



Risk Management Division
Workers' Compensation Program
P.O. Box 64081
St. Paul, Minnesota 55164
Phone: 651.201.3000
Fax: 651.297.5471
TTY (MN Relay Service): 711
www.admin.state.mn.us

This employee information sheet is provided to you in accordance with Minnesota workers' compensation laws. If you have questions, please contact the **ADMIN Workers' Compensation Claims Specialist** assigned to assist with your claim at the number on the enclosed claim acknowledgement letter or **(651) 201-3000 or MN Relay 711** or, contact your agency Workers' Compensation Coordinator.

Minnesota Workers' Compensation System Employee Information Sheet

What does workers' compensation pay for?

- Medical care for the work injury, as long as it is reasonable and necessary
- Wage-loss benefits for part of your lost income (there is a three calendar day waiting period before these benefits start)
- Benefits for permanent damage or loss of function of a body part
- Benefits to your spouse and/or dependents if you die of a work injury
- Vocational rehabilitation services if you cannot return to your pre-injury job or to your pre-injury employer

How are workers' compensation benefits paid?

Your workers' compensation benefits are paid by your agency. State law sets the benefit levels. Please note: pursuant to statute, the Department of Administration's (ADMIN) Workers' Compensation Program can obtain medical information specific to your work injury without your authorization.

If ADMIN accepts your claim for wage loss benefits and you have been disabled for more than three calendar days:

- ADMIN will send you a copy of the *Notice of Insurer's Primary Liability Determination* form stating your claim is accepted.
- ADMIN must start paying wage-loss benefits within 14 days of the date your agency knows about your work injury and lost wages. ADMIN must pay benefits on time. Wage-loss benefits are paid at the same intervals as your work paychecks.

If ADMIN denies your claim for benefits:

- ADMIN will send you a copy of the *Notice of Insurer's Primary Liability Determination* form stating it is denying primary liability for your claim. The form must clearly explain the facts and reasons why ADMIN believes your injury or illness did not result from your work.
- If you disagree with the denial, you should talk to the Workers' Compensation Claims Specialist handling your claim. This person can answer most questions about your claim. You can contact your Claims Specialist by calling their direct dial number or: (651) 201-3000 or MN Relay 711.

- If you are not satisfied with the response you receive from ADMIN and you still disagree with the denial, you should contact the Department of Labor and Industry at one of the numbers below to see what to do next.

If you have other questions or need more help, call the Minnesota Department of Labor and Industry's Workers' Compensation Hotline:

Twin Cities and Southern Minnesota **(651) 284-5005 or 1-800-342-5354 or TTY (651) 297-4198**
Duluth and Northern Minnesota **(218) 733-7810 or 1-800-365-4584**

Your call will be answered by experienced workers' compensation specialists, who will provide **instant, accurate information and assistance**. Additional workers' compensation information is available on Labor and Industry's Web site at www.doli.state.mn.us.

Your employer is required by law to send you this information. This material can be made available to you in different formats, such as large print, Braille or on audiotape, by calling the numbers printed above.

Last updated February 2008. This form may be copied or reproduced electronically. Do not file this form with the Department of Labor & Industry.

Additional Information About Your Workers' Compensation Claim

- You will receive a copy of the First Report of Injury form your agency submitted to ADMIN that you should review for accuracy. Contact your ADMIN Claims Specialist if any information is missing or if you spot any inaccurate information.
- If you want to submit an optional statement concerning your claim, you may do so by submitting a handwritten account of your injury or illnesses. Please simply relay the facts surrounding your work injury or illness and sign and date the statement before sending it to your ADMIN Claims Specialist.
- If you have regular income from a second job, make sure that the wage documentation from your second job is promptly sent to your ADMIN Claims Specialist.
- Your agency and the State of Minnesota have elected to contract with a certified workers' compensation managed care plan for medical treatment related to your work injury or illness. The provider of these services is **CorVel Corporation**. You may have the right to obtain medical treatment from your personal physician for your work injury or illness. Please refer to the enclosed letter regarding CorVel for further information regarding your responsibilities related to seeking medical treatment for your work injury or illness.
- Under the terms of the bargaining agreement you are covered by, you may be eligible to supplement your workers' compensation benefits with your sick and/or vacation leave accruals. For more information on this option, contact the Workers' Compensation Coordinator, the Human Resources office in your agency or a union representative.

This material can be made available to you in different formats, like large print, Braille or audiotape, by calling ADMIN at (651) 201-3000 or MN Relay 711