# KNOW YOUR RIGHTS

# THE INJURED WORKER'S GUIDE TO COMPENSATION LAW IN PENNSYLVANIA

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Shollenberger & Januzzi, LLC, is your personal injury law firm dedicated to protecting the rights of the injured.

If you are injured, the best way to protect your rights is to Know Your Rights. This guide is designed to answer the basic questions you should ask if you are injured on the job in Pennsylvania. At Shollenberger and Januzzi, our experienced attorneys and staff are here to fight to protect your rights under the law. Use this guide to learn the basics of what you need to know, and see Shollenberger & Januzzi to be sure your rights are protected.

Shollenberger and Januzzi serves injured workers and their families for:

- · Personal Injury and wrongful death
- · Car accidents,
- Medical malpractice
- Workers' Compensation
- Social Security disability

If you have a question about an injury you have suffered, call our office at 717-728-3200 to speak with an attorney. Consultations are free, and can make all the difference in protecting your rights.

DISCLAIMER: The Pennsylvania Workers' Compensation Act and the interpretations to it are extremely detailed and complex and are far too extensive to be covered in a guide such as this. The information included in this guide is for reference purposes only and is not intended as a substitute for legal advice or representation by a lawyer. The Pennsylvania Workers' Compensation Act, the regulations that govern the Act and case law which interprets the Act are constantly changing. Anyone receiving workers' compensation benefits, or who potentially has a workers' compensation claim, is strongly encouraged to consult with an experienced workers' compensation attorney to discuss the particulars of his or her case.

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# INJURED WORKER'S GUIDE

I WAS INJURED ON THE JOB,
WHAT DO I DO?

If you are injured on your job in Pennsylvania you have a right to file for workers' compensation benefits from your employer. You are not required to hire a lawyer to file for benefits, but in most cases you should seek legal advice to ensure you know your rights and to protect your rights under the law. If you are injured, contact Shollenberger and Januzzi (717-728-3200) to speak to an attorney about your injury. The consultation is free, and it may make all the difference in securing your benefits.

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# WHY MUST I FILE A CLAIM FOR WORKERS COMPENSATION?

History: In Pennsylvania you cannot "sue" your employer if you are injured at work. You must file a claim for workers' compensation benefits. The original Pennsylvania Workers' Compensation Act (the "Act") was enacted in 1915. The goal of the Act is to ensure workers injured on the job receive prompt payment of wage loss and medical compensation benefits. In exchange for payment of wages and medical benefits for any injury suffered on the job, employees gave up the right to sue an employer for injuries resulting from the employer's negligence. This was a very significant right for workers to give up, and is the basis for the system we now have in place.

Administration: The Pennsylvania Workers' Compensation Act is administered by the Pennsylvania Workers' Compensation Bureau, an arm of the Pennsylvania Department of Labor and Industry, with offices located throughout the Commonwealth, The system has its own judges and courtrooms; thus, Workers' Compensation Judges hear only matters involving the Workers' Compensation Act.

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# WHAT IF I WAS INJURED BY SOMEONE OTHER THAN MY EMPLOYER?

You may be injured due to circumstances outside of your employment, in which case you may a have a civil claim for injury against someone other than your employer. In that case, contact Shollenberger & Januzzi to speak with an attorney regarding your personal injury.

If you are injured on the job, but the injury is caused by someone other than your employer, you may have what is called a "third party" case. You can pursue a personal injury claim against the third party, as well as receives workers' compensation benefits from your employer.



# WHO IS COVERED BY WORKERS COMPENSATION?

### Every Worker in Pennsylvania is covered by the Workers'

Compensation Act. Every employer in Pennsylvania, no matter how many employees they have, must have workers' compensation insurance. In fact, it is a criminal offense for an employer not to insure his workers under the workers' compensation system; if he fails to do so, the employer could be subject to civil lawsuits by injured workers. As an employee, you are covered by your employer's workers' compensation insurance from your first day on the job through the end of your employment.

Uninsured Employers: Just recently, the Pennsylvania Legislature put into effect the Uninsured Employer Guaranty Fund (UEGF). Finally, Pennsylvania now has a system in which workers' compensation benefits are available to an employee who is injured while working for an uninsured employer.



