

Getting the Benefits You Deserve

Everything You Need to Know About Your
Workers' Compensation Claim to Get **ALL** You Deserve

WORK INJURY CLAIM FORM

Failure to complete this form in its entirety may result in a delay in processing this claim.

FILING CLAIM FOR (check all that apply):

- ☐ Accidental Injury Only
- ☐ Injury With Disability
- ☐ Injury With Hospitalization
- ☐ Deceased - Date Deceased: _____

Accident Policy Number _____ **Short-Term Disability Policy Number** _____ **Hospital Indemnity Policy Number** _____ **Hospital Intensive Care Policy Number** _____ **Life Policy Number** _____ **Specified Health Event Policy Number** _____

Holder/Patient Information. If you are filing for disability, your doctor also complete and sign Section C.

Complete and sign Section D: Employer's Statement. If you are filing for disability, your doctor also complete and sign Section C.

PLUS: The **5** Biggest Myths of Workers' Comp Claims Explained
and The **7** Questions You **MUST** Ask a Workers' Comp Attorney...
(And the Answers to Look For) ...**BEFORE** You Hire Them

by Steven Cohen, Esq.

Getting the Benefits You Deserve

Everything you need to know about your workers compensation
claim to get what you deserve

**PLUS: The 5 Biggest Workers' Comp Claim Myths Explained and
The 7 Questions You MUST Ask A Workers' Comp Lawyer... Before You Hire Them**

By Steven Cohen, Esq.

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Your Special V.I.C. List Code: DSSWC0918

See page 29 for details

***PLEASE NOTE: Without knowing all of the facts and circumstances of your case a
lawyer cannot give you appropriate legal advice,
so I am not allowed to give legal advice in this report:***

*Even though I may know many of the arguments the big insurance companies are going to make in your
claim, I am not allowed to give legal advice in this report. I can offer suggestions and identify certain pitfalls
and traps, but please DO NOT take anything in this report to be legal advice unless you have agreed to hire
me, and I have agreed, in writing, to accept your case.*

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A Note From Steve Cohen

Dear Friend,

First, I want to thank and congratulate you for taking the time and initiative to read this report.

I can tell you from experience that most people who say they are confused and overwhelmed by their Workers' Compensation claim, and are desperate for help and direction, never do anything about it. And by doing nothing, they, and their families, suffer because of it. But by just reading this report... and arming yourself with all the information you need... you've already taken a huge step towards getting the benefits you deserve.

If you've been injured on the job, missed work and have mounting medical bills... I want you to know you are not alone.

According to the US Department of Labor, last year, more than 3 million people suffered a workplace injury... and almost 1 million of those involved injuries serious enough to cause a significant time loss from work, and in some cases, ongoing medical care."

That's a shocking number of injuries and Workers' Compensation claims filed... and a lot of what I call "Workers' Comp Confusion."

But the thing that truly shocks people is the number of Workers' Compensation claims that are rejected every year... simply because they weren't filed properly, or the injured person didn't know what their rights were!

It sounds unbelievable that this would happen, but I've seen this myself, firsthand.

In the 20 years of fighting for Workers' Compensation benefits for my clients from all over NY and NJ, I've found that a good portion of my time is spent correcting mistakes my clients have made, thinking they could do it without an attorney, or thinking they had no choice but to settle for whatever the insurance companies offered them... before coming to me to get them the benefits they deserve under the law.

And it's not just settling for less than they deserve that can be a problem for them. People who have had a claim rejected can encounter many other consequences as a result, including:

- Not being able to provide for their families
- Inability to work or find another job
- Mounting medical bills that are out of reach for the average worker
- Constant calls from bill collectors, and destruction of their credit rating
- Ongoing medical problems and no way to cover the expense
- A lifetime of pain from injuries that are not properly treated... or not treated at all
- Overlooking or destroying a potentially large third party case
- Jeopardizing rights to future benefits



That's an appalling amount of pain and suffering, along with a lot of time and money wasted. What most people don't understand is they could have saved all that trouble and expense if they just had all the facts—and knew what questions to ask—before filing their Workers' Compensation claim.

And that's why I wrote this report.

I know how incredibly confusing it can be trying to find and gather all the information you need that's necessary when filing a claim. Then juggling all that information, and trying to have it all make sense, while your employer, the insurance company and their lawyers are minimizing your injuries, refusing you full treatment or pressuring you to settle. All while you're trying to decide who has your best interests in mind and figuring out what is best for your unique situation... and for your family. And doing it all while suffering from an injury...

That's why it's more important than ever to understand the laws before you file a claim, and what to look for in a Workers' Compensation lawyer. Before your claim gets rejected... or you settle for far less than you deserve.

In this short, easy-to-read report, you'll find:

- Information on exactly what the Workers' Compensation Act is... why it was adopted by our legislature... and what your rights under the Act are...
- The differences between a Workers' Comp claim that gets rejected... and one that gets you everything you need to recover and provide for your family... and how to avoid the 9 common mistakes that lead to a claim rejection....
- Whether or not you really need a lawyer to help file your claim... and what to look for when choosing a Workers' Compensation attorney... and why even a general lawyer, with years and years of experience, might not be the best choice for your needs...
- And you'll get answers to the most important questions you should ask about your Workers' Comp claim...

You'll learn the truth about the 5 biggest myths of Workers' Compensation... This can mean the difference between getting everything you need to provide for your family while you are injured... or getting your claim rejected, and spending months and even years fighting to get the benefits you deserve...

What I've included in this report you most likely won't find on typical lawyer websites, on government information pages, or anywhere else on the Internet.

This is an honest, professional look at the information available and the rights you have under the law...

All this is taken from 20 years of protecting clients just like you... and hearing their most frequently asked questions, concerns and horror stories. Along with some hard-earned "inside" information: I spent 4 years working for insurance companies, defending them from paying Workers' Comp claims... that was until I decided that my true calling was helping injured workers get what they deserved, so I switched sides... But I left knowing every trick in their play book, and use it to my clients' advantage.

Being injured on the job is a very difficult situation to go through, and the decision to hire an attorney is a big one. I trust the information you find in this report will help you make the right decision, that it will bring you new hope and understanding... and help you finally get the benefits you deserve.

Sincerely,



Steven Cohen, Esq.

888.662.1290

Teaneck, Newark, Jersey City, Edison Area, Jersey City, East Rutherford, Bridgewater, Princeton, Woodcliff Lake and New York City

What People Are Saying About Steven Cohen, His Legal Assistant Annette and Their Team

"A man who changed my life and saved my home.

