

## Workers' Compensation Program Employee Information Packet

The information included in this packet will become important to you in the event that you seek medical attention or lose time from work due to a work-related injury or illness. The following provides a brief description of the documents included in this packet and how they are to be used:

- **Notice of Enrollment in a Certified Managed Care Plan** – The State of Minnesota, Workers' Compensation Program uses a managed care organization, CorVel, to provide certified managed health care services.
- **CorVel's 24/7 Work Injury Nurse Line** – Please call **(844) 235-2055** immediately following a workplace injury to speak with a registered nurse who will evaluate your injury and help connect you with the quality care you need for non-emergent injuries for which you have not yet sought medical treatment. If an emergency, please dial 911.
- **Telehealth Option** – If appropriate for your injury, CorVel's 24/7 Work Injury Nurse Line may offer you a choice of receiving your initial medical care through a Telehealth medical visit. You should have access to a private area and a device that provides video and voice access to the internet (computer, laptop, iPad, mobile phone, etc.)
- **Letter to State Employees (to bring to health care provider)**- CorVel offers many services to help you receive quality medical care for your injury or illness; while working with you and your provider to help you return to work.
- **CorVel Managed Care Instruction Brochure** - If you must seek medical attention due to a work-related injury or illness, please refer to the following brochure to determine which clinic you should go to. You should also bring this brochure with you to your doctor appointment.
- **CorVel Managed Care ID Card** – If you must seek medical attention due to a work related injury or illness please carry this card with you and provide it to your medical doctor's office when asked about insurance coverage.
- **CorCareRX Pharmacy Benefit** letter – The State of Minnesota, Workers' Compensation Program managed care organization, CorVel administers a workers' compensation prescription pharmacy program called CorCareRx for state employees with work-related injuries. This letter explains the program and what you can expect should your doctor prescribe medications related to your injury.
- **Injured Worker's First Fill Prescription Information Sheet** – On your first visit, please give this notice to any pharmacy listed on this insert.
- **Report of Work Ability** form – If you must seek medical attention for your injury, this form should be taken with you to each appointment and should be completed by the treating physician. You will need to submit the form to your supervisor prior to your return to work after each appointment.
- **Life Matters (EAP/Life Program)** - This program offers *confidential* services and is available to you 24 hours a day.

In the near future as your workers' compensation claim is processed, you will receive further information from the Workers' Compensation Claims Specialist assigned to your claim. Please watch for this letter in your mail. If you have any questions, please contact your supervisor and/or agency Workers' Compensation Coordinator.

## **Notice of Enrollment in a Certified Managed Care Plan for Workers' Compensation Injuries and Illness**

Please note a change in how necessary medical care will be provided to you in connection with your work injury. Under Minnesota Rule 5218.0250, the Minnesota Department of Administration provides this notice to inform you that:

Effective July 1, 2005, your employer (the State of Minnesota) enrolled with CorVel, a certified workers' compensation managed care plan that provides state employees and covered volunteers with all necessary medical treatment for work-related injuries and illness.

If injured in the course of your work, you may receive treatment from a medical doctor, chiropractor, podiatrist, osteopath, or dentist, if the treatment is available within the community and is appropriate for the injury or illness. You must receive all necessary medical treatment for your work injury from a health care provider who is a member of CorVel's plan, except in the following circumstances: you have already established a treating relationship with a non-participating provider (who maintains your medical records)\* prior to the work-related injury; or if you require emergency treatment; or if your place of employment and residence are beyond the mileage parameters set forth in part 5218.0100, subp. 1.F.(7).

Furthermore, if you sustained your work-related injury prior to the State's enrollment with CorVel, you may continue to receive treatment from a non-participating provider until you change doctors.

