

by the Compensation Law. In disputed cases, the injured employe is informed of his rights under the law and in many cases is assisted in filing the proper petition, so that his case may be heard by a referee. Adjusters connected with the Bureau frequently represent the claimants at the hearings before the referees and the Workmen's Compensation Board. Fatal cases are investigated by the Bureau's adjusters to determine if there are any dependents who are entitled to the payment of compensation. The Bureau also notifies Consular Officers representing foreign countries, but who are located in this country, in case of fatal accidents to any of their subjects in order that they may determine if there are any non-resident alien dependents who may be entitled to payments of compensation. All petitions are filed with the Bureau at Harrisburg and the cases are then referred to the referee for the district in which the accident occurred, or where the claimant resides, or to the Workmen's Compensation Board. When cases are disposed of by the referees, copies of the decisions are mailed by the Bureau to the claimant and the defendant in every case. If an appeal from the decision of the referee is taken by either side, the case is referred to the Workmen's Compensation Board. All petitions for lump sum payments are referred to and disposed of by the Board.

CASES ADJUSTED BY VOLUNTARY AGREEMENTS

In approximately 96 per cent of the cases in which compensation is paid the payments are made voluntarily by agreement executed by the injured employe and employer, or insurance carrier. These agreements are carefully checked by the Bureau before being approved in order to determine whether the injured person is securing the full benefit of the law. In every fatal case the amount of compensation payable to dependents is calculated by the Bureau before agreements are approved, thus fully protecting the interests of all parties concerned. Cases in which disputes arise while compensation is being paid or where payments are arbitrarily discontinued are frequently investigated by the adjusters connected with the Bureau and assistance given in adjusting these cases. Receipts covering all compensation payments are filed with the Bureau and a final receipt is required when disability terminates and compensation payments cease. The final receipt must give the date when disability terminated, the total amount paid and the wage at which the injured person returned to work. This information is required in order that the Bureau may determine if the injured person has received the full amount of compensation payable and whether there is any liability on the part of the employer for the payment of compensation for partial disability because of any loss in earning power due to the accident. All applications for lump sum payments are investigated to determine the merits of such claims. Assistance is also frequently given in securing the appointment of guardians in cases where compensation is payable to minor dependents.

An employe injured in the course of employment should notify the employer or person in charge immediately after the accident. The employer is required to furnish reasonable medical, surgical and hospital services, medicines and supplies during the first 30 days after disability begins. If the employer upon application made by