I can never thank you enough for what you have done for me.

I will always keep you in my prayers and in my heart.

Thank you, Mr. Cohen

My deepest gratitude."

-- *Loretta W, Tennessee*

"Annette, thank you so much.

Your hard work was way above and beyond the call of duty.

I'll never forget you."

-- *Mark S., New Jersey*

"Steven, thank you for all your assistance.

The money from my settlement allowed me to see a doctor and get the medication I needed. The pain in my legs is a thing of the past.

Right after I took care of myself, my sister became seriously ill with cancer, and was in and out of the hospital. She is out now but still needs my assistance. If it were not for your hard work, I may not have been healthy enough to help her.

Thanks so much."

-- *Sharon P., New Jersey*

"Steve –

Thank you so much for all your help and support over the past 5 years.

Thanks for making sure I received the proper medical care, and in a timely manner.

I could not have been blessed with a more caring and efficient lawyer — and most importantly, one who believes in me.

Thank you for all your continued support. It has been a great pleasure and experience working with you."

-- *Gladys G., New Jersey*

"Dear Annette

Thank you for answering my questions and for always keeping on top of everything pertaining to my case!

You are truly an asset to the practice.

May the new year bring you good health."

-- *Rose M., New York*

The Davis, Saperstein & Salomon, P.C. Client Promise

When you suddenly find yourself in a situation where you need an attorney, it can be one of the most stressful times in your life. There are so many things you have to worry about... but one thing you should not wonder about is if the person you just entrusted with your case and your future has your best interests at heart.

That's why at Davis, Saperstein & Salomon, P.C. we promise you, and all of our clients, the absolute best quality legal service we can provide, with the same personal attention we would give our closest family and friends.

We strongly believe that our valued Workers' Compensation clients are entitled to not only the rights you are guaranteed under the law, but also rights we believe you are entitled to from your lawyer and law firm. So we put them in writing and when you hire Davis, Saperstein & Salomon, P.C. to represent you, you can be rest assured that:

You are entitled to be treated with courtesy and consideration at all times by your lawyer, the other lawyers and personnel in your lawyer's office.

You are entitled to an attorney capable of handling your legal matter competently and diligently, in accordance with the highest standards of the profession.

If you are not satisfied with how your matter is being handled, you have the right to withdraw from the attorney-client relationship at any time (court approval may be required in some matters and your attorney may have a claim against you for the value of services rendered to you up to the point of discharge).

You are entitled to your lawyer's independent professional judgment and undivided loyalty, uncompromised by conflicts of interest.

You are entitled to be charged a reasonable fee and to have your lawyer explain at the outset how the fee will be determined by the court.

You are entitled to have your questions and concerns addressed in a prompt manner and to have your telephone calls returned promptly.

You are entitled to be kept informed as to the status of your matter and to request and receive copies of papers.

You are entitled to sufficient information to allow you to participate meaningfully in the development of your matter.

You are entitled to have your legitimate objectives respected by your attorney, including whether or not to settle your matter (court approval of a settlement is required in all workers' compensation matters).

You have the right to privacy in your dealings with your lawyer and to have your secrets and confidences preserved to the extent permitted by law.

You are entitled to have your attorney conduct himself or herself ethically in accordance with the Code of Professional Responsibility. You may not be refused representation on the basis of race, creed, color, religion, sex, sexual orientation, age, national origin or disability.

Arthur's Story

During my twenty years of practicing Workers' Compensation law, I've heard many, many stories of "Workers' Comp Confusion" and a myriad of reasons why my clients were so anxious to get to a settlement.

Their reasons range from shame (they are embarrassed about having had an accident at work), to personal (they feel they are being taken advantage of by a company they worked hard for), to professional (they want to get the treatment they need so they can get back to work).

Whatever their personal reasons, my clients all have two things in common: They desperately want to get their Workers' Compensation claim handled so they can get their full benefits and get on with their lives. And they all, in one way or another, remind me of my "typical" client... someone I'll call "Arthur," whose story is taken from the many stories and comments I've heard throughout the years. "His" personal journey is one I'm reminded of every time a new client sits across from me...

My accident couldn't have happened at a worse time. Things had been slow at work, and money was really tight. I was trying to pick up extra shifts when I injured my back. Since a good part of my job required me to carry boxes and equipment in and out of a truck all day, I wasn't going to be able to work for a while. And with bills already piling up, that made my wife panic...

On top of losing my income, the doctor I went to told me I'd have to go through regular physical therapy to treat my injury, and put me on pain meds. There was no way I'd be able to pay for all that... I could deal with the pain, so I wasn't concerned about the meds, but I was afraid that if I didn't go through with the physical therapy he'd ordered, I'd never get back to work.

And I wasn't about to start looking for a new job in my late 50's... not that anyone would be beating down my door to hire a 56-year-old with a bad back.

One of my co-workers suggested I file for workers' compensation to help pay for the medical bills (and other bills), that were piling up on my dining room table. When I asked my supervisor at work about it, he told me not to bother. He said I wasn't eligible because the accident wasn't the company's fault. So they didn't have to pay. He also hinted (not too subtly), that if I did file, the company would be sued and my chance for ever coming back to work there would be zero. Even though I'd given them 11 years of loyal service without a single problem. I felt like, in addition to the pain in my back, I'd just gotten kicked in the gut.

Every time the phone rang I got a knot in the pit of my stomach, knowing the call could be from another bill collector. Things were so bad it was getting so I couldn't face my wife anymore. She was getting more and more anxious about the bills, and was trying hard to be strong, keep up a happy face, and not cause me more stress... but the stress levels in my house were sky high. And the silence during dinner was deafening.

I was confused, angry and felt helpless. And I didn't know where to turn. Then one of my physical therapists suggested I call an attorney.

I never thought about calling a lawyer. Not just because my supervisor said I could be fired if I sued the company, but mostly because I didn't have money for groceries, let alone an expensive lawyer. But she gave me the number and I called.

I had no idea that there were attorneys who only handled workers' compensation cases. Or that they only got paid based on the settlement they got for you. For the first time, after our initial meeting, I felt like I actually had a chance to make it through this.

Having a skilled and knowledgeable lawyer representing me took my mind off of my case and allowed me to concentrate on getting better. My physical therapy got paid, and I got my workers' comp checks to help pay my bills.

Looking back, I realize I should have called sooner...and not relied on what my boss told me. Turns out my supervisor was wrong, I was entitled to those benefits even though my injury wasn't the company's fault...and there was no need to sue anybody to get them.

