

Work Comp Campus Stakeholder Showcases:

Attendees get update, try hands-on user testing, give feedback

The Workers' Compensation Modernization Program (WCMP) recently hosted several Stakeholder Showcases for legislators, other guests and members of advisory groups formed of future Work Comp Campus users. Attendees heard a progress update about the creation of the system and got some hands-on time testing components that have already been built. Work Comp Campus, which will go live for all users in August 2020, is the Department of Labor and Industry's (DLI's) web-based system for filing and accessing workers' compensation claims.



Stakeholder Showcase attendees were given a progress update about the Department of Labor and Industry's (DLI's) Work Comp Campus application before getting to do some hands-on testing, Nov. 14 and 15. Addressing the attendees were (above left to right): Brad Morse, Workers' Compensation Modernization Program director, DLI; Valerie Brophy, change management lead, CapTech; and Nicolette Lerch, business systems analyst lead, CapTech.

DLI is actively engaging with communities in Minnesota to build a system that serves the needs of the future users. As a part of that outreach effort, DLI has asked community members to become involved in these advisory groups, representing stakeholder categories: Employee Advisory Representatives; Employer Stakeholder Advisory Workgroup; Executive Modernization Advisory Committee; Insurance Stakeholder Advisory Board; Legal Advisory Workgroup; Rehabilitation Provider Advisory Committee; and Trading Partner Advisory Committee. 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.

For most attendees to the Stakeholder Showcases, Nov. 14 and 15, this was their first time seeing Campus live. In a large IT project it is rare to have the chance to share a system with users while it is still in development, which is why the WCMP team was excited to host these events. The Stakeholder Showcase testing exercise allowed future end-users to provide feedback about what has already been built and influence future functionality.



Learn more, get involved

For news and details about Campus, visit www.dli.mn.gov/business/workers-compensation/work-comp-campus. If you would like to learn more about Campus or become involved, email WCMP Change Management Lead Valerie Brophy at valerie.brophy@state.mn.us.

About Work Comp Campus

When it goes live in August 2020, Work Comp Campus will allow ready and easy access for all parties involved in a workers' compensation claim to access and manage their claims in real time online. Quicker access to claim information among all parties will ensure work injuries are reported and compensated in a streamlined process.



Notice, comment period for proposed expedited permanent rules governing treatment for post-traumatic stress disorder

On Nov. 12, 2019, the Department of Labor and Industry (DLI) published a Notice of Intent to Adopt Expedited Rules without a Public Hearing for Proposed Expedited Permanent Rules Governing Treatment for Post-traumatic Stress Disorder (PTSD).

The notice included a copy of the proposed rule, a summary of the overall nature and effect of the proposed rule and a citation to DLI's statutory authority for adopting the rule.

Parties are welcome to submit written comments in support of or opposition to the proposed expedited rules and any part or subpart of the rules. Additionally, parties may send a written request that a hearing be held on the rules pursuant to Minnesota Statutes § 14.389, subdivision 5.

Comments and requests for hearing must be received by 4:30 p.m., Thursday, Dec. 12, 2019. Written comments and requests for hearing should be emailed to dli.rules@state.mn.us or sent by U.S. mail to Ethan Landy, Office of General Counsel, Minnesota Department of Labor and Industry, 443 Lafayette Road N., St. Paul, MN 55155. Copies of the notice and proposed rule are available on DLI's website at www.dli.mn.gov/about-department/rulemaking/rulemaking-docket-minnesota-rules-chapter-52216700-2019.

Richard Davis named Alternative Dispute Resolution director

Richard Davis has been named the director of the Department of Labor and Industry's (DLI's) Alternative Dispute Resolution (ADR) unit. For the past four years, Davis has led the Minnesota Department of Transportation's (MnDOT's) neutral, informal and independent problem-solving efforts with citizens statewide and provided counsel to senior management, transportation stakeholders and legislative partners on a wide range of issues.

ADR seeks early intervention in workers' compensation disputes through conference and mediation. It handles calls from the workers' compensation hotline and responds to questions from injured workers, employers, health care providers, attorneys and qualified rehabilitation consultants.

Before joining MnDOT, Davis worked in the private sector in Chicago as a management consultant with Deloitte and locally with Target, SuperValu and Thomson Reuters. He has an undergraduate degree in accounting from the University of Alabama, an MBA from the University of Minnesota's Carlson School of Management and a law degree.



