



Workers Compensation Claim State Environmental Guide - Minnesota

MINNESOTA – <http://www.doli.state.mn.us/WC/Employer.asp>

Indemnity issues

Temporary Total Benefits	As of 10/1/2021, minimum \$251.33, 20% of max comp rate. Max comp rate is 102% of SAWW or \$1,256.64. 3 calendar day waiting period; waiting period payable if employee loses time on the 10 th day or thereafter. 130 week cap. Benefits must commence within 14 days of first day of lost time. Payments to be made in accordance with the employee’s normal pay schedule. Compensation rate is 2/3 of the Average Weekly Wage (AWW).																																								
Temporary Partial Benefits	No Min., As of 10/1/2021 max is \$1,256.64. For Injuries prior to 10/1/2018, 225 week cap (not more than 450 weeks after DOI.) For injuries after 10/1/2018, 275 weeks (not more than 450 weeks after DOI.) Payment must be made within 10 days of date wages sent. TPD rate is calculated as follows: (AWW – current earnings) X 2/3.																																								
Permanent Partial Benefits	<p>Based on the PPD schedule under MN 5223.0300.</p> <table border="1" data-bbox="587 919 1528 1440"> <thead> <tr> <th colspan="4">For injuries from Oct. 1, 1995, through Sept. 30, 2000</th> </tr> <tr> <th>Impairment rating %</th> <th>Amount</th> <th>Impairment rating %</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>0-25</td> <td>\$75,000</td> <td>61-65</td> <td>\$160,000</td> </tr> <tr> <td>26-30</td> <td>\$80,000</td> <td>66-70</td> <td>\$180,000</td> </tr> <tr> <td>31-35</td> <td>\$85,000</td> <td>71-75</td> <td>\$200,000</td> </tr> <tr> <td>36-40</td> <td>\$90,000</td> <td>76-80</td> <td>\$240,000</td> </tr> <tr> <td>41-45</td> <td>\$95,000</td> <td>81-85</td> <td>\$280,000</td> </tr> <tr> <td>46-50</td> <td>\$100,000</td> <td>86-90</td> <td>\$320,000</td> </tr> <tr> <td>51-55</td> <td>\$120,000</td> <td>91-95</td> <td>\$360,000</td> </tr> <tr> <td>56-60</td> <td>\$140,000</td> <td>96-100</td> <td>\$400,000</td> </tr> </tbody> </table>	For injuries from Oct. 1, 1995, through Sept. 30, 2000				Impairment rating %	Amount	Impairment rating %	Amount	0-25	\$75,000	61-65	\$160,000	26-30	\$80,000	66-70	\$180,000	31-35	\$85,000	71-75	\$200,000	36-40	\$90,000	76-80	\$240,000	41-45	\$95,000	81-85	\$280,000	46-50	\$100,000	86-90	\$320,000	51-55	\$120,000	91-95	\$360,000	56-60	\$140,000	96-100	\$400,000
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The Travelers Indemnity Company and its property casualty affiliates. One Tower Square, Hartford, CT 06183

