

No time-lost claims processing

No time-lost claims (NTL)

Many of the claims we process are no time-lost claims (NTL). This means that although your employee experienced a work-related injury, the employee can continue working without losing time from work beyond the day of injury and does not have a permanent disability resulting from that work injury.

Once we accept the NTL claim, we will cover your employee's medical costs as long as they are directly related to the work injury. You and your employee will receive a letter from us outlining the benefits and services available.

No time-lost claims process

The following steps outline the process we follow when a NTL claim is registered with us:

Step 1—Four important questions are explored

- **Do you have an open WCB-Alberta account with us?** This tells us if you and your employee are covered under the [Alberta Workers' Compensation Act](#).
- **Does the accident your employee experienced meet the criteria for a work-related accident?** This information is found in the *Workers' Compensation Act* as well as in our policies. If the accident meets the criteria, then the claim is accepted.
- **Has your employee missed time from work?** This information should be on your report and your employee's accident report—we may call you to confirm.
- **Are the medical services and costs directly related to the accident your employee experienced?**

Step 2—Monitoring incoming information

- We review and process medical costs and treatment. Medical treatment may include physical therapy and chiropractic treatment.
- We review all incoming information such as letters or reports to ensure we don't miss anything critical, telling us your employee requires additional support. Should this be the case, your employee's claim is transferred to an adjudicator.

Step 3—Your employee's claim will be transferred to adjudication when:

- We do not have clear answers to the questions in step 1.
- Your employee missed time from work beyond the day of accident. This is based on the Worker or Employer's Report of Injury or Occupational Disease form, or on a phone call with you or your employee.
- You, the employer, express concerns about your employee's accident or injury.
- There are concerns about the modified work your employee may be participating in (e.g., your employee has a decrease in wages as a result of the modified work or the modified work duties are not helping your employee get back to full duties).
- The physical therapy or chiropractic treatment plan changes (e.g., a request for treatment extension).
- Complex medical conditions have developed requiring further investigation and/or intervention. For example:
 - We receive new information that the medical diagnosis may have changed to a more complex diagnosis.
 - Medical reporting is now recommending additional medical testing (e.g., CT scan, MRI's, EMG's, etc.).
 - Your employee requires surgery.
 - A claim for eyeglass damage reveals your employee also suffered a personal injury.

