✓ CHECKLIST 6.2

Preliminary Process

Checklist for Filing a Workers' Compensation Claim

		Obtain necessary medical documentation		
			Hospital records	
			Office notes	
			Reports of diagnostic studies	
		Wi	tness statements	
☐ Obtain information from insurer file			tain information from insurer file	
			First Reports of Injury	
			Applicable DIA filings	
			Signed/recorded statements of employee	
			Independent medical exam reports	
			Wage schedules	
			Request for Production of Documents	
2.	Fili	ing the Claim		
☐ Initial considerations		ial considerations		
			At least five days of lost earnings	
			Less than twenty-one days of disability—paid from sixth day to date of return to work	
			Twenty-one days or over—paid from first day of disability	
			File claim after thirty days from date of injury or after receipt of denial from insurer	
☐ Procedure		cedure		
			Form 110	

Workers' Compensation Practice in Massachusetts

Copy to insurer by certified mail
Claim for benefits accompanied by supporting medical documentation
Claim for medical services accompanied by supporting medical documentation and notice of utilization review denial
Claim for Section 36 benefits accompanied by medical documentation and specific dollar amount claimed