Now I'm back to work and slowly but surely got caught up financially. My injury is healed as best it can be, and there's no animosity at work. And no more tension at home either.

Although I will never be 100% the same again, I got my health back, I got my job back and I got my life back.

-- "Arthur R"

What is Workers' Compensation?

Before we get into all the important stuff you need to know (and watch out for...) when filing your Workers' Compensation claim, it's a good idea to understand exactly what Workers' Compensation is, and why it's so important.

The simple explanation is this: A little over 100 years ago, Governor Woodrow Wilson signed into law the New Jersey Workers' Compensation Act. It gives workers benefits for work injuries, regardless of fault. The Act provides for the payment of an injured worker's medical bills, money while the worker is missing time from work due to their injuries, and possibly an award of money if the injuries create a permanent problem.

The "legalese" explanation is this: The legislative intent of the New Jersey Workers' Compensation Act is to make employers responsible for the injuries of their employees who were injured by accident in the furtherance of the employer's business, regardless of fault. (Translation: If you got hurt at work doing something within your normal work duties, or doing something your employer asked you to do for the business, then your employer is responsible for your injury even if it is your own fault!)

So what the State Legislature did was create the Act as a remedy to provide workers injured on the job with payment of their medical bills, a temporary paycheck if their injuries keep them from working and finally, provide them with an award of money if their injuries result in a permanent physical or emotional problem. The Act also gives benefits to a surviving husband or wife, and their minor children, if a worker is killed while working.

It's important to know: Workers' compensation is a "no fault" system. That means you don't have to show your employer did anything wrong to have caused your injury. You simply have to prove you were injured while working as the result of an accident.

Prior to the Act, in order to recover lost wages and medical expenses, an injured worker had to prove that their employer was negligent, and that negligence caused the injury. In fact, in some states, if a worker did anything that contributed to his injury he or she would have been barred from making a claim because of "contributory negligence."

That meant many injured workers were left without any compensation and unable to work.

Fortunately that is no longer the case, and the legislature has made it much easier to get benefits and compensation.

N.J.S.A. 34:15-39.1, states: "It shall be unlawful for any employer. . .to discharge or in any other manner discriminate against an employee. . .because such employee has claimed or attempted to claim workmen's compensation benefits from such employer. . ."



What Are the Solutions and Options Available to You?

If you are injured or become ill as a result of your job there are several options available to you. And not all of them are equally beneficial...

Option 1: Don't file a Workers' Compensation claim, pay for all your medical expenses yourself, "suck it up" and deal with losing your wages for whatever time you are out of work (or take whatever "assistance" your employer and their insurance company offer), then return to work whenever you are able.

Surprisingly, many people choose this option. They see it as being "loyal" to their employer, and not causing them any problems or legal issues. The reality is that is not true at all and they are simply harming themselves unnecessarily.

Option 2: File your claim yourself, and hope that it gets approved and your employer and their insurance company make you a fair and reasonable offer to cover all your expenses until you are healed and able to work again.

I call this the "Lottery Ticket Option" because you have as much chance of getting all your benefits as you do of hitting the lottery. Sure it happens once in a while (usually to someone else), but the odds of it happening to you are extremely slim...

Option 3: Hire an experienced Workers' Compensation attorney to file for you and fight for your rights. Notice I said "experienced Workers' Compensation attorney" not just any attorney. There is a reason for that (and I'll explain it fully on page 18), but for now know that Workers' Compensation lawyers study the law very carefully, understand the ins and outs of filing claims, and have in-depth knowledge of how the insurance companies work. If necessary, they'll stand up for you in a workers' compensation court, prove your case and make the insurance company pay you what you deserve.



The 9 Most Common Mistakes Made When Claiming Workers' Compensation

Ensuring your Workers' Comp claim is accepted and you get all the benefits you are entitled to doesn't start when you sit down to fill out your claim form. No, it happens long before that. Unfortunately, most people have no idea what they need to do to make sure they have all the proper information and have taken all the necessary steps to get their claim in order.

That's why so many claims get rejected every year... not because they are not entitled to Workers' Compensation, but because they made some mistakes along the way. Mistakes that are completely avoidable... if you know what they are, and what to watch out for.

That's why I've compiled this list of the **9 Most Common Mistakes Made When Claiming Workers' Compensation**. Read it carefully, and make sure you don't trip over any of these potential landmines when preparing your claim...

Common Mistake 1: Failing To Properly Report Your Accident

Hands down, the most important thing to do if you are injured on the job is to report the injury to your employer. Many employers have an accident policy in place which can be referenced in your employee manual. If this is the case with your employer then it is incredibly important for you to follow those guidelines set out in the manual. If there is no written accident reporting policy then I find that the best thing to do is to let everyone know about your injury... and that would include co-workers, supervisors, and/or anyone in the human resources department that your employer may have.

Why is that so important? Many employers and insurance companies tell injured employees that they cannot file the claim because they were not notified of the accident within time. Some employers often tell injured employees that they had to have notice within 24 hours of the accident, and time has "expired" on making a claim. **This is not the law.**

The law generally requires that an injured employee notify the employer of the work injury within 30 days of the accident. But that period can be expanded to 90 days under certain circumstances. There are, however, exceptions to this rule. Specifically, and most commonly, if the employer, or an agent or representative, had actual knowledge of the accident (say for example, they were present when the injury happened, or an ambulance showed up at the jobsite to take you to the hospital), then the employer is also deemed to have notice of the injury, whether it was in writing or not. It is for this reason that it is so important to report to everyone where you work that you were injured by accident. If your accident was not witnessed by any coworkers or other individuals, I would urge you to immediately report your injury, preferably in writing, to your employer.

There are other exceptions which may apply to your specific case as well. That's why I recommend if your claim has been denied by the insurance company or your employer for failure to report the claim within the required period of time, you contact an attorney immediately to determine if the appropriate time limits have been applied. Or to determine if your claim meets one of the exceptions.

Common Mistake 2: Failing to Give a Full and Accurate History to Medical Providers

I cannot stress this enough: If you fail to tell the medical providers where you are hurt and how you were hurt, you could not only be harming yourself physically, but legally, as well. We all know that it is very important to advise the medical providers of all our complaints so that the doctors can give us the proper treatment... but it is equally important to your claim for benefits as well.

When the insurance company is investigating a claim they may take statements from the injured party and witnesses, but they may also inspect the medical records. They are looking to see what the injured worker told the doctors and nurses as to how they were hurt and what parts of their body was injured.

