

May 7, 2024

City Clerk  
ATTN: CLAIMS  
200 E. Wells Street, Room 205  
Milwaukee, WI 53202-3567

CITY OF MILWAUKEE  
2024 MAY -8 AM 11:10  
CITY CLERK'S OFFICE

Dear City Clerk;

Following please find the information requested, based on the Office of the City Clerk's "Instructions for Filing a Claim against the City of Milwaukee". It will outline why the City of Milwaukee acted negligently, as there was no indication this sidewalk hazard existed. (Sidewalk - Southeast corner of State and James Lovell)

**CIRCUMSTANCES OF CLAIM:**

On February 12, 2024, at approximately 10pm, I was walking back to the MacArthur Parking lot after my Fiserv Forum shift. I walked across State Street so I could then cross James Lovell to continue to the MacArthur parking structure. It was dark and there was a hole on the sidewalk filled with dirty water causing it to blend into the sidewalk. There was no indication to warn me of this hazard.

My left leg went into the hole. It stopped because my right leg bent and hit the sidewalk, allowing my two hands to further stop me. I was able to then pull my left leg out of the hole. I went back a couple days later with a tape measure and confirmed the hole was *deeper* than 8 feet. Further explanation and supporting pictures are included under the "Description of the Incident" in this document.

I went to urgent care the next morning/February 13 because of the pain and swelling. X-rays initially showed I did not break any bones. The doctor remained concerned because of my age and details of the accident. I was placed in a FULL leg brace to immobilize it for one week until I could see an orthopedic doctor (Dr. Curtiss). After additional x-rays, Dr. Curtis, the orthopedic doctor, confirmed I seriously sprained my MCL. I was placed in a specific knee brace for an additional nine weeks. She also prescribed physical therapy to help reduce the blood clot/swelling. My last visit with Dr. Curtiss was on April 25, 2024.

**ADDRESS OF CLAIMANT:**

Janet M. Wilhelms  
10131 W. Melvina Street  
Wauwatosa, Wisconsin 53222  
Cell Phone: 312-961-7982  
Email: janet3327@gmail.com

**RELIEF SOUGHT:**

The City of Milwaukee was negligent because there was no indication to warn of this sidewalk hazard. This hazard is located adjacent to the pedestrian post used to prompt the stop light so one can safely cross the street.

Because of the City's negligence, I am seeking reimbursement for all medical expenses. I am also seeking pain and suffering based on my physical impairment. I had limited mobility and was in constant pain which effected: nightly sleeping, pain waking me every time I moved; all daily activities such as dressing, showering, sitting down, getting in a car; pain in the *right* leg, as it compensated for the injured left one; etc. In addition, I am a very active person and this also affected me mentally as it limited my daily activities and cancelled several daily plans.

## **SUMMARY OF EXPENSES/REIMBURSEMENT:**

Following are the medical expenses incurred during the **TWELVE WEEKS** following my injury: TEN weeks in a brace followed by TWO weeks after its removal. Although the pain has not left, I am now able to slowly kneel again. Medicare has not yet confirmed if they will pay towards two of the remaining balances so they remain estimated costs. All are presented today to insure the City receives this documentation within their 120 day limit.

### **Froedtert Urgent Care and Hospital: Exhibits 1-5**

- Amount Charged: \$3,388.00 minus Insurance Payment of \$2,849.13.
- Amount Due by patient: **\$538.87**

### **Froedtert Orthopaedics Sports Medicine, Mequon Doctor (Dr. Curtiss): Exhibits 6-7**

- Amount Charged: \$3,525.00 minus Insurance Payment of \$2,811.00
- Amount Due by patient: **\$714.00**

### **TOTAL REIMBURSEMENT:**

- Balance to be paid by patient for medical bills: **\$1,252.87**
- Pain and Suffering based on 12 weeks multiplied by **1.2 of the total \$6,913.00 medical bills.** (Percent provided by consultant): **\$8,295.60**
- **TOTAL REIMBURSEMENT: \$9,548.47**

**DESCRIPTION OF THE INCIDENT:**

**LOCATION:** On the sidewalk - Southeast corner of State and James Lovell

**DATE/TIME:** February 12, 2024, at approximately 10pm, while walking back to MacArthur Parking lot after my shift at Fiserv Forum. Note: This was a path I generally don't take, as I usually walk with someone and we cut through the open parking lot to the east of this location.

