

Highlights of 2019 Workers' Compensation Advisory Council legislation

Governor Tim Walz signed legislation May 30, 2019, enacting statutory amendments recommended by the Workers' Compensation Advisory Council (WCAC) to implement a modernized workers' compensation technology system, which will replace the aging imaging system in effect since 1992. The workers' compensation Claims Access and Management Platform User System (CAMPUS) will simplify and expedite stakeholder interaction with the workers' compensation system. It will be an integrated, electronic and web-based system that will: securely maintain and retain records related to a specific workers' compensation claim; process electronic data filed by stakeholders; provide authorized stakeholders and agency staff members secure, efficient and user-friendly online access to documents related to a claim; and support automated workflows and operations.



The legislation is in Laws of Minnesota, 2019 First Special Session Chapter 7, Article 12. Refer to the actual law for the complete language and details. You can view Article 12 online in the final engrossment of H.F. 2 at www.revisor.mn.gov/bills/text.php?number=HF2&version=0&session=ls91&session_year=2019&session_number=1&format=pdf.

Highlights of the amendments

Sections 1-4. Minnesota Statutes § 176.011. Definitions – effective Aug. 31, 2020

- Adds definitions for: "agency"; "CAMPUS" (the name of the new workers' compensation system); "division file" (the official electronic file in CAMPUS to retain documents and data related to a claim); and "document."

Section 5. Minn. Stat. § 176.1812, subd. 2. Collective bargaining agreements, filing and review

- Requires that the commissioner need not approve, but must be notified within 30 days, of an employer's entry or withdrawal from an approved Union Construction Workers' Compensation Program (UCWCP) agreement. Effective June 1, 2019.
- Modifies reporting obligations. UCWCP must annually report claim-specific dispute resolution data to enable the commissioner to report aggregate dispute data to the Legislature. Effective Aug. 31, 2020.

Section 6. Minn. Stat. § 176.231. Report of death or injury to commissioner of Department of Labor and industry; access to data – effective Aug. 31, 2020

- Clarifies when first reports of injury and subsequent reports must be filed with the commissioner, adding that a report of injury must also be filed when a dispute is initiated, when a vocational rehabilitation form is filed and when permanent partial disability is ascertainable. The insurer must also report whether the injury is covered by UCWCP under Minn. Stat. § 176.1812.
- Describes the process for adopting and updating new technical requirements for electronic filing of reports of injuries by employers and insurers according to a national workers' compensation electronic reporting standard developed by the International Association of Industrial Accident Boards and Commissions (IAIABC).

- Describes and clarifies who has electronic access to the CAMPUS division file or parts of the division file depending on the entity's role in the workers' compensation system, including: agencies, attorneys, employees, employers, insurers, intervenors, licensed third-party administrators, registered rehabilitation providers, and statutorily created entities that pay or reimburse benefits. Specifies when an authorization is required to access the division file and requirements for authorizations.

Section 7. Minn. Stat. § 176.253. Insurer, employer and third-party administrator; performance of acts

- Provides that a licensed third-party administrator (TPA) with a CAMPUS account may act on behalf of an employer or insurer as provided in the contract, unless the insurer or TPA notifies the department otherwise.

Section 8. Minn. Stat. § 176.2611, subd. 2. Applicability – effective Aug. 31, 2020

- Clarifies the applicability of Minn. Stat. § 176.2611 to reflect the amendments in sections 9 and 10.

Section 9. Minn. Stat. § 176.2611 subd. 5. Form revision; access to documents at the Office of Administrative Hearings (OAH) and the Department of Labor and Industry (DLI) – effective May 31, 2019 (the day after final enactment)

- Revises terminology to reflect replacement of the imaging system with CAMPUS and requires interagency read-only access to the OAH and DLI case management systems. Beginning Aug. 31, 2020, requires electronic transmission of dispute-related documents and data between the agencies using application programming interfaces (APIs).

Section 10. Minn. Stat. § 176.2611, subd. 6. Data privacy – various effective dates

- Updates the existing language, enacted in 2018, to reflect that as of Aug. 31, 2020, the amendments to Minn. Stat. § 176.231 (section 6) govern access to the division file in CAMPUS. Subdivision 6 continues to govern access to data at OAH after Aug. 31, 2020. Posted notices of proceedings may not include the employee's name or any part of the name, effective May 31, 2019.

Section 11. Minn. Stat. § 176.2612 [New]. The Workers' Compensation Claims Access and Management Platform User System (CAMPUS) – effective Aug. 31, 2020

- Describes the requirements of CAMPUS, including a single, secure electronic service and filing system for documents filed with the commissioner and the Workers' Compensation Court of Appeals (WCCA), electronic transmission of documents between agencies, and electronic access to the division file by authorized persons and agencies.
- Requires the commissioner to develop a plan and statutory proposal for improvements to CAMPUS by January 2021. The plan must ensure a single calendaring system and a single filing system to include OAH.
- Describes who is required to create and maintain an account in CAMPUS for purposes of electronic filing and access to the division file. Permits, but does not require, an employee to create an account.

