

WARNKEN, LLC

Attorneys at Law
2 Reservoir Circle
Suite 104

Pikesville, Maryland 21208-1391
443-921-1100
443-921-1111 (fax)
www.warnkenlaw.com

Starting Your Workers' Compensation Case

Dear Potential Client:

We are excited you would like Warnken, LLC to handle your workers' compensation case. We have been around for more than 20 years representing injured workers. We believe in the cause of injured workers. We don't appreciate it when you get jerked around by insurance companies. We fight back.

In order to get started with us, we need you to fill out the paperwork in the next few pages. It shouldn't take more than 10 minutes, and you will finally have an advocate on your side. If you do not give the paperwork directly to a member of the Warnken team, you can email to either Dayna@warnkenlaw.com or Rebecca.Smith@warnkenlaw.com. You can also fax it to 443-921-1111. Please don't delay. Timing matters in workers' compensation and we want to do everything possible to maximize your benefits and make sure you're healing. You will officially be a client when you receive the signed Agreement to Retain Counsel back from us.

You do not need to complete the mileage reimbursement form right now. You can hold onto it and complete later. In addition, you only need to complete the new attorney release if you currently have a lawyer that we are replacing. Please complete all other pages though.

It's your case, it's your body, it's your life. Don't take that lightly and don't let anyone else take that lightly either. Again, we're excited to be able to help you. If you need any assistance in filling out paperwork, do not hesitate to call us. We're always here to help.

Sincerely,
Byron B. Warnken, Esq., Rebecca Smith, Esq.
Dayna Kipnis, Esq. and the whole Warnken, LLC
workers' comp team



Samples of attorney bios from WarnkenLaw.com. Visit the website to read the full bios. All clients will be represented by the whole team, though Dayna Kipnis or Rebecca Smith will be the attorney of record.

Rebecca L. Smith

Workers' Compensation Attorney

Ms. Smith, in addition to representing injured police officers and other public safety personnel, represents injured workers in workers' compensation matters. She is an excellent workers' compensation lawyer. Ms. Smith has worked to obtain sizable recoveries for those injured on the job. Whether in negotiation with IWIF or any other workers' comp insurer, or in front of the Maryland Workers' Compensation Commission, Ms. Smith does everything she can to obtain results for you.



Dayna Kipnis

Workers' Compensation Experience

Dayna Kipnis, Esq. is an experienced workers' compensation attorney. She joined Warnken, LLC in 2015 to bolster an already successful personal injury and workers' compensation practice. Kipnis spent 10 years on the defense side of workers' compensation, first at the well known comp defense firm Semmes Bowen & Semmes, then for years as Baltimore County's in-house workers' compensation defense lawyer.

Before joining Warnken, LLC, she also spent two years at a small Baltimore City workers' compensation law firm.



Byron B. Warnken

Byron's practice focuses on personal injury and workers' compensation. Individuals are harmed or manipulated by corporations and insurance companies with regularity. It's vital someone is able to help such individuals achieve justice.





Master Information for Workers' Compensation Cases
(Please Print Legibly)

Today's Date: _____

Full name: _____

Address: _____

Phone #: _____

Email Address: _____

County of Residence _____

Social Sec. #: _____ **Birth Date:** _____ **Marital Status:** _____

Medical Insurance Provider: _____

Was Medical Insurance Used for Treatment of this Injury?: _____

Employer at time of accident: _____

Employment Address: _____

Employment Phone #: _____

Job Title/Description: _____

Gross Weekly Income: _____

Were You Paid Full Wages for Date of Accident?: _____

Date of Accident: _____ (mm/dd/yyyy) **Time of Accident:** _____ am/pm

Location of Accident: _____

Preferred Method of Contact: Phone/Email _____

Detailed Description of Accident: _____

Description of Injuries (always include Left or Right, if applicable): _____

Any other important information your attorney needs to know/any specific questions you still have? _____

Anyone else injured in same incident: _____

Date employer notified: _____

Name of person notified: _____

Date Out of Work/Returned to Work: _____

Name(s), Adresse(s) & Telephone Number(s) of Physicians Seen for Accident:

MEDICAL PROVIDER NAME	PHONE	ADDRESS
1. _____	_____	_____
_____	_____	_____
2. _____	_____	_____
_____	_____	_____
3. _____	_____	_____
_____	_____	_____

(please list primary care physician if you saw your primary care physician related to your comp injury.)

