



STATE OF NEW YORK
 WORKERS' COMPENSATION BOARD
 PO Box 5205
 Binghamton, NY 13902-5205
 www.web.state.ny.us

THIS AGENCY EMPLOYS AND SERVES
 PEOPLE WITH DISABILITIES WITHOUT
 DISCRIMINATION.

ZACHARY S. WEISS
 CHAIR

Please see reverse for Recipients.

February 20, 2009

FILE COPY


Yes the client should cooperate but he was found permanently partially disabled seven years ago! You cannot threaten a client with loss of benefits over this issue!

THE COMMAND

THE THREAT

The Board hereby directs you to cooperate with the carrier's Section 15-8 investigation to avoid a hearing on the issue of your eligibility for continued compensation benefits.

cc: Travelers Indemnity Co.
 Markhoff and Mittman.

By: 
 Telephone: (800)877-1373

Your "W.C.B. Case No." is important. In the future, please refer to the "W.C.B. Case No." below so that we could expedite the processing of the correspondence you send us.

Su numero de caso "W.C.B. Case No." es importante. En el futuro, indique el numero de su caso "W.C.B. Case No." que aparece de abajo para poder porcesar la correspondencia que usted nos mande mas rapidamente.



ZACHARY S. WEISS

CHAIR

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They will "urge" the parties to cooperate as opposed to the threat in the other letter!

Carrier/Employer:

In your Request for Further Action form of 02/05/2009 you indicated that you request a hearing in order to compel the claimant's cooperation with your Section 15 investigation (claimant/attorney have not responded to numerous requests to sign medical release form).

In response to your request:

The Board will contact the claimant to urge him to comply with the Section 15-8 investigation. The carrier may resubmit a new RFA-2 if the claimant does not cooperate within 40 days.