Richard Davis

Workers' compensation coverage for farms

By Brian Zaidman, Research and Statistics

A farm operation must provide workers' compensation insurance for its employees, unless it paid or was obligated to pay cash wages to farm laborers during the previous calendar year less than a certain dollar amount. That threshold dollar amount depends on whether the farm operation maintains specified liability insurance.

If the farm operation has a farm liability insurance policy with \$300,000 total liability coverage and \$5,000 medical payment coverage for farm laborers, then the farm operation is not required to maintain workers' compensation insurance if the total wages to farm laborers during the previous calendar year were less than the statewide average annual wage.¹ If the farm operation does not maintain the specified liability insurance, then the farm operation must maintain workers' compensation insurance unless the total wages to farm laborers during the previous calendar year were less than \$8,000.²



The chart below may be used to determine if the farm operation's wages to farm laborers (roughly payroll) during the previous calendar year are less than the statewide average annual wage for the year in which the farm liability policy is written.

Family farm coverage

Minnesota Statutes § 176.011, subd. 11a (a)(2)

Average annual wage under M.S. § 176.011, subd. 20	Services rendered (roughly payroll) year	Policy written year
\$47,616	Jan. 1-Dec. 31, 2012	Jan. 1-Dec. 31, 2013
\$49,134	Jan. 1-Dec. 31, 2013	Jan. 1-Dec. 31, 2014
\$49,924	Jan. 1-Dec. 31, 2014	Jan. 1-Dec. 31, 2015
\$51,420	Jan. 1-Dec. 31, 2015	Jan. 1-Dec. 31, 2016
\$53,349	Jan. 1-Dec. 31, 2016	Jan. 1-Dec. 31, 2017
\$54,103	Jan. 1-Dec. 31, 2017	Jan. 1-Dec. 31, 2018
\$55,978	Jan. 1-Dec. 31, 2018	Jan. 1-Dec. 31, 2019
\$57,817	Jan. 1-Dec. 31, 2019	Jan. 1-Dec. 31, 2020

¹The statewide average annual wage is received from the Department of Employment and Economic Development and is the number from which the statewide average weekly wage is derived.

²Farm laborer does not include machine hire and other persons specified in Minnesota Statutes § 176.011, subds. 11a and 12. Other farm employees excluded from workers' compensation coverage in certain circumstances are described in Minnesota Statutes § 176.041, subd. 1.

Minnesota workplace injury, illness rate reaches new all-time low

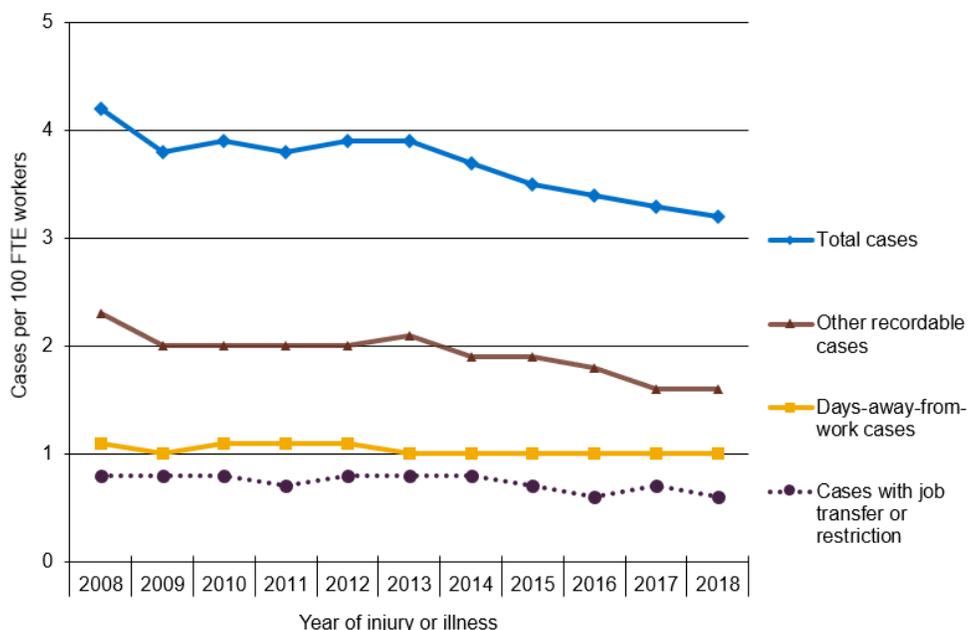
Minnesota's estimated workplace injury and illness rate for 2018 reached its lowest level since the measurement started in 1973. According to the annual Survey of Occupational Injuries and Illnesses, the state had an estimated 3.2 OSHA-recordable nonfatal workplace injuries and illnesses per 100 full-time-equivalent (FTE) workers in 2018. The estimated rate for 2017 was 3.3 cases per 100 FTE workers. Minnesota's trends for total recordable cases and its constituent case types are shown in Figure 1.