Section 12. Minn. Stat. § 176.275. Filing of papers; proof of service – effective Aug. 31, 2020

- Clarifies an agency's authority to accept or reject a filing; requires filers to use the worker identification (WID) number instead of the Social Security number (SSN) if a WID number has been assigned; provides that a document inadvertently filed at the wrong agency is deemed filed with the correct agency only if it is filed by an unrepresented employee.
- Applies the definition of an "affidavit" in District Court Rules to workers' compensation affidavits; and amends proof of service requirements for agencies and parties.

Section 13. Minn. Stat. § 176.281. Orders, decisions, and awards; filing; service – effective Aug. 31, 2020

- Requires immediate electronic transmission of data, documents and dispute outcomes between the Office of Administrative Hearings' case management system and CAMPUS, via APIs.

Section 14. Minn. Stat. § 175.285. Service of papers and notices; electronic filing – effective Aug. 31, 2020

- Requires documents to be electronically filed with or served on the commissioner or WCCA.
- Provides that an employee cannot be required to electronically file a document or accept electronic service.
- Allows rehabilitation providers to attest that signatures have been obtained on electronically filed rehabilitation documents.
- Allows the commissioner, WCCA and parties to electronically serve documents on another party through CAMPUS via secure email or access through a web portal.
- Extends the document electronic filing deadline to 11:59 p.m., but if a document is served on a party after 4:30 p.m., the time for the party to assert a responsive right is extended.

Section 15. Minn. Stat. § 176.312. Affidavits of prejudice and petitions for reassignment – effective July 1, 2019

- Extends the time from 10 to 20 days for a party to petition for reassignment of a compensation judge.

View the highlights in table format

A table on page 8 provides highlights and effective dates of the legislation by subpart.

Roslyn Robertson returns as DLI deputy commissioner

Roslyn Robertson is the Department of Labor and Industry's (DLI's) new deputy commissioner. She has 30 years of experience working at DLI in a variety of leadership roles and has significant experience in the program areas of Apprenticeship, Construction Codes and Licensing, Labor Standards and Minnesota OSHA (MNOSHA).

As deputy commissioner, Robertson will oversee the Construction Codes and Licensing Division, Workers' Compensation Division, and the Apprenticeship, Labor Standards, MNOSHA Compliance and MNOSHA Workplace Safety Consultation units.

Learn more about DLI at www.dli.mn.gov/about-department/about-dli.



From the *State Register*: Provider participation list available

Health care providers that provide medical services to an injured worker under the workers' compensation law are required to participate in the Medical Assistance Program and MinnesotaCare as a condition of receiving payment for treatment of the workers' compensation injury.

(See Minnesota Statutes § 256B.0644 and Minnesota Rules, parts 5221.0500, subpart 1, and 9505.5200 to 9505.5240.)

The Department of Human Services (DHS) list of providers that participate in the Medical Assistance Program and MinnesotaCare is now available online. To see if a provider is on the list, check the Minnesota Health Care Programs (MHCP) provider directory at <http://mhcpproviderdirectory.dhs.state.mn.us>.

To obtain a full list of participating providers, call the DHS Provider Call Center at 651-431-2700 or 800-366-5411 and request a work order to have the list sent to you. You may also fax the request to 651-431-7462 or mail it to the Department of Human Services, Provider Eligibility and Compliance, P.O. Box 64987, St. Paul, MN 55164-0987.



WCMP update: Focused on building complex system functionalities

The Department of Labor and Industry (DLI) and its partners, Minnesota IT Services (MNIT), the Workers' Compensation Court of Appeals (WCCA) and national IT consulting firm CapTech, have been hard at work building a new workers' compensation system for Minnesotans.

Work Comp Campus is a user-centered, data-driven, online portal that improves support to injured workers and provides greater insight into claims and disputes for all parties. The system will allow quicker access to claim information among employers, insurance companies, medical providers, injured workers and attorneys to ensure work injuries are reported, treated and compensated in a streamlined manner.

Building Work Comp Campus is a big job. Implementation and deployment kicked off in August 2018 and it is planned to finish in late summer 2020. Development will be about 27% complete by mid-July. Early development was focused on building the system's framework and core processes. Now that that is complete, the team is focusing on building more complex functionality for both internal DLI use and external partners' use.

To ensure DLI is building a system that serves the needs of the future users, DLI is engaging actively with communities throughout Minnesota. This currently involves speaking engagements at relevant existing groups (task forces, advisory councils, committees and conferences), as well as specific advisory groups put together by DLI to gather requirements and feedback directly from future users.

There are currently six DLI advisory groups that include representatives from every stakeholder group. DLI will continue to reach out to various stakeholder groups as feedback and participation are needed. The participants in these groups will contribute significantly to the functionality of the future system by highlighting the specific needs of their communities, providing feedback and testing system functionality. If you are interested in becoming involved with these groups or future opportunities, email WCMP Change Management Lead Valerie Brophy at valerie.brophy@state.mn.us.

Sample mock-up of user dashboard

Below is a sample mock-up of the Work Comp Campus dashboard for external users. It is not yet final, so there may be differences when the system goes live.

