

Contents

Law changes, department updates

Registration now open for 2026 Workers' Compensation Summit.....	page 2
Cynthia Larson named new Compliance, Records and Training director	page 2
Results of the Special Compensation Fund assessment	page 3
Workers' compensation, Campus assistance available by phone, email.....	page 4
No P.O. box: Use street address when sending mail to SCF	page 4
New benefit, provider fee levels, and fee schedules effective Oct. 1	page 5
Subscribe to DLI's email newsletters	page 6

Tips, reminders

Ask the ADR and Work Comp Campus pro	page 7
Translated webpages, materials, Language Line available via DLI website	page 8
Alert: Injured workers targeted in work comp scams	page 9
Workers' Compensation Court of Appeals update: Attorney fees.....	page 10
EDI event table update	page 10
Updated employee, dependency benefit guides.....	page 10
Withdrawing from a workers' compensation rehabilitation file, the role of the Vocational Rehabilitation unit or filing a request for assistance on a rehabilitation plan.....	page 11

Data, reports

Workplace injuries: How does Minnesota compare?	page 13
Are you registered to vote?.....	page 14
Workers' compensation trends continue stability, long-term downward trajectories.....	page 15

Events, training

Workers' compensation events calendar	page 16
Training: OSHA recordkeeping basics offered online in October	page 16

Court decisions

Workers' Compensation Court of Appeals decisions	page D-1
Minnesota Supreme Court decisions.....	page D-4



Registration now open for 2026 Workers' Compensation Summit

Registration is now open for the [2026 Workers' Compensation Summit: Sharing Knowledge, Shaping Solutions](#). This full-day conference, Thursday, Oct. 22, in Bloomington, Minnesota, will offer a range of presentations about the current state of workers' compensation and other industry topics.

Lynn Wehrman, president and CEO of WeCo, will provide this year's keynote address, "A Human-focused Approach to Welcoming Employees with Disabilities into Our Workplaces." It will explore best practices, challenges and innovations in reintegrating employees with disabilities into the workplace. See the full agenda and other details on the 2026 Summit website.

Attendee registration, continuing education credits

Registration for an individual attendee is \$150 and includes breakfast, lunch, snacks and a full day of informational sessions. To register, visit cvent.me/B7NVnV. If you require other accommodations, please note them during the registration process. Attendee registration will be open until the end of the day, Thursday, Oct. 15.

Cancellations cannot be accommodated. However, should an unexpected circumstance arise after registration and you are no longer able to attend, attendees can transfer their registration to another person. Transfers will be accommodated until Thursday, Oct. 15.

CRCC and CLE approved this program for up to 5.0 credit hours. The program has also been submitted to CDMS for up to 5.0 credit hours.

REGISTER TODAY!



Cynthia Larson named new Compliance, Records and Training director

Compliance, Records and Training (CRT) Director Cynthia Larson started her position at the Department of Labor and Industry on July 29. She is a strategic leader in vocational rehabilitation and workforce development, with a master's degree, a Certified Rehabilitation Counselor credential and more than 15 years of progressive management experience in Minnesota state government, and corporate and nonprofit environments.

Larson has most recently led field operations for the Minnesota Department of Employment and Economic Development across multiple CareerForce locations. Previously, she coordinated return-to-work and accommodation processes at UnitedHealth Group, and managed transitional employment initiatives at Goodwill-Easter Seals Minnesota, focusing on individualized support for people with disabilities and socioeconomic barriers.



CRT creates and maintains workers' compensation claim files. It ensures compliance with benefit provisions of workers' compensation law by auditing claims, penalizing insurers for late payment and providing educational outreach. It also registers qualified rehabilitation consultants and provides analysis of medical and rehabilitation issues. Upon request, CRT mails the state's required workplace posters without charge.

Results of the Special Compensation Fund assessment

Introduction

The Special Compensation Fund assessment funds Minnesota's workers' compensation programs. Most of the assessment dollars go to funding the supplementary, second-injury, uninsured and occupational disease benefit programs. The assessment also funds the operating expenses of the workers' compensation divisions of the Department of Labor and Industry (DLI), the Court of Administrative Hearings and the Workers' Compensation Court of Appeals; the state portion of Minnesota OSHA Compliance; rate regulation at the Department of Commerce; and fraud prevention at the Bureau of Criminal Apprehension.

The Special Compensation Fund assessment is directly invoiced by DLI. The first half of the assessment is due Aug. 1 every year and the second half is due the following Feb. 1. Invoices are mailed approximately 30 days before the due date. Assessment amounts of \$1,000 or less are invoiced with first-half invoices only.

In fiscal-year 2026, the Special Compensation Fund experienced an unprecedented year, with supplementary benefit and second-injury fund reimbursements to insurers and self-insured employers exceeding \$40 million. Consequently, a modest increase to the assessment rate will be implemented; DLI's 2026 Special Compensation Fund assessment is set at \$68.9 million.

The liability was divided between the insurers and self-insurers by the ratio of their 2025 indemnity payments to the total indemnity reported by both groups.

Group	2025 indemnity	Ratio	FY 2027 funding liabilities	2025 DSR pure premium
Insurers	\$396,839,338	76.53%	\$52,729,496	\$1,036,350,811
Self-insurers	\$121,698,340	23.47%	\$16,170,504	
Total	\$518,537,678	100.00%	\$68,900,000	\$1,036,350,811

Insurer premium surcharge rate

The insurer premium surcharge rate applied for the purpose of determining the Special Compensation Fund assessment is 5.09%. The rate was determined by dividing the insurer portion of the Special Compensation Fund state-fiscal-year 2027 liability (\$52,729,496) by the 2025 designated statistical reporting pure premium reported by all insurers (\$1,036,350,811).