For this reason, when you discuss your accident and injuries with any medical provider, **be clear and detailed** when discussing the nature of your injuries and how they occurred. And always, always, always identify where you were hurt and if there was anything unusual that caused your injuries.

When an injured employee comes into my office and the insurance company has either denied their claim completely or said they will not provide medical treatment to a specific body part, one of the biggest hurdles I find is that the accident or injury was not reported in the medical records until several weeks or months after the initial date of injury. Insurance companies scrutinize these records and if it is not in the medical records they have a difficult time compensating the injured employee.

Most importantly, if it is necessary for your case to go to a hearing the medical records are one of the most compelling pieces of testimony that will be entered in at the hearing. When being evaluated by the Deputy Commissioner, they are given greater weight as evidence, because they are written by a third-party that has no stake in the claim. Also, it is a long established principle that people are most honest when they are reporting their physical complaints to physicians because they want to get better and the physician needs all the information that he can get to make a proper diagnosis. Remember, this practice is recommended not only for your first visit or with just the emergency room staff - continue to repeat this information for every appointment you have, with every medical professional.

Common Mistake 3: Failure to File a Formal Claim Petition

In the State of New Jersey there are certain time limitations which govern when an injured employee can pursue a workers' compensation claim. In order to be clear, I am not talking about giving notice to your employer of the accident as I mentioned in Common Mistake 1. What I am talking about here is the actual pursuit of compensation that you are entitled to under the New Jersey Workers' Compensation Act. That has to be done within a certain amount of time after your injury occurs.

In order to help protect your right to compensation **you need to file an Employee Claim Petition with the NJ Division of Workers' Compensation.** (There is a sample form on page 25.) If you fail to file a Claim Petition within the appropriate time period, then you may lose your rights to further benefits. The difficulty is, the time limit to file a Claim Petition is different for different injured employees depending upon various circumstances because some injuries are discovered years after exposure to a harmful substance.

You may have heard that you have two years to pursue workers' compensation benefits in the State of New Jersey. While this may be true in most instances, it is not true under all circumstances. If workers' compensation benefits have already been provided, then the period to file a claim petition is two years from when benefits were last given to you for your claim.

The important rule to remember is that you must file an Employee Claim Petition within two years of your accident or the last benefit paid to you by the workers' compensation insurer, whichever is later.

Common Mistake 4: Failure to Comply with Medical Treatment

In the State of New Jersey, the workers' compensation insurance company or employer generally has the right to direct the medical treatment of the injured worker. That means they get to tell your medical provider what treatments you should and shouldn't receive.

If you have been injured, and you are out of work receiving weekly benefits from a workers' compensation insurance company, it is very important that you comply with the recommendations of the treating physician—especially when it comes to attending medical appointments and therapies.

If you fail to attend medical appointments, you may jeopardize your benefits.

Medical appointments are appointments for any type of treatment that is reasonably necessary to effect a cure, give relief, or tend to lessen the period of disability. If an injured employee willfully fails to attend medical appointments that have been scheduled by the insurance company, employer, or the physician, then the insurance company or the employer will request that your benefits be terminated and your case dismissed.

And if your benefits are suspended it could be a very lengthy process to get them reinstated. It could take months, or even years.

Once again the rule to remember is: Comply with medical treatment. Not only is it in your best interest physically, it keeps the insurance company from having a reason to terminate your benefits.

Common Mistake 5: Failing to Return to Work When Authorized

When an authorized doctor releases you to "full duty" work, your temporary total disability benefits will be stopped by the Workers' Compensation carrier. At this time it's critical to immediately call your employer to notify them that you have been given a "return to work full duty" and that you intend to report for work immediately.

If you are returned to "temporary light duty" work, you should make sure you clearly know exactly what temporary restrictions the doctor has placed on your return to work. The restrictions should be in writing and you should ask the doctor for a copy of whatever temporary restrictions have been placed on you.

Once it is clear that you have a temporary light duty restriction, you should immediately ask your employer if temporary light duty work is available. If temporary light duty work is unavailable for you, then temporary total disability benefits through the compensation carrier (insurance company), must continue until either you can resume full duty work or the light duty restriction is lifted or becomes a "permanent" light duty restriction.

Problems frequently arise when you are given a "return to work" by the authorized doctor, but you don't feel capable of returning to work just yet.

This is a common problem, and if this happens to you, you should first attempt to discuss the issue with the authorized doctor. If this does not resolve the problem, I would urge you to immediately discuss the issue with an experienced Workers' Compensation lawyer as to how to best approach this issue.

Under no circumstances would I recommend that if you are released to work and you do not feel you are capable of

the work, that you just don't go to work. If you do not show up for work in this situation, your employer may simply terminate your employment because you have "abandoned your job".

If the employer fails to provide a job description, or if the doctor fails to approve the job description and the insurance company or employer refuse to provide weekly benefits, then contact an attorney immediately.

Common Mistake 6: Failing to Request a Second Opinion

Although the insurance adjuster may be correct in telling you that they have the right to tell you where to treat (see Common Mistake 4), they cannot keep you from having a second opinion.

If you have been released by the authorized treating physician, yet you feel you require further medical care, I would urge you to demand a second opinion from the insurance company.

It's important to note: The insurance company or the employer is not going to freely allow this, so it may be necessary for you to obtain legal representation to be successful in this endeavor. **But remember:** You are not simply required to stay hurt. You have options.

Common Mistake 7: Accepting a "Voluntary Tender" Without Pursuing a Formal Claim Petition

Occasionally, Workers' Compensation carriers will make what is called a "voluntary tender," which is essentially an offer of money to an injured worker as a "settlement" of his or her case.

This may be done whether you are represented by an attorney or not. Generally speaking, any voluntary tender of money made by the insurance company does not accurately depict the true value of the case.

However, all too often an injured worker never discusses the voluntary offer with an attorney and merely assumes that "this is all that I am entitled to receive."

If you do not have an attorney and you are given a voluntary offer of money by the insurance company after your discharge from medical treatment, I would urge you to discuss your rights with an experienced Workers' Compensation attorney. They can often get you more money than was tendered to you by the insurance company.

Common Mistake 8: Not Hiring a Lawyer... or Hiring the Wrong Lawyer

You may have noticed this came up several times when discussing other common mistakes... having a lawyer at your side during this time is important. While it seems that most people should know how important it is to seek advice when they are injured, statistics show that many people just don't.

