



Sent via certified mail

February 07, 2018

**Victoria Sarver
666 W. 18th St., Apt. #4
Costa Mesa CA 92627**

**Employer: Lighthouse Coastal
Date of Injury: 09/01/13 – 09/01/17 CT
Claim Number: 550796**

NOTICE REGARDING

DENIAL OF WORKERS' COMPENSATION BENEFIT

Brotherhood Mutual Insurance Company is handling your workers' compensation claim on behalf of Lighthouse Coastal Community Church. This notice is to advise you of the status of disability benefits for your workers' compensation injury on the date shown above.

After careful consideration of all available information, we are denying liability for your claim of injury. Workers' compensation benefits are being denied based on:

- 1) *No substantial medical evidence in support of a work-related claim.***
- 2) *Post Termination claim per LC3600(a)(10).***
- 3) *Good Faith Personnel Action***

For claims reported on or after April 19, 2004, regardless of the date of injury, if you submitted a claim form to your employer or claims administrator, Labor Code section 5402(c) provides that within one working day after you file the claim form, the employer shall authorize the provision of all treatment, consistent with the applicable treating guidelines, for the alleged injury and shall continue to provide such medical treatment until the claims administrator accepts or denies liability for the claim. Until the date the claim is accepted or rejected, liability for medical treatment under this Labor Code section shall be limited to a maximum of ten thousand dollars (\$10,000).

Unless you have done so already, you should immediately send for consideration of payment, all bills for medical services provided between the date the completed claim form was given to the employer and the date that liability for the claim is rejected.

If you are represented, you may contact your attorney with any questions.

Additional information may be found in the publication **Workers' Compensation in California: A Guidebook for Injured Workers**. A complete copy of the Guidebook may be obtained at the website of the Division of Workers' Compensation (see *URL* below) or by contacting an Information and Assistance (I&A) Officer of the Division of Workers' Compensation. Chapters 2, 4 and 9 of the Guidebook contain information addressing the determination of liability for a workers' compensation claim and the QME process.

Guidebook for Injured Workers:

<http://www.dir.ca.gov/InjuredWorkerGuidebook/InjuredWorkerGuidebook.html>

Chapter 2: After You Get Hurt on the Job

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

Chapter 4: Resolving Problems with Medical Care and Medical Reports:

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

Chapter 9: For More Information and Help

<http://www.dir.ca.gov/InjuredWorkerGuidebook/Chapter9.pdf>

The State of California 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. 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.

For information about the workers' compensation claims process and your rights and obligations, go to www.dir.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,

Janice Gardner

Claims Examiner