The amount each insurer is assessed is determined by multiplying 5.09% by the designated statistical reporting (DSR) pure premium for calendar-year 2025. The total amount assessed is divided into two invoices, the first due Aug. 1, 2026, and the second due Feb. 1, 2027 (unless the total amount due is \$1,000 or less; then the entire amount is due Aug. 1, 2026).

The insurer portion of the 2026 assessment will be adjusted for actual 2025 data reported by the Minnesota Workers' Compensation Insurers Association. As a result of 2014 amendments to [Minnesota Statutes 176.129, subdivision 2a](#), the current assessment is considered to be an estimate based on the prior year's data. The reconciliation and final determination (true-up) for insurers will be completed by December 2026. See [2014 Minnesota Laws Chapter 182](#).

Self-insured assessment rate

The self-insured assessment rate is 13.29%. It was determined by dividing the self-insured portion of the Special Compensation Fund state-fiscal-year 2027 liability (\$16,170,504) by the total 2025 indemnity reported by the self-insured employers (\$121,698,340).

The amount each self-insurer is assessed is determined by multiplying 13.29% by the indemnities self-reported to DLI for calendar-year 2025. The total amount assessed is divided into two invoices, the first due Aug. 1, 2026, and the second due Feb. 1, 2027 (unless the total amount due is \$1,000 or less; then the entire amount is due Aug. 1, 2026).

Further information

If you need further information, send an email message to DLI at dli.assessment@state.mn.us.

Workers' compensation, Campus assistance available by phone, email

The Workers' Compensation Help Desk is available to answer basic questions related to workers' compensation or Work Comp Campus. It will also route more complex questions to subject matter experts within the Workers' Compensation Division.

Live support is available 8 a.m. to 4:30 p.m., Monday through Friday (except holidays). Voicemail messages left outside of office hours will be responded to within 24 hours of the next business day.

- 651-284-5005 (press 3)
- 800-342-5354 (press 3)
- helpdesk.dli@state.mn.us



POSTCARD

No P.O. box: Use street address when sending mail to SCF

The Minnesota Department of Labor and Industry's Special Compensation Fund (SCF) closed its P.O. box Sept. 1.

All mail for the St. Paul SCF office should be sent to:

Minnesota Department of Labor and Industry
Special Compensation Fund
443 Lafayette Road N.
St. Paul, MN 55155.



New benefit, provider fee levels, and fee schedules effective Oct. 1

The statewide average weekly wage (SAWW) effective Oct. 1, 2026, is \$1,476, a 3.72% increase from the current SAWW of \$1,423, which has been in effect since Oct. 1, 2025.

The new SAWW is based on 2025 payroll and employment figures supplied by the Department of Employment and Economic Development and the calculation procedure in Minnesota Statutes § 176.011, subdivision 1b. The change in the SAWW is the basis for the Minn. Stat. § 176.645 annual benefit adjustment. The time and amount of the adjustments are limited by Minn. Stat. § 176.645.

Tables showing the historical value of workers' compensation benefits, reimbursements, medical services conversion factors, maximum hourly vocational rehabilitation rates and independent medical examination (IME) fees are posted on the [Work comp: Rate information, statewide average weekly wage \(SAWW\) webpage](#) on the Department of Labor and Industry (DLI) website.

Vocational rehabilitation maximum hourly fee adjustments

Pursuant to Minnesota Rules, part 5220.1900, subpart 1b:

- the maximum qualified rehabilitation consultant (QRC) hourly rate increased by 3.00% to \$133.88 for rehabilitation services provided on or after Oct. 1, 2026; and
- the maximum hourly rate for rehabilitation job development and placement services, whether provided by rehabilitation vendors or by QRC firms, increased by 3.00% to \$107.21 on Oct. 1, 2026.

Relative value medical fee schedule adjustments

The following updates to the workers' compensation physician fee schedule conversion factors in Minn. R., part 5221.4020, have been approved by an administrative law judge. The rule amendments, which are effective for services provided on or after Oct. 1, 2026, are available on DLI's [Rulemaking docket for Minnesota Rules Chapter 5221 – 2026 webpage](#).

Minnesota Statutes § 176.136, subd. 1a, paragraph (c)(1), provides for annual adjustment of the medical fee schedule conversion factors by no more than the percent change in the SAWW. As in previous years, the annual adjustment of the conversion factors is based on the percent change in the federal Department of Labor's Producer Price Index for Offices of Physicians (PPI-P) (annual-average basis), which for 2025 was 1.51%.

Based on the approved adjustment, the conversion factors effective for services provided on or after Oct. 1, 2026, are:

- for medical/surgical services described in Minn. R. 5221.4030 \$68.30
- for pathology and laboratory services described in Minn. R. 5221.4040 \$60.81
- for physical medicine/rehabilitation services described in Minn. R. 5221.4050 \$61.48
- for chiropractic services described in Minn. R. 5221.4060 \$52.94

Independent medical examination fee adjustment

Minnesota Rules, part 5219.0500, subp. 4, provides for adjustment of the maximum fees for independent medical examinations (IMEs) in the same manner as the adjustment of the conversion factors. Therefore, the maximum fees increased by 1.51% for IME services provided on or after Oct. 1, 2026.

A table of the maximum IME fee adjustments from Dec. 1, 1993, to present is available on DLI's [Work comp: IME fees webpage](#).

Link to inpatient PPS Web Pricer under Minn. Stat. § 176.1362, subd. 1

Since Oct. 1, 2021, payment for inpatient services, articles and supplies must be calculated using the inpatient PPS Web Pricer available on Medicare's website using the applicable dates of inpatient hospitalization. The department must publish the link to the inpatient PPS Web Pricer on its website.

