

## RELEASE OF INFORMATION AND AUTHORIZATION

(Print or Type Using Black or Blue Ink)

Injured Employee's Name	WSI Claim Number
*Injured Employee's Contact Telephone Number	Injured Employee's Date of Birth

I authorize Workforce Safety and Insurance to release **ALL** my Workforce Safety and Insurance information and records on file.

Please release this information and these records to:

- Legislative Management's Workers' Compensation Review Committee;
- Legislative Council staff; and
- Optional - My representative (please specify) \_\_\_\_\_

I authorize the Legislative Management's Workers' Compensation Review Committee, Legislative Council staff, and Workforce Safety and Insurance officials to discuss my Workforce Safety and Insurance information and records during meetings of the Workers' Compensation Review Committee and related activities of the North Dakota Legislative Assembly.

I understand the meetings of the Workers' Compensation Review Committee are open to the public. I understand these meetings are recorded and minutes are kept and these recordings and minutes are public records.

I understand the Workers' Compensation Review 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.

I understand a determination regarding whether a request for review meets the necessary requirements is **NOT** a legal opinion and should **NOT** be relied on or considered to be legal advice.

A copy of this release and authorization is considered as valid as the original. This release and authorization remains in effect until revoked by me or until January 1, 2019, whichever occurs first.

Date	*Injured Employee's Signature
*Injured Employee's Mailing Address	

\*In the case of a deceased injured employee, please provide information regarding the survivor seeking review.

## **REVIEW ISSUE SUMMARY**

**(Print or Type Using Black or Blue Ink)**

<b>PART 1 - INJURED EMPLOYEE INFORMATION</b>	
Injured Employee's Name	WSI Claim Number
*Injured Employee's Contact Telephone Number	Injured Employee's Date of Birth

<b>PART 2 - INJURED EMPLOYEE CONTACT INFORMATION</b>	
The Legislative Council will use this information to provide you with notices of upcoming Workers' Compensation Review Committee meetings and minutes of meetings.	
*Mailing Address	*Email Address

<b>PART 3 - REVIEW ISSUE</b>
<p>The purpose of the committee review of claims is to determine whether changes should be made to the laws relating to workers' compensation. To further this purpose, information provided to the committee by the injured employee should be presented in a thorough and clear manner. If you have more than one workers' compensation issue, please address each issue separately. As part of this presentation, please include:</p> <ol style="list-style-type: none"><li>1. The workers' compensation issue or Workforce Safety and Insurance decision with which you disagree;</li><li>2. What you think is wrong regarding this issue or decision and why; and</li><li>3. What you think the correct outcome or decision should be.</li></ol> <p>Please use the space below to briefly summarize the three main points found in the previous paragraph. If you need additional space, please provide attachments.</p>

\*In the case of a deceased injured employee, please provide information regarding the survivor seeking review.

**54-35-22. Workers' compensation review committee.**

1. During each interim, a legislative management's interim workers' compensation review committee must be appointed as follows: two members of the senate appointed by the majority leader of the senate of the legislative assembly; one member of the senate appointed by the minority leader of the senate of the legislative assembly; two members of the house of representatives appointed by the majority leader of the house of representatives; and one member of the house of representatives appointed by the minority leader of the house of representatives. The chairman of the legislative management shall designate the chairman of the committee. The committee shall operate according to the laws and procedures governing the operation of other legislative management interim committees. The committee may recommend legislation relating to workers' compensation. The committee shall meet once each calendar quarter or less often if the committee chairman determines a meeting that quarter is not necessary because there are no claims to review.
2. The committee shall review workers' compensation claims that are brought to the committee by injured workers for the purpose of determining whether changes should be made to the laws relating to workers' compensation. A claim may not be reviewed by the committee unless workforce safety and insurance has issued a final determination and either the injured worker has exhausted the administrative and judicial appeals process or the period for appeal has expired. In order for the committee to review a claim, the injured worker must first sign a release of information for constituent authorization to allow the committee and legislative council to review the injured worker's workforce safety and insurance records and to allow the committee members and workforce safety and insurance representatives to discuss the records in an interim committee hearing. Notwithstanding any open meeting requirements, except as otherwise provided under this section, the workforce safety and insurance records of an injured worker whose case is reviewed by the committee are confidential. However, pursuant to the constituent's authorization, information contained in the records may be discussed by the committee members and workforce safety and insurance representatives in an interim committee hearing.
3. The committee shall accept testimony of an injured worker and of a representative designated by the injured worker. After the committee has received the testimony of the injured worker and the injured worker's representative, the committee shall request that workforce safety and insurance provide testimony.