You may access care for a work-related injury or illness by going to a clinic or health care provider from CorVel's network; or by asking your agency's Workers' Compensation Coordinator to share CorVel's provider directory with you; or by accessing CorVel's provider directory on-line at: [http://www.corvel.com/provider\\_lookup/](http://www.corvel.com/provider_lookup/); or by calling CorVel's 24-hour Nurse Phone Line at 612-436-2542 or 866-399-8541. You may also contact CorVel's Nurse Phone line if you have questions about managed care for workers' compensation; or direct such inquiries to the State Workers' Compensation Program at (651) 201-3001. You may also contact your agency's Workers' Compensation Coordinator if you need assistance.

Additional information may be obtained by calling the Minnesota Department of Labor and Industry (DOLI) in St. Paul at (651) 284-5005 or (800) 342-5354. In Duluth, call DOLI at (218) 733-7810 or (800) 365-4584.

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\* In accordance with part 5218.0500, subparts 1 and 2, except that if you later change doctors you must then choose a doctor who participates in CorVel's plan.

TO: State Employees

RE: CorVel, a Managed Health Care System for Employees with Work-Related Injuries and Illnesses

**Please bring this letter to your health care provider on your next visit.**

Effective July 1, 2005, Minnesota state employees injured on the job use a managed health care system called CorVel. This managed health care system offers many services to help you receive quality medical care for your injury or illness while working with you and your health care provider to help you return to your job.

The services offered by CorVel are as follows:

- **CorVel Nurse Phone Line, a 24-hour information and provider referral service.** This service is available 365 days a year by calling **(612) 436-2542** in the metro area, or **(866) 399-8541** outside the metro area. CorVel's Nurse Phone Line, staffed by registered nurses, can refer you to the closest participating provider to your home or workplace to evaluate and treat your injury. Report any injury to your supervisor or designated person at work. **In an emergency, call your local 911 emergency service.**
- **A provider network, experienced in treating employees with work-related injuries.** You must see an evaluating and treating physician at your agency designated CorVel clinic for your initial evaluation. (The designated CorVel clinic is listed on the managed care poster displayed at your work site.) CorVel's participating providers are required to evaluate your work-related injury within 24 hours of your request for treatment. Following the initial treatment or evaluation, you have the right to continue treating with the designated clinic; you may see another provider who is a member of CorVel's plan or, you may treat with a non-participating provider, if you qualify for one of the exceptions listed under "Coordination of services with non-participating providers." The doctor you treat with after the initial evaluation is considered your primary treating provider. That provider maybe a medical doctor, osteopath, podiatrist, chiropractor or dentist, as long as the required treatment is within the provider's scope of practice and is appropriate under CorVel's treatment guidelines. Appropriate treating providers must be available to you within 30 miles of either your workplace or residence, if you live and/or work in the seven county metropolitan area, or within 50 miles if both your workplace and residence are outside the seven county metropolitan area. You are allowed to change primary treating providers once within the managed care plan. Additional changes of your primary treating provider must be approved by the managed care plan.
- **Case management services provided in cooperation with your network provider.** CorVel's registered nurses (case managers) will work with your provider to coordinate your health care services. By evaluating proposed medical treatment, they coordinate necessary medical care and assist in returning you to work as soon as possible.

**Coordination of services with non-participating providers.** You must receive all medical treatment for work-related injuries from a participating provider. The limited occasions under which you are allowed to see a non-participating provider are as follows:

- In an emergency situation;
- You are referred by the managed care plan;
- The nearest network provider is located more than 50 miles from your place of employment and your residence (please call CorVel's Nurse Phone Line at **(612) 436-2542** or **(866) 399-8541** for information about CorVel providers in your community);
- You have a documented history of treatment before an injury with a provider who maintains your medical record. This means there is documentation you have been treated at least twice, whether or not for a work-related condition, in the past two years. (You must call CorVel's Nurse Phone Line at **(612) 436-2542** or **(866) 399-8541** and notify them of your intent to seek treatment from a non-participating provider).