The dashboard mock-up features a dark blue header with the DLI logo and user profile 'John Jacobson'. The main content area is divided into several sections:

- My Overview:** Three large cards showing '22 Open Cases', '12 Upcoming Events', and '28 New Documents'.
- Notifications:** A list of recent document creation notifications.
- My Queue:** A table with tabs for 'Claims', 'Disputes', and 'Forms'. It lists items like 'Employee's Claim Petition', 'Medical Request', and 'Rehabilitation Request'.
- Events:** A calendar view for January 2019.

At the bottom, there is a footer with contact information and links for 'Terms of Use', 'Privacy Policy', and 'About Us'.

CompFact: Concussions – A growing concern

By Brian Zaidman, Research and Statistics

The number of indemnity claims with concussions has increased in 2017 and 2018, reaching the highest levels ever reported in Minnesota (see Figure 1). The 533 indemnity claims total reported for 2018 (which is likely to increase as claims develop) is more than double the number from five years earlier; and the number reported for 2013 is more than three times higher than the number reported five years earlier. Another interesting comparison is that the number of workers with concussions resulting in payment of indemnity benefits is now 10 times higher than the number in 2006. Concussions accounted for 1.9% of indemnity claims from 2015 through 2017, compared with just 0.2% of indemnity claims from 2005 through 2007.

While the increase in reported concussions may be due to an actual increase in blows to the head, the increase may also be due to heightened sensitivity among employers and employees about concussions and their long-term effects. A decade ago, employers may have described an injury due to a fall where the worker bumps her head on the pavement as a bruise or as head pain. In recent years, employers are much more likely to characterize the injury as a concussion. The descriptions the employers enter on their First Report of Injury forms are used to code the injury characteristics in the workers' compensation claims database.

There are likely many more concussions occurring that do not result in more than three days of disability. Minnesota's number of concussions estimated from the Survey of Occupational Injuries and Illnesses, which includes cases *with at least one day away from work*, averages 50% higher than the workers' compensation claim count from 2011 through 2017.

Analysis of the 1,155 concussion injuries from 2015 through 2017 shows the events, sources, industries and occupations where concussions are most common. The most notable demographic characteristic is that women were more likely to report concussions, accounting for 55% of the concussion injuries. This is in contrast to all other injuries, where women accounted for 37% of the claims.

Concussions, continues ...

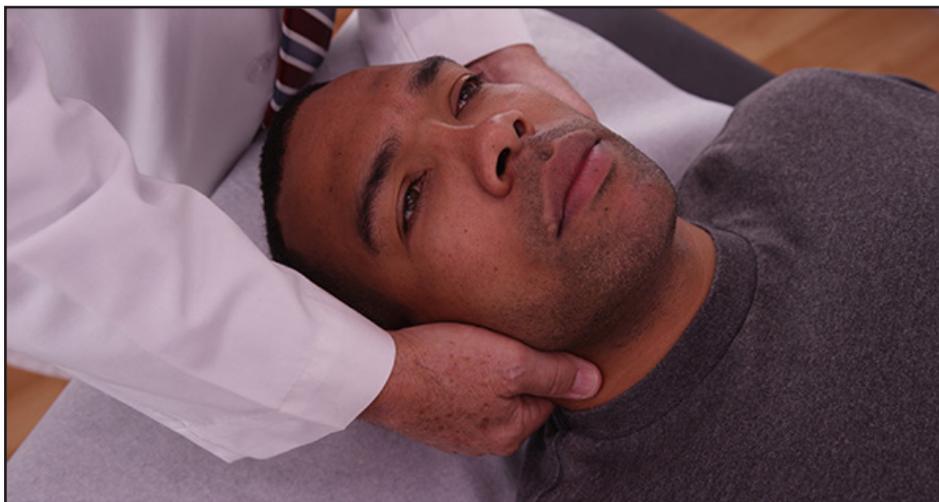
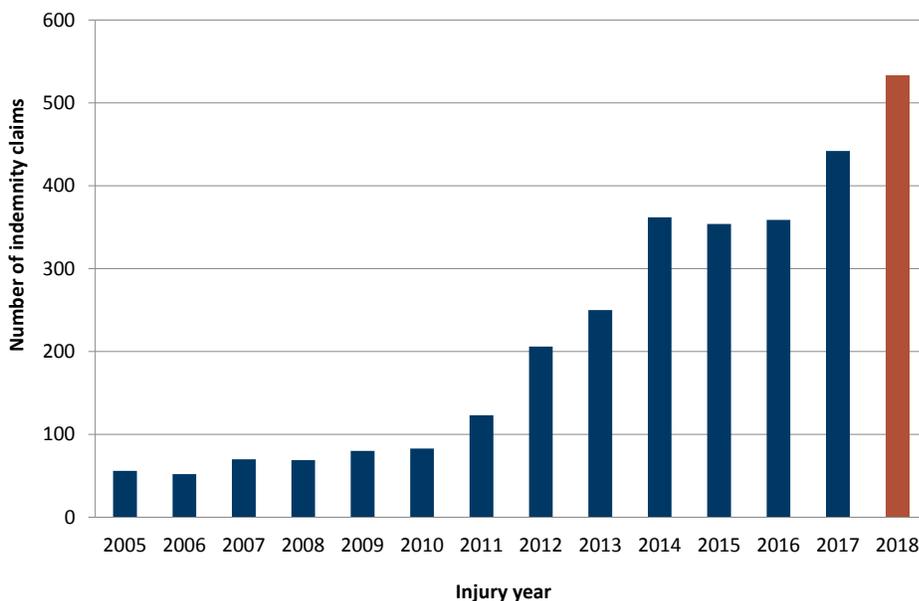


Figure 1. Number of concussion injuries among indemnity claims, Minnesota, 2005-2018



Source: Minnesota workers' compensation claims database.

