

Rule 04 NCAC 10A .0102 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10A .0102 OFFICIAL FORMS

~~(a) The Industrial Commission will remain in continuous session subject to the call of the Chairman to meet as a body for the purpose of transacting such business as may come before it.~~

~~(b) In reviewing an Opinion and Award of Deputy Commissioner or of a sole Commissioner acting as the hearing officer, the Full Commission may sit en banc or in panels of three.~~

(a) Copies of the Commission's rules and forms may be obtained by contacting the Commission in person at the address in Rule .0101 of this Subchapter, by written request mailed to 4340 Mail Service Center, Raleigh, NC 27699-4340, Attn.: Administrator, or from the Commission's website at <http://www.ic.nc.gov/forms.html>.

(b) The use of any printed forms other than those provided by the Commission is prohibited except that insurance carriers, self-insured employers, employers, attorneys and other parties may reproduce Commission forms for their own use, provided:

(1) no statement, question, or information blank contained on the Commission form is omitted from the substituted form, and form; and

(2) the substituted form is identical in size and format with the Commission form.

*History Note: Authority G.S. 97-80(a); 97-81(a);
Eff. January 1, 1990;
Amended Eff. April 1, 2014; June 1, 2000.*

Rule 04 NCAC 10A .0405 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10A .0405 REINSTATEMENT OF COMPENSATION

~~(a) Amputation of any portion of the bone of a distal phalange of a finger or toe at or distal to the visible base of the nail will be considered as equivalent to the loss of one fourth of such finger or toe.~~

~~(b) Amputation of any portion of the bone of the distal phalange of a finger or toe proximal to the visible base of the nail will be considered as equivalent to the loss of one half of such finger or toe.~~

~~(c) Amputation through the forearm at a point so distal to the elbow as to permit satisfactory use of a prosthetic appliance with retention of full natural elbow function shall be considered amputation of the hand. Otherwise, it shall be considered amputation of the arm.~~

~~(d) Amputation through the lower leg at a point so distal to the knee as to permit satisfactory use of a prosthetic appliance with retention of full natural knee function shall be considered amputation of the foot. Otherwise, it shall be considered amputation of the leg.~~

(a) In a claim in which the employer, carrier, or administrator has admitted liability, when an employee seeks reinstatement of compensation pursuant to G.S. 97-18(k), the employee may notify the employer, carrier, or administrator, and the employer's, carrier's, or administrator's attorney of record, on a Form 23 [~~Application to Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation*, or by the filing of a Form 33 [~~Request that Claim be Assigned for Hearing~~] *Request that Claim be Assigned for Hearing*.

(b) When reinstatement is sought by the filing of a Form 23 [~~Application to Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation*, the original Form 23 [~~Application to Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation* and the attached documents shall be sent to the Commission at the same time and by the same method by which a copy of the Form 23 and attached documents are sent to the employer, carrier, or administrator and the employer's, carrier's, or administrator's attorney of record. The employee shall specify the grounds and the alleged facts supporting the application and shall complete the blank space in the "Important Notice to Employer" portion of Form 23 [~~Application to Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation* by inserting a date 17 days from the date the employee serves the completed Form 23 [~~Application to Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation* on the employer, carrier, or administrator and the attorney of record, if any. The Form 23 [~~Application to Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation* shall specify the number of pages of documents attached that are to be considered by the Commission. Within 17 days from the date the employee serves the completed Form 23 [~~Application to Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation* on the employer, carrier, or administrator and the attorney of record, if any, the employer, carrier, or administrator shall complete Section B of the Form 23 [~~Application to Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation* and send it to the Commission and to the employee, or the

1 employee's attorney of record, at the same time and by the same method by which the form is sent to the
2 Commission.

3 (c) If the employer, carrier, or administrator does not object within the time allowed, the Commission shall review
4 the Form 23 [~~Application to Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of*
5 *Disability Compensation* and attached documentation and, without an informal hearing, render an Administrative
6 Decision [~~or~~] *and* Order as to whether there is sufficient basis under the Workers' Compensation Act to reinstate
7 compensation. This Administrative Decision and Order shall be rendered within five days of the expiration of the
8 time within which the employer, carrier, or administrator could have filed a response to the Form 23 [~~Application to~~
9 ~~Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation*.
10 Either party may seek review of the Administrative Decision and Order as provided by Rule .0703 of this
11 [~~subchapter~~] *Subchapter*.