The link to the inpatient PPS Web Pricer is available on DLI's [Work comp: PC Pricer tool for inpatient hospital bills webpage](#).

Hospital catastrophic injury threshold adjustment

The threshold for payment of inpatient hospital services, articles and supplies provided to patients with catastrophic, high-cost injuries is adjusted pursuant to Minn. Stat. § 176.1362, subd. 2. For hospital discharges on or after Oct. 1, 2026, the threshold amount is adjusted to \$346,417. If a hospital's usual and customary charges exceed this amount, payment is 75% of the hospital's charges instead of the MS-DRG amount calculated using the inpatient PPS Web Pricer.

Notice of availability of ambulatory surgical center (ASC) addenda

The fee schedule for workers' compensation ambulatory surgical center (ASC) services is based on the Medicare Ambulatory Surgical Center Payment System (ASCPS) addenda AA, BB, and DD1 available on the Medicare website as of July 1, 2026, and the corresponding Medicare rules and claims processing manual. Payment for workers' compensation procedures and services is the ASCPS amount on the total bill times a multiplier of 320%, or the ASC's total usual and customary charges, whichever is less.

Links to Addenda AA, BB, and DD1 are available on DLI's [Work comp: Medical fee schedules – ASCPS webpage](#). They are effective for services provided by an ASC on or after Oct. 1, 2026.

Notice of availability of hospital outpatient fee schedule (HOFS)

The workers' compensation hospital outpatient fee schedule (HOFS) establishes payment rates for workers' compensation outpatient hospital services that are listed in the HOFS (see Minn. Stat. § 176.1364). The updated HOFS table, effective for services from Oct. 1, 2026, through Sept. 30, 2027, is available on DLI's [Work comp: Medical fee schedules – HOFS webpage](#).

HOFS provides two separate payment rates, one for hospitals with more than 100 licensed beds and one for non-critical access hospitals with 100 or fewer licensed beds.

Subscribe to DLI's email newsletters

Did you know the Department of Labor and Industry offers more than two dozen email lists to which you can subscribe to receive news targeted to specific groups? (If you are reading this, you are probably on the *COMPACT* email list.)

Lists related to workers' compensation news include:

- Adjusters updates
- *COMPACT*
- Employer updates
- Rehabilitation providers updates
- Attorney updates
- *Campus Connect*
- Medical providers updates
- Trading partner updates



Other email lists are available for:

- *Labor and Industry News*
- Construction codes, licensing and building trades
- Minnesota OSHA and workplace safety
- Apprenticeship, dual-training and Youth Skills Training
- Labor standards, worker rights, wage and hour
- Rulemaking

[Learn more about the available email lists](#) on the Department of Labor and Industry website.

Ask the ADR and Work Comp Campus pro

DLI's Alternative Dispute Resolution unit answers frequently asked questions

By Brian Mak, director, Alternative Dispute Resolution

Editor's note: The Alternative Dispute Resolution unit at the Minnesota Department of Labor and Industry seeks early intervention in workers' compensation disputes through conferences and mediations. It handles calls from the Workers' Compensation Help Desk and responds to questions from all stakeholders.

Q: What services does the Alternative Dispute Resolution (ADR) unit provide at the Department of Labor and Industry (DLI)?

A: The ADR unit offers four primary functions to resolve workers' compensation disputes: customer assistance; dispute certification; administrative conferences; and mediation.

Q: I could not resolve my workers' compensation dispute alone. How do I request certification of an issue at DLI?

A: The certification process starts by filing a Request for Certification via webform in Work Comp Campus. A mediator/arbitrator then engages the parties to attempt to resolve the issue.

Q: My issue was not resolved in the certification process and the matter was then certified as a dispute. What happens now?

A: After an issue is certified, the requesting party should file a Request for Assistance under the same assigned Campus dispute. An administrative conference is then scheduled.

Q: How do I place potential intervenors on notice of the dispute?

A: Proper notice is outlined under Minnesota Statutes § 176.361 and Minnesota Rules 1415.1100. While there is no prescribed form or Campus webform to place a party on notice, one should consider only referencing DLI specific information, such as the Campus dispute (DS) number and pertinent case information. Do not instruct potential intervenors to file a Motion to Intervene at the Court of Administrative Hearings (CAH) if the proceeding is at DLI.



Q: I am the opposing party. Do I need to file a response?

A: Yes, Minn. R. 1415.3800, subpart 3, requires requesting parties to file a response in all medical disputes and can be inferred under Minn. R. 5220.0410, subp. 4, for vocational rehabilitation matters. Per Minn. Stat. § 176.106, subdivision 6, a penalty may be assessed if the insurer does not provide a specific reason for nonpayment of the items in dispute.

Q: How do I file exhibits before an administrative conference?

A: All filings related to a case at DLI should be submitted via Campus. While some people like to email exhibits to all parties, they should be filed under the corresponding dispute in Campus to avoid delay. An email message to the other parties of the filing can help ensure the parties are made aware of the exhibits and have an opportunity to review them before the conference.

Q: How does DLI conduct administrative conferences?

A: All administrative conferences are conducted via Microsoft Teams. The link and the assigned date and time are listed in the Notice of Administrative Conference.

Q: Something came up on my schedule. How do I request a continuance?

A: Continuances are disfavored and only granted for “good cause,” as outlined under Minn. R. 1415.3700, subp. 6. When requesting a continuance, contact the assigned mediator/arbitrator in writing and provide all relevant information.

Q: Who do I contact if the case is resolved before the administrative conference?

A: The requesting party should take the lead by contacting the assigned mediator/arbitrator via email, telephone or filing a letter regarding settlement on the corresponding dispute in Campus. Never remove an administrative conference from your calendar until you receive a confirming response from the mediator/arbitrator.

Q: We had the administrative conference. Now what happens?

