



## WORKER'S COMPENSATION

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### Worker's Compensation

If you suffer an on the job injury, you will need to complete the First Report of Injury form and send it to Christina Canales in HR immediately or as soon as possible. You may email it to [ccanales@collin.edu](mailto:ccanales@collin.edu) or fax it to 972-985-3778. You must also report the injury to your supervisor immediately.

You may see any doctor or urgent care clinic that accepts workers compensation claims, such as Concentra or CareNow. Our medical plan, HealthSelect, does not cover work related injuries or sickness. Our workers compensation carrier is Deep East Texas Self-Insured Fund. Their number is 800-944-0859. Be sure to give this information to the doctor or clinic you visit.

Employees do have the right to opt out of Workers Compensation coverage, but, must do so in writing to Christina Canales in HR at the Collin Higher Education Center.

#### Form Link

[First Report of Injury Form](#)

#### Benefits Links

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#### CONTACT US

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