12 (d) If the employer, carrier, or administrator timely objects to the Form 23 [~~Application to Reinstate Payment of~~
13 ~~Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation*, the Commission shall
14 conduct an informal hearing within 25 days of the receipt by the Commission of the Form 23 [~~Application to~~
15 ~~Reinstate Payment of Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation* unless
16 the time is extended for good cause shown. The informal hearing may be conducted with the parties or their
17 attorneys of record personally present with the Commission. The Commission shall make arrangements for the
18 informal hearing with a view toward conducting the hearing in the most expeditious manner. The informal hearing
19 shall be no more than 30 minutes, with each side being given 10 minutes to present its case and five minutes for
20 rebuttal. Notwithstanding the foregoing, the employee may waive the right to an informal hearing and proceed to a
21 formal hearing by filing a request for hearing on a Form 33 [~~Request that Claim be Assigned for Hearing~~] *Request*
22 *that Claim be Assigned for Hearing*. Either party may appeal the Administrative Decision and Order of the
23 Commission as provided by Rule .0703 of this [~~subchapter~~] *Subchapter*. A Deputy Commissioner shall conduct a
24 hearing which shall be a hearing [~~de novo~~] *de novo*. The hearing shall be peremptorily set and shall not require a
25 Form 33 [~~Request that Claim be Assigned for Hearing~~] *Request that Claim be Assigned for Hearing*. The employee
26 has the burden of producing evidence on the issue of the employee's application to reinstate compensation. If the
27 Deputy Commissioner reverses an order previously granting a Form 23 [~~Application to Reinstate Payment of~~
28 ~~Disability Compensation~~] *Application to Reinstate Payment of Disability Compensation* motion, the employer shall
29 promptly terminate compensation or otherwise comply with the Deputy Commissioner's decision, notwithstanding
30 any appeal or application for review to the Full Commission under G.S. 97-85.

31 (e) If the Commission is unable to render a decision after the informal hearing, the Commission shall issue an order
32 to that effect, that shall be in lieu of a Form 33 [~~Request that Claim be Assigned for Hearing~~] *Request that Claim be*
33 *Assigned for Hearing*, and the case shall be placed on the formal hearing docket. If additional issues are to be
34 addressed, the employee, employer, carrier, or administrator shall file a Form 33 [~~Request that Claim be Assigned~~
35 ~~for Hearing~~] *Request that Claim be Assigned for Hearing* or notify the Commission that a formal hearing is not
36 currently necessary, within 30 days of the date of the Administrative Decision or Order. The effect of placing the
37 case on the docket shall be the same as if the Form 23 [~~Application to Reinstate Payment of Disability~~

1 Compensation | Application to Reinstate Payment of Disability Compensation was denied, and compensation shall
2 not be reinstated until such time as the case is decided by a Commissioner or a Deputy Commissioner following a
3 formal hearing.

4
5 *History Note: Authority G.S. 97-18(k); 97-80(a);*
6 *Eff. January 1, 1990;*
7 *Amended Eff. April 1, 2014.*

1 Rule 04 NCAC 10A .0411 is adopted as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014, with changes as follows:

3
4 **04 NCAC 10A .0411 SAFETY RULES**

5 ~~[-The safety rules or regulations adopted by an employer qualify as approved by the Commission within the meaning~~
6 ~~of G.S. 97-12 if the following requirements are satisfied:]~~ The process for the Commission to approve safety rules or
7 regulations adopted by an employer as set forth in G.S. 97-12 is as follows:

8 (1) ~~The rules~~ [include] shall comply with the general provisions of the safety rules outlined by the
9 American National Standards Institute and the Occupational Safety and Health Act. These
10 standards can be purchased at <http://ansi.org/> and accessed free of charge at
11 <https://www.osha.gov/law-regs.html>, respectively.

12 (2) ~~The rules~~ [have been] shall be filed by the employer in writing with the Commission's Safety
13 Education Director by mailing them to 4339 Mail Service Center, Raleigh, NC 27699-4339 or e-
14 mailing them to safety@ic.nc.gov.

15 (3) ~~[A copy of the rules bearing a certificate of approval from the Commission has been returned to~~
16 ~~the employer. The certificate of approval shall indicate that the rules have been reviewed and~~
17 ~~found by the Safety Education Director of the Commission to be in compliance with the general~~
18 ~~rules of the American National Standards Institute and the Occupational Safety and Health Act~~
19 ~~and that the rules are approved by the Commission pursuant to G.S. 97-12;]~~ The rules shall be
20 reviewed by the Safety Education Director of the Commission and approved if they are found to
21 be in compliance with Item 1 of this Rule. The Commission shall return to the employer a copy of
22 the rules bearing a certificate of approval from the Commission indicating that the rules have been
23 approved by the Commission pursuant to G.S. 97-12. An employer may revise and resubmit the
24 rules if not approved by the Safety Education Director of the Commission.

