Category:	Compensation and Benefits
Sub Category:	Employee Fringe Benefits
Effective Date:	2/84
Revised Date:	11/1/17
Forms:	Employee's First Notice of Injury

# INCA Community Services Personnel Policy & Procedure



Responsible: Human Resource Director

Management/Supervisory staff

## **Mandatory Fringe Benefits Policy**

#### **Purpose**

The purpose of this policy is to define and make notice of the employee mandatory fringe benefits received throughout an employee's employment with the agency. Those that are receiving compensation for the work they provide to the agency are eligible for the following allowances.

#### **Policy**

INCA Community Services, Inc. will comply and provide the mandatory fringe benefits directed by federal, state and local laws.

### Social Security

All employees of this Agency are without option covered by the Federal Social Security (FICA) Retirement and Disability Program. The mandatory contributions to FICA are shared by the Agency and the employee in the amounts specified by the Federal Government.

#### **Unemployment Compensation**

This Agency will contribute for State Unemployment Insurance at the rate prescribed by the Oklahoma Security Act (Title 40, Chapter 6, Oklahoma Statutes 1961) as amended and as administered by the Employment Security Commission.

- Eligibility for benefits is determined for each individual case and claims are processed by the applica employment office.
- The periods and reasons for potential disqualification from receiving such benefits as
  established by State Law are as follows: leaving work voluntarily without good cause;
  discharge for misconduct connected with work; failure to apply for or accept suitable work
  until re-employed and has earned wages equal to or in excess of ten times weekly benefit
  amount.
- More information about Unemployment Compensation laws can be found at <a href="www.ok.gov">www.ok.gov</a>.
   This website has the most up to date information about Oklahoma Benefits and Laws.

### **Workers' Compensation**

All employees of this Agency, regardless of category, are covered by the Worker's Compensation Insurance is fully borne by the Agency at no cost to the employee. Workers' Compensation is administered by the State Insurance Fund and within this Agency is the responsibility of the Administrative Services Division. The amount of compensation received is determined by the Worker's Compensation Court. This insurance is applicable to only on-the-job accidents or for those employees who get sick from diseases caused by the job.

The success of the Worker's Compensation Program is dependent upon timely submission of applicable form and information. Form submission is required as follows:

- An Employee must report/notify their supervisor immediately of any on the job accident or injury. (unavoidable circumstances within 24 hours or reasonable time frame.)
- Employee must fill out an INCA Incident/Accident form and submit to supervisor.
  - This must be done even if the employee does not seek medical attention or even if they do not want to file a Worker's Comp claim.
  - Even if the validity of the claim is in doubt, it is mandatory that supervisors complete
    this form using the information that the employee claims as fact to fill out the
    questions.
- The Incident accident form will be submitted to the Human Resource Director along with any documentation concerning incident. (Medical documents, police reports, etc)
- Once documents are submitted to HR a claim is submitted online to Worker's Comp
- Do Not send forms directly to the State Insurance Fund.

#### **Definitions**

### **Dissemination of Policy**

The policy will be made available to all employees through the agency's website. The agency will educate and train employees and supervisors regarding the policy and any conduct that could constitute a violation of the policy.