Additional Information:

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Workers' Compensation Claimant Responsibilities

Thank you for entrusting Warnken, LLC to handle your workers' comp case. Our whole team will work hard for you. But understand you are a part of the team as well. Everyone has the same goal – maximize your recovery. We have things to do and you have things to do. Below is a list of what we ask from you...

1. Do not give information to anyone except our office. Employer/Insurers have been known not to follow the rules sometimes. We do not want you to be taken advantage of.
2. Keep good records! Keep a complete record of days missed from work. Get disability notes from your doctor – and get them to us as quickly as possible. If we don't get the notes in a timely fashion, it makes it harder to get you paid.
3. Send all medical prescription receipts and medical bills to us as soon as possible. We need documentation!
4. Call us after every medical appointment so we are updated on all the latest with your treatment. If you were to miss a medical appointment, call anyway to notify us of the rescheduled date.
5. Do not post anything about your case on any social networking site or anywhere else on the Internet. Be aware, depending on your circumstances, it's possible the insurance company has hired a private investigator to follow you in real life and digitally.
6. Notify us if you receive any other benefits such as medicare, SSI, SSDI, unemployment, retirement, or any other disability benefits. We also need to know if you apply for such benefits.
7. Notify us if you apply for or are granted bankruptcy.
8. If you are not happy with anything about us – tell us immediately.
9. If you are happy with us, tell your friends, co-workers, and loved ones. In addition to workers' comp, we handle personal injury, criminal law, any other matters.

We pride ourselves on a high level of communication with our clients. WE NEED YOU TO COMMUNICATE WITH US AS WELL!

Date

Client Signature

Date

Warnken, LLC

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Attorneys at Law

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CLAIMANT'S AGREEMENT TO RETAIN COUNSEL

This Firm represents my claim for any workers' compensation benefits to which I may be entitled for disability sustained by me on:

While in the course of my employment with:

I hereby retain and employ Warnken, LLC, to represent me with regard to my Maryland Workers' Compensation claim.

I agree to pay Warnken, LLC for their services a fee to be determined by the Workers' Compensation Commission.

I understand that all costs to pursue my claim (e.g. copying fees for medical records, doctor's evaluations, and fees for expert testimony) are my responsibility.

I understand that this retainer applies only to my Workers' Compensation claim and not to any other claim I may have on any other matter. This retainer also does not require the firm of Warnken, LLC to file an appeal on my behalf from any Workers' Compensation Commission decision.

Please note that under the policy of this office, we may destroy all files after five years from the date that the case is concluded. Additionally, please note that we store your information in a cloud-based storage system. If you would like to retain your file beyond five years from the date of conclusion, please notify this office at the time your case has concluded.

Claimant (Print)

Claimant (Signature)

Date

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AUTHORIZATION TO RELEASE PROTECTED HEALTH CARE INFORMATION OF

(Patient's Name)

TO:

