



JOEL M. PRESSMAN
Commissioner

The Commonwealth of Massachusetts

Department of Industrial Accidents

600 Washington Street

Boston, Mass. 02111

CIRCULAR LETTER NO. 257

TO: All Interested Parties
FROM: Joel M. Pressman, Commissioner
RE: Reimbursement for Latency Benefits
DATE: December 15, 1990

M.G.L. c.152, §35C provides that "When there is a difference of five years or more between the date of injury and the initial date on which the injured worker or his survivor first became eligible for benefits under section thirty-one, thirty-four, thirty-four A, or section thirty-five, the applicable benefits shall be those in effect on the first date of eligibility for benefits." In addition, §65(2)(b) indicates that any adjustments paid as a result of the application of §35C is reimbursable out of the Workers' Compensation Trust Fund.

To apply for reimbursements under §35C for latency as indicated above, please complete the attached forms, and forward them to the address given below. Requests for reimbursements should be submitted at the close of each quarter of the calendar year.

Only requests submitted on these forms will be considered by the DIA for reimbursements. Please do not submit reimbursement requests for latency adjustments in cases where:

- A. Any adjustment was paid prior to November 1, 1986; or
- B. Less than five years have passed between the injury date and the first date of eligibility for weekly benefits.

Additional forms may be obtained by written request from the Department of Industrial Accidents, Office of Administration:

Latency Processing
DIA Office of Administration
P.O. Box 9104, Essex Station
Boston, MA 02112-9104

MASSACHUSETTS DEPARTMENT OF INDUSTRIAL ACCIDENTS
DIA TRUST FUND (M.G.L. c. 152 §35C) LATENCY REIMBURSEMENT REQUEST

PAYMENT QUARTER / / TO / /

[illegible]

NOTE: COMPENSATION RATES SHOULD INCLUDE DEPENDENCY BENEFITS, BUT SHOULD NOT INCLUDE ANY SUPPLEMENTAL BENEFITS (COLA'S).

*** DATE OF INJURY MUST BE AT LEAST FIVE YEARS PRIOR TO DISABILITY DATE.

*** ANY PAYMENT OF LATENCY ADJUSTMENT MUST HAVE BEEN MADE ON OR AFTER 11/1/86 IN ORDER TO BE ELIGIBLE FOR REIMBURSEMENT.



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600 Washington Street
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FROM:

MAIL TO:

Latency Processing

DIA Office of Administration

P.O. Box 9104, Essex Station

Boston, MA 02112-9104

Gentlemen:

Attached please find a request, pursuant to M.G.L. c.152, Section 35C (as amended by Chapter 572 of the Acts of 1985), for reimbursement of Latency Benefits paid on behalf of _____ claimants totaling \$_____.

I hereby certify under the penalties of perjury that all laws of the Commonwealth governing assessments and regulations thereof have been complied with and observed, and that all information is, to the best of my knowledge, correct.

Signed: _____

Name: _____

Title: _____

Phone #: _____

Date: _____

FOR INTERNAL USE ONLY

COMMENTS:

PAYMENT APPROVED	_____
DATE:	_____