



Injured Employee Kit

Missouri Employers Mutual can help you get back to work safely and successfully.

- Attend the following medical appointment.
Time: _____ Date: _____
Clinic: _____ Phone: _____
Location: _____
- Give the medical provider the enclosed forms.
AUTHORIZATION FOR MEDICAL TREATMENT
PHYSICAL CAPACITIES REQUIREMENTS
- Use the enclosed **PHARMACY COUPON** for any medicine prescribed relating to the injury.
- Complete the enclosed **EMPLOYEE INCIDENT/INJURY REPORT** immediately and send it back to MEM.
- Follow the medical provider's orders, including attending all scheduled medical and physical therapy appointments.
- Cooperate with your workers compensation carrier, MEM.
- Contact your supervisor regularly.
- When you are released to full or transitional duty, call your MEM Claims Representative and your supervisor immediately.

For more information:



www.mem-ins.com



1.800.442.0593



claims@mem-ins.com

MEM