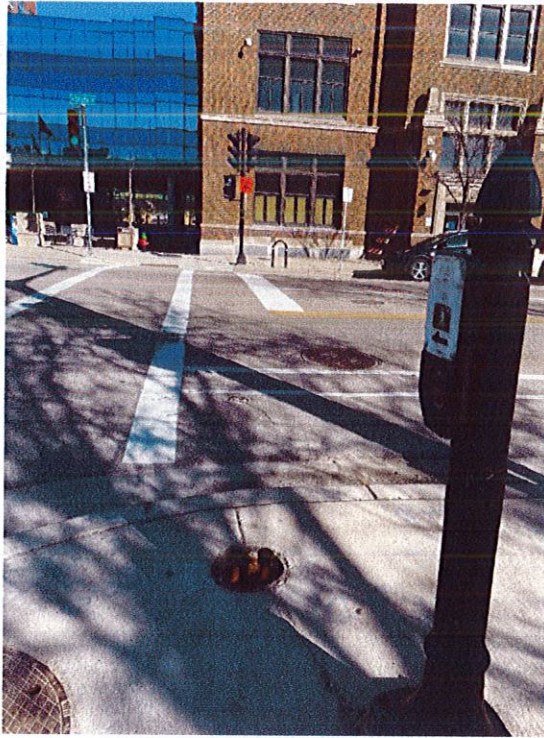
Much of the description is included in the forementioned/above "Circumstances of Claim". To further describe, following are pictures of the hazardous hole and the *physical* appearance of my leg:

*Picture A:* The hole was full of water. You can see the amount that was splashed on the surrounding area when my left leg went into the over 8-foot-deep hole in the sidewalk. The left side of my left leg hit the post that was part of the hole. This caused the extensive swelling. The larger white square (left) is the package of Kleenex that fell out of my pocket when my hands came out to brace me. The smaller white may be the money in my other pocket.



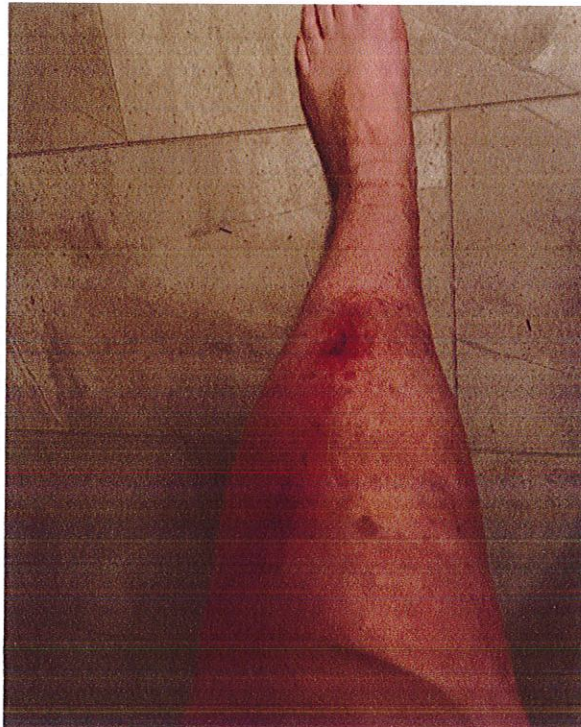
*Picture A*

**Picture B:** I went back to the area a few days later to measure the hole (over 8 ft deep) and take a picture of how close it was to the post that pedestrians use to prompt the stop light to safely cross the street.



