

# SB Annual claims for reimbursement of supplementary benefits

**(0:00 - 2:13)**

This video will provide an overview of the process for submitting annual claims for reimbursement of supplementary benefits. There are two types of reimbursements that can be requested from the Special Compensation Fund: supplementary benefits and reimbursement from the Second Injury Fund. This video will focus on the reimbursement process for supplementary benefits.

The video "Annual Claims for Reimbursement from the Second Injury Fund" focuses on the process for Second Injury Fund reimbursements. An annual claim is submitted by an insurer or self-insurer, a third-party administrator on behalf of the insurer, or an attorney may submit an annual claim if they currently represent or have represented the insurer or self-insured employer and have a "Notice of Representation" on file in Campus. Please note that all reimbursement requests must be submitted under the name of the insurer or self-insurer.

The Special Compensation Fund is required to pay the insurer or self-insurer on record for the date of injury. Doing some prep work before starting a reimbursement request will save time. As you begin the process, keep in mind that you can save your work as a draft and complete the claim request at a later time.

Review the prior claim to ensure the date range and benefit rates for the current claim are accurate. Provide proof that the injured worker is living or provide proof of death. To show proof of life and that the injured worker is eligible for continued benefits during the requested dates of reimbursement, have one of the following documents saved for easy upload during the annual claim submission.

A medical report, a letter from the insurer's representative stating they spoke with the injured worker on a date within the date range being requested, or an authorization form signed and dated by the employee. If the injured worker is deceased, please provide proof of death. Examples of proof of death are a death certificate, obituary, or the Minnesota Department of Human Services death search.

**(2:14 - 5:14)**

A personal representative may speak on the injured worker's behalf if they are not able. A power of attorney must be submitted or already be in the special compensation funds file. Also requested is a copy of the injured worker's Social Security benefit adjustment letter, if applicable.

Please request this form from the injured worker or their attorney. To show your calculations for benefits claimed, you may attach a copy from a benefit calculator if it shows PTD or TTD, each benefit period and applicable adjustment rate, Social Security offset amounts, net supplemental benefit rates and the total, which is the number of weeks times the net supplemental benefit rates

for each row. Now that you've gathered all the required documentation, it's time to log into Campus.

Log in to Campus as the insurer and open the claim transaction for which you are requesting reimbursement. When searching for the claim, be sure to check the inactive box to see all the claims you have access to. If the claim still cannot be found, please contact the Work Comp Help Desk.

The contact information is provided at the end of this video. Once the claim is open, click on the Submit Filing button. From the drop-down menu, select Annual Claim Reimbursement and save.

Next, provide the insurer details and mailing address. Choose the benefit type to be reimbursed. Benefit type is either Supplementary Benefit (SB) or Second Injury Fund (SI).

For this example, select SB and then Next. The claim status will be either Final Claim or Ongoing. The most common options for Final Claims are Death of Employee or Lump Sum Settlement

If you choose Death of Employee, it will request the employee's date of death and will require that you upload proof of death. If Lump Sum Settlement is chosen, it is required that you check the Closed by Settlement box. Copies of the Executed Stipulation for Settlement and Award on Settlement are also required.

They may be uploaded into the Supporting Attachments portion of the submission. We are going to select Ongoing for this example. Campus requires evidence of contact with the employee.

Locate your evidence, then click on the Upload Document button. Click Drag and Drop to open the Files window. Select the file you prepared proving the employee was alive during the benefit period or proof of death if employee has died.

Click Open to select the file. For Document Type, select the appropriate action from the drop-down menu. The description may be edited to fit the document.

Click Upload to complete the process. You will see the file has been added. Click Next to continue.

The next step requires you to provide the benefit period. Click on the Add Benefit Period button. The type of benefit for this example will be PTD.

## **(5:14 - 5:46)**

Click the down arrow to add details. Here is where you will enter all the pertinent information for the claim. A few tips for this page.

An asterisk next to the field name indicates information is required. Provide as much information as needed. Weekly other is typically income from other governmental sources.

Enter zero if the employee is not receiving other income. The max supplementary benefits annual adjustment occurs on October 1st of each year. If you have the number, enter it here.

## **(5:46 - 6:23)**

The employee must be paid \$25,000 in PTD benefits before the offset for Social Security benefits. If the employee is receiving Social Security Disability Income or SSDI, enter the 5% offset amount. SSDI applies to employees that have not reached full retirement age.

If the employee has reached full retirement, enter zero in this field. If you have evidence of government disability benefit changes, they can be uploaded by clicking on the Upload Document button. Double check your entries for accuracy and click Next to continue.

## **(6:24 - 7:15)**

Lump sum settlements are the result of settlements between the injured worker, employer, insurer, and the special compensation fund. They are memorialized in a stipulation for settlement with an accompanying award on the stipulation. There is no lump sum for this example.

If there is a lump sum owed, do not check this box. Instead, enter the lump sum amount and date of award on the stipulation. Click Next to continue.

Under Employer Details, select the employer from the drop-down list. Take the time to verify that all the information is correct. If it is not correct, contact the Work Comp Help Desk.

Select Next to continue. For the Supporting Document section, click on Upload Document. Here you'll upload supporting documentation, such as a benefit calculation if using an external calculator or ledgers showing payment to the employee.

## **(7:15 - 9:10)**

Select the appropriate option from the Document Type drop-down list. The Description field allows you to add more specific document information. Repeat the upload steps until all documents have been uploaded.

Select Upload to continue. If you need to pause the annual claim data entry for any reason, your work can be saved as a draft and completed at a later time. This is how it works.

Save as draft is an option at the bottom of each page of the process. After selecting Save as draft, select Save to save your information to this point. A confirmation screen will confirm the save.

When you're ready to continue, go to the Campus Dashboard. Select the My Forms tab and then select the Annual Claim for Reimbursement draft. The input screens start at the beginning of your annual claim.

Select the Next button at the bottom of the screen until you arrive at the place you left off. The final step is to electronically sign the document. Check the box confirming that the information is true, accurate, and complete, and then select Submit.

A successfully submitted screen gives a confirmation number and lets the filer know the Special Compensation Fund has received the request. Record the confirmation number as a reference for any future questions. A Special Compensation Fund team member will review the submission to be sure it's complete.

They will approve, reject, or send an email requesting more information on the annual claim. Once the submission is approved, a confirmation email is sent to the submitter. The submitted annual claim document can be seen within the claim under the Documents tab.

At this point, the approved submission is assigned to a team member. All annual claims are reviewed in the date order they are received. The reviewer's decision will be emailed directly to the person who submitted the request.

### **(9:12 - 9:41)**

For questions specific to your annual claim, reach out to the Special Compensation Fund unit. They can be reached at 651-284-5097 or send an email to [dli.specialcomp@state.mn.us](mailto:dli.specialcomp@state.mn.us). For further information about workers' compensation in Minnesota or Campus, contact the Work Comp Help Desk. They are available Monday through Friday from 8 to 430.

### **(9:42 - 10:00)**

They can be reached at 651-284-5005 and press 3 or 800-342-5354 and press 3 or send an email to [helpdesk.dli@state.mn.us](mailto:helpdesk.dli@state.mn.us).