The survey estimated Minnesota had 71,600 workers with OSHA-recordable nonfatal workplace injuries and illnesses in 2018, compared to 72,500 estimated cases for 2017. In 2018, Minnesota's employment covered by the survey was approximately 2.79 million.

"Although Minnesota has seen a 61% decrease in its rate of work-related injuries and illnesses in the past 22 years, even one injured or ill worker is one too many," said Nancy Leppink, Department of Labor and Industry (DLI) commissioner. "Every worker in Minnesota has the right to be safe and healthy at work and the right to finish their workday in the same condition in which they started it."

The U.S. Bureau of Labor Statistics (BLS) estimates a national total of 3.5 million nonfatal workplace injuries and illnesses in private- and public-sector workplaces for 2018, resulting in a rate of 3.1 cases per 100 FTE workers.

Figure 1. Injury and illness case incidence rates, all ownerships, Minnesota, 2008-2018



Other results from the Minnesota injury and illness survey

The industry groups with the highest total injury and illness rates were construction (5.0 cases per 100 FTE workers); agriculture, forestry, fishing and hunting (4.9); and transportation and warehousing (4.4).

An estimated 21,200 worker injuries, 1.0 cases per 100 FTE workers, had one or more days away from work after the day of injury. This rate has remained unchanged the last three years.

Additional statistics are available about the characteristics of cases with one or more days away from work. Some highlights are listed below.

- For workers with one or more days away from work, the median was six days away from work, the same as in 2017 and 2015.

- Sprains, strains and tears accounted for 35% of the injuries for workers with days away from work. The second-highest category was soreness and pain, accounting for 20% of the cases.
- The back (19%) was the most commonly injured body part. Hands and head each accounted for 10% of the cases.
- The most common injury events were overexertion and bodily reactions (36%); falls trips and slips (28%); and being struck by objects or equipment (22%).
- The most common sources of injury were floors, walkways and ground surfaces (19%); bodily motion of the injured worker (17%); and vehicles – including forklifts (10%).

State agencies and BLS compile the survey data, which is the primary source of workplace injury and illness statistics at the state and national levels. DLI collected approximately 4,700 injury and illness records from randomly sampled Minnesota establishments in the private and public sectors (excluding federal agencies). DLI appreciates the efforts of the thousands of employees who reported the OSHA log data used to create the statewide estimates.

Additional Minnesota data will be available on the DLI website at www.dli.mn.gov/our-areas-service/research-and-statistics/survey-occupational-injuries-and-illnesses. National data tables are available on the BLS website at www.bls.gov/iif/oshsum.htm and www.bls.gov/iif/oshcdnew.htm.

Workers' compensation committee seeks new member, three alternates

Current Rehabilitation Review Panel openings

The Rehabilitation Review Panel currently has openings for:

- one health care provider member (four-year term);
- one chiropractor/health care provider/rehabilitation provider alternate member (annual term);
- one union labor representative alternate member (annual term); and
- one employer/insurer alternate member (annual term).



To apply for one of the positions, visit www.sos.state.mn.us/boards-commissions on the Secretary of State website.

About the Rehabilitation Review Panel

The panel is composed of employer, insurer, rehabilitation, medical and labor representatives and:

- advises the Department of Labor and Industry (DLI) about workers' compensation vocational rehabilitation issues;
- develops and recommends vocational rehabilitation rules;
- studies vocational rehabilitation services and their delivery;
- assists the DLI commissioner in accomplishing public education; and
- makes final decisions about certification approval or disciplinary matters of qualified rehabilitation consultants and vendors in conjunction with contested hearings.