*Picture B*

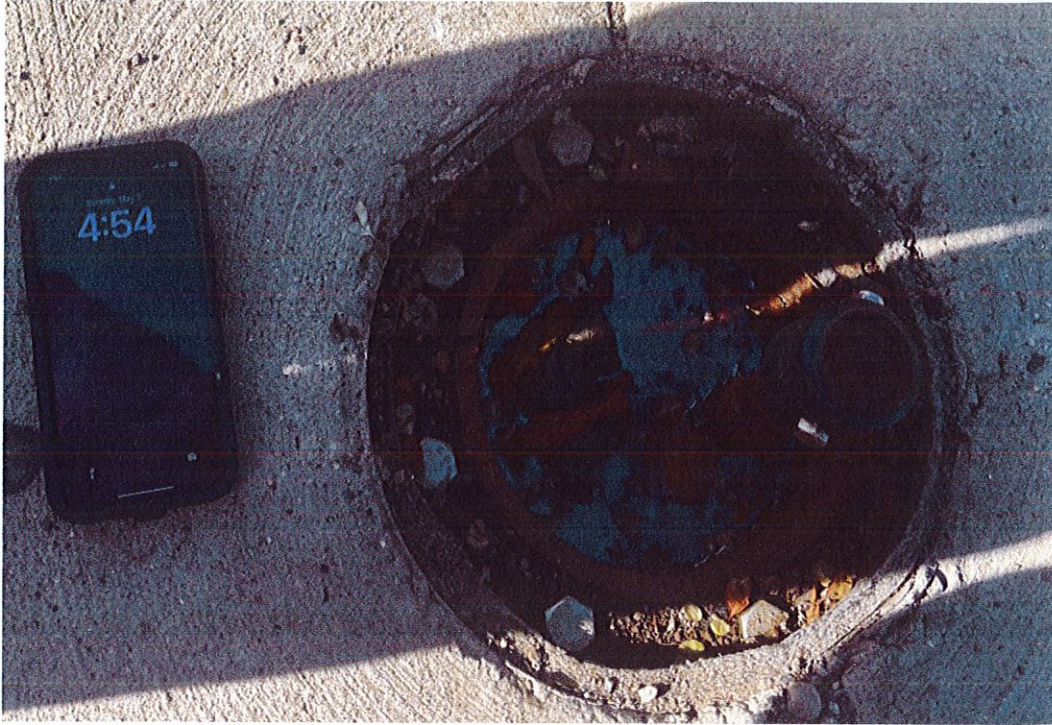
**Picture C:** My left leg showing visible injury when it fell into the hole. Not clearly seen in this picture is the left side of my knee where the post hit and created the swelling.



*Picture C*

**IN SUMMARY: CITY REMAINS NEGLIGENT**

Immediately after the February 12 incident, I slowly walked to a police van parked on the street. They mentioned someone else had reported it earlier and the city should have fixed it. I also informed both the police and mayor's office of this hazard on February 13 when I requested their claim form. On May 4, 2024, the city remains negligent, as this hole continues to exist as a hazard (currently filled with water), and NO warning for pedestrians! (Picture D taken at 4:54 on May 4, 2024).



*Picture D*

My life had been altered for over twelve weeks but fortunately, I am expected to have a full recovery. Please contact me should you need additional information in order to process this claim.

Regards,

*Janet M. Wilhelms*

**Janet M. Wilhelms**

Cell Phone: 312-961-7982

Email: Janet3327@gmail.com

**Date: 04/08/24**

Janet M Wilhelms  
 10131 W MELVINA ST  
 WAUWATOSA, WI 53222

Guarantor ID: 8241086

Per your request, below is an itemization of your hospital charges.

**Patient:** Janet M Wilhelms  
**Hospital Account:** 8046194606  
**Admission Date:** 02/13/24  
**Discharge Date:** 02/13/24  
**Visit Coverages:** Network Health Medicare - Medicare Network Health  
**Location:** Tosa Health Center - Froedtert & the Medical College of Wisconsin Community Physicians

**Total Charges: 314.00**

**Professional Charges**

Date	Rev Code	Procedure Code	Description	Qty	Amount
02/13/24		99213	Office/Outpatient Established Low Mdm 20 Min	1	260.00
02/13/24		L1830	Ko Immob Canvas Long Pre Ots	1	54.00

**Professional Payments and Adjustments**

Date	Description	Amount
	Insurance Payments and Adjustments	-277.51

*Exhibit 1*



**Date:** 04/08/24

Janet M Wilhelms  
10131 W MELVINA ST  
WAUWATOSA, WI 53222

Guarantor ID: 8241086

Per your request, below is an itemization of your hospital charges.