**Should you choose a non-participating provider, you must provide CorVel with documentation of your prior treating relationship within 10 calendar days of when you gave notice of your injury or illness to your supervisor or agency workers' compensation coordinator.**

*Emergency treatment does not require authorization. A non-participating provider may deliver health care services to you for emergency treatment.*

Providers who are not in the CorVel network must be aware of the following rules:

- Providers must comply with treatment guidelines, case management, peer review, dispute resolution and billing and reporting procedures (Minn. Rule 5218.0050, subp. 2A).
- Providers must agree to refer you to a participating CorVel provider for specialized care, physical therapy, and diagnostic testing (Minn. Rule 5218.0500, subp. 2B).

Whether or not your health care provider participates in CorVel, your provider must call CorVel at **(612) 436-2542** or **(866) 399-8541** in the metro area, **(800) 262-0828** outside the metro area, or fax the request to **(612)436-2499** for prior notification on the following:

- All cases involving three or more consecutive days of time loss from work;
- All inpatient hospitalizations and outpatient surgeries;
- All medical care requiring frequent active and passive treatment such as physical therapy, chiropractic care, or chronic pain management;
- Imaging procedures such as MRI's and CT scans.

If your health care provider needs to refer your care to a specialist, he or she should contact CorVel at **(612) 436-2542** or **(866) 399-8541**. If you require specialty services that are not available within the mileage restrictions mentioned above, Case Management may refer you to a provider outside these restrictions.

Your health care provider may submit a medical bill for payment to:

**MedCheck-CorVel, Suite 610  
3001 NE Broadway Street  
Minneapolis, MN 55413-2658**

If you have questions, contact your supervisor or any of the following numbers:

Minnesota Department of Administration

- **(651) 201-3000**

CorVel Customer Service

- **(612) 436-2542 (metro area)**
- **(866) 399-8541 (greater MN)**

## **ATTENTION: ALL EMPLOYEES REGARDING WORK-RELATED INJURIES**

Your employer has enrolled with CorVel, a Certified Managed Care Plan, to provide all necessary medical treatment for workers' compensation injuries.

### **How To Obtain Medical Care Through The CorVel Certified Managed Care Plan**

You are entitled to receive an initial evaluation from a participating medical provider within 24 hours of your initial request for medical care. If you live within the 7-county metro area, the provider must be geographically convenient and within a 30-mile radius of your workplace or residence. If you live in rural Minnesota, the provider must be geographically convenient and within a 50-mile radius of your workplace or residence. CorVel has a complete managed care provider network which includes the following medical specialties: medical doctor; chiropractor; podiatrist; osteopath; or dentist. You may obtain medical care from a doctor within any of these specialties provided the treatment is available within your community and is appropriate for the injury or illness being reported.

### **CORVEL ACCESS LINE 612-436-2500 or 877-703-4241**

CorVel has an Access Line to assist in providing access to medical services under the Certified Managed Care Plan and to address any questions or complaints regarding managed care services. The CorVel Access Line is answered by CorVel staff during regular business hours (8 a.m. to 5 p.m., Monday through Friday, except holidays) and provides recorded information after regular business hours and on holidays. In addition, all employees can access the CorVel Provider Directory on line at [www.corvel.com](http://www.corvel.com), PPO Look Up, Find a Provider, Select a Network, MN Certified Managed Care. You can search by location, specialty or service.

#### **How to Obtain an Initial Appointment -**

1. Prior to obtaining an appointment, report your injury to the person or department at your employer that has been designated to receive reports of work-related injuries. Upon reporting your injury, you will be provided with a Patient Identification Card and a Certified Managed Care Plan Instruction Brochure.
2. Call the **CorVel Access Line** for assistance in obtaining an appointment with an approved medical provider, or make an appointment directly with a healthcare provider using the online CorVel Provider Network Directory.
3. Please present the Patient Identification Card to the medical provider when you begin treatment.

#### **How to Obtain Emergency Medical Care or Urgently Needed Medical Services -**

In the event of a medical emergency, seek treatment at the nearest emergency medical facility or call 911 **IMMEDIATELY**. Other urgently needed medical services may be obtained at the nearest available urgent care center. Emergency or urgently needed medical services may be obtained from any qualified provider regardless of participation in CorVel's Certified Managed Care Provider Network. Either you or your representative

must call the **CorVel Access Line** within 48 hours of your initial emergency medical treatment. If you need additional medical care, CorVel will assist you in choosing a participating medical provider.

