
In the Matter of the Compensation of
RAMONA F. SAATKAMP, Claimant
Own Motion No. 04-0135M
OWN MOTION ORDER OF DISMISSAL
Claimant Unrepresented
Legacy Health Syst, Insurance Carrier

Reviewing Panel: Members Biehl and Langer.

The self-insured employer has submitted a “Carrier’s Own Motion Recommendation” form, indicating that claimant requests that it reopen her 1991 injury claim for a “worsening” of her previously accepted condition (“lumbosacral strain”). *See* ORS 656.278(1)(a) (2001). The employer recommends against reopening the claim.

Clarifying that she is only seeking palliative medical services, claimant has withdrawn her “claim for aggravation of the worker’s comp. injury of 11/7/91.” In reply, the employer rescinded its April 12, 2004 Carrier’s Own Motion Recommendation.

Under such circumstances, this request for Own Motion relief is dismissed. Claimant’s entitlement to medical expenses pursuant to ORS 656.245 is not affected by this order.¹

IT IS SO ORDERED.

Entered at Salem, Oregon on May 24, 2004

¹ Finally, inasmuch as claimant is unrepresented, she may wish to consult the Workers’ Compensation Ombudsman, whose job it is to assist injured workers in such matters. She may contact the Workers’ Compensation Ombudsman, free of charge, at 1-800-927-1271, or write to:

WORKERS’ COMPENSATION OMBUDSMAN
DEPT OF CONSUMER & BUSINESS SERVICES
PO BOX 14480
SALEM, OR 97309-0405