



North Dakota Legislative Council

STATE CAPITOL, 600 EAST BOULEVARD, BISMARCK, ND 58505-0360

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October 19, 2017

Dear Injured Employee:

Thank you for your interest in having the Legislative Management's Workers' Compensation Review Committee review your claim to consider whether there should be a change in the law. To be eligible to have the committee review your claim, the law requires that you must:

1. Be an injured employee or the survivor of a deceased injured employee;
2. Have received a final determination regarding a North Dakota workers' compensation claim;
3. Have exhausted the administrative and judicial appeal process or the period for appeal must have expired;
4. Have signed the enclosed *Release of Information and Authorization*; and
5. Have a workers' compensation-related issue you believe supports a change in the state's workers' compensation laws.

Enclosed is the form *Release of Information and Authorization*, a copy of North Dakota Century Code Section 54-35-22 (the law creating the Workers' Compensation Review Committee), and the form *Review Issue Summary*.

Please submit completed forms to:

Workers' Compensation Review Committee
ATTN: Christopher S. Joseph
Legislative Council
State Capitol
600 East Boulevard Avenue
Bismarck, ND 58505-0360

Forms also may be submitted electronically to lcouncil@nd.gov.

Upon receipt of the completed *Release of Information and Authorization*, we will determine whether you meet the requirements to have a claim reviewed by the committee.

A Legislative Council staff member will contact you regarding the status of your request for review. If you meet the requirements and the committee accepts your request for review of a claim, please remember this committee is **NOT** authorized to adjudicate claims and is **NOT** a forum for appeal. The committee will **NOT** change any existing decisions of Workforce Safety and Insurance. If your request for review of a claim is accepted for review by the committee, time will be reserved for you and your representative on the committee's agenda for a future meeting so that you may provide testimony to the committee.

If the committee accepts your request for review of a claim, an independent and neutral representative of Workforce Safety and Insurance will contact you. This representative will provide you with assistance in reviewing your records and summarizing your case. Completion and return of the *Review Issue Summary* is optional, but will help the representative of Workforce Safety and Insurance prepare a summary of your records.

Even though the committee may determine your claim is eligible for review, you should not consider this determination as having any effect on your claim or your ability to appeal. You may want to contact a private attorney if you think you have a legal basis for pursuing your claim.

Please recognize that if the committee reviews your claim, the committee may discuss your claim at more than one meeting. The Legislative Council will provide you with notice of upcoming Workers' Compensation Review Committee meetings and with minutes of committee meetings.

Please contact the Legislative Council office if you need additional copies of any of these forms. Copies of these forms are available online at <http://www.legis.nd.gov/assembly/65-2017/session-interim/workers-compensation-review-committee-application-forms>.

Sincerely,

A handwritten signature in black ink, reading "Jonathan D. Casper". The signature is fluid and cursive, with the first name "Jonathan" and last name "Casper" clearly legible.

Senator Jonathan Casper
Chairman
Workers' Compensation Review Committee

JC/JJB
Encs.