Panel members participate in person or by telephone in quarterly meetings at DLI, which generally last one to two hours. If issues warrant, meetings may occur more often. The panel's meeting schedule, agendas and minutes are online at www.dli.mn.gov/about-department/boards-and-councils/rehabilitation-review-panel.

DLI collecting data about hospital outpatient fee schedule, ambulatory surgical center payment system

By David Berry, Research and Statistics

Two new payment systems took effect Oct. 1, 2018, for services provided to workers' compensation claimants by hospital outpatient departments and ambulatory surgical centers: the hospital outpatient fee schedule (HOFS); and the ambulatory surgical center payment system (ASCPS). As part of the legislation putting these systems into effect, the Legislature mandated the Department of Labor and Industry (DLI) produce reports assessing payment timeliness and accuracy under these systems (Minnesota Statutes § 176.1364, subdivision 6; Minn. Stat. § 176.1363, subd. 4). The reports are due Jan. 15, 2021.



To perform the analysis for the reports, DLI will be collecting data from insurers (including self-insurers) and providers. DLI's data requests will be sent by Jan. 1, 2020, with requested data due the following July 1.

The requested data will pertain to individual claims, in which the patient is de-identified, paid under HOFS and ASCPS. The data will consist of those items – such as billing and payment dates, service codes and payment amounts – necessary for assessing payment timeliness and accuracy. The data will be submitted via upload to a protected page on the DLI website.

To facilitate data reporting by payers and providers, DLI is:

- collecting only those data items necessary for the analysis;
- limiting the sample size;
- providing two options for data-submitters to report the data – by completing an Excel spreadsheet or by producing a text file;
- including a feature in the report spreadsheet to alert data-submitters to instances of invalid or inconsistent data;
- providing online training videos; and
- allowing six months for data-submitters to compile and submit data.

DLI hopes for full cooperation from providers and payers in this joint effort to comply with the legislative mandate.

Reminder: 2018 SCF assessment 'true-up'

Minnesota Statutes § 176.129, subd. 2a, now provides for an adjustment or "true-up" of the assessment paid by insurers for deposit into the Special Compensation Fund (SCF). The Department of Labor and Industry commissioner *estimates* each insurer's share of the assessment using the insurer's earned standard premium from the previous calendar year. The commissioner must later make a final determination of the amount owed based on the insurer's actual earned standard workers' compensation premium for the current year, after those figures become available.



As a result of this true-up, insurers will likely either owe additional monies to the SCF or be refunded monies that were overpaid. Invoices were mailed to insurers by Nov. 15, with payment due Dec. 31. Refunds will be applied to the 2019 second-half assessment invoices due Feb. 1. Refunds will be processed the week of Dec. 9; statements for those with money due Feb. 1 will be sent the week of Dec. 16. To be issued a refund, insurance companies that are not currently registered as vendors with the state of Minnesota will be required to file a W-9 Request for Taxpayer Identification Number and Certification form.

For more information, contact us at 651-284-5021 or dli.assessment@state.mn.us.

Recordkeeping training offered in January, includes webinar

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 about OSHA recordkeeping, in January. **Registration is required.**

Dates

- **Jan. 10 webinar** – 9 to 11:30 a.m.
- **Jan. 29** – 1 to 3:30 p.m.
- **Jan. 31** – 9 to 11:30 a.m.

Topics

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

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 Office of Workers' Compensation Ombudsman is a separate entity within the Department of Labor and Industry. Its purpose is to inform, assist and empower injured workers and small businesses having difficulty navigating the workers' compensation system, to help resolve problems encountered in the system.

The Office of Workers' Compensation Ombudsman also recommends statute or rule changes to improve the effectiveness of the workers' compensation system.

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

Injured worker age distribution shows little change

By Brian Zaidman, Research and Statistics

The median age of workers with workers' compensation indemnity claims rose from 44.1 years in 2008 to 45.6 years in 2013, and since that time has changed little, with a level of 45.5 years in 2018.

Figure 1 shows age-group trends in the percentages of claimants by year of injury. The largest increase has been among workers 55 to 64 years old; the percentage for this group rose from 16% of all claimants in 2008 to 23% in 2018. Workers 65 years old and older increased from 3% of the claimants in 2008 to 5% in 2018.