**Patient:** Janet M Wilhelms  
**Hospital Account:** 8046372266  
**Admission Date:** 02/13/24  
**Discharge Date:** 02/13/24  
**Visit Coverages:** Network Health Medicare - Medicare Network Health  
**Location:** Froedtert Hospital

**Total Charges:** 121.00

**Professional Charges**

Date	Rev Code	Procedure Code	Description	Qty	Amount
02/13/24		73562	X-Ray Knee 3 View	1	121.00

**Professional Payments and Adjustments**

Date	Description	Amount
	Insurance Payments and Adjustments	-112.49

Exhibit 2

**Date: 04/08/24**

Janet M Wilhelms  
 10131 W MELVINA ST  
 WAUWATOSA, WI 53222

Guarantor ID: 8241086

Per your request, below is an itemization of your hospital charges.

**Patient:** Janet M Wilhelms  
**Hospital Account:** 6506780454  
**Admission Date:** 02/13/24  
**Discharge Date:** 02/13/24  
**Visit Coverages:** Network Health Medicare - Medicare Network Health  
**Location:** Froedtert Hospital

**Total Charges: 685.00**

**Hospital Charges**

Date of Service	Rev Code	Procedure Code	Description	Qty	Amount
02/13/24	0320	320000108	HC X-RAY EXAM, KNEE, 3 VIEWS	1	685.00

**Hospital Payments and Adjustments**

Date	Description	Amount
	Insurance Payments and Adjustments	-598.10

Exhibit 3



**Date: 04/08/24**

Janet M Wilhelms  
 10131 W MELVINA ST  
 WAUWATOSA, WI 53222

Guarantor ID: 8241086

Per your request, below is an itemization of your hospital charges.

**Patient:** Janet M Wilhelms  
**Hospital Account:** 6506831269  
**Admission Date:** 02/22/24  
**Discharge Date:** 02/29/24  
**Visit Coverages:** Network Health Medicare - Medicare Network Health  
**Location:** Froedtert Hospital

**Total Charges: 986.00**

**Hospital Charges**

Date of Service	Rev Code	Procedure Code	Description	Qty	Amount
02/22/24	0420	420000024	HC PT, THERAPEUTIC EXERCISES, EACH 15 MIN	1	169.00
02/22/24	0424	424000056	HC PHYSICAL THERAPY EVALUATION, LOW COMPLEXITY	1	328.00
02/26/24	0420	420000024	HC PT, THERAPEUTIC EXERCISES, EACH 15 MIN	2	338.00
02/26/24	0420	420000027	HC PT, THERAPEUTIC ACTIVITIES, EACH 15 MIN	1	151.00

**Hospital Payments and Adjustments**

Date	Description	Amount
	Insurance Payments and Adjustments	-791.19

*Exhibit 4*



**Date:** 04/08/24

Janet M Wilhelms  
 10131 W MELVINA ST  
 WAUWATOSA, WI 53222

Guarantor ID: 8241086

Per your request, below is an itemization of your hospital charges.

**Patient:** Janet M Wilhelms  
**Hospital Account:** 6506889261  
**Admission Date:** 03/05/24  
**Discharge Date:** 03/31/24  
**Visit Coverages:** Network Health Medicare - Medicare Network Health  
**Location:** Froedtert Hospital

