

November 15, 2023

Adel Hanna 5688 Cousins Pl Rancho Cucamonga CA 91737-2156

Claim Number: 06919232
Employee: Adel Hanna
Date of Injury: 12/03/2022
Employer: Ca Institution For Men
Attn: Return To Work Office

NOTICE OF DELAY IN DETERMINING LIABILITY FOR WORKERS' COMPENSATION BENEFITS DELAY

State Compensation Insurance Fund, the claims administrator for Ca Institution For Men Attn: Return To Work Office, is handling your workers' compensation claim. This notice is to advise you of the status of your workers' compensation claim for your injury of December 3, 2022.

All potential workers' compensation benefits are being delayed because additional information is necessary to determine if you have suffered a work related injury.

In order to make a decision:

We need substantial medical documentation addressing causation.
 We need your completed and signed medical history and release form.

If you have any questions or need clarification regarding the content of this notice, please contact your attorney.

Failure to provide all information requested, or attend any appointments set up for you, may result in rejection of your claim.

We will notify you of our decision on or before January 30, 2024.

For all injuries which occur on after January 1, 1990, there is a legal presumption before the Workers' Compensation Appeals Board that your claim is compensable if it is not denied within 90 days of your return of a Workers' Compensation Claim Form (DWC 1) to your employer. That presumption can be rebutted only with information that could not be discovered within the 90-day period.

Effective April 19, 2004, the law requires your employer to authorize medical treatment for your claimed injury within one working day after your filing of a Workers' Compensation Claim Form (DWC-1), and to continue to provide treatment until your claim is accepted or rejected, up to a limit of \$10,000 in total. All treatment provided is subject to utilization review and application of evidence-based, peer-reviewed, and nationally recognized guidelines. All treatment provided must be within the State Fund MPN, if applicable. If you feel you need medical attention and you have filed an a Workers' Compensation Claim Form(DWC1) with your employer, please contact me immediately at the number below for arrangements to see a physician.

Additional information may be obtained from an Information and Assistance officer with the Division of Workers' Compensation, or on the Division's website: www.dwc.ca.gov.

For more information, please refer to the publication "Workers' Compensation in California: A Guidebook for Injured Workers"

After You Get Hurt on the Job

http://www.dir.ca.gov/InjuredWorkerGuidebook/Chapter2.pdf

Resolving Problems with Medical Care & Medical Reports

http://www.dir.ca.gov/InjuredWorkerGuidebook/Chapter4.pdf

For More Information and Help

http://www.dir.ca.gov/InjuredWorkerGuidebook/Chapter10.pdf

and

http://www.dir.ca.gov/InjuredWorkerGuidebook/FAOs IandA.pdf

and

http://www.dir.ca.gov/InjuredWorkerGuidebook/FAOsAttornev.pdf

A complete copy of the Guidebook may be obtained on the Division of Workers' Compensation's website at

http://www.dir.ca.gov/InjuredWorkerGuidebook/InjuredWorkerGuidebook.html or by contacting an Information and Assistance officer of the Division of Workers' Compensation.

The State of California, Division of Workers' Compensation, requires that you be given the following information:

You have a right to disagree with decisions affecting your claim. If you have any questions about the information provided to you in this notice, please call me, Mandi Vargas at (951) 697-7349. You also have the right to be represented by an attorney of your choice. However, if you are represented by an attorney, you should call your attorney, not me, Mandi Vargas.

For information about the workers' compensation claims process and your rights and obligations, go to www.dwc.ca.gov or contact an information and assistance (I & A) officer of the state Division of Workers' Compensation. For recorded information and a list of offices, call (800) 736-7401.

Keep this notice. It contains important information about your workers' compensation benefits.

Sincerely