

# **CLAIMS REPORTING**

Prompt incident reporting increases the likelihood of successful claims management and helps ensure your injured employees receive the benefits to which they are entitled.

SafeShore simplifies the process of filing workers' compensation claims after a workplace incident. Please see the information below on the process of reporting a claim.

If you have questions about the claims process, please reach out to Signal Mutual's Claims Department.



## Longshore

Report all Longshore claims under the SafeShore policy by completing Form LS-202 and emailing it to: Claims@SignalSafeShore.com

#### Reporting Deadline

For Longshore claim, the employer has 10 days from the date of notice of an injury to file a claim with the Office of Workers' Compensation Programs (OWCP) to avoid a late reporting fine.

# **Online Reporting**

Insureds can utilize the online reporting platform:

https://www.safeshore.onli ne/first-report-of-injury

### **MEL**

Download the **Marine Employee Injury Report** Form

Complete the form and e-mail it to MELClaims@SafeShore.online

#### **State Act**

Report a State Act Claim e-mail claim details to:

Claims@SignalSafeShore.com

## Key Overview of OSHA Standards for Reporting Workplace Incidents:

Under OSHA regulations, employers must report serious workplace incidents within specific timeframes. These include fatalities, inpatient hospitalizations, amputations, and eye losses. In addition to timely reporting, employers must maintain accurate records of all work-related injuries and illnesses. Reporting Requirements:

- Fatalities must be reported to OSHA within 8 hours of the employer becoming aware of the incident.
- Inpatient hospitalizations, amputations, and eye losses must be reported within 24 hours of the employer's knowledge of the event.

#### **Recordkeeping Requirements:**

Employers are also responsible for documenting workplace injuries and illnesses using the following OSHA forms:

- Form 300 Log of Work-Related Injuries and Illnesses
- Form 301 Injury and Illness Incident Report
- Form 300A Summary of Work-Related Injuries and Illnesses