**Total Charges:** 1,282.00

**Hospital Charges**

Date of Service	Rev Code	Procedure Code	Description	Qty	Amount
03/05/24	0420	420000024	HC PT, THERAPEUTIC EXERCISES, EACH 15 MIN	1	169.00
03/05/24	0420	420000027	HC PT, THERAPEUTIC ACTIVITIES, EACH 15 MIN	2	302.00
03/14/24	0420	420000024	HC PT, THERAPEUTIC EXERCISES, EACH 15 MIN	1	169.00
03/14/24	0420	420000026	HC PT, MANUAL THERAPY, EACH 15 MIN	1	170.00
03/14/24	0420	420000027	HC PT, THERAPEUTIC ACTIVITIES, EACH 15 MIN	1	151.00
03/20/24	0420	420000026	HC PT, MANUAL THERAPY, EACH 15 MIN	1	170.00
03/20/24	0420	420000027	HC PT, THERAPEUTIC ACTIVITIES, EACH 15 MIN	1	151.00

**Hospital Payments and Adjustments**

Date	Description	Amount
	Insurance Payments and Adjustments	-1,069.84

*Exhibit 5*  
 10

# Billing for Janet M Wilhelms

Exhibit 6

Physician and Hospital Services for Guarantor #8241086

## Visit Accounts

Currently viewing: Active accounts ^

Active accounts

Year to date

Last year

Date range

## Outstanding Balance

<b>Mar 5</b> 2024	<b>Physical Therapist Established Visit at Rehabilitation Services, Sports Medicine Center</b>		
	Mar 5, 2024 to Mar 31, 2024	Billed	\$1,282.00
	Hospital Services	Insurance Covered	-\$1,177.00
	Provider: Heather Curtiss, MD	You Paid	\$0.00
	Patient: Janet M Wilhelms	<b>Your Balance</b>	<b>\$105.00</b>
Primary Payer: Network Health Medicare Account #6506889261			

<b>Feb 22</b> 2024	<b>Physical Therapy New Visit at Rehabilitation Services, Sports Medicine Center</b>		
	Feb 22, 2024 to Feb 29, 2024	Billed	\$986.00
	Hospital Services	Insurance Covered	-\$916.00
	Provider: Heather Curtiss, MD	You Paid	\$0.00
	Patient: Janet M Wilhelms	<b>Your Balance</b>	<b>\$70.00</b>
Primary Payer: Network Health Medicare Account #6506831269			

<b>Apr 25</b> 2024	<b>Established Patient Visit at Orthopaedics &amp; Sports Medicine, Mequon Health Center</b>		
	Physician Services	Billed	\$260.00
	Provider: Heather Curtiss, MD	Insurance Covered	\$0.00
	Patient: Janet M Wilhelms	You Paid	-\$35.00
	Primary Payer: Network Health Medicare	Pending Insurance	\$225.00
Account #8047401049			
	<b>Your Balance</b>	<b>\$0.00</b>	

<b>Feb 19</b> 2024	<b>Diagnostic Radiology Exam Visit at Diagnostic Radiology, Imaging Services, Mequon Health Center</b>		
	Physician Services	Billed	\$209.00
	Provider: Melissa Dubois, MD	Insurance Covered	\$0.00
	Patient: Janet M Wilhelms	You Paid	\$0.00
	Primary Payer: Network Health Medicare	Pending Insurance	\$209.00
Account #8046459911			
	<b>Your Balance</b>	<b>\$0.00</b>	

<b>Mar 19 2024</b>	<b>Established Patient Visit at Orthopaedics &amp; Sports Medicine, Mequon Health Center</b>		
	Physician Services	Billed	\$260.00
	Provider: Heather Curtiss, MD	Insurance Covered	-\$225.00
	Patient: Janet M Wilhelms	You Paid	-\$35.00
	Primary Payer: Network Health Medicare Account #8047574294	<b>Your Balance</b>	<b>\$0.00</b>

<b>Feb 19 2024</b>	<b>New Patient Visit at Orthopaedics &amp; Sports Medicine, Mequon Health Center</b>		
	Physician Services	Billed	\$528.00
	Provider: Heather Curtiss, MD	Insurance Covered	-\$493.00
	Patient: Janet M Wilhelms	You Paid	-\$35.00
	Primary Payer: Network Health Medicare Account #8046639558	<b>Your Balance</b>	<b>\$0.00</b>