#### **Medical Care Following Your Initial Appointment -**

- If you received an initial evaluation from a provider in the CorVel Certified Managed Care Plan network and you require treatment beyond your initial appointment, you may continue care with this provider. It is necessary that your required treatment is within this provider's scope of practice.
- If the provider who performed your initial evaluation is **not** a member of the CorVel Certified Managed Care network (non-participating provider), and you wish to continue care with this provider, then refer to the conditions outlined under **Medical Care with a Non-Participating Provider**
- You also have the right to select a different treating provider following the initial evaluation. For assistance in obtaining an appointment with a new provider, call the **CorVel Access Line**.

#### **Medical Care Outside of CorVel's Regular Business Hours -**

CorVel's regular business hours are 8 a.m. to 5 p.m., Monday through Friday, excluding holidays. If you require non-emergency medical care outside of regular business hours, you may obtain care through one of the following options:

1. Call the **CorVel Access Line** and leave a recorded message. A member of CorVel's Access Line staff will respond to your message immediately on the next business day and will provide any necessary assistance in obtaining a medical appointment on your behalf.
2. Seek care at the nearest available medical facility. **Then call the CorVel Access Line within 48 hours.** If you require further care, a member of CorVel's Access Line staff will provide any necessary assistance in obtaining a medical appointment on your behalf.

#### **How to Change Treating Providers -**

If you are not satisfied with your medical treatment, you are allowed to change treating providers at least once. To change treating providers, call the **CorVel Access Line**.

**Note:** Selecting a different treating provider following the initial evaluation does not count as a change of treating provider **unless** you have seen the evaluating provider more than once for your current injury.

### **Medical Care with a Non-Participating Provider**

If you have sustained a work-related injury **prior** to this notice, you may continue to receive treatment for that injury from a non-participating provider until you decide to change doctors. Then you must change to a participating provider.

For work-related injuries occurring **after** this notice, you may seek treatment with a non-participating provider in the following cases:

1. If you have established a history of treatment with a healthcare provider who maintains your medical records and you have received medical care from this provider at least twice in the two years before your date of injury. If your treatment history with a provider does not meet the standard you must seek approval from CorVel or the workers' compensation insurer. The treatment for your work-related injury must also be within this provider's scope of practice. Call the CorVel Access line for more information and

/or if you want to treat with an established - non participating provider.

- ♦ If you decide to change doctors, it must be to a participating provider. All referrals are to be within the CorVel Certified Managed Care Plan Network.

2. If the nearest provider available within the CorVel network is beyond the state mileage guidelines (30-mile radius in the 7-county metro area and 50-mile radius in rural Minnesota) from your place of employment and residence. Call the CorVel Access Line for assistance in finding an appropriate non-participating provider.
3. If you require emergency or urgently needed medical services.

#### Questions Or Concerns Regarding CorVel's Certified Managed Care Plan

CorVel will be happy to respond to questions about its Certified Managed Care Plan - please call:

**877-703-4241**

You may also contact the Minnesota Department of Labor & Industry with questions at:

DLI – Greater Minnesota – (Toll Free) 1 (800) 342-5354 (DIAL-DLI)  
Metro – (651) 284-5032  
Duluth – (218) 733-7810 or (Toll Free) 1 (800) 342-5354  
TTY – (651) 297-4198

CorVel likewise welcomes feedback regarding its services. To voice a comment or concern about services you have received from CorVel's Certified Managed Care Plan, call the CorVel Access Line at: **877-703-4241**

**You may also email your concerns to: Minnesota Referral Center@CorVel.com**

#### Dispute Resolution Process Available To Employees

If you wish to file a dispute regarding services you have received from CorVel's Certified Managed Care Plan, please make a written request to initiate CorVel's Dispute Resolution Process to the attention of the Managed Care Manager at:

**CorVel Certified Managed Care  
3001 NE Broadway Street, Suite 600  
Minneapolis, MN 55413**

**You may also email your request to: Minnesota\_ReferralCenter@CorVel.com**

This process will be completed within 30 days after your written request is received by CorVel's Managed Care Manager.

