How do I obtain prescription medication?
You will receive a workers' compensation prescription card from our pharmacy benefit manager (PBM). Our current PBM is Optum. You may fill prescription medication at your local pharmacy that participates in the Optum/Timesys network. Over 95% of the pharmacies in Arkansas are in the network. Arkansas Workers' Compensation Commission rules require that generics should be used unless the treating physician provides sufficient justification for requiring brand name medication.

If my claim is compensable, when will I start receiving benefits?
In general, there are two (2) types of workers' compensation claims: (1) "Medical Only" claims which do not involve more than seven (7) days of disability and for which only medical benefits are required and (2) "Lost Time" claims for which either temporary total or partial temporary disability benefits are payable. Under Ark. Code §11-9-501(a)(1) and (2), a claim is not considered a "lost time" claim until after you have missed seven (7) days of work; thereafter, compensation is payable on the nineteenth (9th) day of disability. Under Ark. Code Ann. §11-9-501(a) (3), if you are disabled for two (2) weeks or more, your compensation benefits become retroactive to the first date of your disability. In most cases, you will receive bi-weekly compensation payments in the amount of 66-2/3% of your average weekly wage, subject to the state maximum average weekly wage as determined by the Arkansas Workers’ Compensation Commission. Medical expenses that are reasonably necessary and related to your compensable injury are generally paid within thirty (30) days of receipt by PECD.

How long will I receive benefits?
There is no single answer to this question but, in general, you will receive medical and, in appropriate cases, temporary disability benefits as long as you remain in your healing period and are either partially or totally disabled from working due to your workers' compensation in jury. However, your employer may have a light duty program that will allow you to return to work in modified duty even during your healing period. In most cases, your physician will determine when your healing period has ended ("maximum medical improvement") and whether you have sustained any anatomical impairment warranting a period of additional compensation for permanent disability under Ark. Code §§11-9-521 or 11-9-522. Even after your healing period and permanent benefits (if any) have ended, you may be entitled to maintenance medication and/or medical devices as determined by your physician.
I have sustained an injury on the job - what do I do?

Immediately advise your supervisor that you need to report an injury. If you do not believe that you will need medical treatment, you should complete an incident report form. If you believe that you will need medical treatment you should call the workers’ compensation reporting/nurse triage toll free number. The initial claim forms will be completed by the personnel handling the toll free number and the initial forms will be sent to your agency’s designated contact for your review, completion and signature. If there are any errors on the forms please correct and initial the corrections and sign the forms.

If you are directed for medical care, your employer should provide you with a Temporary Prescription Form to take the pharmacy with our prescription. The initial claim forms will be forwarded to Public Employee Claims Division of the Arkansas Insurance Department where a Claims Specialist or Analyst will determine whether or not benefits other than the initial medical care can be paid in your claim. If you are directed to a medical provider while on the call to the workers’ compensation reporting/nurse triage line, your initial medical care from that medical provider and any prescription(s) from that provider will be covered regardless of whether or not the claim is determined to be payable. In a non-emergency situation, failure to report an injury before seeking treatment may result in a denial of medical benefits until such time as you notify your employer of the accident.

Can I report to my usual physician for medical care?

No. Under Ark. Code §§11-9-508 and 11-9-514, the Public Employee Claims Division selects the physician from its MCO network to treat your workers’ compensation injury in most non-emergency situations. This physician may manage your care for the entirety of your healing period or may refer you to a specialist (such as a orthopedic physician) if necessary.

However, also under §11-9-514, you have the right to petition the Arkansas Workers’ Compensation Commission for a one-time change of physician. In emergency situations, you will most likely be directed or taken to the nearest emergency room for immediate care.

If my claim is denied, can I appeal?

Yes. Before benefits beyond initial medical treatment can be paid on your claim, the Public Employee Claims Division must determine whether a claim meets the statutory and case law requirements for a “compensable claim.” If your claim is denied, a hearing before an Administrative Law Judge of the Arkansas Workers’ Compensation Commission may be requested. To request a hearing, an employee files a Workers’ Compensation Commission Form AR-C with a cover letter requesting that the matter be referred to an Administrative Law Judge for hearing. Attorneys’ fees in workers’ compensation are on a contingent fee basis. If you have any questions regarding legal rights under Arkansas workers’ compensation law, you may contact the Legal Advisor Division of the Arkansas Workers’ Compensation Commission for free information regarding workers’ compensation rights and benefits at 1-800-250-2511.