



**DEPARTMENT OF  
LABOR AND INDUSTRY**  
WORKERS' COMPENSATION

## Denials of primary liability in Minnesota



# Terms used in this video

DLI  
Department of Labor  
and Industry

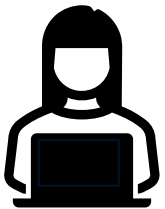
FROI  
First Report of Injury

NOPLD  
Notice of Insurers'  
Primary Liability  
Determination

EDI  
Electronic data  
interchange

SROI  
Subsequent Report of  
Injury

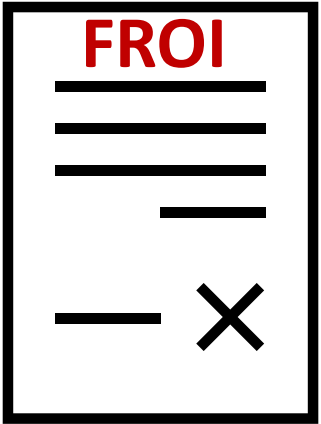
NOID  
Notice of Intention to  
Discontinue Workers'  
Compensation  
Benefits



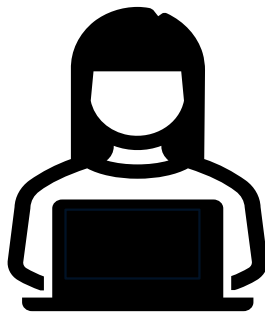
The term “insurer” is used to designate the claim administrator, insurer, self-insurer or third-party administrator.



# Improve the quality of denial notices



Accept or deny?

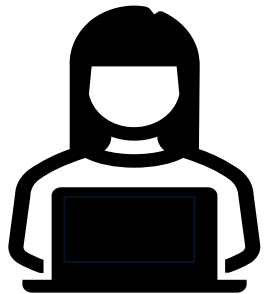


The underlying basis for a denial:  
– understand;  
– evaluate; and  
– communicate.

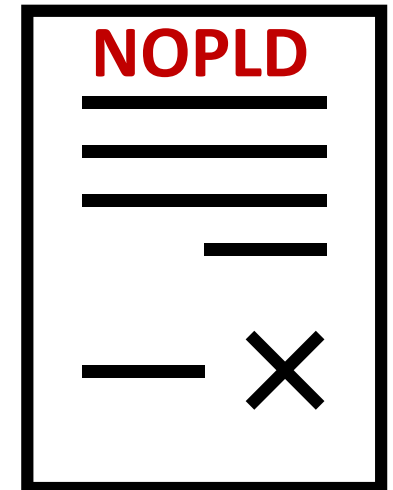
Avoid being nonspecific or frivolous.



# Primary liability determination



A primary liability determination is a determination that an alleged work-related injury *is* or *is not* compensable under Minnesota statutes and rules.



# Parties to a claim may include



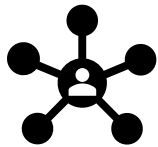
Employee



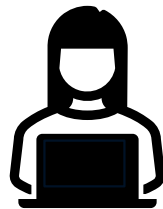
Heirs or dependents  
of an employee



Employee's  
representative



Employer or self-  
insured employer



Insurer



Third-party administrator  
for the insurer



# Steps to a primary liability denial

## Step one

Investigate  
the injury

## Step two

Determine  
compensability

## Step three

Formulate and submit  
denial reason

## Step four

Distribute to  
required parties



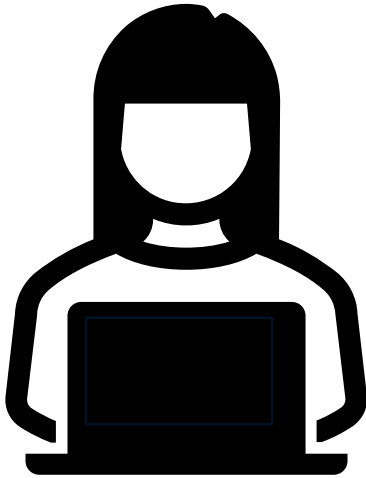
# Steps to a primary liability denial (step one)