Events

- Fourteen percent of the injuries were due to falls on the same level caused by slipping.
- Thirteen percent were due to the worker being assaulted by hitting, kicking, beating or shoving.
- Thirteen percent were due to being struck by an object or equipment.

Sources

- Eight percent of the injuries were caused by a fall to a floor.
- Six percent were due to an assault by a student.
- Six percent were caused by a fall to a parking lot.
- Six percent were due to an assault by a client or customer.

Industries

- Nineteen percent of the injuries were in health care and social assistance.
- Fifteen percent were in educational services.
- Fifteen percent were in retail trade.

Occupations

- Fourteen percent of the injuries were to workers in transportation and material moving occupations.
- Ten percent were to workers in education, training and library occupations.
- Ten percent were to workers in sales occupations.
- Nine percent were to workers in health care support occupations.

Reviewing the basics: *Recordkeeping training offered Aug. 16, Nov. 6*

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. The Department of Labor and Industry is offering free introductory-level training sessions Aug. 16 and Nov. 6 about OSHA recordkeeping.

Topics

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



Registration, more information

To register, visit <https://secure.doli.state.mn.us/events>. For more information about the training sessions, visit www.dli.mn.gov/business/workplace-safety-and-health/mnosha-compliance-recordkeeping-standard.

Turn to Office of Workers' Compensation Ombudsman for help with claims



The Department of Labor and Industry's Office of Workers' Compensation Ombudsman informs, assists and empowers injured workers and small businesses having difficulty navigating the workers' compensation system. It is a separate entity within the department.

For assistance, contact the Office of Workers' Compensation Ombudsman at 651-284-5013, 800-342-5354 or dli.ombudsman@state.mn.us.

New SAWW, TTD maximum rates effective October 2019

The statewide average weekly wage (SAWW) effective Oct. 1, 2019, is \$1,112, a 3.25% increase from the current SAWW of \$1,077, which has been in effect since Oct. 1, 2018. (See the table at right.) The statewide average *annual* wage will change to \$57,817 on Jan. 1, 2020.

The new SAWW is based on 2018 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 first adjustment are limited by Minn. Stat. § 176.645, subds. 1 and 2.

The maximum temporary total disability (TTD) benefit rate will change to \$1,134.24 and the minimum permanent total disability (PTD) benefit rate will change to \$723.

A complete notice with provider fee levels will be published in the September edition of *COMPACT*.

Statewide average weekly wage Effective Oct. 1 of the indicated year		
Year	Statewide average weekly wage	Percent change from prior year
2006	\$782	1.03%
2007	\$808	3.32%
2008	\$850	5.20%
2009	\$878	3.29%
2010	\$868	-1.14%
2011	\$896	3.23%
2012	\$916	2.23%
2013	\$945	3.17%
2014	\$961	1.69%
2015	\$989	2.91%
2016	\$1,026	3.74%
2017	\$1,041	1.46%
2018	\$1,077	3.46%
2019	\$1,112	3.25%

WCRI report compares Minnesota with 17 other states

The Workers' Compensation Research Institute's (WCRI's) most recent report for Minnesota, *CompScope Benchmarks for Minnesota, 19th Edition*, was released in April. This report uses insurer claim files to compare Minnesota's medical payments, indemnity benefits and insurer expenses with those of 17 other states, including Iowa and Wisconsin, for the 2012 to 2017 period. The report is available for purchase from WCRI at www.wcrinet.org.



Major findings

- Average costs for all paid claims, measured at an average of 36 months after the injury (2015 claims measured in 2018) were 20% lower in Minnesota than the 18-state median.
- For cases with more than seven days of lost time, Minnesota's cost was 11% lower than the median value. Medical costs, indemnity benefits and benefit delivery expenses were all below the median, although fairly typical relative to other states. Benefit delivery expenses include medical cost containment expenses, defense attorney fees and independent medical examination costs.
- Average payments for Minnesota claims have showed little to moderate growth from 2012 to 2017. Analysis of claims with more than seven days of lost time, measured an average of 12 months after the injury, shows the total of medical costs, indemnity benefits, vocational rehabilitation and claims expenses increased at an average annual rate of 2.6%. Claim costs measured an average of 36 months after the injury grew at an annual rate of 1.9%.
- Minnesota had slightly fewer claims with any permanent partial disability (PPD) or lump-sum payment, at an average of 36 months after the injury, than the median state; however, the average PPD/lump-sum payment for these claims was 19% higher than the median.
- Benefit delivery expenses (for claims with these expenses) were 12% lower than the median state value for Minnesota claims with more than seven days of lost time at an average of 36 months after the injury.