## AM I ENTITLED TO COMPENSATION? REQUIREMENTS TO RECEIVE BENEFITS

In order to receive benefits there must be an employer-employee relationship, the injury must occur during the course and scope of that employment and the injury must be related to work. These terms and circumstances are set forth in the Act and have been defined and interpreted further in case law.

### Employer/Employee Relationship

Most employer-employee relationships are self-evident. However, there are instances where the employer-employee relationship is not so clear. For example, many times a worker will be technically designated an independent contractor. However, simply calling the worker an independent contractor does not mean the worker isn't entitled to

workers' compensation benefits. The law will look at the true nature of the relationship of the parties by considering the interaction of the parties to each other and will determine if there was mutual assent to enter an employment relationship. If the true nature of the relationship appears to be an employer-employee relationship, rather than a true independent contractor relationship, workers' compensation courts will consider the relationship to be one of employer-employee.

These determinations are made on a case-by-case basis with the court looking at the facts and circumstances surrounding the relationship of the parties. Courts reference four basic elements when determining the existence of an employer-employee relationship: (1) the right to select the employee; (2) the right and power to remove the employee; (3) the power to direct the manner of performance; and (4) the potential power to control the employee.

Also, the law recognizes what has been termed a "statutory employer." This typically occurs in the construction business. If an employee of the subcontractor, hired by the general contractor, is injured on the construction site, the general contractor may be obligated to pay workers' compensation benefits to the injured employee. In this situation, the general contractor is called a "statutory employer."

Temporary Employment: More and more employees are finding jobs through temporary employment agencies. When an employee is injured while working through a temp agency, the issue often arises as to whether the temp agency or the temporary employer is obligated to pay workers' compensation benefits. Again, this issue is decided on a case-by-case basis, generally following the same principles as used under the employer/independent contractor situations. The facts and circumstances of the injured worker's relationship with the temp agency and with the temporary employer will be examined to determine which of the two is responsible for payment of workers' compensation benefits.

Casual Employment: Certain forms of what the law terms "casual employment" are not covered under the Act. Casual employment situations generally involve inconsistent or sporadic work. The typical examples are homeowner-type situations, such as mowing grass or babysitting.

Pennsylvania Jurisdiction: Many workers are hired in one state to work in a number of other states. A worker who is injured in another state but whose contract of hire or principal place of employment was in Pennsylvania is likely to be covered by the Pennsylvania Workers' Compensation Act.

Similarly, any injured worker, no matter where they were hired or where their employer is principally located, is entitled to Pennsylvania workers' compensation benefits if the injury occurs in Pennsylvania. In many cases, an injured worker may be entitled to benefits in more than one state. If that is the case, the injured worker is encouraged to investigate potential benefits of the states in question to determine which state's workers' compensation benefits would be more favorable.

### Course & Scope of Employment

For an injured worker to be eligible for workers' compensation benefits, his or her injury must occur within the "course and scope" of employment. Most situations are obvious, but there are many situations in which the injury is not clearly within the course and scope of employment. These situations are too numerous to describe in detail.

In deciding this issue, the courts will look to determine whether, at the time of the injury, the employee is "furthering the interest" of his employer. Again, this is a difficult phrase to define and the courts will look at this on a case-by-case basis to determine if indeed the injury occurred during the course and scope of employment and is therefore compensable.

Many situations arise in which an employee is injured on the employer's premises, but not while actually "on-the-clock." Generally, an injury which occurs on the employer's premises is compensable. Again, each situation is decided on a case-by-case basis. Attendance at employer-sponsored picnics, parties, and other such social functions are usually compensable as they are considered activities which further the interest of the employer. Also, if an injury occurs while participating on an employer-sponsored sports team, such as a softball team, volleyball team, etc., that activity is generally considered to be furthering the employer's interest and is compensable. Again, there are exceptions to this general rule, and the courts will look at the facts and circumstances of each particular injury to determine if it is compensable. There are many unusual circumstances

in which people become injured which could be potentially considered within the course of employment, and it is advisable to consult an attorney to determine your rights.

### 120-Day Notice Obligation

Workers who suffer an injury at work must report the injury to their employer within 120 days from the date of injury. The time for giving notice of the injury does not begin to run until the worker knows, or given the circumstances should know, of the existence of the injury and its potential relationship to work. Injured workers are **strongly encouraged** to report every injury immediately- and in writing- to protect their rights. If the worker does not give notice within the 120-day time limit, the worker may lose his or her rights and protections under the Act.