Here are the four main reasons why people don't hire a lawyer immediately after an injury:

1. They don't know if they really need a lawyer, so they are hesitant to talk to one.
2. They don't know a lawyer personally, so they don't bother to look for one.
3. They aren't sure if they can trust a lawyer, so they don't want to use one.
4. They believe the insurance companies when they say that they will end up with less money if they hire an attorney. (By the way, that is absolutely NOT true.)

I don't have to tell you, not a single one of these reasons is a good one. In spite of all the lawyer jokes you may have heard, there are many honest, hard working, and ethical lawyers who can help you deal with a workers' compensation claim. While it is true that a lawyer will usually get a portion of the money you collect from the insurance company, it is also true that a good lawyer can dramatically increase your chances of getting all the benefits you are entitled to.

Why do you need an attorney in a workers' compensation claim? Immediately after being injured in an accident, you are thrown into an adversarial legal system. In other words, the insurance company or the employer has a team of adjusters, investigators, and attorneys who are all working against you, seeking to pay you as little as possible.... and to get you back to work as quickly as possible... whether you are able to or not.

But not every situation requires a lawyer. If you have been involved in a work accident involving small or minimal injuries, you probably don't even need a lawyer.

If you didn't contact a lawyer immediately (as we have recommended), time has passed, you only had a couple of doctor visits and you only lost a few days from work, then you probably **don't** need to hire a lawyer. But you certainly should at least contact a lawyer and get some free advice.

(Note: Many law firms won't even talk to people in this situation – as soon as they determine there's no "good case" for them, they just want to get you off the phone quickly and move on. Our law firm isn't like that. If you call us with a problem or a question, even if we know we can't represent you, we'll still try to answer your questions or we'll refer you to another lawyer or to a government agency that can help you.)

The bottom line is... considering the legalities and complexities of the established system for compensating the injured, hiring an attorney is usually necessary to "level the playing field," and to ensure that you receive maximum benefits for your work injury.

Common Mistake 9: Not Filing Because Your Injuries Were Caused by Someone Other Than A Co-Worker or Employer

Some people are told that if their injury wasn't caused by another employee, or directly by their employer, that they are not able to file a Workers' Comp claim. That is not so. It's just a different ball game.

This is when we would open up a "Third Party Case" for you and we file a lawsuit against the wrongdoer for your pain and suffering, any future wage losses and we even fight to get back the benefits already paid by your insurance carrier. This type of case is handled on a contingency fee, meaning you will owe us nothing if we do not win a settlement for you.

What are the types of third party cases? There are several. Sometimes we can file a suit against a general contractor on the worksite, or if you were injured in a motor vehicle accident, we can file against the other driver. Another type of third party case would be if you fell on another person's property, and we can prove they were negligent.

The 5 Biggest Myths of Workers' Compensation

Besides the 9 mistakes you just read, there are some common misconceptions when it comes to Workers' Compensation, the benefits, and what you are entitled to. Just as those mistakes can hurt your chances of getting your full benefits, believing any of these five myths can do just as much damage.

Myth 1: My employer will file all necessary forms to protect my claim

False. Your employer is required to file a First Report of Injury or Illness form with the Division of Workers' Compensation, but this form does not protect your claim. If you wish to go forward with your case, you must file a Claim Petition with the Division of Worker' Compensation.

Myth 2: Workers' Compensation claims require that I sue my employer

False. You file a claim (not a lawsuit), with the Division of Workers' Compensation, which is a state government agency that oversees workers' compensation claims in New Jersey. Workers' compensation is an administrative hearing process and is not civil litigation.

The Division of Worker's Compensation is the judicial body that hears motions and hearing requests through appointed judges. There is no right to a jury trial in a workers' compensation claim.

Most of the time an injured worker is really filing the claim against the employer's insurance company, unless the employer is uninsured or self insured.

Myth 3: I can collect for pain and suffering

False. The purpose of the Workers' Compensation Act is to compensate the employee for lost wages, medical treatment and diminished future earning capacity. The Act does not allow for compensation for pain and suffering.

Myth 4: My employer says that since the accident was my fault I can't pursue a claim

False. Workers' Compensation is a no fault system. The accident can be 100% your fault and you still are entitled to full benefits under the New Jersey Workers' Compensation Act.

Myth 5: I can't collect because I was working "off the books"

False. Working off the books is irrelevant. Your employer should have known better. You have an absolute right to Workers' Compensation benefits as long as the injury happened while working.

The 7 Most Important Questions to Ask Your Workers' Compensation Lawyer Before Hiring Them... And the Answers to Look For

When deciding on which Workers' Compensation lawyer to use, most people do a quick Google search, and call the firm listed at the top. But choosing the right lawyer for you requires some research, some diligence, and asking the right questions of the person in the suit and tie sitting across from you.

Here are the 7 crucial questions you should ask of anyone you are considering to help protect your rights. Taking the time to ask can mean the difference between getting all the benefits you deserve, having your medical issues handled properly, your bills paid for, and getting back to work... or having your claim rejected and wondering how you're going to support your family.

1. How much experience does your firm have in representing injured employees?

There are a lot of hidden landmines you can step on when filing your claim, and a lot of tactics insurance companies will use to keep your payouts as low as possible. You want someone by your side who has been in the trenches again and again, and knows what to look for... and look out for. Our firm has over 30 years of experience in protecting workers and their families.

2. Have you ever been sued for legal malpractice?

I am proud to say that I have never been sued for legal malpractice, nor have I ever had to pay out a settlement claim for legal malpractice.

3. Are you covered by a legal malpractice insurance policy?

We have several million dollars in coverage to protect our clients.

4. Have you ever been disciplined by the State Bar of New Jersey?

New Jersey has a strict code of ethics that all lawyers must follow and in more than 20 years of practice no client of mine has ever filed an ethics complaint against me.

5. Do you have licensed adjusters who will assist the lawyers in the day-to-day handling of my case?

Licensed adjusters have seen the way the insurance companies work, from the inside. They know exactly how to diminish your claim because that used to be their job. Law firms hire them to help fend this off. That said, our firm does not employ any adjuster to resolve your claim, and it's something we are truly proud of.

Adjusters never went to law school and are not licensed by the State of New Jersey.

All of my clients' cases get the benefit of all my years of experience in settling cases or from personally trying them before a compensation judge.

6. Who at your office (both attorneys and non-attorneys) will be communicating with the insurance company on my case?

Knowing exactly who is going to bat for you is vital when choosing the right attorney. Make sure you know who is going to be your advocate. I know what buttons to push with the insurance companies and I will personally negotiate your case.