Highlights of 2019 Workers' Compensation Advisory Council legislation

Laws of Minnesota 2019; 2019 First Special Session; Chapter 7, Article 12

Session law section	Minnesota statute amended	Highlights of amendments	Effective date
1	176.011, subd. 1c	Defines "agency" to include the Department of Labor and Industry (DLI), the Office of Administrative Hearings (OAH), and the Workers' Compensation Court of Appeals (WCCA), unless the context indicates otherwise.	8/31/20
2	176.011, subd. 1d	Defines "CAMPUS" as described in Minnesota Statutes § 176.2612.	8/31/20
3	176.011, subd. 8d	Defines "division file" within CAMPUS to retain imaged or electronic documents and data related to a workers' compensation claim. Excludes data used for agency internal operations, confidential mediation statements, and judge, mediator, or commissioner work product.	8/31/20
4	176.011, subd. 8e	Defines "document" to include a form, report, record, notice, order, and paper, including information and data authorized or required to be filed with or served on or by an agency.	8/31/20
5	176.1812, subd. 2	Paragraph (b) provides that the commissioner need not approve an employer's entry or withdrawal from an approved Union Construction Workers' Compensation Program (UCWCP) agreement, but must be notified within 30 days. Paragraph (c) modifies reporting obligations. UCWCP must annually report claim-specific dispute resolution data, to enable the commissioner to report aggregate dispute data to the Legislature.	6/1/19 (b) 8/31/20 (c)
6	176.231, subd. 1	Paragraph (b) clarifies when first reports of injury and subsequent reports must be filed with the commissioner, adding that a report of injury not previously filed must be filed within 14 days after a dispute is initiated, a vocational rehabilitation form is filed, and when permanent partial disability is ascertainable. Paragraph (d) reflects updated Minnesota OSHA reporting requirements. Paragraph (e) requires the insurer ¹ to also report whether the injury is covered by UCWCP under Minn. Stat. § 176.1812.	8/31/20
6	176.231, subd. 2	Clarifies injury reporting between the employer, insurer, and commissioner. Requires the insurer to serve the report of injury on the employee within two business days after it is accepted by the commissioner.	8/31/20
6	176.231, subd. 5	Paragraphs (a) and (b) require reports filed under Minn. Stat. § 176.231 to be filed electronically in the manner and format required by the commissioner. The commissioner must give 60 days' notice to insurers and in the <i>State Register</i> of the effective date that a report must be electronically filed, except as specified in paragraph (d). Paragraph (c) requires reports designated by the commissioner to be filed electronically according to the version of the Claims Release Standard (CRS) published by the International Association of Industrial Accident Boards and Commissions (IAIABC) and adopted by the commissioner. Requires the commissioner to publish a Minnesota implementation guide for the reporting requirements on DLI's website. Paragraph (d) requires the commissioner to give insurers notice, and publish notice in the <i>State Register</i> , of reports that must be filed according to the adopted version of the CRS, and provide interested parties a 90-day comment period. After considering the comments, requires the commissioner to publish notice of the adopted CRS and Minnesota implementation guide at least 90 days before the effective date. Requires the commissioner to give at least 30 days' notice of any updates to the Minnesota implementation guide.	8/31/20, except the notices may be published before then to ensure an effective date of 8/31/20

Highlights, continues ...

¹"Insurer" also includes a self-insured employer in these highlights.

Highlights, continued ...

6	176.231, subd. 9	<p>Paragraph (a) provides that documents in the division file are private and nonpublic data as defined in Minn. Stat. § 13.02, but may be used in hearings and for state investigations and statistics. The documents are available without an authorization to specified statutory entities, an agency as needed to perform its responsibilities, and as provided in subds. 9a, 9b, and 9c. Specifies when an authorization is required.</p> <p>Paragraph (b) provides that a person with an authorization signed by the employee, dependent of a deceased employee, insurer, or employer has access to the division file and specifies requirements for authorizations.</p>	8/31/20
6	176.231, subd. 9a	<p>Paragraph (a) provides access to the division file for a specific claimed date(s) of injury without an authorization to: an employee or guardian; a deceased employee's legal heir or dependent; an employer and insurer for the claim; and specified entities that provide, pay, or reimburse the claim. Provides access to certain documents in the division file to persons who have filed a motion to intervene in a disputed claim and registered rehabilitation providers. Provides access to the division file to licensed third-party administrators (TPAs) for claims they have contracted with listed entities to administer.</p> <p>Paragraph (b) provides that an attorney who has filed a signed authorization, retainer agreement, notice of appearance or representation, or a pleading or response to a pleading has the same access to the division file that the authorizing person has unless limited by the document. Specifies how long the attorney's access continues, depending on whether a subsequent document is filed and the nature of the document.</p>	8/31/20
6	176.231, subd. 9b	Describes interagency access to documents and data related to workers' compensation disputes without an authorization when CAMPUS is implemented, with exceptions.	8/31/20
6	176.231, subd. 9c	<p>Paragraph (a) defines "enforcement action," "investigation," and "final order."</p> <p>Paragraph (b) provides that a final enforcement order or final penalty related to a specific employee's claim is placed in the division file, with access as provided in subdivision 9a. Before the order is final, the employee, dependent of a deceased employee, employer, or insurer and their attorneys have access.</p> <p>Paragraph (c) provides that enforcement orders and penalty assessments that are not claim-specific are governed by Minn. Stat. §§ 13.39 and 13.41 of the data practices act, except that Social Security numbers (SSNs), worker identification (WID) numbers, and the identity of a complainant are private or nonpublic data as defined in Minn. Stat. § 13.02 of the data practices act.</p>	8/31/20
7	176.253	Provides that a licensed TPA with an active account in CAMPUS may act on behalf of the employer or insurer as provided in the contract between the TPA and the employer or insurer. Requires DLI to serve an order or penalty on the TPA acting on behalf of the employer or insurer. Provides the TPA with authority to act on behalf of the employer or insurer in responding to an inquiry, penalty, or order, unless the insurer or TPA notifies DLI in writing otherwise.	8/31/20
8	176.2611, subd. 2	Updates the applicability of Minn. Stat. § 176.2611 to reflect the amendments.	8/31/20

