



# Job Safety and Health IT'S THE LAW!

## All workers have the right to:

- A safe workplace.
- Raise a safety or health concern with your employer or OSHA, or report a work-related injury or illness, without being retaliated against.
- Receive information and training on job hazards, including all hazardous substances in your workplace.
- Request a confidential OSHA inspection of your workplace if you believe there are unsafe or unhealthy conditions. You have the right to have a representative contact OSHA on your behalf.
- Participate (or have your representative participate) in an OSHA inspection and speak in private to the inspector.
- File a complaint with OSHA within 30 days (by phone, online or by mail) if you have been retaliated against for using your rights.
- See any OSHA citations issued to your employer.
- Request copies of your medical records, tests that measure hazards in the workplace, and the workplace injury and illness log.

*This poster is available free from OSHA.*

**Contact OSHA. We can help.**

## Employers must:

- Provide employees a workplace free from recognized hazards. It is illegal to retaliate against an employee for using any of their rights under the law, including raising a health and safety concern with you or with OSHA, or reporting a work-related injury or illness.
- Comply with all applicable OSHA standards.
- Notify OSHA within 8 hours of a workplace fatality or within 24 hours of any work-related inpatient hospitalization, amputation, or loss of an eye.
- Provide required training to all workers in a language and vocabulary they can understand.
- Prominently display this poster in the workplace.
- Post OSHA citations at or near the place of the alleged violations.

On-Site Consultation services are available to small and medium-sized employers, without citation or penalty, through OSHA-supported consultation programs in every state.



# NOTICE TO EMPLOYEES CONCERNING WORKERS' COMPENSATION IN TEXAS

**COVERAGE:** [Name of employer] \_\_\_\_\_ **STATE OF OREGON**  
has workers' compensation insurance coverage from [name of commercial insurance company]  
**Zurich American Insurance Company** in the event of  
work-related injury or occupational disease. This coverage is effective from [effective date of workers' compensation  
insurance policy] **7/1/2024**. Any injuries or occupational diseases which occur on or after that  
date will be handled by [name of commercial insurance company]  
**Zurich Claims Services**. An employee or  
a person acting on the employee's behalf, must notify the employer of an injury or occupational disease not later  
than the 30th day after the date on which the injury occurs or the date the employee knew or should have known  
of an occupational disease, unless the Texas Department of Insurance, Division of Workers' Compensation (Division)  
determines that good cause existed for failure to provide timely notice. Your employer is required to provide you  
with coverage information, in writing, when you are hired or whenever the employer becomes, or ceases to be,  
covered by workers' compensation insurance.

**EMPLOYEE ASSISTANCE:** The Division provides free information about how to file a workers' compensation  
claim. Division staff will answer any questions you may have about workers' compensation and process any requests  
for dispute resolution of a claim. You can obtain this assistance by contacting your local Division field office or by  
calling 1-800-252-7031. The Office of Injured Employee Counsel (OIEC) also provides free assistance to injured  
employees and will explain your rights and responsibilities under the Workers' Compensation Act. You can obtain  
OIEC's assistance by contacting an OIEC customer service representative in your local Division field office or by calling  
1-866-EZE-OIEC (1-866-393-6432).

**SAFETY VIOLATIONS HOTLINE:** The Division has a 24 hour toll-free telephone number for reporting  
unsafe conditions in the workplace that may violate occupational health and safety laws. Employers are prohibited  
by law from suspending, terminating, or discriminating against any employee because he or she in good faith reports  
an alleged occupational health or safety violation. Contact the Division at 1-800-452-9595.

