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.

  Some work-related psychological injuries may qualify you for benefits: if your injury is post-traumatic stress disorder with at least one month of persistent symptoms and diagnosed by a licensed psychologist, psychiatrist or licensed psychiatric nurse practitioner; or if the psychological injury is accompanied by a physical injury.

- 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 about 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 specific, written confirmation from your doctor about any authorization to be off work.

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 it believes 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 claim adjuster who is handling your claim. If you are not satisfied and still disagree with the denial, call the Department of Labor and Industry's Workers' Compensation Help Desk at 651-284-5005 or 800-342-5354.

Fraud

Collecting workers' compensation benefits you are not entitled to is theft. Call 888-372-8366 to report workers' compensation fraud.

Insurer name and contact information

DEPARTMENT OF LABOR AND INDUSTRY

651-284-5032 • 800-342-5354 • dli.workcomp@state.mn.us • dli.mn.gov

Posting required by law in a location where employees can easily see this notice.

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