Highlights, continues ...

Highlights, continued ...

9	176.2611, subd. 5	<p>Repeals references to the imaged file throughout. Repeals the requirement that DLI send Notices of Discontinuance and commissioner decisions and mediated agreements to OAH.</p> <p>Paragraph (c) provides that as of Aug. 31, 2020, specified dispute-related documents must be immediately transmitted between OAH's case management system and CAMPUS using application programming interfaces.</p> <p>Paragraph (e) provides that each agency must be provided with complete, read-only, electronic access to the other agency's case management systems.</p>	5/31/19, except as noted in (c)
10	176.2611, subd. 6	<p>Paragraph (a) provides that once a document filed with the office is transmitted to DLI using application programming interfaces, the data practices classification is as provided in Minn. Stat. § 176.231.</p> <p>Paragraph (b) provides that posted notices of scheduled proceedings may not include the employee's name or any part of the name.</p>	8/31/20 (a) 5/31/19 (b)
11	176.2612, subd. 1	Describes the functions of CAMPUS.	8/31/20
11	176.2612, subd. 2	Requires the commissioner, by Jan. 11, 2021, to recommend to the Workers' Compensation Advisory Council (WCAC) a plan and proposed amendments for the most effective means to implement improvements to CAMPUS and OAH's case management systems, including a single calendaring system and a single filing system. Provides that the filing requirements in Minn. Stat. § 176.2611, subdivisions 3 and 4, remain in effect until further amendments are enacted pursuant to WCAC recommendations.	8/31/20
11	176.2612, subd. 3	Specifies who must create a CAMPUS account and describes the consequences for failure to do so. Permits, but does not require, an employee to create an account.	8/31/20
12	176.275, subd. 1	Provides that filing of documents is complete upon acceptance by the agency. Permits an agency to reject a document that is not filed in the manner and format required by this chapter. Requires filers to use the WID number instead of the SSN if a WID number has been assigned. Provides that a document inadvertently filed at the wrong agency is deemed filed at the correct agency only if filed by an unrepresented employee.	8/31/20
12	176.275, subd. 2	Provides that a proof of service, affidavit of service, or notarized statement on a document is satisfied if it meets the definition of an affidavit under Rule 15 of the General Rules of Practice for the District Courts. Amends proof of service requirements for agencies and parties.	8/31/20
13	176.281	Requires immediate electronic transmission of data, documents, and dispute outcomes between OAH's case management system and CAMPUS via application programming interfaces.	8/31/20
14	176.285, subd. 1	Requires documents to be served by U.S. mail, except where electronic service is authorized or required under this section and Minn. Stat. § 176.275. An employee cannot be required to accept electronic service.	8/31/20
14	176.285, subd. 2	Provides that where service is required or authorized to be filed with or served on OAH, it may be filed electronically if authorized by OAH. Where a document is authorized or required to be filed with or served on the commissioner or WCCA, it must be filed electronically as specified by the commissioner. An employee must not be required to file a document electronically, unless it is filed by an attorney on behalf of the employee. "Electronic" service and filing excludes facsimile and email, unless authorized by the agency. A document is deemed filed with an agency on the business day it is accepted for filing on or before 11:59 p.m.	8/31/20

Highlights, continues ...

Highlights, continued ...

14	176.285, subd. 2a	Provides that if a rehabilitation provider files a rehabilitation document that requires the signature of a party under Minn. Stat. § 176.102 or rules, the provider shall specify whether each party's signature has been obtained, retain the document with the original signatures for five years, and provide it upon request to the commissioner or compensation judge.	8/31/20
14	176.285, subd. 2b	Permits the commissioner, WCCA, and parties to electronically serve documents on another party through CAMPUS via secure email or access through a web portal. Prohibits electronic service on an employee unless the employee has created an account and agreed to accept electronic service through the OAH case management system or CAMPUS. Provides that the date of electronic service of a document is the date the recipient is sent a document electronically or is notified the document is available on a website, whichever occurs first.	8/31/20
14	176.285, subd. 2c	Provides that when the electronic filing of a document with an agency marks the beginning of a prescribed time for another party to assert a right, the time to assert the right is extended by two calendar days when it is shown that service to another party was by U.S. mail and by one business day if the document was electronically served on the party via CAMPUS or the OAH case management system after 4:30 p.m.	8/31/20
14	176.285, subd. 3	Provides that if a document unrelated to a dispute, such as a first report of injury, is required to be filed with the commissioner and served on the employee or other party, the serving party must retain the proof of service and provide it to the commissioner or compensation judge upon request.	8/31/20
15	176.312	Extends the time from 10 to 20 days for a party to petition for reassignment of a compensation judge.	7/1/19