The percentage of workers in the 45- to 54-year-old age group decreased from nearly 30% in 2009 to 23% in 2018. The four worker age groups in the 25-to-64-year range each have similar percentages of indemnity claims.

Figure 2 shows the number of indemnity claimants in each age group, not adjusted for claim development. The total number of paid indemnity claims reported through September 2019 for each injury year varies from a high of 23,600 claims in 2008 to 20,000 claims in 2018, being essentially unchanged since 2016.

The number of claims from workers 65 years and older increased from 650 in 2008 to 950 reported in 2018. (The number of 2018 indemnity claims for workers age 65 and older is expected to increase to about 1,040 claims.)

The age distribution of claimants for injury year 2018 is similar to the age distribution of employed workers.

As shown in Figure 3, the percentages of injured workers are slightly below the percentages for all workers for the two youngest groups, slightly above the all-worker percentage for workers 45 to 54 years old and workers 55 to 64 years old, and almost identical to the all-worker percentage for workers age 65 and older.

This indicates the claims rate per worker (not adjusted for hours worked) is lower for workers aged 16 to 44 years.

For more information about workers aged 65 years and older, see a brief article from the Department of Employment and Economic Development at mn.gov/deed/newscenter/publications/review/october-2019/by-the-numbers.jsp.

Fig. 1. Percent of indemnity claimants by age group, 2008 to 2018

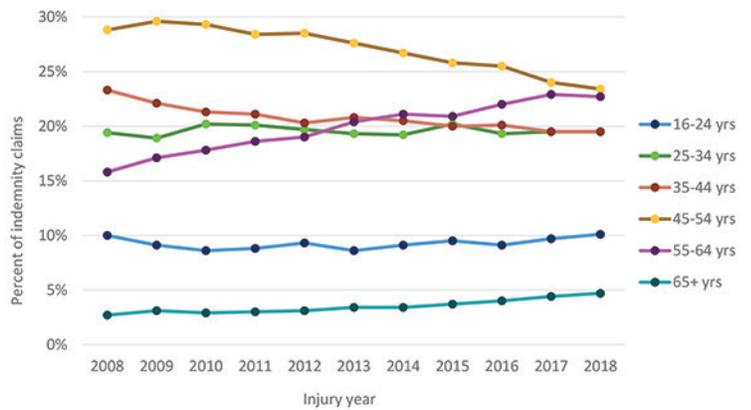


Fig. 2. Number of indemnity claimants by age group, 2008 to 2018

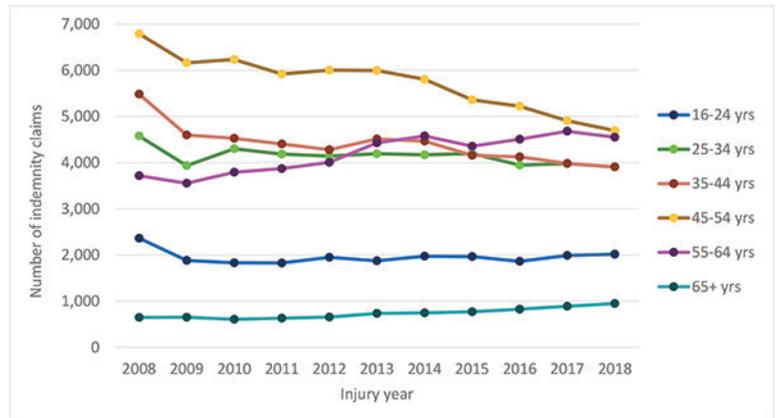
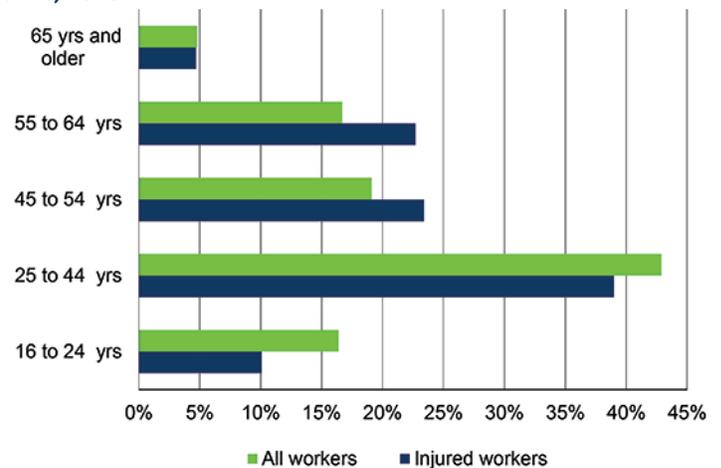


