

Texas Military Forces  
State Active Duty Workers Compensation Instructions

**Injured Members & Workers Comp Benefits while serving on SAD.** It is critical that units in the field know where to obtain the forms required. They are included on the WC website, as well as on the TKO, J1 website. Units will ensure forms are available to the elements servicing forward in the operation.

a. Benefits. TXMF members on SAD paid status are carried on a state payroll as state employees. A member of the State Military Forces, as defined by section 431.001 Government Code, who is injured, disabled or killed while engaged in authorized training or duty, is entitled to receive Workers Compensation benefits under Chapter 501, Labor Code. Workers Compensation is a state-regulated insurance program that pays state employee medical bills and replaces some lost wages if an employee is injured at work, or has work-related illness. Workers Compensation provides four types of benefits.

- 1) Medical: Pays for medical care necessary to treat a work-related injury or illness.
- 2) Income: Replaces a portion of wages lost because of a work-related injury or illness.
- 3) Death: Replaces a portion of lost family income for eligible family members of workers killed on the job.
- 4) Burial: Pays some of the deceased worker's funeral expenses.

b. Reporting procedures for members injured on SAD.

1) When a member, who is considered a state employee, is injured on the job, the injury must be reported to the Workers Compensation Coordinator (WCC) within 30 days of the incident even if the employee does not need to see a doctor at that time.

2) If the employee needs immediate medical treatment, the member or someone in the member's chain of command must report the injury to the WCC immediately. This can be done telephonically. Then WCC can validate the need in the event the treatment facility needs to verify that it is a valid Worker's Compensation claim before medical treatment is given. A Worker's Compensation Claim number must be obtained immediately by submitting a DWC Form-1 to the WCC. Fill in blocks 1 through 30 using SAD start date as the Date of Hire. The signature on this form is for the WCC.

3) Report claims within 5 days to: Workers Compensation Coordinator, Human Resources Office, Camp Mabry, Austin, Texas (512) 782-5133 or DSN 954-5133. Upon notification/request the Coordinator will provide all necessary forms and instructions for filing the claim. Return all completed documents to State Human Resources, Bldg 10, Camp Mabry, by mail: Workers Compensation Coordinator, Human Resources Office, PO Box 5218, Austin, Texas 78763-5218, fax copies to 512-782-5669, or documents may be scanned and e-mailed to [susan.mcginis@us.army.mil](mailto:susan.mcginis@us.army.mil). The full claim packet must be received by the WCC within five days of the incident and includes the State Active Duty Injury Claims Checklist and all supporting documents listed.