Workers' compensation events calendar

July 2019

July 17 Workers' Compensation Advisory Council

July 18 Medical Services Review Board

August 2019

Aug. 14 Workers' Compensation Advisory Council

Aug. 16 OSHA recordkeeping training: Learn the basics

Aug. 22 Orientation training for rehabilitation providers

September 2019

Sept. 18 Workers' Compensation Insurers' Task Force

October 2019

Oct. 3 Rehabilitation Review Panel

Oct. 9 Workers' Compensation Advisory Council

Oct. 10 Medical Services Review Board

November 2019

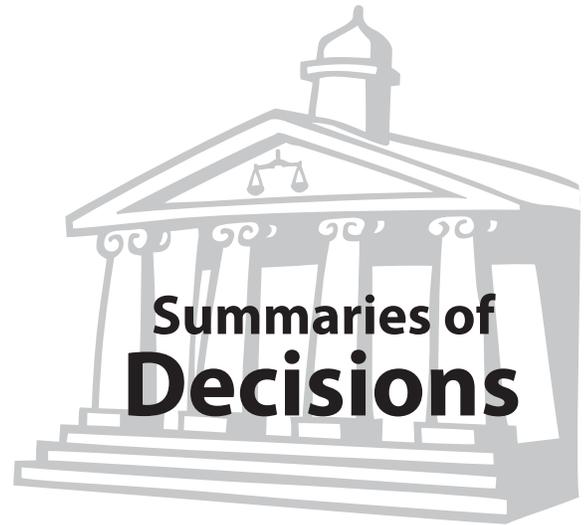
Nov. 6 OSHA recordkeeping training: Learn the basics

Nov. 20 Workers' Compensation Insurers' Task Force

Workers' Compensation Court of Appeals

February through April 2019

Case summaries published are
those prepared by the WCCA



Jessika R. Hyland v. St. Mary's Hospital Mayo Clinic, Feb. 4, 2019

Causation – Consequential Injury

Substantial evidence, including medical records, lay testimony and expert medical opinion, supports the finding that the employee's 2016 fall on stairs did not result in an injury consequential to her 2012 work injury.

Practice and Procedure – Remand

The compensation judge's Findings and Order contain insufficient factual findings with respect to the extent of the employee's permanent partial disability and the effects of the employee's work and non-work injuries on her employability. We vacate and remand for further findings on the issues of whether the employee satisfied the statutory permanency minimum to meet the threshold for permanent total disability, and whether the employee is permanently and totally disabled.

Affirms, in part, vacates and remands, in part.

Millard J. Strand v. R&L Carriers Shared Services, L.L.C., Feb. 14, 2019

Vacation of Award – Substantial Change in Condition

The employee has shown a substantial change in medical condition that was not reasonably anticipated at the time of settlement.

Granted.

Walter J. Childs v. Alternative Business Furniture, Inc., Feb. 21, 2019

Jurisdiction – Subject Matter Rule Construed – Minnesota Rules 1420.3700

The Office of Administrative Hearings is not divested of jurisdiction over a matter that has been reported settled by the parties when an employee withdraws a claim petition, or the claim petition is dismissed based on a pending settlement, but the stipulation for settlement is later filed and approved.

Affirmed.

Emad Abed v. ERA Venture Capital, Feb. 22, 2019

Evidence – Expert Medical Opinion

The compensation judge's choice of which expert medical opinion to adopt did not constitute a finding that the rejected opinion was not adequately founded. The expert medical opinions in this matter have adequate foundation and the employee's arguments regarding the expert medical opinions go to the weight to be assigned to the opinions by the compensation judge, not to their foundation.

Causation – Substantial Evidence

Substantial evidence, including adequately found medical opinion, supports the compensation judge's findings that the employee had not sustained neck and low back injuries as a result of a work injury and that the admitted right foot and ankle injury had resolved.

Affirmed.

Brian Dilley v. Carver Counth Sheriff, Feb. 22, 2019

Attorney Fees – Heaton Fees

The compensation judge erred in concluding that the employee's attorney was ineligible for Heaton fees where the attorney represented the employee's interests in a dispute over rehabilitation services, even though the primary dispute was payment of a qualified rehabilitation consultant's (QRC's) past bills and the QRC represented herself. The case is remanded for a determination of a reasonable attorney fee pursuant to Heaton and Minnesota Statutes 176.081, subd. 1.

Reversed and remanded.

Chad Gilbertson v. Ideacom Mid America Inc., March 4, 2019

Causation – Substantial Evidence

Substantial evidence, including medical records and expert medical opinion, supported the compensation judge's findings determining that the employee's work injury was temporary.

Affirmed.

Brian A. Ward v. Bang Printing, Inc., Feb. 27, 2019

Apportionment

Substantial evidence supports the compensation judge's apportionment determination where there were varying apportionment opinions with adequate foundation.

Affirmed.