Fig. 3. Age distribution of all workers and workers with indemnity claims, 2018



Report compares Minnesota medical payments, use with 17 other states

By Brian Zaidman, Research and Statistics

The Workers' Compensation Research Institute's (WCRI's) most recent report for Minnesota, *CompScope Medical Benchmarks for Minnesota, 20th Edition*, was released in October. This report uses insurer claim files to compare Minnesota's medical payments and service use with those of 17 other states, including Iowa and Wisconsin. The report is available for purchase from WCRI at www.wcrinet.org.



The report focuses on results for workers injured in 2017 and on trends for the 2012 to 2017 period for claims with more than seven days of lost time, measured at an average of one year following the injury. The report results reflect the time period after the introduction of the hospital inpatient fee schedule (for discharges on or after Jan. 1, 2016) and prior to the implementation of the hospital outpatient and ambulatory surgical center fee schedules (effective for services on or after Oct. 1, 2018). Here are some of the major findings.

- Minnesota's average adjusted medical payment per 2017 claim was 16% lower than the median of the 18 study states. Payments per claim for nonhospital providers were 15% lower, while hospital outpatient payments were 26% higher and payments per hospital inpatient episode were 1% lower than the median.
- Medical payments per claim were stable during the period from 2012 through 2017. The average annual growth in medical payments in Minnesota was 0.8%, lower than the 2.2% median annual growth among the study states.
- Sixty-six percent of the 2017 Minnesota claims had payment to a hospital (typical of the study states) and hospitals accounted for 48% of the medical payments, above the median of 44%.
- Minnesota's average adjusted hospital outpatient payments for 2017 claims (\$5,900) were higher than the median state's value (\$4,700).
- Minnesota's average adjusted hospital inpatient payments per inpatient episode for 2016 claims (at two years average claim maturity), \$32,100, was very close to the median state value (\$32,500). Minnesota had been higher than the median value of the states for 2015 claims of the same maturity.
- Among claims at an average of one year maturity, hospital inpatient care decreased from 24% of Minnesota's total medical payments for 2013 claims to 16% of total payments for 2017 claims, typical of the study states.
- Among Minnesota's 2017 claims, 28% had surgery (either inpatient or outpatient). Minnesota had the second-largest decrease in overall surgeries since 2012 among the study states.
- Among 2016 claims (at two years average claim maturity) 5.3% of injured workers in Minnesota had hospital inpatient care, lower than the median value of 6.2%.
- Forty-six percent of Minnesota's inpatient episodes involved surgery, which is 2.7% of all claims with more than seven days of lost time, below the median value of 3.2%.
- Payments per claim to nonhospital providers in Minnesota were lower than in the median state, mostly due to lower utilization of services. The lower utilization offset the slightly higher payment levels, consistent with the fee schedule.



