



**You may lose important rights if you do not take certain actions within 10 days.
Read this letter and any enclosed fact sheets very carefully.**

August 5, 2010

Tiffany Anderson
2 N. Avena Ave.
Lodi, CA 95242

Employee: Tiffany Anderson
Claim # : VE0700184
Date of Injury: 06/19/2008

**NOTICE REGARDING TEMPORARY DISABILITY BENEFITS
PAYMENT TERMINATION**

Dear Ms. Anderson:

Acclamation Insurance Management Services (AIMS) is handling your workers' compensation claim on behalf of San Joaquin County Mosquito Vector Control District. This notice is to advise you of the status of disability benefits for your workers' compensation injury on the date shown above.

Payments are ending because your AME physician, Dr. Tabaddor has indicated in his report dated 06/08/2010 that you have reached your maximum medical improvement and that your condition has been determined to be Permanent and Stationary as of 06/08/2010.

The total amount of temporary disability benefits paid to you total \$ 50,534.48. These benefits were paid from 07/21/08 through 07/30/10 at \$ 602.59 per week. Please see the attached detailed payment record for specific periods and amount paid.

However, since your doctor has determined you to be Permanent and Stationary as of 06/08/2010, payment of your temporary disability should have ended on 06/07/10; thus, there was an overpayment of \$4,571.42 for the period 06/08/10 through 07/30/10.

Please note that the overpaid amount of \$4,571.42 will be credited against your permanent disability benefits payment.

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 regarding the information provided to you in this notice, please call **Mackenzie Dawson at (916) 563-1900, ext. 242**. However, if you are represented by an attorney, you should call your attorney, not the claims adjuster. If you want further information on your rights to benefits or disagree with our decision, you may contact your local Information and Assistance Officer of the Division of Workers' Compensation by calling **(209)948-7759**.


For recorded information and a list of offices, call (800) 736-7401. You may also visit the DWC website at: http://www.dir.ca.gov/DWC/dwc_home_page.htm.

P.O. Box 269120
Sacramento, CA 95826-9120
(916) 563-1900

You also have a right to consult an attorney of your choice. Should you decide to be represented by an attorney, you may or may not receive a larger award, but unless you are determined to be ineligible for an award, the attorney's fee will be deducted from any award you might receive for disability benefits. The decision to be represented by an attorney is yours to make, but it is voluntary and may not be necessary for you to receive your benefits.

To resolve a dispute, you may apply to the Workers' Compensation Appeals Board.

Sincerely,



Mackenzie Dawson
Claims Examiner

Cc: ~~Stockwell, Harris, Woolverton & Muehl~~
~~Ronald Stein, Inc.~~
San Joaquin County MVCD

Encl:

- DWC Fact Sheet C – Temporary Disability (Rev 2/08)
- DWC Fact Sheet E – QME/AME (Rev 11/09)
- Payment Record