## Step one

Investigate  
the injury



# Step one: Investigate

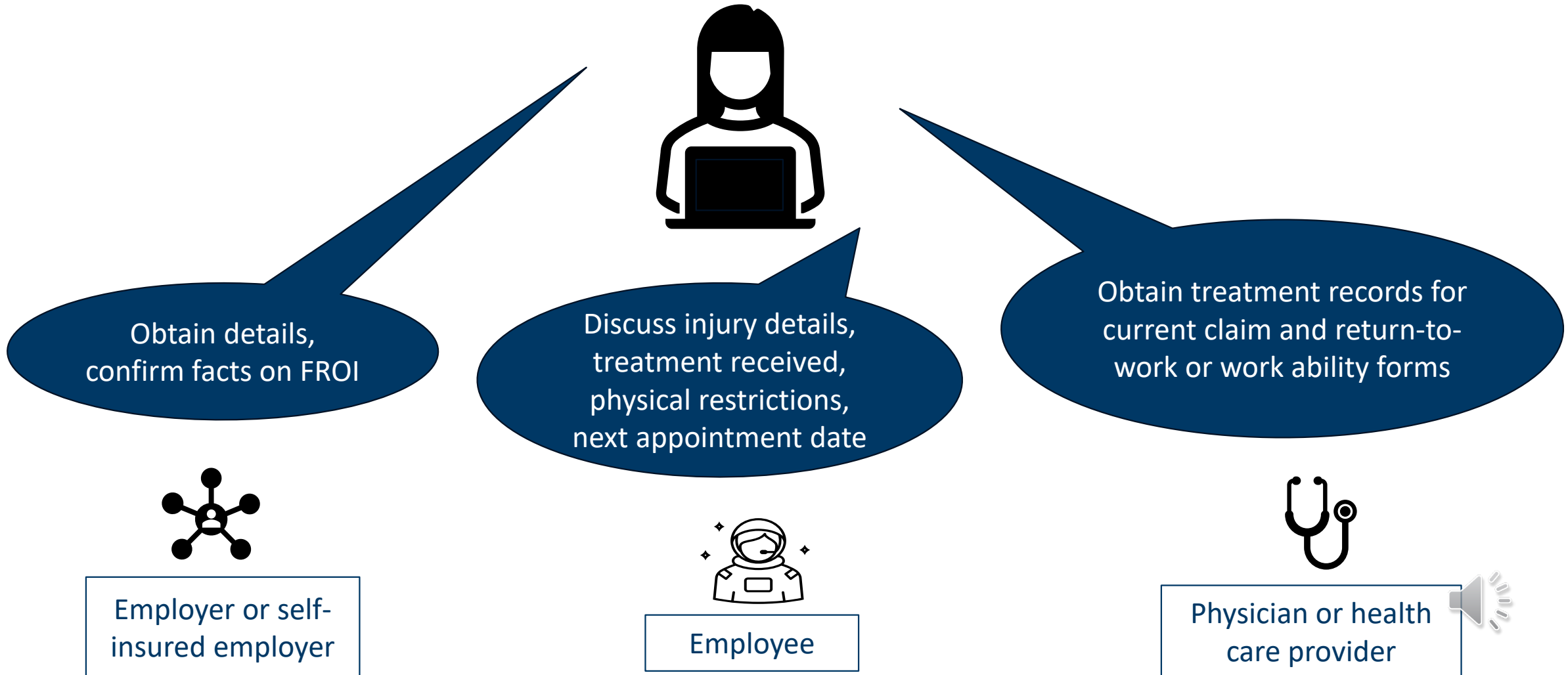


An investigation or good faith effort to attempt an investigation of the claim must be completed.