Workers' compensation events calendar

December 2019

Dec. 18 Workers' Compensation Advisory Council

January 2020

Jan. 9 Rehabilitation Review Panel

Jan. 10 OSHA recordkeeping training: Learn the basics

Jan. 16 Medical Services Review Board

Jan. 22 Workers' Compensation Advisory Council

Jan. 29 OSHA recordkeeping training: Learn the basics

Jan. 31 OSHA recordkeeping training: Learn the basics

February 2020

Feb. 12 Workers' Compensation Advisory Council

Feb. 14 Rehabilitation provider orientation training

April 2020

April 2 Rehabilitation Review Panel

April 8 Workers' Compensation Advisory Council

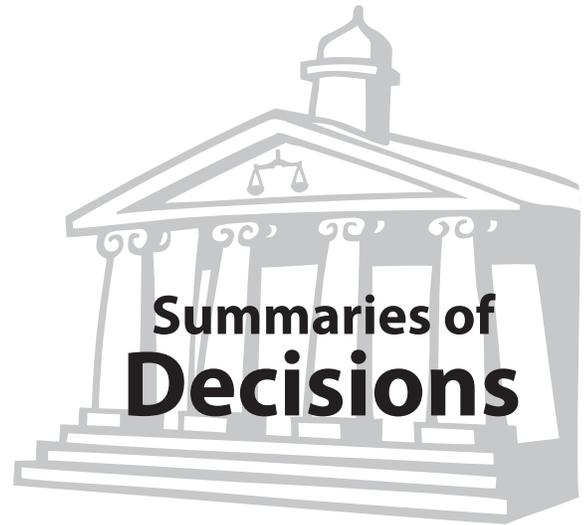
April 16 Medical Services Review Board

Note: Event dates may change. Check the online calendar at www.dli.mn.gov/about-department/about-dli/events-workers-compensation.

Workers' Compensation Court of Appeals

August through October 2019

Case summaries published are
those prepared by the WCCA



Robert R. Matson v. Great Lakes Coca-Cola Distribution, Aug. 1, 2019

Causation – Substantial Evidence

Substantial evidence, including well-founded medical opinion, supports the compensation judge's finding that the employee's November 2016 low back injury resolved in three months.

Affirmed.

Jill M. Kohler v. Douglas County Hospital, Aug. 20, 2019

Medical Treatment and Expense – Reasonable and Necessary

Substantial evidence in the record supports the compensation judge's denial of payment for cervical fusion surgery as that medical treatment was not reasonable, necessary or causally related to the work injury.

Evidence – Expert Medical Opinion

The compensation judge did not abuse her discretion in relying on portions of expert medical opinion offered where the medical opinion had adequate foundation and was consistent with the judge's factual findings regarding the employee's condition.

Practice and Procedure – Matters at Issue

Opinion of the independent medical examiner that the work injury was temporary and resolved did not improperly expand issues where the compensation judge limited her Findings and Order to the reasonableness, necessity and causal relationship between the employee's various work injuries and the surgery performed, which were the issues raised.

Affirmed.

Amber L. Lenartz v. Children’s Hospitals and Clinics of Minnesota, Aug. 28, 2019

Causation – Substantial Evidence

Substantial evidence, including medical records, expert medical opinion and lay testimony, supports the compensation judge’s determination that the employee’s symptoms, disability and treatment are causally related to the work injury.

Affirmed.

Jason R. Danielson v. Walmart Stores, Inc., Aug. 29, 2019

Appeals – Record

Where the compensation judge made only one finding on the ultimate issue on appeal and failed to make findings regarding essential elements of the application of Minnesota Statutes 176.101, subd. 1(i), and where the record on appeal was incomplete, precluding meaningful appellate review, we vacate and remand for reconsideration.

Vacated in part and remanded in part.

Michelle E. Wilson v. Holiday Stationstore, Sept. 4, 2019

**Statutes Construed – Minnesota Statutes 176.155
Evidence – Expert Medical Opinion**

Minnesota Statutes 176.155 does not restrict the employee from offering reports from medical experts whose opinions were solicited for purposes of litigation, and whether more than one such report may be received into evidence in support of the employee’s claims is a question committed to the discretion of the compensation judge.

Permanent Partial Disability – Weber Rating

A supplemental permanent partial disability rating under Weber v. City of Inver Grove Heights, 461 N.W.2d 918, 43 W.C.D. 471 (Minn. 1990), is not permissible where an employee’s impairment is included in the schedule. The employee’s patella fracture condition is specifically addressed in Minnesota Rules 5223.0510, subpart 3.I., and the compensation judge erred in awarding two percent permanency under Weber.

Permanent Partial Disability – Substantial Evidence

Substantial evidence, including expert medical opinion, supported a 12 percent rating of the employee’s loss of range of motion to the right knee and the associated award of permanent partial disability benefits.

**Medical Treatment and Expense – Medical Mileage
Medical Treatment and Expense – Reasonable and Necessary**

Substantial evidence, including lay testimony, medical records and expert medical opinion, supports the compensation judge’s finding that the employee’s treatment in the Deer River area, and the mileage associated with that treatment, were reasonable, necessary and causally related to the work injury.