A: The mediator/arbitrator conducting the conference will prepare a binding decision and order. Any party in disagreement with the order has the right to request a formal hearing at CAH as outlined in Minn. Stat. §§ 176.106.

Q: Can I still attempt to resolve my workers’ compensation dispute even if the case is now at CAH?

A: Yes, all DLI mediators can help resolve your case – no matter where it is in the workers’ compensation process.

Q: Is there anything else I should know about resolving disputes?

A: The ADR unit is here to help you resolve your workers’ compensation cases and can be reached directly by phone at 651-284-5032. Give us a call!

Translated webpages, materials, Language Line available via DLI website

The Department of Labor and Industry (DLI) posts its available translated materials on its website at dli.mn.gov/translations. It has documents available in Chinese, Hmong, Karen, Somali and Spanish. A few other documents throughout the website are available in additional languages.

The DLI website now also provides Google Translate near the upper left corner of each page, allowing visitors to choose the language for the website text.

In addition, DLI has access to Language Line, a free language translation phone service for limited-English speakers. If DLI help is needed, view the contact information at dli.mn.gov/about-department/about-dli/contact-us, call and a DLI employee will get in touch with an interpreter in the needed language.



Alert: Injured workers targeted in work comp scam

The Department of Labor and Industry (DLI) and the Court of Administrative Hearings have both posted “scam alerts” on their websites related to a sophisticated nationwide scam targeting workers with reported work-related injuries. Ultimately, the scam involves an attempt to get an injured worker to pay money to receive workers’ compensation benefits. The scammer often communicates that benefits have been awarded by a judge following a hearing or through a settlement obtained on the injured workers’ behalf. The scammer may impersonate a judge, attorney, state employee or other government representative, and research may show the scammer appears legitimate. Notices may appear to be signed by a current judge or to have been issued from a state agency.

Unfortunately, some injured workers have fallen for the scam and sent money trying to get workers’ compensation benefits. DLI would like injured workers and workers’ compensation stakeholders to know the following.

Attorneys cannot obtain benefits for an injured worker without their knowledge

An attorney cannot pursue workers’ compensation benefits on an injured workers’ behalf without having first been asked to do so by the injured worker. Once retained by an injured worker, the attorney has an ethical duty to keep the injured worker informed about what is happening with the legal claim and when any hearings may be.



Injured workers do not have to pay to receive the benefits they are entitled to

Attorneys who are hired by injured workers to obtain benefits on their behalf are paid a portion of any benefits awarded. Injured workers cannot be required to pay up-front for any benefits that may have been obtained or for any legal services that were used to obtain those benefits on the injured workers’ behalf.

Injured workers do not have to provide bank or account information to receive benefits

Benefits are paid via check and sent in the mail. Injured workers receiving ongoing wage-loss benefits may choose to have their wage-loss benefits paid via direct deposit instead of by check, with appropriate bank account details provided at the time of the request. No other forms of payment are currently allowed under Minnesota workers’ compensation law.

Injured workers do not generally need to act immediately or risk losing benefits

Notice of a work-related injury must be made to the employer as soon as possible. If a claim is denied and the injured worker wants to start a legal action to get the benefits they think they are due, that action should be started as soon as possible. But, generally, an injured worker has approximately three years from the date of injury to make that decision.

Any stakeholder who has heard from or about an injured worker who may have been a target of a workers’ compensation scam is encouraged to have the injured worker reach out to the DLI [Workers’ Compensation Help Desk](#) for assistance with their injury claim, report the scam incident to local law enforcement and/or file a complaint with the [Minnesota Attorney General’s Office](#).

Workers' Compensation Court of Appeals update: Attorney fees

Beginning with decisions issued July 1, 2026, the Workers' Compensation Court of Appeals will address the award of attorney fees on appeal in a separate order. The court will consider whether to award fees and in what amount on an individual basis. The attorney fee determination is appealable separately from the decision on the substantive issues of the case.



EDI event table update

The Minnesota Department of Labor and Industry (DLI) is updating the Minnesota implementation guide event table of the Claims Release Standard 3.1 (XML format) published by the International Association of Industrial Accident Boards and Commissions (IAIABC).

Specifically, Appendix C, MN Event Table, of the Minnesota implementation guide is being updated to account for the statutory change, effective for dates on injury on or after Oct. 1, 2026, that expands the timeframe from 60 days to 90 days for an employer or insurer to change their liability determination with a SROI 04 – full denial transaction after accepting liability. The proposed change was posted on DLI's [Work comp: Electronic data Interchange \(EDI\) and eFROI web portal](#) webpage Aug. 31, 2026. The change became effective Oct. 1, 2026.

Updated employee, dependency benefit guides

After receiving notice of a work-related injury, the Department of Labor and Industry (DLI) is required to mail a brochure to the injured worker that explains the injured worker's rights and responsibilities, the assistance available, the operation of the workers' compensation system and whatever other relevant information is deemed necessary (see Minnesota Statutes section 176.235). A brochure is also sent to the survivor(s) in the event notice is received of a work-related death.

DLI is finalizing new versions of the brochures to provide more high-level information for stakeholders. In addition, instead of one brochure for both injury and death claims, there will be separate brochures for each. DLI's hope is these condensed and targeted brochures will help injured workers or their survivors get necessary information about the workers' compensation process without being overwhelmed by information, while also reducing costs and the time associated with the department preparing and sending the brochures.

The current brochure, "An employee's guide to the Minnesota workers' compensation system" is on DLI's [Work comp: Employee guide to Minnesota's workers' compensation system](#) webpage; the new brochures will also be posted there after they are finalized.