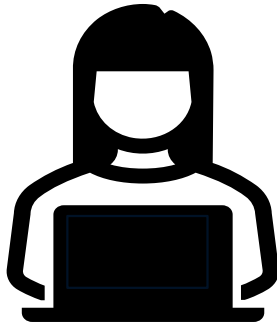




# Step one: Start the investigation



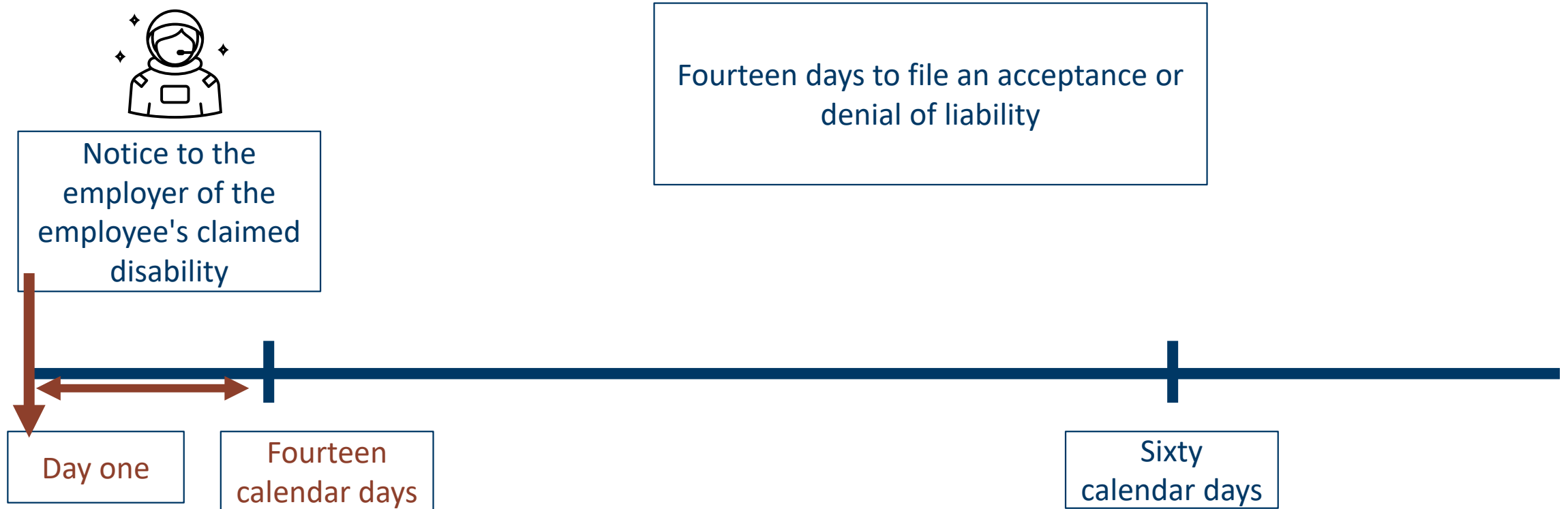
# Step one: Minnesota Statutes § 176.221, subdivision 1



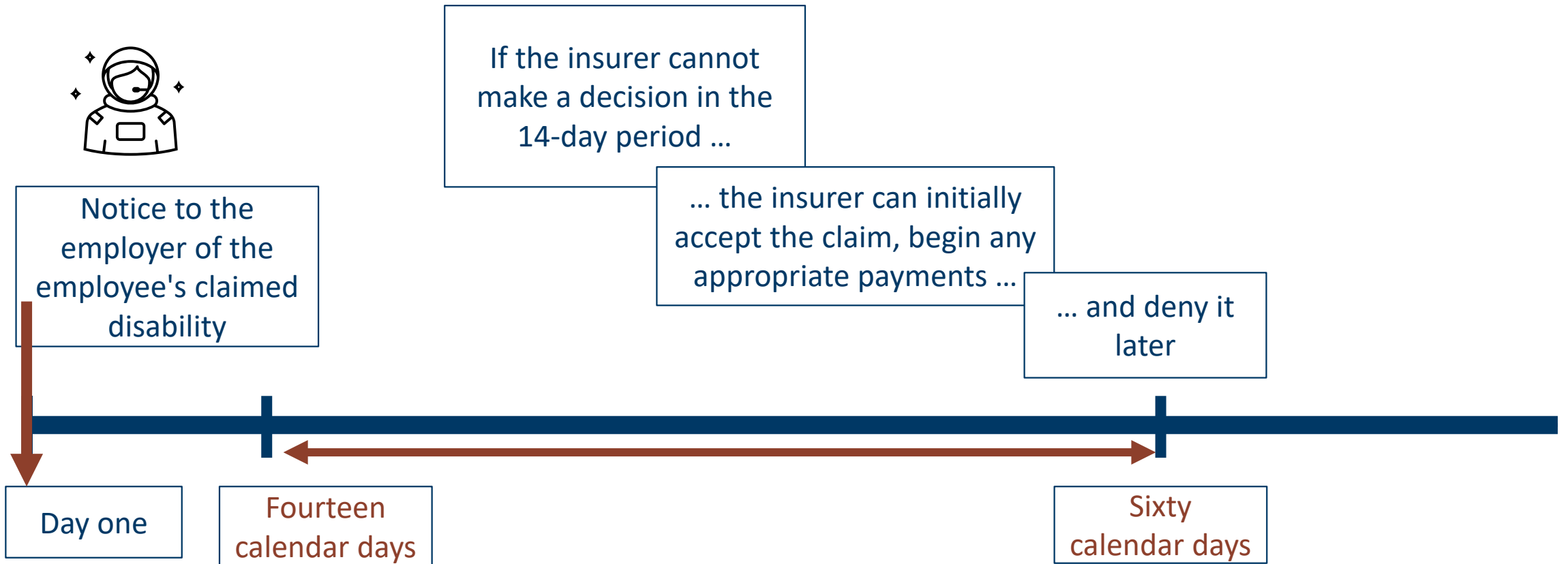
Review this statute in its entirety to thoroughly understand various timelines regarding a denial or acceptance of primary liability.