# AVISO A LOS EMPLEADOS SOBRE LA COMPENSACIÓN PARA TRABAJADORES EN TEXAS

**COBERTURA:** [Name of the employer] \_\_\_\_\_ **STATE OF OREGON**  
tiene cobertura de seguros de compensación para trabajadores con [name of the commercial insurance company]  
**Zurich American Insurance Company** para protegerle en caso  
de una lesión o enfermedad ocupacional relacionada con el trabajo. Esta cobertura está vigente desde [effective  
date of workers' compensation insurance policy] **7/1/2024**. Cualquier lesión o  
enfermedad ocupacional que ocurra en o después de esta fecha será manejada por [name of commercial  
insurance company] **Zurich Claims Services**. Un empleado o una persona  
que actúe en nombre del empleado, debe notificar al empleador sobre una lesión o una enfermedad ocupacional a  
no más tardar de treinta (30) días, a partir de la fecha en que ocurrió la lesión o en la fecha en la que el empleado  
se enteró o debería de haberse enterado de la enfermedad ocupacional, al menos que el Departamento de  
Seguros de Texas, División de Compensación para Trabajadores (Texas Department of Insurance, Division of  
Workers' Compensation – TDI-DWC, por su nombre y siglas en inglés) (División) determine que existió una buena  
causa para que no se haya notificado al empleador dentro del tiempo señalado. Su empleador tiene la obligación  
de proporcionarle a usted información por escrito sobre la cobertura cuando usted es contratado o cuando su  
empleador adquiere o deja de tener una cobertura de seguro de compensación para trabajadores.

**ASISTENCIA AL EMPLEADO:** La División proporciona información gratuita sobre cómo presentar una  
reclamación de compensación para trabajadores. El personal de la División contestará cualquier pregunta que usted  
pueda tener sobre la compensación para trabajadores y procesará cualquier solicitud de resolución de disputas  
relacionada con una reclamación. Usted puede obtener este tipo de asistencia comunicándose con su oficina local  
de la División o llamando al teléfono 1-800-252-7031. La Oficina de Asesoría Pública para el Empleado Lesionado  
(Office of Injured Employee Counsel – OIEC, por su nombre y siglas en inglés) también ofrece asistencia gratuita a los  
empleados lesionados y ellos le explicarán cuáles son sus derechos y responsabilidades bajo la Ley de Compensación  
para Trabajadores. Usted puede obtener la asistencia de OIEC comunicándose con un representante de servicio al  
cliente de OIEC en su oficina local de la División o llamando al 1-866-EZE-OIEC (1-866-393-6432).

**LÍNEA DIRECTA PARA REPORTAR VIOLACIONES DE SEGURIDAD:** La División cuenta con  
una línea gratuita telefónica que está en servicio las 24 horas del día para reportar condiciones inseguras en el área  
de trabajo que podrían violar las leyes ocupacionales de salud y seguridad. La ley prohíbe que los empleadores  
suspendan, despidan o discriminen en contra de cualquier empleado porque él o ella de buena fe reporta una  
alegada violación ocupacional de salud o seguridad. Comuníquese con la División al teléfono 1-800-452-9595.

# NOTICE TO EMPLOYEES CONCERNING ASSISTANCE AVAILABLE IN THE WORKERS' COMPENSATION SYSTEM FROM THE OFFICE OF INJURED EMPLOYEE COUNSEL

Have you been injured on the job? As an injured employee in Texas, you have the right to free assistance from the Office of Injured Employee Counsel (OIEC). OIEC is the state agency that assists unrepresented injured employees with their claim in the workers' compensation system.

You can contact OIEC by calling its toll-free telephone number: 1-866-393-6432. More information about OIEC and its Ombudsman Program is available at the agency's website ([www.oiec.texas.gov](http://www.oiec.texas.gov)).

## OMBUDSMAN PROGRAM

WHAT IS AN OMBUDSMAN? An Ombudsman is an employee of OIEC who can assist you if you have a dispute with your employer's insurance carrier. An Ombudsman's assistance is free of charge. Each Ombudsman has a workers' compensation adjuster's license and has completed a comprehensive training program designed specifically to assist you with your dispute.

An Ombudsman can help you identify and develop the disputed issues in your case and attempt to resolve them. If the issues cannot be resolved, the Ombudsman can help you request a dispute resolution proceeding at the Texas Department of Insurance, Division of Workers' Compensation. Once a proceeding is scheduled an Ombudsman can:

- Help you prepare for the proceeding (Benefit Review Conference and/or Contested Case Hearing);
- Attend the proceeding with you and communicate on your behalf; and
- Assist you with an appeal or a response to an insurance carrier's appeal, if necessary.