Pursuant to the Health Insurance Portability and Accountability Act (HIPAA) Privacy Regulations, 45 CFR § 164.508, you are hereby authorized to release to Warnken, LLC or to any of its representatives, all medical records, meaning every page in my record, including but not limited to: office notes, fact sheets, discharge summaries, history and physical, consultation notes, intra-operative records, anesthesia records, operative reports, recovery room, pathology reports, medication administration records, EKG reports, EKG strips, EEG reports, EEG strips, therapy notes, orders, progress notes, laboratory results, nurses notes, vital signs sheets, intake/output records, reports of all x-rays, mammograms, CT scans, MRIs or PET scans, respiratory therapy records, nutrition records, social worker records, transfusion records, code sheets, consent forms, autopsy report, labor flow sheets, labor and delivery summary, delivery summary/report/note, fetal monitor strips, nursery records, emergency room records, transfer records, discharge instructions, personal property list, in-patient records, clinic records, correspondence, photographs, videotapes, telephone messages, computer generated information, medical bills, pharmacy and drug records, health insurance, insurance claim forms, insurance payment forms, Medicaid or Medicare records, concerning any medical treatment that the above-named patient has received from you, at your institution, or which you keep in the regular course of business. I hereby authorize release of all records regarding mental health, psychiatric, chemical dependency or HIV. The patient understands that this authorization need not be signed as a condition of receiving treatment.

A photocopy, fax, or digitally imaged copy of this authorization shall be as valid as the original.

The purpose of this authorization and request is to obtain ALL medical information pertaining to the patient's physical condition.

I further authorize attorneys at Warnken, LLC to speak to my healthcare professionals privately or to obtain testimony from them at deposition or trial a may be requested. **It is my further request that you do not discuss my care with any other attorneys unless my own attorneys are also present.**

I also hereby authorize you to provide, BUT ONLY IF REQUESTED, AND ONLY TO MY OWN ATTORNEYS, a written report concerning my condition, its causes, its prognosis, or any other matters they deem relevant to a legal claim.

This authorization expires one (1) years from the date of my signature; however, the above-named patient or his/her representative has the right to revoke this authorization in writing by providing a signed, written notice of revocation to the health care provider identified above and to Warnken, LLC.

The information disclosed pursuant to this authorization may be subject to re-disclosure and no longer protected by the privacy regulations promulgated pursuant to the Health Information Portability and Accountability Act (HIPAA).

(PATIENT)

[If personal representative or parent of minor sign and describe authority]

Patient's Date of Birth

Patient's SSN

Date Signed

IMPORTANT NOTICE TO PROVIDERS: By law, medical providers may not condition the release of patient data upon the signing of a written acknowledgement of a debt or the acknowledgement of a lien upon the potential receipt of proceeds from a claim.

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REQUEST FOR TRANSFER OF FILE

I, _____, do hereby request and instruct my former attorney, _____, to release all medical records and documents pertaining to my workers' compensation claim arising from an injury that occurred on or about _____. Please cease work on my case, including communication with the Insurer and me, and send all documents to my new attorneys Warnken, LLC, Attorneys-at-Law.

Date

Claimant



Mileage you should include:
Any approved medical visit

Please use multiple sheets if necessary

Claimant: _____

Date of Injury: _____

Claim # _____

TRAVELED FROM	TRAVELED TO	DATE	ROUND TRIP MILEAGE	PARKING	TOLLS

TOTAL MILES: _____ X _____ plus _____ equals _____
(Mileage Rate) (Parking and Tolls) Total Reimbursement

No mileage reimbursement for claimant IME, prescription pickup, or lawyer/court trips.
 Parking and tolls need to have receipts for reimbursement.

Claimant's Attorney: Rebecca Smith, Esq.

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I hereby affirm under the penalties of perjury that the facts listed above are true & correct to the best of my knowledge.

Claimant Signature:

Date: _____



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Common Workers' Compensation Questions

All of our clients have questions. Most clients have lots of questions. That's what we're here for. Below are some of the most common questions. Whatever your question, make sure you understand the answer. We will spend as long as needed educating you because that's how you will receive the most for your case.

1. What is TTD?

TTD stands for temporary total disability. It's the benefits you get when you cannot work in any capacity because of your injury. TTD is $2/3$ of your average weekly wage, but cannot exceed the state average weekly wage. TTD benefits are tax-free. You must have verification you can't work from a doctor.

2. When will I get my TTD benefits?

TTD benefits will not be paid until the insurer accepts your claim and you provide a doctor's note to the insurer to prove you are unable to work. We will work on that issue for you if you have *any* problems.