### Disability (Injury)

Under the Pennsylvania Workers' Compensation Act, disability is defined by work loss. There are essentially two types of disability, (1) temporary total disability (TTD) and (2) temporary partial disability (TPD).

TTD arises in a situation where an injured employee is completely off work as the result of the injury. TPD generally arises when the injured worker is back to work, but the injury prevents the employee from earning his time of injury wage. Disability does not hinge on the severity of the injury. For workers' compensation purposes, even a severely injured worker is not disabled if he or she is able to work and earn at least his or her pre-injury wage. Consequently, for workers' compensation purposes, an injured worker would be considered totally disabled if the work injury prevents him from working, even if the injury is not that severe.

### Compensable Injuries

The Pennsylvania Workers' Compensation Act takes a broad view in determining what constitutes an injury. Any injury or condition caused by an accident or activity at work can be considered a work injury. An aggravation of a pre-existing condition which occurs at work is also a compensable injury. The definition of injury for compensation purposes is not limited to workplace accidents. Repetitive use type injuries, such as carpal tunnel syndrome and tennis elbow (epicondylitis) are included as compensable injuries if the claimant can prove those conditions were

caused by his or her employment, or if the underlying condition flares up or becomes aggravated through the course and scope of a worker's employment. This includes heart attacks and heart ailments.

The definition of injury is not limited to physical injury. While very difficult to prove, psychiatric injuries caused by "abnormal working conditions" are compensable under the Act. More common are psychological conditions which arise from stress related to a worker's physical injury. These may be compensable work injuries.

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# HOW DOES MY EMPLOYER GRANT BENEFITS?

The majority of work injuries are voluntarily accepted by the employer's workers' compensation insurance provider. All accepted work injuries are to be reported to the Pennsylvania Bureau of Workers' Compensation, on a form called a Notice of Compensation Payable (NCP). A medical-only NCP can be filed to report a work injury that requires medical treatment, but where the injured employee did not lose time from work.

Oftentimes, the employer/insurer is unsure whether to immediately accept an injury as work-related. In that instance, the employer/insurer can file what is called a Notice of Temporary Compensation Payable (NTCP). Here, the employer/insurer temporarily accepts the injury, without accepting liability. This gives the employer/insurer 90 days to investigate to determine whether, in their mind, the injury is a compensable work-related injury. If the employer/insurer chooses to deny liability for the injury, they must file a Notice Stopping Temporary Compensation Payable (NSTCP) within 90 days of the filing of the NTCP, along with a Notice of Denial.

If the employer/insurer does nothing and allows the 90 day period to run, the NTCP converts to an NCP and the employer/insurer is considered to have accepted the injury.

# WHAT IF MY BENEFITS ARE DENIED?

If you receive a notice that your benefits are denied you should contact an attorney at Shollenbereger and Januzzi (717-728-3200) immediately to determine your options. If an employer/insurer denies benefits for what the employee believes to be a compensable injury, the employee can initiate litigation to fight for benefits. This is done with the filing of a Claim Petition. The Claim Petition is a Bureau form and is filed with the Workers' Compensation Bureau in Harrisburg. The Bureau will then assign the Claim Petition to a Workers' Compensation Judge based upon the county in which the employee lives. The Workers' Compensation Judge will then initiate proceedings by scheduling a hearing.

The workers' compensation litigation process can be a long, drawn-out process. Generally, the Workers' Compensation Judge does not make his or her determination until after a series of hearings and usually the testimony of both the doctor supporting the claimant and the doctor supporting the position of the employer/insurer. This process, from the time of filing the Claim Petition until the judge's determination, can often take up to a year or more.

Workers' compensation litigation is a formal court proceeding, following the ordinary rules of court. The court procedures go beyond the purpose of this booklet. Again, if you believe you may need to file a claim petition, seek legal advice from Shollenberger & Januzzi (717-728-3200).