July 1, 2005

Effective Date

Administration, Risk Management Division, (651) 201-3000

Employer Contact/Telephone Number

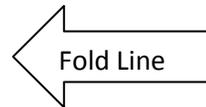


## **CERTIFIED MANAGED CARE PLAN INSTRUCTION BROCHURE**

## **Managed Care ID Card Instructions:**

1. Write the employee's first and last name in the space provided.
2. Write in the date of injury (DOI) in the space provided.
3. Cut out card along dotted lines.
4. Fold the card where indicated - the final card will be wallet-sized.
5. Employee should present this card at all health care provider visits for their work- related injury.

<b>CorVel Certified Managed Care Plan</b> 24 Hour Employee information Line 612-436-2542 or 866-399-8541	
Insurer/Employer: Dept. of Administration Work Comp. Program Phone: 651-201-3000	
Medical bills must be submitted electronically. If your Clearinghouse has electronic billing submission questions, please contact 877-703-4240 or stmn_clearinghouse@corvel.com for more information.	
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Administrator: Dept. of Administration Work Comp. Program, State of MN	
Employee Name _____	DOI: _____
If you have questions, comments or complaints, call CorVel's Certified Managed Care Plan at: 612 436-2500 or 877-703-4241. CorVel welcomes feedback regarding its services. You may also call the Minnesota Department of Labor & Industry with questions at:	
DLI – Greater Minnesota – (Toll Free) 1 (800)-342-5354 (DIAL- DLI) Metro – (651) 284-5032 Duluth – (218) 733-7810 (Toll Free) or 1 (800) 342-5354 TTY – (651) 297-4198	
Dispute Resolution Process Available to Employees: If you wish to file a dispute regarding services you have received from CorVel's Certified Managed Care Plan, please make a written request to initiate CorVel's Dispute Resolution Process to the attention of the Managed Care Manager at: <b>CorVel Certified Managed Care Plan</b> <b>3001 NE Broadway Street, Suite 600, Minneapolis, MN 55413</b> You may also email your request to: Minnesota_ReferralCenter@CorVel.com This process will be completed within 30 days after your written request is received by CorVel's Managed Care Manager.	



## **Workers' Compensation Program CorCareRX Pharmacy Benefit**

To: State Employee

Re: **Filling a prescription for your work injury with CorCareRx  
Injured Worker's First Fill Prescription Information Sheet &  
CorCareRx ID Cards**

Please check with your agency workers' compensation coordinator to determine if your agency participates in the first fill program for prescription medications. If your agency participates in the first-fill program, you should receive an Injured Worker's First Fill Prescription Information Sheet from your agency that you should use to fill any initial prescription that a health care provider prescribes for your work-injury. This first-fill card can only be used onetime.

Shortly you will receive a letter from CorVel with instructions on to how to fill workers' compensation-related prescriptions using CorCareRx, CorVel's workers' compensation pharmacy plan. The letter will include a personal identification card along with a list of pharmacies in the area where you may get your prescriptions filled. This ID card should be used for all workers' compensation-related prescriptions.

Once you receive the card, it is required that you use the card to fill prescriptions for your work injury. Use of the prescription card brings the following benefits:

- No out-of-pocket expense
- Eliminates the need for you to request reimbursement for the costs of prescriptions

The card can only be used for prescription medications related to the specific workers' compensation injury that the card is issued for. If you have questions upon receipt of the letter and card, call CorVel at (800) 275-8893.