Damon A. Ewing v. Print Craft, Inc., March 12, 2019

Rehabilitation – Fees and Expenses

The qualified rehabilitation consultant was not barred from payment for services provided under an established rehabilitation plan until the filing of the request for termination of that plan, despite the subsequent finding that the

work injury was temporary and had resolved prior to that filing, under Minnesota Statutes 176.102m subd. 8; Minnesota Rules 5220.0510, subp. 2d; and Parker v. Univ. of Minn., 64 W.C.D. 134, 142 (W.C.C.A. 2003).

Reversed and modified.

Galen T. Block v. Exterior Remodelers, Inc., March 19, 2019

Vacation of Award

Payment made to an employee under a settlement agreement that is later vacated on the basis of an unanticipated medical condition is not a mistake of fact as contemplated by Minnesota Statutes 176.179, and the employer and insurer are entitled to a 100 percent credit for the settlement amount paid to the employee under the vacated settlement against the employee's current claim for benefits.

Affirmed.

Daniela R. Sanderson v. Independent School District 316

Causation – Substantial Evidence

Substantial evidence, including lay testimony, expert medical opinion and medical records, supported the judge's determination that the employee suffered a work injury that was a substantial contributing factor to her wage loss, permanent partial disability and need for surgery.

Wages – Calculation

Where specific findings on average weekly wage are required under the specific facts of this case, but no findings were made by the compensation judge on this issue, we remand for a determination of the employee's average weekly wage.

Vacation of Award – Fraud

Where circumstantial evidence was offered by the employer and insurer at the hearing below to support their position that the employee's claims of an injury were false, and where substantial evidence supported the compensation judge's finding that the employee's testimony asserting the occurrence of the injury was credible, an allegation of fraud predicated on the same evidence rejected by the court below does not provide this court with a basis to vacate the compensation judge's findings and order on the basis of fraud.

Affirmed in part and vacated and remanded in part; petition to vacate denied.

Jean M. Goehring v. Patricia Bouwman, March 26, 2019

Arising Out Of And In The Course Of

An employee who suffered a fall attributed to a substance on her shoe did not meet her burden of proof to establish that her injury arose out of her employment, where the compensation judge found that the employee was not wearing that shoe at the time of her injury and no other explanation for the fall was offered.

Affirmed.

Wayne F. Roberts v. Hibbing Taconite Mining, March 26, 2019

Statutes Construed – Minnesota Statutes 176.179

Where substantial evidence supports the determination of the compensation judge that the employee received workers' compensation benefits in good faith, the compensation judge's denial of the petition for reimbursement filed by the self-insured employer is affirmed.

Affirmed.

Rodney Wolters v. Curry Sanitation, Inc., April 2, 2019

Vacation Of Award – Substantial Change In Condition

The court concludes the employee's petition has failed to demonstrate a substantial change in medical condition sufficient to warrant vacation of two successive awards on stipulation.

Petition to vacate denied.

Denise M. Klein v. Minnesota Association of Townships, April 15, 2019

Causation – Substantial Evidence

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

Affirmed.

Wilton M. Grieger, deceased, by Julia Grieger v. Menards, April 29, 2019

Dependency Benefits – Calculation

Where the compensation judge relied on expert testimony regarding the number of hours normally worked in the employment or industry in which the injury was sustained as required by Minnesota Statutes 176.011, subdivision 18, and that testimony is supported by other evidence, the judge's determination of the dependency benefit under Minn. Stat. 176.111, subd. 5, is supported by substantial evidence.

Affirmed.

Minnesota Supreme Court

February through April 2019

Case summaries published are
those prepared by the WCCA



Clarence Johnson v. University Good Samaritan, A18-1311, Feb. 6, 2019

Considered and decided by the court without oral argument.

Clarence Johnson v. Skill-Tech, Inc., A18-1249, Feb. 6, 2019

Considered and decided by the court without oral argument.

Clarence Johnson v. A Touch of Class Painting, Inc., A18-1391, Feb. 6, 2019

Considered and decided by the court without oral argument.

Gerald A. Grace v. Smith Foundry Company, A18-1591, Feb. 12, 2019

Considered and decided by the court without oral argument.

Tessa M. Washek v. New Dimension Home Healthcare, A18-1520, Feb. 13, 2019

Considered and decided by the court without oral argument.

Claude Bruton v. Smithfield Foods, Inc., A18-0914, Feb. 27, 2019

In the absence of statutory authority to offset workers' compensation benefits by the amount of disability benefits paid under an employer's self-funded and self-administered plan, the employer must pay workers' compensation benefits without reducing those benefits by the amount of previously paid disability benefits. Affirmed.

Eddie Hudson v. Trillium Staffing, A18-1896, April 9, 2019

Considered and decided by the court without oral argument.

William H. Johnson v. Darchuks Fabrication, Inc., A18-1131, April 24, 2019

1. The treatment parameters established under the workers' compensation act in Minnesota Rules 5221.6020, subpart 2 (2017), apply to treatment of an injury after liability has been established but do not apply when liability for the compensation benefits owed for an injury has been denied.
2. An employer that contests its obligation to pay for medical treatment for an employee injury that the employer admits is covered by the workers' compensation act has not "denied liability for the injury" within the meaning of Minnesota Rules 5221.6020, subpart 2.

Reversed and remanded.