# WHAT TYPES OF BENEFITS MAY | GET?

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The majority of workers' compensation cases include two types of benefits, (1) wage (indemnity) benefits and, (2) medical benefits. Medical benefits are limited to medical treatment for the work injury. However, there are several other types of benefits available to claimants in more limited circumstances:

- Death benefits are available to the family of a worker who died as a result of a work injury.
- Specific loss benefits are available to any employee who loses a body part as a result of a work injury. Specific loss injuries run the gamut from the partial loss of a finger or toe to the loss of an entire limb. To recover a specific loss benefit the body part does not necessarily need to be lost or amputated. These benefits are also available if medical evidence indicates that the injured worker has lost the use of the body part for all intents and purposes, even without the actual loss of the body part. Specific loss benefits are also available for blindness in one or both eyes and hearing loss, whether partial or total.
- Scarring (and disfigurement), but only for scarring of the head, face and neck. Surgical scars resulting from surgeries for work-related injuries are also compensable, but also limited to scars of the head, face and neck.

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# HOW IS MY WAGE BENEFIT CALCULATED?

Generally, an injured worker is entitled to workers' compensation benefits in the amount of two-thirds of his/her average weekly wage. However, there is a maximum and minimum benefit. Workers, who at the time of the injury are earning less than what is called the Statewide Average Weekly Wage, will receive 90% of their average weekly wage.

For employees who work for their time-of-injury employer for more than a year leading up to the injury, their average weekly wage is determined by their earnings going back one year from the date of the injury. The one-year period is divided into quarters and the lowest quarter is excluded from the calculation; then, the wages for the remaining three quarters are averaged to determine the injured worker's average weekly wage. Then, depending on the amount of the average weekly wage, the employee's "compensation rate" is determined by the use of either the two-thirds or 90% formula. In addition to the employee's hourly wage or salary, other forms of compensation such as earnings from reported gratuities, bonus payments, and room and board provided by the employer are all included in determining the employee's average weekly wage.

Workers' compensation benefits are not taxable. However, once an employee's compensation rate is set for a given date of injury, it will never increase, even if the employee's salary increases.

If the injured employee is working at more than one job at the time of the injury, called "concurrent employment," the wages from both jobs are used to determine the injured worker's average weekly wage.

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### MAY MY EMPLOYER TAKE ANY DEDUCTIONS FROM MY WAGE BENEFIT?

An employer/insurer is entitled to credits or offsets against an employee's wage benefit if the injured employee receives certain benefits. Examples of these credits or offsets include unemployment compensation benefits, certain pension benefits, and social security retirement benefits. The nuances regarding these credits and offsets are quite specific, and it's recommended an injured worker consult an attorney to determine if an employer/insurer is entitled to a credit or offset.

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### WHAT ARE MY MEDICAL BENEFITS?

As noted above, an employer/insurer is obligated to pay for an injured employee's medical treatment for their work injury. Once the employer/insurer has accepted liability, they are required to pay for all medical expenses which are reasonable and necessary to treat the work injury.

# WHAT AM I OBLIGATED TO DO TO RECEIVE MEDICAL BENEFITS?

The injured employee has certain obligations which trigger the employer/insurer's responsibility to pay medical benefits. An employee is required to treat with a "panel provider" for a period of 90 days. A "panel provider" is a medical provider that is included on an employer's panel or list of medical providers. The 90 days does not start from the day of injury, but rather from the day of first treatment.

However, in order for the employer to enforce this 90 day period, the employer must give the injured employee notice of the panel, provide the employee with the written list, and obtain written acknowledgment from the employee that the employee has been notified of the panel. This written acknowledgment must be obtained by the employer both at the time of hire and following the injury. If the employer fails to meet these requirements, the injured employee can treat "off the list."

Further, once the 90 day period has run, the injured employee can then treat with a provider of their own choosing.

The employer/insurer has the right to challenge the obligation to pay for medical treatment by requesting a **Utilization Review**. A Utilization Review is filed for a specific treatment or treatment by a specific provider. This eventually leads to a "paper" review of the treatment at issue.

If the reviewer, who is hired through a **Utilization Review Organization** (**URO**), finds the treatment to be reasonable and necessary, the employer/insurer will be required to pay for the treatment. If the reviewer determines that the treatment is not reasonable and necessary, the employer/insurer is not required to pay for the treatment. Either side can challenge the determination of the reviewer by filing, with the Bureau, a Petition to Review the Utilization Review determination.