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Indemnity issues

Permanent Partial Benefits	For injuries Oct. 1, 2000 to Sept. 30, 2018			
	Impairment rating %	Amount	Impairment rating %	Amount
	0-5.5	\$75,000	50.5-55.5	\$165,000
	5.5-10.5	\$80,000	55.5-60.5	\$190,000
	10.5-15.5	\$85,000	60.5-65.5	\$215,000
	15.5-20.5	\$90,000	65.5-70.5	\$240,000
	20.5-25.5	\$95,000	70.5-75.5	\$265,000
	25.5-30.5	\$100,000	75.5-80.5	\$315,000
	30.5-35.5	\$110,000	80.5-85.5	\$365,000
	35.5-40.5	\$120,000	85.5-90.5	\$415,000
	40.5-45.5	\$130,000	90.5-95.5	\$465,000
	45.5-50.5	\$140,000	95.5-100	\$515,000
	For injuries Oct. 1, 2018 to present			
	Impairment rating %	Amount	Impairment rating %	Amount
	0-5.5	\$78,800	50.5-55.5	\$173,300
	5.5-10.5	\$84,000	55.5-60.5	\$199,500
	10.5-15.5	\$89,300	60.5-65.5	\$225,800
	15.5-20.5	\$94,500	65.5-70.5	\$252,000
	20.5-25.5	\$99,800	70.5-75.5	\$278,300
	25.5-30.5	\$105,000	75.5-80.5	\$330,800
30.5-35.5	\$115,500	80.5-85.5	\$383,300	
35.5-40.5	\$126,000	85.5-90.5	\$435,800	
40.5-45.5	\$136,500	90.5-95.5	\$488,300	
45.5-50.5	\$147,000	95.5-100	\$540,800	
Permanent Total Benefits	Minimum 65% of the SAWW \$801. Max is 102% of SAWW \$1256.64. For injuries prior to 10/1/2018, able to presume retirement at age 67. For injuries 10/1/2018 or later, PTD benefits payable to age 72; If DOI after age 67 – PTD limited to 5 years.			
Fatality Benefits	Max burial expense \$15,000. For deaths after 10/1/1983 and a spouse with no dependents, benefits are payable at 50% of the daily wage at the time of injury for 10 years including adjustments. For spouse with one dependent, benefits are payable at 60%. For spouse with more than one dependent, benefits are payable at 66 2/3%. Effective 4/28/2000, minimum dependency benefit is \$60,000.			

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Vocational Rehabilitation	If TTD is likely to exceed 13 weeks, then a rehab consultation is required with a Qualified Rehabilitation Consultant (QRC). Employee is allowed to choose their own QRC. Retraining program must be approved by the Department of Labor and Industry.
Settlement Allowed	Yes.
Cap on benefits, exceptions	<ul style="list-style-type: none"> • If date of injury is from Oct. 1, 1995, through Sept. 30, 2000, the injured worker must file a request for retraining benefits before 104 weeks of wage-loss benefits have been paid to them. • If date of injury is from Oct. 1, 2000, through Sept. 30, 2008, the injured worker must file a request for retraining benefits before 156 weeks of wage-loss benefits have been to them. • If injury date is on or after Oct. 1, 2008, injured worker must file a request for retraining before 208 weeks of wage-loss benefits have been paid.

Medical issues

Initial Choice of Provider	Employee		
Change of Provider	One change allowed within the first 60 days.		
Medical Fee Schedule	Yes		
Managed Care	Managed care plans are allowed but must be approved plans.		
Utilization Review	Not admissible at trial to deny treatment		
Treatment Guidelines	MN does have treatment parameters. Refer to MN Rule 5221.6010		
Generic Drug Substitution	The state mandates generic substitution.		
Medical Mileage Reimbursement Rate	<table border="1"> <tr> <td>1/1/2022</td> <td>\$0.58/mile</td> </tr> </table>	1/1/2022	\$0.58/mile
1/1/2022	\$0.58/mile		
Network Information	First Health (primary) and CorVel (secondary).		
Ability to Terminate Medical Treatment	Medical remains open for life of claimant as long as treatment is reasonable and necessary and related to the injury.		
Settlement Allowed	If liability is in question, it is possible to close medical.		
Cap on benefits, exceptions	Refer to the MN Treatment Parameters		

Other Issues

WC Hearing Docket Speed	9–12 months
Staff Counsel	Law Offices of Kelly R. Rodieck & Associates. P.O. Box 64093 St. Paul, MN 55164-0093 Phone: 651-221-7755 Fax: 651-221-7704 or 651-221-7705
Hearings require attorney or claim handler participation	Attorney
Occupational Diseases	Same as personal injury
Second Injury Fund availability	Abolished after 6/30/1992 Supplementary benefits abolished 10/1/1995.
Other Offset Opportunities	SSDI or Social Security Retirement offset after \$25K paid in PTD benefits
EDI	Claims EDI Release 3: FROI only (1/1/2014) EDI for all Claim related

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Other Issues

	information. MN DLI uses an electronic platform, CAMPUS.
In-State Adjusting Required	No
License or Certification Required	Yes, for TPA claims only