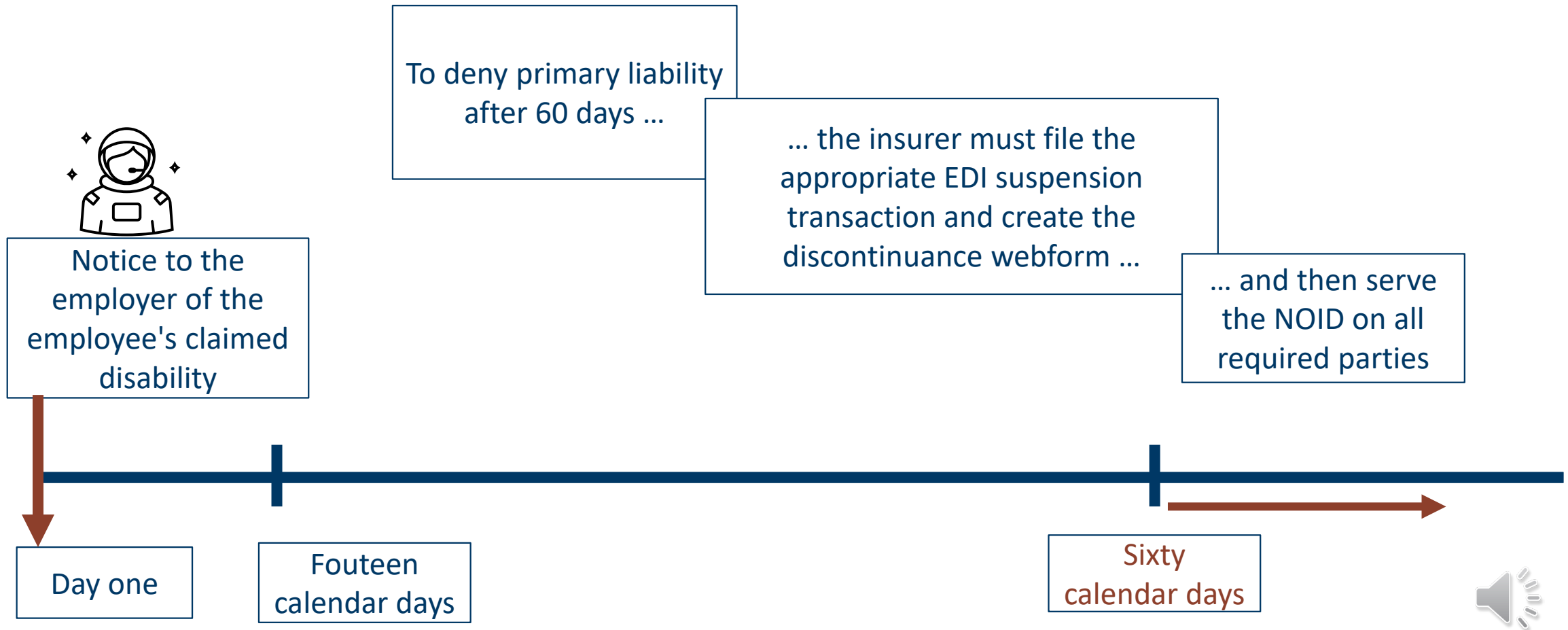
# Step one: Timely submission, 14 days



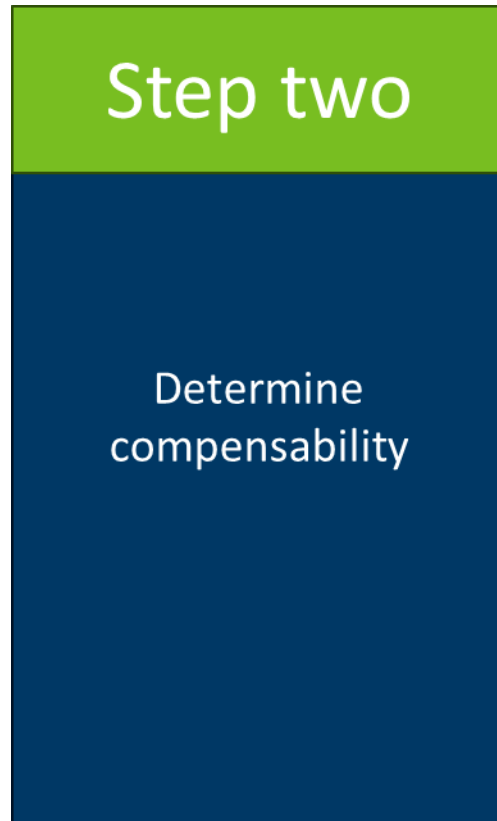
# Step one: Timeline, 14 to 60 days



# Step one: Timeline after 60 days



# Steps to a primary liability denial (step two)



# Step two: Determine compensability

Has the claim been investigated?

Is there a legal basis to deny?

Are there facts to support the legal basis?

Is the basis supported by fact or law?

Are there relevant medical reports or other related documents that support the asserted basis for the denial?



# Steps to a primary liability denial (step three)

## Step three

Formulate and submit  
denial reason





# Step three: Formulate and submit

Remember the potential parties?  
They all need to understand the denial reason provided.



Employee



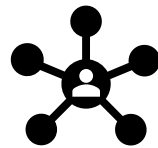
Insurer



Heirs or dependents  
of an employee



Employee's  
representative



Employer or  
self-insured  
employer



Third-party  
administrator  
for the insurer

Language must be  
easily understood to a  
person of average  
intelligence

Denial must be  
clearly stated with a  
specific reason

Cannot be considered  
frivolous