7. If I am not happy with your firm the first 30 days after I hire you, can I take my case and owe you no fee?

It is important to make sure you are satisfied with your law firm, and to know quickly that they are working on your case, since claims are time sensitive. At Davis, Saperstein & Salomon P.C. we offer a 30 day client satisfaction guarantee. If you are not satisfied with how we treat you and your case in those first 30 days, you can take your file and leave with no questions asked and no costs or fees.



Appendix 1: A Glossary of Common and Confusing Workers' Compensation Terms

By now you have a pretty good grasp on what Workers' Compensation means in the State of New Jersey, the protection it provides and how to file your claim.

To help you through the process, you should have a basic understanding of certain terms that will be frequently used during your workers' compensation claim. Here is a simplified, plain-English description of key words you will hear a lot, once your claim is filed:

Accepted Claim: A claim in which the insurance company accepts or agrees that your injury or illness will be covered by workers' compensation.

Medical Only Claim: A claim in which the insurance company or employer accepts or agrees that you have suffered an injury. However, they believe you are still capable of working and therefore they are only going to pay for your medical treatment.

Denied Claim: A claim in which the insurance company or employer does not accept or believe that they have a responsibility to provide compensation for your injuries.

Average Weekly Wage: The average weekly, or what's commonly called the Gross Weekly Wage, is generally calculated based upon the employee's average wage over the six month period immediately prior to the date of the accident. The average weekly wage includes all overtime paid during that six month period. For example, for accidents which occur in 2008, the state minimum temporary disability rate is \$198 per week, and the maximum temporary disability rate is \$742 per week. Each year it changes and for 2012 it is \$810.00 per week.

Compensation Rate: The compensation rate is 70% up to a maximum of the injured employee's average weekly wage subject to a maximum or minimum for the year of the injury.

Temporary Total Disability: Weekly disability compensation provided to the injured employee for his/her inability to work. The disability payments are provided at the employee's compensation rate.

Permanent Partial Disability Rating: A percentage amount assigned to a body part intended to determine the number of weeks the injured worker is entitled to compensation for their injury. The permanent partial disability rating is typically estimated by medical experts, such as doctors, and either agreed upon by way of settlement between the employer's insurance company and the injured worker or set by a Judge of the Workers' Compensation Court after a non-jury trial.

Maximal Medical Improvement (MMI): The point in time when an injured employee's condition will not improve or change with further medical treatment.

Maximum medical improvement is determined by the authorized treating physician. Usually when the injured employee reaches maximum medical improvement he/she is released from doctor's care.

Modified or Light-Duty Work: Temporary employment offered by the employer to the injured employee while they are on restrictive duty by the treating physician.

Suitable Employment: Once the employee reaches MMI, the law requires that the injured employee be returned to suitable employment. Suitable employment is permanent employment available in the competitive marketplace, within the employee's physical, education, and vocational abilities. The employment also must be comparable in wages as to the injured's pre-injury position.

Vocational Rehabilitation: If you are permanently unable to do your usual job, and your employer does not offer other suitable employment, you will qualify for this benefit. It may include job placement counseling, retraining and a vocational rehabilitation maintenance allowance.



It is my job to protect you from harming your claim and to protect your future rights.

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WORKERS COMPENSATION – FIRST REPORT OF INJURY OR ILLNESS

EMPLOYER (NAME & ADDRESS INCL ZIP)		CARRIER/ADMINISTRATOR CLAIM NUMBER	OSHA LOG NUMBER	REPORT PURPOSE CODE	
		JURISDICTION		JURISDICTION CLAIM NUMBER	
		INSURED REPORT NUMBER			
		EMPLOYER'S LOCATION ADDRESS (IF DIFFERENT)		LOCATION #	
INDUSTRY CODE	EMPLOYER FEIN			PHONE #	
CARRIER/CLAIMS ADMINISTRATOR					
CARRIER (NAME, ADDRESS, & PHONE #)		POLICY PERIOD	CLAIMS ADMINISTRATOR (NAME, ADDRESS & PHONE NO)		
		TO			
		CHECK IF APPROPRIATE <input type="checkbox"/> SELF INSURANCE			
CARRIER FEIN	POLICY/SELF-INSURED NUMBER		ADMINISTRATOR FEIN		
AGENT NAME & CODE NUMBER					
EMPLOYEE/WAGE					
NAME (LAST, FIRST, MIDDLE)		DATE OF BIRTH	SOCIAL SECURITY NUMBER	DATE HIRED	STATE OF HIRE
ADDRESS (INCL ZIP)		SEX	MARITAL STATUS	OCCUPATION/JOB TITLE	
		<input type="checkbox"/> M MALE <input type="checkbox"/> F FEMALE <input type="checkbox"/> U UNKNOWN	<input type="checkbox"/> U UNMARRIED SINGLE/DIVORCED <input type="checkbox"/> M MARRIED <input type="checkbox"/> S SEPARATED <input type="checkbox"/> K UNKNOWN	EMPLOYMENT STATUS	
PHONE		# OF DEPENDENTS	NCCI CLASS CODE		
RATE PER:	DAY WEEK	MONTH OTHER:	DAYS WORKED/WEEK	FULL PAY FOR DAY OF INJURY? DID SALARY CONTINUE?	YES NO YES NO
OCCURRENCE/TREATMENT					
TIME EMPLOYEE BEGAN WORK	AM PM	DATE OF INJURY/ILLNESS	TIME OF OCCURRENCE () CANNOT BE DETERMINED	AM PM	LAST WORK DATE
					DATE EMPLOYER NOTIFIED
CONTACT NAME/PHONE NUMBER		TYPE OF INJURY/ILLNESS		PART OF BODY AFFECTED	
DID INJURY/ILLNESS/EXPOSURE OCCUR ON EMPLOYER'S PREMISES?		TYPE OF INJURY/ILLNESS CODE		PART OF BODY AFFECTED CODE	
<input type="checkbox"/> YES <input type="checkbox"/> NO					
DEPARTMENT OR LOCATION WHERE ACCIDENT OR ILLNESS EXPOSURE OCCURRED			ALL EQUIPMENT, MATERIALS, OR CHEMICALS EMPLOYEE WAS USING WHEN ACCIDENT OR ILLNESS EXPOSURE OCCURRED		
SPECIFIC ACTIVITY THE EMPLOYEE WAS ENGAGED IN WHEN THE ACCIDENT OR ILLNESS EXPOSURE OCCURRED			WORK PROCESS THE EMPLOYEE WAS ENGAGED IN WHEN ACCIDENT OR ILLNESS EXPOSURE OCCURRED		
HOW INJURY OR ILLNESS/ABNORMAL HEALTH CONDITION OCCURRED. DESCRIBE THE SEQUENCE OF EVENTS AND INCLUDE ANY OBJECTS OR SUBSTANCES THAT DIRECTLY INJURED THE EMPLOYEE OR MADE THE EMPLOYEE ILL					
					CAUSE OF INJURY CODE
DATE RETURN(ED) TO WORK	IF FATAL, GIVE DATE OF DEATH	WERE SAFEGUARDS OR SAFETY EQUIPMENT PROVIDED?		YES NO	YES NO
		WERE THEY USED?		YES NO	YES NO
PHYSICIAN/HEALTH CARE PROVIDER (NAME & ADDRESS)		HOSPITAL OR OFF SITE TREATMENT (NAME & ADDRESS)		INITIAL TREATMENT	
				0 NO MEDICAL TREATMENT	
				1 MINOR: BY EMPLOYER	
				2 MINOR CLINIC/HOSP	
				3 EMERGENCY CARE	
				4 HOSPITALIZED > 24 HOURS	
				5 FUTURE MAJOR MEDICAL/ LOST TIME ANTICIPATED	
OTHER					
WITNESSES (NAME & PHONE #)					
DATE ADMINISTRATOR NOTIFIED	DATE PREPARED	PREPARER'S NAME & TITLE			PHONE NUMBER