Withdrawing from a workers' compensation rehabilitation file, the role of the Vocational Rehabilitation unit or filing a request for assistance on a rehabilitation plan

A qualified rehabilitation consultant (QRC) sometimes withdraws from providing vocational rehabilitation services to an injured worker when the workers' compensation insurer (including a self-insured employer) denies primary liability or further liability for an injury. Where the insurer has denied liability, the QRC must comply with the requirements of the rehabilitation rules (Minnesota Rules 5220.0510, subpart 7a) before referring the file to the Minnesota Department of Labor and Industry (DLI) Vocational Rehabilitation unit (VRU).



Under the rule, the appropriate action the QRC should take depends on whether litigation is pending on the denial of liability. If the sole dispute is regarding discontinuance of compensation, an employee eligible for rehabilitation services may be referred to VRU only after the employee or employer has filed an objection under Minnesota Statutes section 176.238, subdivision 6, to the administrative decision on discontinuance. Compliance with the rule requirements governing QRC withdrawal helps avoid confusing the parties and helps avoid the need for communications from DLI about appropriate form filing.

Disputed denial of primary liability or further liability

Situation

- The insurer issued a written denial of primary liability or further liability.
- The injured worker is disputing the insurer's liability determination and wants to continue receiving rehabilitation services.
- The injured worker has filed an Employee's Claim Petition form, an Employee's Objection to Discontinuance form, a request for administrative conference or another document initiating litigation disputing the insurer's liability determination.
- If the sole dispute is regarding compensation, the QRC should not withdraw, referring the rehabilitation file to VRU, until the employee or employer has filed an objection to the administrative decision on discontinuance.

How to withdraw

- File the R-3 Rehabilitation Plan Amendment form in Work Comp Campus with a copy of the insurer's written denial attached.
- Send copies of the R-3 form and attachment to the parties.
- When the R-3 is filed in Campus with the withdrawal box selected, a referral is automatically sent to VRU. To ensure VRU has adequate time to provide meaningful rehabilitation services to the injured worker, the referral should be made as soon as possible and, preferably, well in advance of any scheduled conference or hearing.

After receipt of the R-3 form, with the written denial attached in Campus, VRU will review the file to confirm current pending litigation, per Minn. Stat. section 176.104.

If VRU confirms it can accept the referral, a QRC will be assigned. The assigned QRC will contact the injured worker as soon as possible to develop an R-3 form and continue rehabilitation services until litigation has concluded, an Award on Stipulation is received or the injured worker has successfully returned to suitable gainful employment.

If VRU cannot accept the file, it will send a letter to the QRC, with copies to the parties and DLI, advising VRU cannot provide rehabilitation services. VRU will not file any rehabilitation forms with DLI. The DLI rehabilitation policy specialist will reassign the rehabilitation file to the previous QRC.

The steps outlined below in “Uncontested denial of primary liability or further liability” or “Request for Assistance” should be followed if there is no pending litigation under Minn. Stat. section 176.104.

Uncontested denial of primary liability or further liability

Situation

- The injured worker does not dispute the insurer’s denial or has not filed a litigation document contesting the denial of liability at this time.

How to withdraw

- Prepare the R-8 Notice of Rehabilitation Plan Closure form. Under “Reason for rehabilitation plan closure” check “QRC withdrawal.”
- File the R-8 form and narrative summary report in Campus and send copies to the parties and VRU.

In this situation, note that if the injured worker later decides to litigate the contested denial of liability, VRU can then perform a rehabilitation consultation and, if the employee is eligible, provide rehabilitation services to the injured worker.

QRC wants to withdraw from the rehabilitation file where there is no denial of liability

Situation

- The QRC decides to no longer provide rehabilitation services.
- Another QRC has not yet been identified to take over the rehabilitation file.

How to withdraw

- File the Request for Assistance form in Campus outlining the issue and copy the parties. DLI’s Alternative Dispute Resolution unit will attempt to resolve the issue informally and/or schedule a conference and issue a decision and order.

Issues concerning QRC withdrawal can be avoided by communicating with the parties, identifying the specific circumstances involved and filing the appropriate form. See Minn. R. 5220.0510, subps. 3a and 7a(C), for specific language regarding the obligations of the QRC when withdrawing from a rehabilitation file.

About VRU

The Department of Labor and Industry’s Vocational Rehabilitation unit provides vocational rehabilitation services to injured workers whose claims have been denied by the employer/insurer so they might receive needed vocational assistance prior to, rather than after, a determination of liability by the courts if they would otherwise be eligible. Documents for VRU should be sent to: Minnesota Department of Labor and Industry, Vocational Rehabilitation unit, 443 Lafayette Road N., St. Paul, MN 55155.

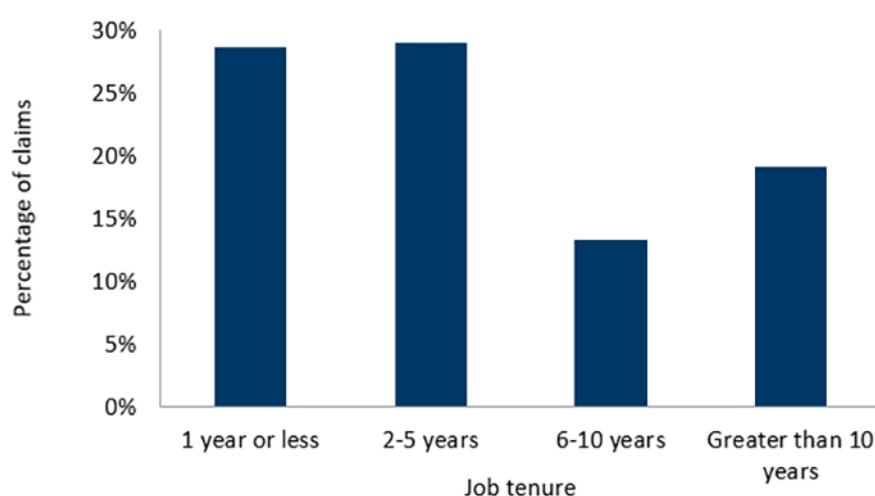
Workplace injuries: How does Minnesota compare?