3. Does workers' comp pay for medical bills?

The workers' comp insurer pays for medical bills for treatment related to your workers' comp injury. The insurer will not pay medical bills unless the claim is accepted and the doctor requests authorization from the insurer to proceed with the treatment.

4. Is my employer entitled to see my medical records?

The employer does not have access to your medical records directly, but the Insurer will have access to your medical records. Speak to us for further information about this sensitive subject.

5. What is Average Weekly Wage and what if I work overtime?

Your Average Weekly Wage (AWW) is the average of your wages for the 14 weeks prior to your injury. If you work overtime, that is included in the calculation of AWW. The AWW is determined by your pay history, so it's important to keep your paystubs so you can prove your wages.

6. How much are legal fees?

In workers' comp, the attorney doesn't get paid unless you get paid. There are two ways for an attorney to get paid in workers' comp. The first is if the Commission has to decide whether you are entitled to

TTD at a hearing. If the Commission awards TTD, the attorney is entitled to 10%. The second way is at the end of the case when you get a permanent partial disability award or settlement. The attorney is entitled to 20% of that. The fees are set by the law.

7. When do I get pain and suffering?

In workers' comp, you do not get pain and suffering. You get permanent partial disability (PPD) or permanent total disability (PTD), which compensates you for the permanent issues you will have as a result of your work-related injury. This is determined after your doctor releases you from care at maximum medical improvement.

8. How long does it take?

How long the case takes depends on a lot of factors. If the insurer accepts the claim without a fight, things will move more quickly than if they deny the claim. For PPD or PTD, the case will take as long as it takes for you to get to maximum medical improvement and released from the doctor's care.

9. Do I have to talk to the insurer?

If you are unrepresented, you will need to talk to the insurer about how the accident happened and the status of your treatment to make sure you get TTD and your treatment approved. You should have an attorney represent you as soon as possible after an injury so that you don't have to speak with the insurer directly. The insurers do not advocate for you and will not do you any favors. We will speak to the insurer for you.

10. What if the insurer denies my claim?

That's what you have an attorney for. Warnken, LLC is here to fight for you.

11. How do I know if a claim has been filed?

Just because a claim has been filed with the insurer and you are given a claim number does not mean that a claim has been filed with the Commission. It is important to get a claim filed with the Commission in case the insurer denies payments or treatment. Contact us if you are unsure whether a claim has been filed. We'll file one for you if you haven't filed one already.

12. What is an IME? Do I have to go see the IME doctor assigned by the insurer?

An IME is an Independent Medical Evaluation. If the insurer schedules you for an IME, you should contact an attorney immediately. This means that the insurer will rely on whatever their doctor says is best for your treatment, regardless of whether your doctor agrees.

13. What if my employer doesn't have workers' comp insurance?

If your employer doesn't have workers' compensation insurance, you should contact an attorney immediately. The Uninsured Employers Fund would handle the processing of your claim in place of the insurer. Also, the Commission and the UEF will research to find the insurer if it's not immediately apparent.

14. Do I need a doctor's note for the insurer to pay TTD benefits?

Yes. Without a doctor's note saying that you are unable to work because of your work-related injury, the insurer will not pay TTD benefits.

15. Am I compensated if I have to drive far for doctor's appointments?

The insurer will compensate you for the mileage to and from the doctor. For 2014, the insurer will compensate you \$0.56 per mile for your doctor's appointments. This is not automatic and the information must be submitted to the insurer for payment.

16. I need treatment but it hasn't been approved. What do I need to do?

Contact Warnken, LLC immediately.

17. How long does it take to have treatment approved?

The sooner you get us working for you, the sooner the treatment will be approved.

18. What do I do if the insurer isn't returning my calls?

Contact an attorney immediately. When you need treatment and you're not getting TTD, time is of the essence. You cannot afford to wait for the insurer to get back to you. You are just a number to them.