



**MEDICAL CASE
MANAGEMENT EXTENSION
REQUEST**
RETURN TO WORK DIVISION
SFN 60730 (03/2016)

1600 E Century Ave, Ste 1
PO Box 5585
Bismarck ND 58506-5585
Telephone 800-777-5033
Toll Free Fax 888-786-8695
TTY (hearing impaired) 800-366-6888
Fraud and Safety Hotline 800-243-3331
www.workforcesafety.com

Date	Injured worker	Claim number
Hours billed to date		
Hours requested		
Description of professional hours to include travel, mileage, and wait time, to accomplish plan and rationale.		
Signature of requesting Nurse Case Manager	Date	