



California SB1159 COVID-19 Exposure Reporting

Overview

Senate Bill (SB1159) is a new law signed by Governor Gavin Newsom on September 17, 2020. For dates of exposure on or after July 6, 2020, the law contains specific reporting requirements which are outlined below and in the attached COVID-19 Exposure Reporting Form.

COVID-19 exposures you are required to report:

- On or after 7/6/2020 through 1/1/2023, **ALL** positive COVID-19 test results for employees, regardless of job classification or claimed work exposure, should be reported by completing the attached COVID-19 Exposure Reporting Form and emailing to COVIDEXPOSURE@travelers.com.
- If the employee is claiming exposure at work, a new claim should also be reported on [Travelers' Claim Reporting Site](#) or by calling 1.800.238.6225. The attached COVID-19 Exposure Reporting Form should still be completed and submitted to COVIDEXPOSURE@travelers.com.

When must you report:

Based on the date ranges below, there are different reporting timeframes to Travelers:

Positive COVID-19 test results between 7/6/2020 and 9/17/2020:
Must be reported by 10/17/2020

Positive COVID-19 test results between 9/17/2020 and 1/1/2023:
Must be reported within three business days of your knowledge of the results

What information are you required to report:

- The date the employee tested positive, which is the date the COVID-19 test was conducted.
- For the 14-day period preceding the date of the employees' positive test result, you must provide:
 - The address or addresses of the employee's specific place(s) of employment;
 - The date the employee last worked at each of the employee's specific place(s) of employment.
- The highest number of employees who reported to work at each specific place of employment in the 45-day period preceding the last day the employee worked at each location.
- The employee's name and personal information should not be reported on the attached COVID-19 Exposure Reporting Form. This information should only be provided when reporting a new claim on the [Travelers' Claim Reporting Site](#) or by calling 1.800.238.6225.

An employer or other person acting on behalf of an employer who intentionally submits false or misleading information or fails to submit information when reporting is subject to a civil penalty in the amount of up to \$10,000 to be assessed by the Labor Commissioner.



California SB1159 COVID-19 Exposure Reporting Form

Effective: 7/6/2020 – 1/1/2023

For dates of loss prior to 7/6/2020, you should report a Workers' Compensation claim by visiting [Travelers' Claim Reporting Site](#) or calling 1.800.238.6225

DO NOT DELAY IN REPORTING: If you have an employee who has tested positive for COVID-19 you are required to report the following information within 3 business days of knowledge.

PLEASE EMAIL YOUR COMPLETED FORM TO COVIDEXPOSURE@travelers.com

ACCOUNT INFORMATION		
PREPARER'S NAME AND TITLE	PREPARER'S PHONE NUMBER	EMPLOYER'S DATE OF KNOWLEDGE
PARENT COMPANY / INSURED'S NAME	SUBSIDIARY (COMPANY) NAME	POLICY SYMBOL AND NUMBER

INCIDENT INFORMATION		
(The employee's name or other personal information should <u>not</u> be provided on this form.)		
EMPLOYEE ID (NOT SSN, DL#, etc.)	LAST DAY WORKED	DATE POSITIVE COVID-19 TEST CONDUCTED
IS THE EMPLOYEE CLAIMING EXPOSURE AT WORK? NO YES - If yes, please continue to complete and submit this COVID-19 Exposure Reporting Form AND report claim via the Travelers' Claim Reporting Site or by calling 1.800.238.6225.		

INSURED CONTACT INFORMATION	
CONTACT NAME	PHONE NUMBER
EMAIL ADDRESS	BEST TIME TO CONTACT AND PREFERRED CONTACT METHOD, IF NEEDED.

Please continue to complete the additional location information on the next page.



California SB1159 COVID-19 Exposure Reporting Form

LOCATION INFORMATION

(If the employee works at multiple locations, please complete the following for each location. Provide the address of specific place(s) of employment during the 14-day period preceding the positive test.)

	Address	City	State	Zip Code	Has this location ever been ordered to close due to a risk of infection with COVID-19? (Yes/No)	If Yes, please explain	Last Date Employee Worked at This Location	Highest number of employees who worked in the specific location in the 45 days preceding the employee's last day at that location
Location #1								
Location #2								
Location #3								
Location #4								
Location #5								
Location #6								
Location #7								
Location #8								
Location #9								
Location #10								