Show a complete  
investigation or  
good faith effort

All referenced  
medical reports and  
related documents  
must be attached



# Step three: Tips to formulate and submit

Avoid using abbreviations or industry acronyms.

You know what you know, put it on paper. All facts should be documented.

Ensure the denial reason states a legal and factual basis, is specific and is not frivolous.

Make sure what you are serving is complete and what you intended.

Attach all supporting documentation to the denial.

Ensure documentation is uploaded into the Work Comp Campus file and attached to the denial when served.

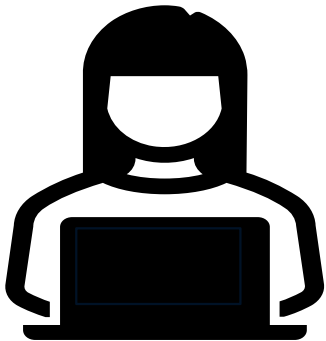


# Step three: Tips to formulate and submit (continued)

The reason field in Campus has a limit of 500 characters.

If your denial reason cannot be completely incorporated within the 500-character limit, attach a separate denial statement, ...

... DLI suggests stating in the "Reason" field that the full denial reasoning is attached.



For any denial that relies on medical records or other relevant documents, the denial reason should clearly explain how the facts within the supplied records or documents support the denial.