The issuance of the card is tied to the timing of the submission of First Report of Injury forms and is automated. There is no call necessary to activate this benefit. Reimbursement requests for the cost of prescriptions filled prior to the issuance of the card may be sent to:

CorVel  
Suite 610  
3001 NE Broadway St.  
Minneapolis, MN 55413-2658

**PLEASE TAKE THIS INSERT TO THE PHARMACY**

***Injured Worker's First Fill Prescription Information Sheet***

**Injured Worker Name:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_

**Date Of Injury:** \_\_\_\_\_

***Dear Injured Worker,***

On your first visit, please give this notice to any pharmacy listed on this insert to expedite the processing of your approved Worker's Compensation prescriptions, based on the established parameters by **MN Dept of Admin**. With the CorVel CorCareRx program, you do not need to complete any paperwork or claim forms. Simply present this CorVel First Fill Prescription Information Sheet to the pharmacy. You should not incur any costs or co-payments at the pharmacy and will allow up to a **10** day supply of medications.

**Dear Pharmacist,**

Please use the Injured Worker's **SSN plus 8 digit Date of Injury** (SSN+MMDDYYYY) as their 17 digit Identification number when entering the following information to process an online claim to CorVel on behalf of State of MN injured workers:

**BIN: 004336**  
**PCN: ADV**  
**RxGrp: RXFFWC162**

Pharmacies can contact CorVel **Pharmacy Help Desk** at (800)364-6331 for assistance with claims processing. The Pharmacy Help Desk is available 24 hours a day, 7 days a week for your convenience.

There are 70,000 Participating Pharmacies in the CorVel Network. Below is a sample listing.

Amcare Walker Pharmacy	Hanson Drug	Rite Aid
Anderson Drug	Health Partners	Salk Drug
Apothecary Shop	HY-Vee Pharmacy	Sam's Club Pharmacy
Bloomington Drug	K Mart Pharmacy	Samuelson's Drug
Butler Drug	Kennedy Snyder Drug	Snyder's Drug Store
Cash Wise Pharmacy	Lakes Area Pharmacy	Target Pharmacy
Cub Pharmacy	Medicine Shoppe	Town & Country Pharmacy
Curt's Pharmacy	Moudry Apothecary Shop	Walgreens Pharmacy
CVS Pharmacy	Pamida Pharmacy	Wal-Mart Pharmacy
Falk's Newman Pharmacy	Rainbow Pharmacy	Watertown Health Mart

Mail or fax to:  
 MN Department of Labor and Industry  
 Workers' Compensation Division  
 PO Box 64221  
 St. Paul, MN 55164-0221  
 (651) 284-5032 or 1-800-342-5354  
 Fax: (651) 284-5731

# Report of Work Ability

See Instructions of Reverse Side

Print in ink or type  
 Enter dates in MM/DD/YYYY format



DO NOT USE THIS SPACE

This form must be provided to the employee.  
 (Minn. Rules 5221.0410, I subd. 6)

**NOTICE TO EMPLOYEE: YOU MUST PROMPTLY PROVIDE A COPY OF THIS REPORT TO YOUR EMPLOYER OR WORKERS' COMPENSATION INSURER, AND QUALIFIED REHABILITATION CONSULTANT IF YOU HAVE ONE.**

WID number or SSN	Date of injury	Date of birth
Employee		
Employer		
Insurer/Self-insurer-TPA		
Insurer claim number		

Date of most recent examination by this office \_\_\_\_\_

Select the appropriate option(s) below and fill in the applicable dates.

- Employee is able to work without restrictions as of \_\_\_\_\_ (date)
- Employee is able to work with restrictions, from \_\_\_\_\_ (date) to \_\_\_\_\_ (date)

The restrictions are:

- Employee is unable to work from \_\_\_\_\_ (date) to \_\_\_\_\_ (date)

The next scheduled visit is:  as needed OR \_\_\_\_\_

Name (Type or Print)			Signature		Degree
Address			State	License #/Registration #	
City	State	ZIP code	Phone # (include area code)		Date signed

## INSTRUCTIONS FOR COMPLETING REPORT OF WORK ABILITY

Each health care provider directing the course of treatment for an employee who alleges to have incurred an injury on the job must complete a Report of Work Ability within 10 days of a request for a Report of Work Ability from the insurer, or at the applicable interval (Minn. Rules 5221.0410, subp. 6):

1. every visit if visits are less frequent than one every two weeks;
2. every 2 weeks if visits are more frequent than once every two weeks, unless work restrictions change sooner; and
3. upon expiration of the ending or review date of the restrictions specified in a previous Report of Work Ability.