CONNECT  @OIEC  @OIECTexas  @OIECtube  [oiec.texas.gov](http://oiec.texas.gov)

Figure 28 TAC §276.5(c) - April 2018



# AVISO PARA LOS EMPLEADOS SOBRE LA ASISTENCIA DISPONIBLE EN EL SISTEMA DE COMPENSACIÓN PARA TRABAJADORES POR PARTE DE LA OFICINA DE ASESORÍA PÚBLICA PARA EL EMPLEADO LESIONADO

¿Se ha lesionado en el trabajo? Como empleado lesionado en Texas, usted tiene derecho a recibir asistencia gratuita por parte de la Oficina de Asesoría Pública para el Empleado Lesionado (Office of Injured Employee Counsel –OIEC, por su nombre y siglas en inglés). OIEC es la agencia estatal que asiste a los empleados lesionados que no cuentan con representación legal con su reclamación en el sistema de compensación para trabajadores.

Usted puede comunicarse con OIEC llamando a su número de teléfono gratuito: 1-866-393-6432. Más información sobre OIEC y sobre el Programa de Ombudsman se encuentra disponible en el sitio web de la agencia ([www.oiec.texas.gov](http://www.oiec.texas.gov)).

## PROGRAMA DE OMBUDSMAN

¿QUÉ ES UN OMBUDSMAN? Un Ombudsman es un empleado de OIEC que le puede asistir si usted tiene una disputa con la aseguradora de su empleador. La asistencia por parte del Ombudsman es gratuita. Cada Ombudsman cuenta con una licencia de ajustador de compensación para trabajadores y ha completado un extenso programa de capacitación, el cual ha sido diseñado específicamente para asistirle a usted con su disputa.

Un Ombudsman puede ayudarle a identificar y desarrollar los asuntos en disputa en su caso e intentar resolverlos. Si los asuntos no pueden ser resueltos, el Ombudsman puede ayudarle a solicitar un procedimiento de resolución de disputas ante el Departamento de Seguros de Texas, División de Compensación para Trabajadores (Texas Department of Insurance, Division of Workers' Compensation, por su nombre en inglés). Una vez que el procedimiento ha sido programado, el Ombudsman puede:

- Ayudarle a prepararse para el procedimiento (Conferencia para Revisión de Beneficios [Benefit Review Conference, por su nombre en inglés] y/o Audiencia para Disputar Beneficios [Contested Case Hearing, por su nombre en inglés]);
- Asistir al procedimiento con usted y hablar en su nombre; y
- Ayudarle con una apelación o con una respuesta a la apelación de una aseguradora, si es necesario.

CONÉCTESE  @OIEC  @OIECTexas  @OIECtube  [oiec.texas.gov](http://oiec.texas.gov)

Título 28 Código Administrativo de Texas §276.5(c) - Abril 2018



## **For State of Oregon Remote Workers - Required Notice**

### ***Reference Rule 110.101***

- (a) In addition to the posted notice required by subsection (e) of this section, employers, as defined by Labor Code Section 406.001, shall notify their employees of workers' compensation insurance coverage status, in writing. This additional notice:
- (1) shall be provided at the time an employee is hired, meaning when the employee is required by federal law to complete both a W-4 form and an I-9 form or when a break in service has occurred and the employee is required by federal law to complete a W-4 form on the first day the employee reports back to duty;
  - (2) shall be provided to each employee, by an employer whose workers' compensation insurance coverage is terminated or cancelled, not later than the 15<sup>th</sup> day after the date on which the termination or cancellation of coverage takes effect;
  - (3) shall be provided to each employee, by an employer who obtains workers' compensation insurance coverage, not later than the 15<sup>th</sup> day after the date on which coverage takes effect, as necessary to allow the employee to elect to retain common law rights under Labor Code Chapter 406;
  - (4) shall include the text required in the posted notice (see rule 110.101 (e)(1), (e)(2), (e)(3), (e)(4) for appropriate language); and
  - (5) if the employer is covered by workers' compensation insurance (subscriber) or becomes covered, whether by commercial insurance or through self-insurance as provided by the Texas Workers' Compensation Act (Act), shall include the following statement:

### ***NOTICE TO NEW EMPLOYEES***

**“You may elect to retain your common law right of action if, no later than five days after you begin employment or within five days after receiving written notice from the employer that the employer has obtained workers' compensation insurance coverage, you notify your employer in writing that you wish to retain your common law right to recover damages for personal injury. If you elect to retain your common law right of action, you cannot obtain workers' compensation income or medical benefits if you are injured.”**