By Kristin Osiecki, Research and Data Analytics

A national workers' compensation analysis provides a useful benchmark for looking at workplace injury patterns in Minnesota. The [2026 Travelers Injury Impact Report](#) analyzed more than 1.2 million paid workers' compensation claims (excluding COVID-19) from 2021 through 2025. Travelers found that employees in their first year accounted for 37% of injuries and 34% of claim costs. Minnesota claims from the same five-year period show several similar patterns, although the datasets and categories are not directly comparable.

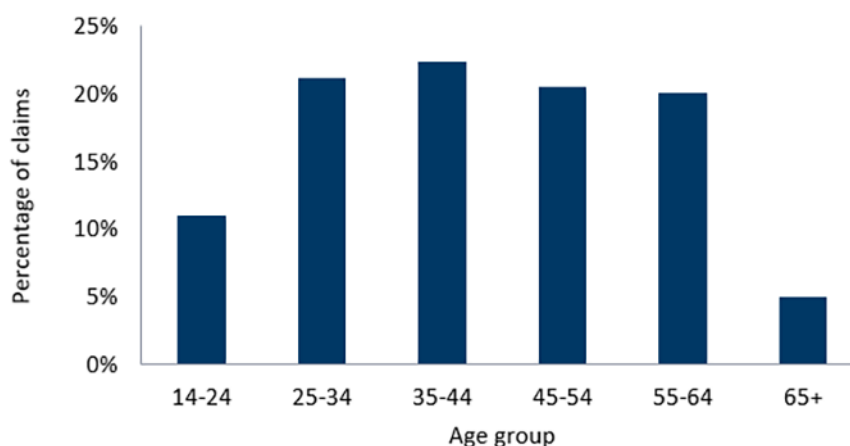
In Minnesota, 28.6% of claims involved workers with one year or less of tenure and another 29.0% involved workers with one to five years of tenure (Figure 1). Together, workers with five or fewer years of tenure accounted for nearly 58% of claims with reported tenure. The national and Minnesota data both point to the importance of sustained safety training and support for employees early in their tenure.

Figure 1. Minnesota claims by worker job tenure



Minnesota claims were also spread fairly evenly across workers ages 25 through 64 (Figure 2). Workers ages 35 to 44 represented the largest share, at 22.3%, followed closely by ages 25 to 34 (21.1%), 45 to 54 (20.5%) and 55 to 64 (20.1%). About one-quarter of Minnesota claims involved workers age 55 or older. The Travelers report similarly identified older workers as an important group, reporting longer average recovery times among workers age 60 and older.

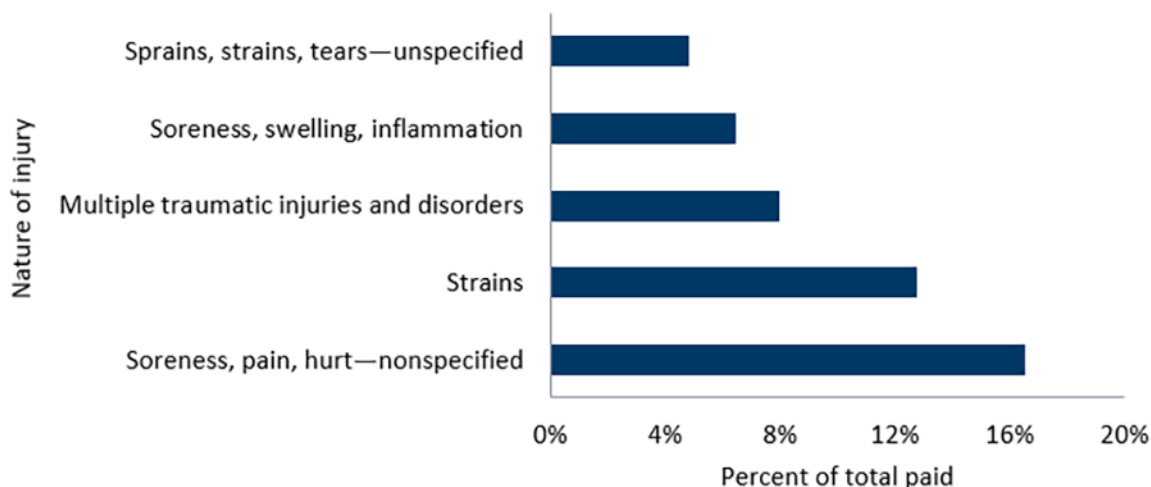
Figure 2. Minnesota claims for worker age



Claim patterns also varied by industry and injury characteristics. Education and health services accounted for 31.1% of Minnesota claims, followed by trade, transportation and utilities (22.9%), manufacturing (12.5%) and construction (7.3%). These percentages describe the distribution of claims, not industry injury rates. The most common injury categories were: pain and soreness; sprains, strains and tears; and multiple traumatic injuries. Upper and lower extremities and the back were the most frequently affected body parts, while structures and surfaces were the leading identified source of injury.

Looking at cost rather than frequency shows where the financial impact is concentrated. The five highest-cost known nature-of-injury categories accounted for approximately \$578 million, or 48.6% of all claim payments (Figure 3). Soreness, pain, hurt (nonspecified) accounted for the largest share at 16.5% (\$196.5 million), followed by strains at 12.8% (\$151.9 million) and multiple traumatic injuries and disorders at 8.0% (\$95.0 million). Therefore, common musculoskeletal injuries and symptoms represent a substantial share of Minnesota workers' compensation payments.

