Workers’ compensation

— If you are injured —

■ Report any injury to your supervisor as soon as possible, no matter how minor it may appear. You may lose the right to workers’ compensation benefits if you do not make a timely report of the injury to your employer. The time limit may be as short as 14 days.

■ Provide your employer with as much information as possible about your injury.

■ Get any necessary medical treatment as soon as possible. If you are not covered by a certified managed care organization (CMCO), you may treat with a doctor of your choice. Your employer must notify you in writing if you are covered by a CMCO.

■ Cooperate with all requests for information concerning your claim.

The law allows the workers’ compensation insurer to obtain medical information related to your work injury without your authorization, but they must send you written notification when they request the information.

The insurer cannot obtain other medical records unless you sign a written authorization.

■ Get written confirmation from your doctor about any authorization to be off work. The note should be as specific as possible.

— Workers’ compensation pays for —

■ Medical care for your work injury, as long as it is reasonable and necessary.

■ Wage-loss benefits for part of your lost income.

■ Compensation for permanent damage to or loss of function of a body part.

■ Vocational rehabilitation services if you cannot return to your pre-injury job or to your pre-injury employer due to your work injury.

■ Benefits to your spouse and/or dependents if you die as a result of a work injury.

— What the insurer must do —

■ The insurer must investigate your claim promptly. If you have been disabled for more than three calendar-days, the insurer must begin payment of benefits or send you a denial of liability within 14 days after your employer knew you were off work or had lost wages because of your claimed injury.

■ If the insurer accepts your claim for wage-loss benefits and you have been disabled for more than three calendar-days: The insurer will notify you and must start paying wage-loss benefits within the 14 days noted above. The insurer must pay benefits on time. Wage-loss benefits are paid at the same intervals as your work paychecks.

■ If the insurer denies your claim for wage-loss benefits and you have been disabled for more than three calendar-days: The insurer will send notice to you within 14 days. The notice must clearly explain the facts and reasons why they believe your injury or illness did not result from your work or why the claimed wage-loss benefits are not related to your injury.

If you disagree with the denial, talk with the insurance claims adjuster who is handling your claim. If you are not satisfied and still disagree with the denial, call the Minnesota Department of Labor and Industry’s Workers’ Compensation Hotline at 1-800-342-5354.

Fraud Collecting workers’ compensation benefits you are not entitled to is theft. If you have reason to suspect someone is committing workers’ compensation fraud, call 1-888-FRAUD MN (1-888-372-8366).

For more information about workers’ compensation or if you need assistance with a claim, contact:

Department of Labor and Industry
Workers’ Compensation
443 Lafayette Road N.
St. Paul, MN 55155
(651) 284-5032
1-800-DIAL-DLI (1-800-342-5354)
dli.workcomp@state.mn.us
www.dli.mn.gov

Insurer name
League of Minnesota Cities Insurance Trust
(651) 281-1200 or (800) 925-1122

Posting required by law in a conspicuous location wherever the employer is engaged in business.