New Jersey Benefit Status Letter - Medical Only

Helpful Hints:

• Adjust spacing for your letterhead logo and Address information
• This letter is prepared if the Claim Type (DN74) is M – Medical Only or B – Became Medical Only
• In the “TO:” section, this section should contain the injured workers first (DN44) and last name (DN43,) full address (DN46 and DN47,) city (DN48,) state (DN49,) and zip (DN50)
• Date of Injury is DN31
• **Do not print the worker's social security number (DN42) on this letter**
• Insurance Claim # is known as the Claim Administrator Claim # (DN15)
• Agency Claim # in Release 1 and Jurisdiction Claim Number in Release 3 is DN5
• Jurisdiction is NJ (New Jersey) (DN4)
• Name of Employer is DN18
• Employer’s Address is comprised of DN19, DN20, DN21, DN22 and DN23
• DN0095 Paid To Date/Reduced Earnings/Recoveries Code DN0095 for Release 1 or DN0216
Other Benefit type code DN0216 for Release 3
• The Benefit section will be inserted if there is a value of **350, 360 or 370** in DN95-
  This should be a textual description, not a code #
• Paid To Date/Reduced Earnings/Recoveries Amount is DN0096 in Release 1 and Other Benefit Type Amount DN0215 in Release 3.
• Allow for up to 25 OBTs (other benefit types)

New Jersey Benefit Status Letter – Indemnity

Helpful Hints:

• Adjust spacing for your letterhead logo and Address information
• In the “TO:” section, this section should contain the injured workers first (DN44) and last name (DN43,) full address (DN46 and DN47,) city (DN48,) state (DN49,) and zip (DN50)
• Date of Injury is DN31
• **Do not print the worker's social security number (DN42) on this letter**
• Insurance Claim # is known as the Claim Administrator Claim # (DN15)
• Agency Claim # in Release 1 and Jurisdiction Claim Number in Release 3 is DN5
• Jurisdiction is NJ (New Jersey) (DN4)
• In the “status of your workers' compensation claim” section: the claims administrator should check all the boxes that apply.
• Return to Work date is DN72
• Maximum Medical Improvement Status is DN70
• Permanent Impairment Percent is DN84
• Permanent Impairment Body Par is DN83 – this is the textual description
• Repeat the above two entries (to compose one line,) as many times as necessary in this letter, to indicate all impaired body parts
• Date of Death is DN57
• Indicate have or have not, as appropriate
• Name of Employer is DN18
• Employer’s Address is comprised of DN19, DN20, DN21, DN22 and DN23
• Weekly wage is DN62. Overwrite place holder with injured workers weekly wage.
• Indicate were or were not as appropriate, to whether overtime, lodging, uniforms, etc, were applicable to weekly wage.
• Weekly benefit rate is the TTD DN87 Payment/Adjustment Weekly Amount in Release 1 and
DN87 Net Weekly Amount in Release 3 (DN85 Payment/Adjustment Code in Release 1 and DN85 Benefit Type Code in Release 3=050)

- Benefit Description is DN85 Payment/Adjustment Code in Release 1 and DN85 Benefit Type Code in Release 3 or DN95. **This should be a textual description, not a code #.**

- For DN85 benefits –DN0086 Payment/Adjustment Paid to Date in Release 1 and DN0086 Benefit Type Amount Paid in Release 3, also report corresponding DN86 Payment Adjustment Paid to Date Release 1 and DN0086 Benefit Type Amount Paid in Release 3, DN88 Payment/Adjustment Start Date in Release 1 and DN0088 benefit Period Start Date in Release 3/DN89 Payment/Adjustment End Date in Release 1 and DN0089 Benefit Period Through Date in Release 3- From/Through Dates, and DN90 Payment/Adjustment Weeks Paid in Release 1 and DN0090 Benefit type Claim Weeks in Release 3/ DN91 Payment/Adjustment Days Paid in Release 1 and DN0091 Benefit Type Claim Days in Release 3 - # Weeks/# Days respectively

- For DN95 benefits - Paid To Date / Reduced Earnings / Recoveries Code in Release 1 and DN0216 Other Benefit Type Code in Release 3, also report corresponding DN96 - Paid to Date / Reduced Earnings / Recoveries Amount in Release 1 and DN215 Other Benefit Type Amount in Release 3, no from/through dates or #weeks/# days is required for this type of benefit.

- Allow for up to 26 indemnity and 25 OBTs (other benefit types)