Rehabilitation – Substantial Evidence

Substantial evidence, including rehabilitation records, medical records, lay testimony and expert vocational opinion, supported the compensation judge’s award of the expenses of vocational rehabilitation for the period in question.

Practice and Procedure – Matters at Issue Intervenors – Standing

The compensation judge erred as a matter of law in awarding reimbursement to a medical provider that had failed to intervene.

Affirmed in part, reversed in part and vacated in part.

Lillian S. Jensen v. Donnelly Custom Manufacturing Co., Sept. 10, 2019

Evidence – Res Judicata

Res judicata does not bar an employee from claiming benefits for a time period after a decision on an earlier claim. Collateral estoppel does not bar a later claim when an employee's condition has changed. Because the issue of whether the employee's condition has changed or whether new material facts have emerged, such that collateral estoppel would not apply, has not been addressed, the matter is remanded for further proceedings.

Vacated in part and remanded.

Molly Rhyner v. Mattress Giant Holding Corp., Sept. 20, 2019

Evidence – Res Judicata

Where approval of SI joint injections was not at issue in a prior adjudication, neither claim preclusion nor issue preclusion applies to bar the employee's current claim.

Medical Treatment and Expense – Substantial Evidence

Substantial evidence supports the compensation judge's award of recommended SI joint injections.

Intervention Appeals Practice and Procedure

Where the intervenors had not been served with the notice of appeal or the appellants' brief, this court will not modify a compensation judge's appealed award of payment to the intervenors.

Affirmed.

Bradley Eaton v. 3M Company, Sept. 25, 2019

Causation – Substantial Evidence

Substantial evidence, including medical records and expert medical opinion, supported the compensation judge's finding that the employee failed to prove that a workplace exposure to chemical fumes resulted in occupational asthma.

Affirmed.

Judy A. Carda v. Minnesota Department of Human Services, Sept. 30, 2019

Causation – Substantial Evidence

Substantial evidence, including well-founded medical opinion, medical records and credible testimony, supports the compensation judge's finding that the employee suffered from complex regional pain syndrome (CRPS) and was temporarily and totally disabled due to that condition.

**Temporary Total Disability – Retirement
Temporary Total Disability – Withdrawal From Labor Market**

Where the employee took early retirement due to financial necessity and to continue her medical benefits, substantial evidence supports the compensation judge's finding that the evidence failed to establish that the employee had retired or withdrawn from the labor market. Where the employee sought to return to work when released to do so, the compensation judge did not err by awarding temporary total disability benefits for the period the employee was taken off work by her physician.

Affirmed.

Chris N. Erickson v. Qwest Corp., Oct. 24, 2019

Medical Treatment and Expense – Reasonable and Necessary

Substantial evidence in the record, including well-founded medical opinion, supports the compensation judge's denial of payment for ongoing medical treatment as that medical treatment was not reasonable, necessary or causally related to the work injury.

Evidence – Expert Medical Opinion

The compensation judge did not abuse his discretion in relying on expert medical opinions, including the opinion of a court-ordered neutral physician, where those opinions had adequate foundation and were consistent with the judge's factual findings regarding the employee's condition.

Affirmed.

Michael W. Mucker v. Metro Transit/Metropolitan Council, Oct. 24, 2019

Causation – Substantial Evidence

Substantial evidence, including the employee's medical records and expert medical opinion, supports the compensation judge's determination regarding causation of the employee's need for surgery.

Affirmed.

Bonnie L. Brandia v. Keystone Automotive, Oct. 25, 2019

Medical Treatment and Expense – Reasonable and Necessary

Where the compensation judge did not address conflicting evidence in the record regarding whether the implantation of a spinal cord stimulator (SCS) could be reasonable and necessary for a non-CRPS diagnosis or whether the SCS was consistent with treatment parameters, this matter is remanded to the compensation judge for further findings and analysis.

Vacated in part and remanded.

Minnesota
Supreme Court

August through October 2019

Case summaries published are
those prepared by the WCCA



Richard Oseland (deceased) by Terrence Oseland, Richard Oseland and Karen Hayhoe v. Crow Wing County, A18-1550, May 29, 2019

1. Under Minnesota Statutes § 176.221, subd. 7 (2018), the "due date" for underpaid compensation benefits is the date of each underpayment, and interests on those underpaid benefits accrues at the statutory rate in effect at the time