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# WHAT HAPPENS IF I RETURN TO WORK? RETURN TO WORK SITUATIONS:

Injured workers generally return to work either full duty or under work restrictions. If an employee is able to return to work full duty and earn his full pre-injury wage but has not yet fully recovered, the returning employee is placed on suspended status, meaning the employer/insurer will continue to pay for the employee's medical treatment but is no longer obligated to pay wage benefits for as long as the employee remains able to perform his full duty job. If the employee returns to work and earns less than his pre-injury wage, the employer/insurer continues to pay medical benefits and must also pay two-thirds of the difference between the injured worker's average weekly wage and his current earnings.

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# WHAT HAPPENS IF I AM LAID OFF WHILE INJURED? LAY-OFF SITUATIONS:

If an injured worker is laid off from work while on restrictions, workers' compensation benefits must be reinstated. If an injured worker is laid off while performing the full duties of his or her pre-injury job, there is no obligation by the employer/insurer to pay wage benefits, as the wage loss is considered the result of economic conditions, not the work injury.

# WHAT SHOULD I DO IF MY EMPLOYER IS TRYING TO CUT OFF MY BENEFITS? EMPLOYER'S ACTIONS TO REDUCE/END BENEFITS:

If your employer/insurer attempts to reduce or eliminate your workers' compensation benefits, you should contact an attorney immediately. Call Shollenberger and Januzzi at (717-728-3200) so that we may take prompt action to protect your rights under the law.

Most injured workers receiving workers' compensation benefits for 6 months or more likely will find themselves the subject of employer/insurer's efforts to reduce or terminate their benefits. Generally, these efforts begin with the workers' compensation carrier's scheduling of an appointment with a doctor chosen by the insurance company called an **Independent Medical Examination (IME)**.

Actions to reduce or end benefits include, but are not limited to:

- (1) **Termination** If the IME physician (or claimant's treating physician) gives an opinion that the worker is completely recovered from the work injury, the employer/insurer will file a Petition to Terminate Compensation Benefits, requesting that a Workers' Compensation Judge terminate all workers' compensation benefits.
- (2) **Suspension** If the IME physician (or the claimant's treating physician) determines that the claimant is not recovered from the work injury but is capable of returning to work in some capacity and the employer offers a job that will pay as much or more than the employee's time of injury earnings and Claimant refuses the job offer, the employer/insurer will file a Petition to Suspend Benefits, asking that the Workers' Compensation Judge suspend wage benefits. However, as indicated above, when in suspension status, medical benefits continue.
- (3) **Modification** If any physician (IME or treating) indicates that the claimant is able to return to work in some capacity, the employer may offer the employee a job earning less than the employee's pre-injury average weekly wage. In this situation, if the employee refuses the job,

the employer/insurer will file a Petition to Modify Benefits, requesting a Workers' Compensation Judge reduce benefits based on the earnings of the offered position.

(4) Labor Market Survey The employer/insurer can also request a modification of benefits based on what is called a "Labor Market Survey." The Labor Market Survey procedure begins with a request that the claimant meet with a "vocational expert" for a vocational interview. Following this interview, the "expert" will assess the earning power of the injured worker purportedly based on available work that is within the injured employee's medical restrictions and vocational abilities. This process is strictly for the employer/insurer's benefit and is intended to reduce its liability. The Labor Market Survey process is too detailed for this guide, but if your employer's workers' compensation insurance carrier requests that you meet with a vocational expert for an "interview," you are strongly encouraged to seek legal advice prior to the interview.

The above examples are the more common efforts taken by employers/insurers to eliminate or reduce a claimant's benefits. Others include:

(5) Impairment Rating Evaluation (IRE) After a claimant has received 104 weeks (2 years) of temporary total disability (TTD) benefits, an employer/insurance carrier can request the employee be seen by a doctor for what is called an Impairment Rating Evaluation (IRE). The evaluation is to determine the percentage of permanent, whole body impairment sustained by the claimant as a result of the work injury. If the percentage is determined to be less than 50%, the claimant's status will change from TTD to TPD. The significance of the change from TTD to TPD is that a claimant can only receive TPD benefits for a maximum of 500 weeks. However, the weekly benefit rate is not reduced. If the percentage of impairment is 50% or greater, the claimant is presumed to remain on TTD status.

There are specific rules that the employer/insurance carrier must follow in order for the IRE determination to be valid. Also, for the IRE to be valid, all facets of the work injury must be considered by the doctor performing the IRE. Further, the claimant must be at what is considered **Maximum Medical Improvement (MMI)** for the IRE to be valid. If you are the subject of an IRE, you should seek legal advice from a workers' compensation attorney immediately.