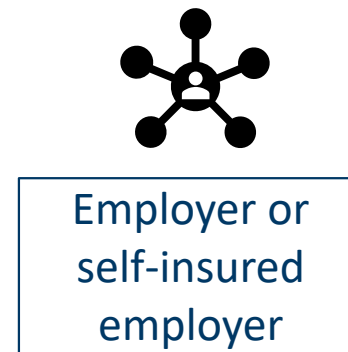
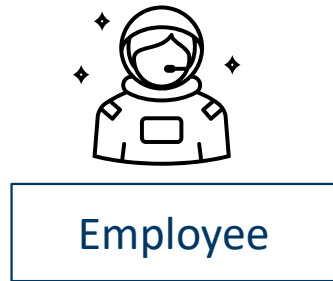
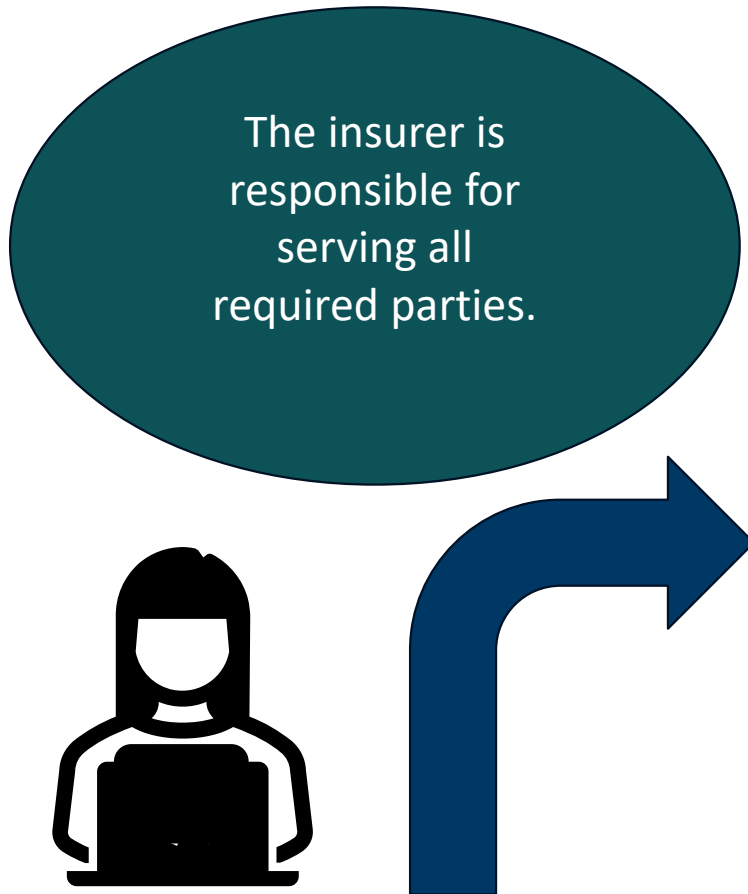
# Steps to a primary liability denial (step four)

## Step four

Distribute to  
required parties



# Step four: Distribute to required parties



# Step four: Distribute to required parties (continued)

The NOPLD form can be found in Campus under the Documents tab.

Check with your company for its preferred method of serving the NOPLD form, along with any supporting documents on all required parties.



- [Video: How to upload a document in Campus](#)
- [Minnesota Office of the Revisor of Statutes](#)

Denials of liability	Minnesota Rules part 5220.2570
Timeline: -- 14 days to pay or deny; -- 60 days to deny using NOPLD; and -- denying after 60 days using NOID.	Minn. Stat. 176.221, subd. 1 Minn. R. 5220.2570, subpart 7
Frivolous denials	Minn. R. 5220.2570, subp. 10
Nonspecific denials	Minn. R. 5220.2570, subp. 2E
Date-of-injury medical records	Minn. Stat. 176.138(a)
Workers' compensation Claims Access and Management Platform User System (CAMPUS)	Minn. Stat. 176.2612



Campus issues? Contact the  
Workers' Compensation Division Help Desk.

651-284-5005, press 3  
800-342-5354, press 3  
[helpdesk.dli@state.mn.us](mailto:helpdesk.dli@state.mn.us)

EDI transaction and submission issues?  
Email the EDI help desk.

[dli.edi@state.mn.us](mailto:dli.edi@state.mn.us)

