

Agenda

- Initial Contact
- Denying a Fatal Claim
- Death Benefits
- Death While Receiving Benefits
- Contact Information



Reporting a Fatality

- CALL RIGHT AWAY!
- Fax first report of injury (WKC-12)
- Fax wage information (WKC-13A1)
- Contact information for dependents:
 - Spouse
 - Children under 18
 - Surviving un-estranged parents



Department of Workforce Development Division of Worker's Compensation Phone: (608)266-1340



Reporting a Fatality

- WC claim number, if known
- Deceased employee name, address, SSN, birth date, death date, injury date
- Dependents or contact information for next of kin
- Employer contact information
- Accident site and brief description
- Informant contact information

	For Divis	ion Use Only	
Contact/Call Date	Received I	by	
WC Claim Number	Deceased Employee Name		
Employee Address			
Social Security Number	Birth Date	Death Date	Injury Date
Dependents			
Employer Name		Telephone Number	
Emporor mano		Section Control of Control of Control	
Employer Mailing Address (Street or	DOD 0'- DI 7- 0	()	
Employer Mailing Address (Street or	r PO Box, City, State, Zip Cod	e)	
Accident Site			
Brief Accident Description			
Insurance Company Name			
Informant Name			
miormant Name			
Telephone Number ()		es.	

Original - Claims Monitoring Copy - Division Fatal Contact Staff

INITIAL FATALITY REPORT



Fatality: Denied Claim

- Denial letter
 - Reason for denial and appeal rights
- Death certificate or autopsy report
- Police report (if applicable)
- Attorney General reviews denials





Death Benefits

- Dependents
 - Spouse or minor child(ren), greater of:
 - o 4 x annual earnings (box #2 on WKC-13A1), or
 - 200 x average weekly wage (AWW) (box #5 on WKC-13A1)
 - Under age 27 on date of injury = Maximum wage
 - Benefits to minor children = restricted account





Death Benefits

- No spouse or children, but surviving parent(s): \$6,500 (may be more if parents prove dependence)
- For multiple children, time remaining until 18
- If children from multiple partners, consider prehearing
- If no dependents, pay into Work Injury Supplemental Benefit Fund (WISBF)
 - Five annual installments or lump sum minus interest credit: section 102.49(5)(b)



Death Benefits



- Funeral expense: Up to \$10,000
- To WISBF: \$20,000 (102.49(5)(a))





PPD or PTD Dies

- Death certificate or autopsy report (is death related to claim?)
- Up to date payment information (WKC-13)
 - Division will provide worksheet
 - Additional payments due? If so, to whom?
- Initiate monthly death benefit payments per
 - 102.47(1) → Permanent Total Disability
 - 102.47(2) → Permanent Partial Disability



Death Before PPD

- Final medical report via doctor's experience and review of records
- Any PPD owed is converted to death benefit per 102.47(2)
 - Accrued PPD to estate
 - Unaccrued PPD pays funeral expense, remainder to dependents as death benefit
 - If no dependents, remainder to WISBF



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