FORM IA-1(r 1-1-02)

SEE BACK FOR IMPORTANT INFORMATION

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EMPLOYER'S INSTRUCTIONS

DO NOT ENTER DATA IN SHADED FIELDS

DATES:

Enter all dates in MM/DD/YY format.

INDUSTRY CODE:

This is the code which represents the nature of the employer's business, which is contained in the Standard Industrial Classification Manual or the North American Industry Classification System, published by the Federal Office of Management and Budget.

CARRIER:

The licensed business entity issuing a contract of insurance and assuming financial responsibility on behalf of the employer of the claimant.

CLAIMS ADMINISTRATOR:

Enter the name of the carrier, third party administrator, state fund, or self-insured responsible for administering the claim.

AGENT NAME & CODE NUMBER:

Enter the name of your insurance agent and his/her code number if known. This information can be found on your insurance policy.

OCCUPATION/JOB TITLE:

This is the primary occupation of the claimant at the time of the accident or exposure.

EMPLOYMENT STATUS:

Indicate the employee's work status. The valid choices are:

Full-Time	On Strike	Unknown	Volunteer
Part-Time	Disabled	Apprenticeship Full-Time	Seasonal
Not Employed	Retired	Apprenticeship Part-Time	Piece Worker

DATE DISABILITY BEGAN:

The first day on which the claimant originally lost time from work due to the occupation injury or disease or as otherwise designated by statute.

CONTACT NAME/PHONE NUMBER:

Enter the name of the individual at the employer's premises to be contacted for additional information.

TYPE OF INJURY/ILLNESS:

Briefly describe the nature of the injury or illness, (eg. Lacerations to the forearm).

PART OF BODY AFFECTED:

Indicate the part of body affected by the injury/illness, (eg. Right forearm, lower back).

DEPARTMENT OR LOCATION WHERE ACCIDENT OR ILLNESS EXPOSURE OCCURRED:

(eg. Maintenance Department or Client's office at 452 Monroe St., Washington, DC 26210)

If the accident or illness exposure did not occur on the employer's premises, enter address or location. Be specific.

EMPLOYER'S INSTRUCTIONS – cont'd

ALL EQUIPMENT, MATERIAL OR CHEMICALS EMPLOYEE WAS USING WHEN ACCIDENT OR ILLNESS EXPOSURE OCCURRED:

(eg. Acetylene cutting torch, metal plate)

List all of the equipment, materials, and/or chemicals the employee was using, applying, handling or operating when the injury or illness occurred. Be specific, for example: decorator's scaffolding, electric sander, paintbrush, and paint.

Enter "NA" for not applicable if no equipment, materials, or chemicals were being used. NOTE: The items listed do not have to be directly involved in the employee's injury or illness.

SPECIFIC ACTIVITY THE EMPLOYEE WAS ENGAGED IN WHEN THE ACCIDENT OR ILLNESS EXPOSURE OCCURRED:

(eg. Cutting metal plate for flooring)

Describe the specific activity the employee was engaged in when the accident or illness exposure occurred, such as sanding ceiling woodwork in preparation for painting.

WORK PROCESS THE EMPLOYEE WAS ENGAGED IN WHEN ACCIDENT OR ILLNESS EXPOSURE OCCURRED:

Describe the work process the employee was engaged in when the accident or illness exposure occurred, such as building maintenance. Enter "NA" for not applicable if employee was not engaged in a work process (eg. walking along a hallway).

HOW INJURY OR ILLNESS/ABNORMAL HEALTH CONDITION OCCURRED. DESCRIBE THE SEQUENCE OF EVENTS AND INCLUDE ANY OBJECTS OR SUBSTANCES THAT DIRECTLY INJURED THE EMPLOYEE OR MADE THE EMPLOYEE ILL:

(Worker stepped back to inspect work and slipped on some scrap metal. As worker fell, worker brushed against the hot metal.)

Describe how the injury or illness/abnormal health condition occurred. Include the sequence of events and name any objects or substance that directly injured the employee or made the employee ill. For example: Worker stepped to the edge of the scaffolding to inspect work, lost balance and fell six feet to the floor. The worker's right wrist was broken in the fall.

DATE RETURN(ED) TO WORK:

Enter the date following to most recent disability period on which the employee returned to work.