Figure 3. Distribution of Minnesota claim payments by nature of injury



Data note: Minnesota data for 2021 through 2025 used in Figures 1 through 3 comes from the Minnesota workers' compensation claims database. Travelers and Minnesota data is not directly equivalent. Unknown nature-of-injury claims are excluded from the Minnesota top-five cost ranking; percentages may not total 100% because of missing, unknown or other categories.

Taken together, the national benchmark and Minnesota data point to a consistent message: newer workers account for a substantial share of claims though claims are distributed across worker age groups and a relatively small group of common injury categories drives a large share of costs. Examining who is injured, when injuries occur and which injuries drive claim costs can help identify opportunities for prevention and further analysis.



Are you registered to vote?

The [Minnesota Secretary of State website](#) has everything you need to know about voting in Minnesota. Visit the website to register to vote, find out where and how you can cast your vote, what's on your ballot and more.

Sixteen- and 17-year-olds can pre-register to vote in Minnesota too.

Workers' compensation trends continue stability, long-term downward trajectories

Workers' compensation claim rates and benefits paid in Minnesota continue to be stable or follow their long-term downward trajectories, a new Department of Labor and Industry report shows. The [2026 Minnesota Workers' Compensation System Report](#) presents trend data from 2004 to the present regarding several aspects of Minnesota's workers' compensation system, including: claims, benefits and costs; vocational rehabilitation; and dispute resolution.

Significant findings

- Relative to the number of full-time-equivalent workers, the total number of paid claims dropped by 42%, indemnity claims by 32% and medical-only claims by 45% from 2004 to 2024. The total claim rate reached its lowest level in 2024 compared to any other reported year.
- Between 2004 and 2024, indemnity benefits per \$100 of payroll fell 41% and medical benefits per \$100 of payroll fell 54%.
- The estimated total cost of Minnesota's workers' compensation system was \$1.70 billion for 2024, or \$0.83 per \$100 of payroll, indicating a long-term downward trend averaging 3.1% annually.
- In 2024, on a current-payment basis, the three largest components of total workers' compensation system cost were insurer expenses (33%), medical benefits (32%) and indemnity benefits other than vocational rehabilitation (30%).
- Compared to 2004, the average amount of time an injured worker received total disability benefits was 33% longer in 2024. The average duration of temporary partial disability fell 12.0% by 2024.
- After adjusting for average wage growth, from 2004 to 2024: total disability benefits per paid indemnity claim increased 37%; temporary partial disability benefits per paid indemnity claim fell 27%; and permanent partial disability benefits per paid indemnity claim fell 38%.
- Participation in vocational rehabilitation rose from 20% of paid indemnity claims for injury-year 2004 to 25% for 2019, but decreased to 21.8% in 2024.
- The denial rate for non-COVID-19 claims was 17.4% in 2024, about half a percentage point higher than 2023.
- In 2025, 86% of scheduled mediations were completed, while 24% of scheduled medical conferences and 25% of scheduled rehabilitation conferences were completed.



View [the complete report](#) on the Department of Labor and Industry website for more detail.

Workers' compensation events calendar

Note: Event dates may change. Always check the [online calendar](#).

October 2026

Oct. 14	Workers' Compensation Advisory Council
Oct. 15	Medical Services Review Board
Oct. 22	2026 Workers' Compensation Summit
Oct. 30	Training: OSHA recordkeeping basics

November 2026

Nov. 18	Workers' Compensation Insurers' Task Force
---------	--

Training: OSHA recordkeeping basics offered online in October

The Department of Labor and Industry is offering a free, online introductory-level training seminar about OSHA recordkeeping requirements Oct. 30, 8:30 to 11:30 a.m. Maintaining an accurate OSHA log of recordable work-related injuries and illnesses is an important skill that benefits employers, workers, safety professionals and government agencies.

Topics

- Recordability of injuries and illnesses
- Counting time
- How many logs to keep
- Creating a log summary
- Recording COVID-19 cases
- Differences between OSHA cases and workers' compensation claims
- Classifying cases
- Privacy cases
- Maintaining logs
- Reporting log data to OSHA

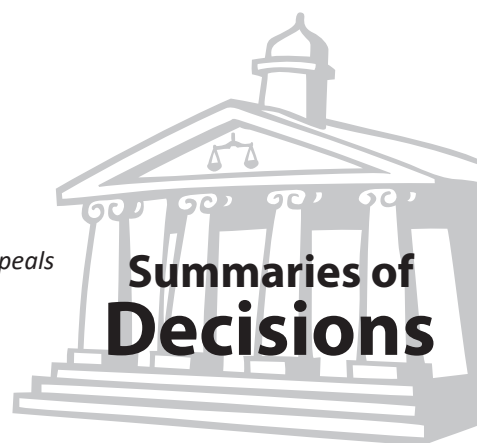


More information

Learn more about these sessions and register to attend (required) on the [MNOSHA Compliance: Recordkeeping standard webpage](#).

Workers' Compensation Court of Appeals summaries of decisions: May through July 2026

Case summaries published are those prepared by the Workers' Compensation Court of Appeals



***Brian L. Zak v. State of Minnesota Department of Veterans Affairs,
May 12, 2026***

Practice And Procedure – Adequacy Of Findings

The compensation judge's conclusion that the employee's work injuries were temporary is adequately supported by findings even though the testimony from one witness was not discussed.

Causation – Substantial Evidence

Substantial evidence, including an expert medical opinion with adequate foundation, supports the compensation judge's disposition of the employee's claims.

Affirmed.