The Report of Work Ability must either be on this form or in a report that contains the same information. The Report of Work Ability must:

- Identify the employee by name, WID or social security number, and date of injury.
- Identify the employer at the time of the employee's claimed work injury.
- If known, identify the workers' compensation insurer at the time of the claimed injury, or the workers' compensation third-party administrator. Also indicate this workers' compensation payer's claim number.
- Indicate the date of the most recent examination by this office. The Report of Work Ability should be completed based on this evaluation.
- Identify the appropriate option which best describes the employee's current ability to work by checking box 1, 2, or 3.
  1. If the employee is able to work without restrictions, fill in the beginning date.
  2. If the employee is able to work with restrictions, fill in the date any restriction of work activity is to begin and the anticipated ending or review date. Describe any restrictions in functional terms (e.g., employee can lift up to 20 pounds, 15 times per hour; should have 10 minute break every hour).
  3. If the employee is unable to work at all, fill in the date the restriction of work activity is to begin and the anticipated ending or review date.
- Indicate the date of the next scheduled visit or indicate that additional visits will be scheduled as needed.
- Identify the health care provider completing the report by name, professional degree, license or registration number, address and phone number.
- Include the signature of the health care provider and date of the report.

The health care provider must provide the Report of Work Ability to the employee and place a copy in the medical record.

If you have questions, please call the claim representative or the Department of Labor and Industry, Workers' Compensation Division at (651) 284-5032 or 1-800-342-5354.

***This material can be made available in different forms, such as large print, Braille or audio. To request, call (651) 284-5032 or 1-800- 342-5354 Voice or TDD (651) 297-4198.***

**ANY PERSON WHO, WITH INTENT TO DEFRAUD, RECEIVES WORKERS' COMPENSATION BENEFITS TO WHICH THE PERSON IS NOT ENTITLED BY KNOWINGLY MISREPRESENTING, MISSTATING, OR FAILING TO DISCLOSE ANY MATERIAL FACT IS GUILTY OF THEFT AND SHALL BE SENTENCED PURSUANT TO SECTION 609.52, SUBDIVISION 3.**

# A Guide to LifeMatters® Services

## The State of Minnesota EAP & Work/Life Program

When you or your family need useful ideas, lifestyle coaching, helpful resources or reliable professional care, LifeMatters, your EAP and WorkLife Service, is just a phone call away. Free, confidential LifeMatters services include:

### Telephone and face-to-face counseling services for:

- Stress, depression, and personal problems
- Balancing work and personal needs
- Family and relationship concerns
- Alcohol or drug dependency
- Workplace conflicts

### WorkLife Services:

**Financial consultation** and resources from a consumer credit counselor to set up a budget, obtain and review credit report information, or assist with debt management and consolidation.

**Legal consultation** with an attorney either over the phone or face-to-face for consumer law, traffic citations and fender benders, family law, or estate planning.

### Online and counselor-assisted searches for:

- Child and elder care resources and guidance
- Online calculators for a variety of analytical questions and needs



The program's user-friendly, *confidential* services are available to you and your eligible dependents 24 hours a day, every day of the year by calling:

**1-800-657-3719**

(Toll-Free U.S., Canada, and Puerto Rico)

On the Internet, go to [mylifematters.com](http://mylifematters.com) and enter the state's password to access resources, educational information, and self-service options. The state's password is **STMN1**.



Services provided directly by LifeMatters are free. If you are referred to outside resources, you will be advised about your costs, if any.

**For more information,  
call LifeMatters at  
1-800-657-3719 or visit  
[mylifematters.com](http://mylifematters.com) —  
password **STMN1**.**