WC-385 (7-05) State of New Jersey Department of Labor and Workforce Development Division of Workers' Compensation P.O. Box 381 Trenton, New Jersey 08625-0381	<h2 style="margin: 0;">EMPLOYEE CLAIM PETITION</h2>	Case No. _____ Version _____ (For office use only)
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P E T I T I O N E R	SOCIAL SECURITY NUMBER <input type="checkbox"/> SSN Not Available NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ COUNTY _____ DATE OF BIRTH _____ SEX _____	P E T I T I O N E R A T T Y	<input type="checkbox"/> SSN <input type="checkbox"/> FEDERAL EMPLOYER NUMBER NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ TELEPHONE NUMBER _____
R E S P O N D E N T	VS NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ IF RESPONDENT KNOWN BY DIFFERENT NAME, PLEASE INDICATE BELOW: _____	I N S U R A N C E C A R R I E R	NAME _____ Indicate if <input type="checkbox"/> Self-Insured or <input type="checkbox"/> Uninsured ADDRESS _____ CITY _____ STATE _____ ZIP _____ CARRIER CLAIM FILE NUMBER _____ <input type="checkbox"/> Additional Carriers listed on Supplemental Page

TO THE DIVISION OF WORKERS' COMPENSATION:

Petitioner, alleging that Petitioner sustained a work injury arising out of and in the course of Petitioner's employment with Respondent, compensable under R.S. 34:15-7 et seq., supplements and amendments, respectfully states:

Date of Accident or Injury.		Occupational Disease. <input type="checkbox"/> YES <input type="checkbox"/> NO		If Occupational Disease Give Periods of Exposure	
Where Injury Occurred.			How Injury Occurred.		
DESCRIBE EXTENT AND CHARACTER OF INJURY: If there has been amputation or disability to any member or impairment of any physical function, explain fully.					
Date Stopped Work		Date Returned to Work		Date Injury Reported And To Whom	
Occupation and Type of Work					
Gross Wages \$	Wage Period	Rate of Temp Compensation \$	Temporary Disability Paid \$	Rate of Perm Compensation \$	Permanent Disability Paid \$
Employer Furnished Medical Aid <input type="checkbox"/> YES <input type="checkbox"/> NO					
Give names and addresses of physicians and hospitals:					
<input type="checkbox"/> Demand is hereby made for answers to standard occupational disease interrogatories. <input type="checkbox"/> Demand is hereby made for all records of medical treatment, examinations and diagnostic studies.					
<input type="checkbox"/> See Attached For Additional Physicians					
What other facts are there that you believe important:					

ARE YOU MEDICARE ELIGIBLE OR A MEDICARE BENEFICIARY?

☐ YES ☐ NO

WERE YOU ELIGIBLE FOR MEDICAID BENEFITS AT THE TIME OF THE WORK INJURY?

☐ YES ☐ NO

DID YOU BECOME ELIGIBLE FOR MEDICAID BENEFITS AFTER THE WORK INJURY?

☐ YES ☐ NO

In occupational disease claims, list claims against other employers filed or to be filed for the same or similar occupational diseases:

Petitioner therefore requests that the Division of Workers' Compensation determine the amount of compensation due Petitioner from said Respondent, under Revised Statutes of New Jersey, Title 34, Chapter 15, and the Acts supplemental thereto and amendatory thereof, and that Petitioner may be awarded Petitioner's costs in this proceeding, and such other relief or further as may be proper.

Petitioner

STATE OF NEW JERSEY
COUNTY OF

Subscribed and sworn or affirmed
to before me this day of
 20 .

This Claim Petition has been presented by the Petitioner to the Division of Workers' Compensation for hearing and determination. Unless and Answer is filed within 30 days of the date of service of the Claim Petition upon you, with the assignment clerk at the vicinaga to which the claim is assigned as indicated on the reverse side, and a copy served upon the Petitioner's attorney, THE PETITIONER WILL PROCEED WITH PROOF OF CLAIM ACCORDING TO LAW AND MAY OBTAIN JUDGMENT AGAINST YOU.

The Privacy Act, 5 U.S.C. §552a, the Social Security Act, 42 U.S.C. § 405, and N.J.S.A. 34:15-1 et seq. authorize the Division of Workers' Compensation to request that the Petitioner supply the Division with his or her Social Security Number for record keeping purposes and cross-matches with the Social Security Administration, Workforce New Jersey, Temporary Disability Insurance and any other proper public purpose.

DIVISION OF WORKERS' COMPENSATION

A Final Note From Steve Cohen

Protecting Your Rights Is Surprisingly Affordable... Getting Your Health, Job and Life Back is... Priceless!

Many of my clients tell me that after hiring our firm the results they see cannot be measured in dollars... This simple decision to finally have someone working on your side to protect your rights and fight for your benefits can create a number of significant positive changes in their lives.

The question is “What is getting our legally protected benefits—and, more importantly—getting our health and job back—worth?”

Imagine having an advocate on your side that has helped thousands of people, working diligently to protect your rights, making sure the insurance companies don’t take advantage of you, taking the stress and pressure away... Instead, you can focus on getting better and getting back to work...

We know you would never “price shop” anything this important. However, you’ll be happy to know that hiring a Workers’ Compensation lawyer is more affordable than you might think, and we work on contingency, which means you only pay if we are able to collect for you. In fact, our fees are set by the Workers’ Compensation Judge and often the insurance company is forced to pay a large part of your legal fees and expert witness fees, benefitting you even more.

So after reviewing this Report and exploring your options, you can now go “First Class” for about the same cost as “going coach.”

You’ve been worrying about this for a while...

Now’s your chance to consult with one of the most respected law firms in the country, with No Charge and No Obligation whatsoever. Also, you’ll enjoy complete privacy and confidentiality.

Because I Understand How Important This is to You...

I just want every person who has ever been injured or become ill at work and felt confused and lost about his or her situation to get the facts first, then decide if hiring a Workers’ Compensation attorney is right for them... without feeling pressure and financial obligation.

I know what a positive, life-long impact getting your health and job back can have on you. You should do this without having to worry about bills and expenses. After all, I’ve seen it hundreds of times.

But, it’s still a big decision... and yours alone to make.

However - I suggest that you only make the decision after a consultation with our experienced Workers’ Compensation staff. I want to help you by making the decision an easy one...

So, what happens next?

When you call to schedule your consultation, ask for Annette, and tell her to put you on our VIC list, and schedule your free consultation...

...Just for reading this report.

Please call our office at **1.888.662.1290**, between the hours of 8:00 am and 5:00 pm EST, Monday through Friday.

Remember to ask Annette to put you on my VIC List, that's Very Important Client and to schedule your No Cost Consultation for the earliest available "priority" appointment.

We feel you are important, and not just another appointment to us. So, please be sure to have all of your supporting documents available, including any doctor reports, incident reports from your accident and prescriptions for any medications the doctors have put you on.

My staff and I are dedicated to doing everything possible to protect your rights and get you the benefits you deserve—in a comfortable, professional legal setting.

Here's to ending your Workers' Compensation Confusion!

Sincerely,



Steven Cohen, Esq.

888.662.1290



P.S. - Please remember to tell Annette and my staff you have read this report, and give them your special VIC List Code found on page 2, and ask for your No Cost Consultation. Don't miss out on your opportunity to speak with me about your individual situation at No Charge, and finally get the benefits you deserve!