Danny McClain v. Eagle Intermodal Services, Inc., May 27, 2026

Vacation of Award – Referral

Minnesota Statutes § 176.521, Subdivision 3 Construed

Where there is conflicting evidence regarding the employee's past and current medical diagnoses, causation, medical treatment, permanent partial disability ratings, and payment of any medical treatment prior to and following awards on stipulation, the Workers' Compensation Court of Appeals may refer the issues to a compensation judge at the Court of Administrative Hearings for factual findings.

Referred to Court of Administrative Hearings.

Debra J. Heisick v. Zurich North America Insurance Company, June 3, 2026

Causation – Substantial Evidence

Evidence – Medical Opinion

Where the compensation judge accepted the opinion of a medical expert on the issue of causation but made an ultimate finding inconsistent with that opinion that is not otherwise supported by substantial evidence in the record, that finding is erroneous.

Reversed.

Mohamud A. Mohamud (deceased), by Samira Farah, v. Bashka Express LLC and Ali Ibraim, June 25, 2026

Dependency Benefits – Substantial Evidence

Statutes Construed – Minnesota Statutes § 176.111

The evidence in the record as a whole does not support a finding that the petitioner was the putative spouse of the employee as defined under Minnesota Statutes § 518.055, and the compensation judge's denial of dependency benefits is affirmed.

Penalties Frivolous Defense

The compensation judge did not abuse his discretion in awarding five and ten percent penalties against the employers for maintaining a frivolous defense.

Affirmed.

Kathryn Berg v. Spartan Nash Distribution Center, July 1, 2026

Evidence – Unopposed Medical Opinion

Argument of counsel regarding the reasonableness and necessity of treatment received by an employee does not constitute evidence independent of the employee's medical record.

Medical Treatment and Expense – Reasonable and Necessary Maximum Medical Improvement

A determination of maximum medical improvement (MMI), without more, does not constitute a basis to deny otherwise reasonable and necessary medical care.

Medical Treatment and Expense – Reasonable and Necessary

A determination that medical treatment is not reasonable or necessary is unsupported by substantial evidence where medical opinions regarding the treatment were rejected and the employee's medical record indicates continuing improvement and lacks any reference to negative outcomes.

Reversed.

Kristine Eastlund v. Another Man's Treasure, July 6, 2026

Employment Relationship – Substantial Evidence

Where the employee had resigned from her position with the employer, a coworker's statements that she would help get her rehired does not establish an ongoing employment relationship or constitute an offer of re-employment.

Arising Out Of And In The Course Of Employment – Substantial Evidence

Where a former employee assisted a coworker in a task that furthered the employer's interests, which was done at the request of the coworker who did not have authority to hire employees, her actions were not in the course of employment.

Affirmed.

Drew W. Schwarz, deceased employee, by Amanda Faulkner, v. Lake Country Power, July 10, 2026

Evidence – Expert Medical Opinion

The compensation judge did not err by relying upon a well-founded expert medical opinion to support the finding that the employee's cause of death was electrocution.

Arising Out Of And In The Course Of – Substantial Evidence

Substantial evidence, including adequately founded expert medical opinion, supports the compensation judge's finding that the employee's death was caused by electrocution.

Affirmed.

Ocla Bellamy v. Midwest Special Services, Inc., July 17, 2026

Evidence – Expert Medical Opinion

Where the employee did not make a foundational objection to the admission of an expert medical opinion at the hearing or raise the issue of foundation in the notice of appeal to this court, the issue cannot be raised on appeal.

Causation – Substantial Evidence

Substantial evidence, including adequately founded expert medical opinions, supports the compensation judge's decision denying the employee's claim for an occupational disease or a specific injury due to insufficient evidence.

Affirmed.

Kathleen Chmiel v. Cassia, July 22, 2026

Causation – Substantial Evidence

Substantial evidence, including expert medical opinion, supports the compensation judge's finding that the employee's low back injury was temporary and had resolved.

Evidence – Expert Medical Opinion

Where the medical opinion regarding the employee's left ankle adopted by the compensation judge lacked foundation, and no other evidence supported the finding that the employee sustained a temporary left ankle contusion injury on the date of injury or the finding that the employee did not aggravate her pre-existing left ankle condition, substantial evidence does not support the judge's denial of the employee's claim for medical expenses related to the consequential aggravation of her left ankle condition.

Practice and Procedure – Appeals

The employee disputed the employer and insurer's denial of temporary total disability benefits for lack of job search at the hearing, but did not argue that she was an active employee who expected to return to work for the employer. A legal theory of compensability of claims cannot be raised for the first time on appeal and is forfeited.

Affirmed in part and reversed in part.

Minnesota Supreme Court workers' compensation decisions: May through July 2026

Case summaries published are those prepared by the Workers' Compensation Court of Appeals



Nicholas Rowe v. City of Minneapolis, July 22, 2026

Statutory Interpretation

Statutes Construed – Minnesota Statutes § 176.011, Subdivision 15(E)

Under Minnesota Statutes § 176.011, subdivision 15(d)-(e), the most recently published edition of the Diagnostic and Statistics Manual of Mental Disorders (DSM) includes text revisions to the DSM.

Statutory Interpretation

Statutes Construed – Minn. Stat. § 176.011, Subd. 15(E)

In assessing the rebuttal of the statutory presumption triggered by an employee's post-traumatic stress disorder (PTSD) diagnosis a compensation judge is not barred from considering an employer's independent psychological evaluation (IPE) based on an outdated edition of the DSM.

Statutory Interpretation

Statutes Construed – Minn. Stat. § 176.011, Subd. 15(E)

In assessing the rebuttal of the statutory presumption triggered by an employee's PTSD diagnosis, a compensation judge's finding that the employer rebutted the statutory presumption is not in error merely because the employer's expert relied on an outdated edition of the DSM in conducting an IPE.

Reversed and remanded.