

EVANS & DIXON LLC

ATTORNEYS AT LAW

**KANSAS DEPARTMENT OF LABOR:
DIVISION OF WORKERS' COMPENSATION**

**TABLE OF MAXIMUM BENEFITS – EFFECTIVE JULY 1, 2022
KANSAS WORKERS' COMPENSATION LAW**

- **NOTICE** – Must be provided within the earliest of the following: (1) 20 days after the date of accident, (2) if the employee is working for the employer against whom treatment is sought, within 20 days of the date of accident, (3) if the employee no longer works for the employer against whom benefits are sought, 10 days from the last day actually worked.
- **APPLICATION FOR HEARING** – Form E-1 must be filed within three years of the date of accident or two years of the last benefit provided.
- **TREATMENT** – The employer must furnish medical treatment to cure and relieve the effects of the injury. The employee has the right to \$500 of unauthorized medical expense.

Medical and hospital allowances.....	no limit
Death: spouse & wholly dependent of children.....	\$300,000
Death: heirs (no dependents).....	Up to \$100,000
Burial allowance.....	Up to \$10,000
Permanent total disability.....	\$155,000
PPD/TTD.....	\$130,000
Functional Impairment only.....	\$75,000
Maximum weekly benefits:	
7-1-18 to 6-30-19.....	\$645
7-1-19 to 6-30-20.....	\$666
7-1-20 to 6-30-21.....	\$687
7-1-21 to 6-30-22.....	\$737
7-1-22 to 6-30-23.....	\$765

- **FOR INFORMATION** – write:

KS DEPT OF LABOR
DIVISION OF WORKERS' COMPENSATION
401 SW TOPEKA BOULEVARD, SUITE 2
TOPEKA KS 66603-3105

Travel to obtain medical services on or after January 1, 2022, shall be reimbursed at the rate of 58.5¢ a mile. Maximum benefits where functional impairment only is awarded is restricted to \$75,000.

- **OR CALL:**

(785) 296-4000 | (800) 332-0353

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| ▪ ** General Information | Option 2 |
| ▪ **Coverage & Compliance | Option 4 |
| ▪ Director's Office | Extension 7364 |
| ▪ **Fraud & Abuse Investigation | Option 3 |
| ▪ **Mediation | Option 2 |
| ▪ Medical Services | Option 8, then 2 |
| ▪ **Ombudsman/Claims Advisory | Option 2 |
| ▪ Administrative Law Judges | Option 5 |
| ▪ Appeals Board | Option 6 |
| ▪ Assessments | Option 8, then 2 |
| ▪ Electronic Data Interchange (EDI) | Option 8, then 1 |
| ▪ Records Management | Option 7 |
| ▪ Self-Insurance | Option 8, then 3 |
| ▪ Website | www.dol.ks.gov |

	Max. weeks may be paid	Compensation at \$765 per week
Disability, body as a whole	415	\$317,475
Shoulder	225	\$172,125
Arm	210	\$160,650
Forearm	200	\$153,000
Hand	150	\$114,750
Leg	200	\$153,000
Lower Leg	190	\$145,350
Foot	125	\$95,625
Eye	120	\$91,800
Hearing, both ears	110	\$84,150
Hearing, one ear	30	\$22,950
Thumb	60	\$45,900
Finger 1 st (index)	37	\$28,305
Finger 2 nd (middle)	30	\$22,950
Finger 3 rd (ring)	20	\$15,300
Finger 4 th (little)	15	\$11,475
Great toe	30	\$22,950
Great toe, end joint only	15	\$11,475
Each other toe	10	\$7,650
Each other toe, end joint only	5	\$3,825

Overland Park, Kansas
10851 Mastin Blvd., Ste. 900
Overland Park, KS 66210
Phone: (913) 693-0900
Fax: (913) 341 - 2293

Kansas City, Missouri
1100 Main St., Ste. 2000
Kansas City, MO 64105
Phone: (816) 472-4600
Fax: (816) 472-4013

St. Louis, Missouri
211 N. Broadway, Ste. 2500
St. Louis, MO 63102
Phone: (314) 621-7755
Fax: (314) 621-3136

Springfield, Missouri
4905 South National Ave., Bldg. B
Springfield, MO 65810
Phone: (417) 882-4700
Fax: (417) 882-4927

Columbia, Missouri
500 West Cherry St., Ste. 200
Columbia, MO 65201
Main: (573) 777-8823
Fax: (314) 884-4400

Omaha, Nebraska
11422 Miracle Hills Dr., Ste. 400
Omaha, NE 68154
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303 W. Madison St., Ste. 1900
Chicago, IL 60606
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