### RESOLUTION OF CLAIMS:

Most workers' compensation claims are resolved in one of the following ways:

### (1) Full Recovery

Most workers' compensation claims end as a result of the injured worker making a full recovery from the work injury. Once full recovery is achieved, the claimant's benefits are terminated.

### (2) Settlements

Many workers' compensation claims resolve via a lump sum paid to the claimant. This is accomplished by way of a **Compromise & Release Agreement (C&R)**. Further, claimants can Compromise & Release, or settle, any or all aspects of the workers' compensation claim. For example, a claimant can settle the wage portion of a claim while the medical portion of the claim remains open either indefinitely or for a specified period of time. There are many issues which arise that can make the C&R process very complicated. It would be a mistake for anyone receiving workers' compensation benefits to settle their workers' compensation claim without speaking to a workers' compensation attorney. Lastly, any settlement of a workers' compensation claim must be approved by a Workers' Compensation Judge after a hearing in which the claimant must testify.

### (3) Termination

Some workers' compensation claims resolve as a result of a Workers' Compensation Judge granting a petition of the employer/insurer to terminate an injured worker's benefits.

### (4) Retirement

Workers' Compensation claims can also be resolved by the retirement of the claimant from the workforce. However, claimants who are receiving retirement benefits as a result of their work injury can and do receive workers' compensation benefits. The manner in which a claimant retires is most important in determining if the claimant can continue to receive workers' compensation benefits. If you are receiving workers' compensation benefits, **DO NOT**, under any circumstances, take any retirement benefit without speaking to a workers' compensation attorney. This is critical.

There are other, less common ways for claims to be resolved. If you think your workers' compensation benefits are in danger of being reduced or terminated, call an attorney immediately at Shollenberger & Januzzi (717-728-3200)

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## MISCELLANEOUS PROVISIONS

### Description of Injury

The description of the work injury is found in the Notice of Compensation Payable. It's important that the injured employee review the description of the injury for accuracy. If the employee suffered multiple injuries from the work accident some of the injuries may be omitted from the official description. Moreover, injuries often worsen over time. For example, a back injury may be listed as a strain or sprain but later determined to be a herniated disk. It's important that the description reflects the current condition because the employer/insurer is only required to pay benefits for what is listed. The description of the injury can be amended with the claimant's filing of a **Petition to Review the NCP**. There are time limitations for filing a Petition to Review. If you believe the description of the injury, or for that matter any information contained on the NCP, is not accurate, it is important to take prompt action.

### Subrogation

As noted earlier, if a claimant is injured in the course and scope of employment as a result of the negligence of a third party, the claimant can bring a separate claim against the third party, in addition to receiving workers' compensation benefits. However, a workers' compensation carrier would have a subrogation interest, or lien, against the proceeds of any recovery from the third party. In simple terms, a workers' compensation carrier is entitled to be repaid for benefits/monies paid to the claimant from any money the claimant receives as a result of the third party action. It should be noted there are limitations to the amount that must be repaid to the workers' compensation insurer. Thus, it's important to seek legal advice to ensure that the workers' compensation carrier is not paid more than what they are entitled to receive.

### Statute of Limitations

As mentioned above, an employee has 120 days to notify his employer of the work injury. Beyond this time there is also a 3-year statute of limitations in which to file a claim. If an employer/insurer does not accept a workers' compensation claim, the injured worker, with some exceptions, has 3 years from the date of the injury to file a claim with the Workers' Compensation Bureau. It's important to note that even though the employer's workers' compensation insurance carrier is paying benefits, it doesn't mean that the claim has been legally accepted. The claim is not legally accepted until an NCP or similar document has been filed with the Bureau. If you aren't sure if your claim has been legally accepted, it's crucial to consult with a workers' compensation attorney immediately.

### Conclusion

This guide provides a basics understanding of Pennsylvania Workers' Compensation law, but cannot substitute for the legal advice of an experienced workers' compensation attorney. If you or someone you know has suffered a work injury, the attorneys at Shollenberger & Januzzi are here to help guide you through the process, and protect your rights under the law.

Consultations to answer any questions about your work injury are free of charge. Contact us at (717) 728-3200 or Toll Free at 1 (800) 813-1368.

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