25
26 *History Note:* *Authority G.S. 97-12; 97-80(a);*
27 *Eff. April 1, 2014.*

Rule 04 NCAC 10A .0601 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

SECTION .0600 – CLAIMS ADMINISTRATION AND PROCEDURES

04 NCAC 10A .0601 EMPLOYER'S OBLIGATIONS UPON NOTICE; DENIAL OF LIABILITY; AND SANCTIONS

~~(a) The employer or its insurance carrier shall promptly investigate each injury reported or known to the employer and at the earliest practicable time shall admit or deny the employee's right to compensation or commence payment of compensation as provided in G.S. 97-18(b), (c), or (d).~~

~~(b)(a) When an~~ Upon the employee's employee files filing of a claim for compensation with the Commission, the Commission may order reasonable sanctions pursuant to G.S. 97-18(j) against the employer or its insurance carrier ~~which if it~~ does not, within 30 days following notice from the Commission of the filing of the claim, or 90 days when a disease is alleged to be from exposure to chemicals, fumes, or other materials or substances in the workplace, ~~or within such reasonable additional time as the Commission may allow,~~ do one of the following:

- (1) ~~Notify~~ File a Form 60 *Employer's Admission of Employee's Right to Compensation* to notify the Commission and the employee in writing that ~~it~~ the employer is admitting the employee's right to compensation and, if applicable, satisfy the requirements for payment of compensation under G.S. ~~[97-18(b).]~~ 97-18(b);
- (2) ~~Notify~~ File a Form 61 *Denial of Workers' Compensation Claim* to notify the Commission and the employee that ~~it~~ the employer denies the employee's right to compensation consistent with G.S. ~~[97-18(c).]~~ 97-18(c);
- (3) File a Form 63 *Notice to Employee of Payment of Compensation Without Prejudice* ~~Initiate payments without prejudice and without liability and satisfy the requirements of~~ consistent with G.S. 97-18(d).

~~For purposes of this Rule, reasonable sanctions shall not prohibit the employer or its insurance carrier from contesting the compensability of and its liability for the claim.~~

Requests for extensions of time to comply with G.S. 97-18(j) ~~this rule may~~ shall be addressed to the ~~Executive Secretary, Claims Administration Section.~~

~~(c)(b) If the employer or insurance carrier denies~~ When liability in any case, ~~case is denied, the employer or insurance carrier shall provide~~ a detailed statement of the basis of denial ~~must that shall~~ be set forth in a letter of denial or Form ~~61, 61~~ Denial of Workers' Compensation Claim, and ~~which that~~ shall be sent to the ~~plaintiff or his employee's attorney of record, if any record or the employee, if unrepresented,~~ all known health care providers ~~which who~~ have submitted bills and provided medical records to the ~~employer/carrier, employer or carrier,~~ and the Industrial Commission. The detailed statement of the basis of denial shall set forth a statement of the facts, as alleged by the employer, concerning the injury or any other matter in dispute; a statement identifying the source, by

~~name or date and type of document, of the facts alleged by the employer; and a statement explaining why the facts,
as alleged by the employer, do not entitle the employee to workers' compensation benefits.~~

*History Note: Authority G.S. 97-18; 97-80(a); 97-81(a);
Eff. January 1, 1990;
Amended Eff. April 1, 2014; August 1, 2006; June 1, 2000.*

Rule 04 NCAC 10A .0603 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10A .0603 RESPONDING TO A PARTY'S REQUEST FOR HEARING

(a) No later than 45 days from receipt of ~~the Request~~ a request for ~~Hearing~~, hearing from [an employee] a party, the self insured employer, insurance carrier, or counsel for the defendant(s) the opposing party or parties shall file with the Industrial Commission a response to the ~~Request~~ request for ~~Hearing~~, hearing.

(b) ~~This~~ The response shall contain the following:

(1) ~~The~~ the basis of the disagreement between the parties, including a statement of the ~~specific~~ issues raised by the plaintiff moving party ~~which~~ that are conceded and the ~~specific~~ issues raised by the plaintiff moving party ~~[which] that~~ are ~~denied~~, denied;

(2) ~~The~~ the date of the injury, if it is contended to be different than that alleged by the plaintiff moving party;

(3) ~~The~~ the part of the body injured, if it is contended to be different than that alleged by the plaintiff moving party;

(4) ~~The~~ the city and county where the injury occurred, if they are ~~contended~~ contended to be different than that alleged by the plaintiff moving party;

~~(5)~~ The [the] names and addresses of all doctors and other expert witnesses whose testimony is needed by the defendant(s) non moving party;

~~(6)~~ The [the] names of all lay witnesses known by the defendant(s) non moving party whose testimony is to be taken [taken];

~~(7)~~(5) An an estimate of the time required for the hearing of the ~~case~~, case; and

~~(8)~~(6) ~~The~~ the telephone ~~number(s)~~ number(s), and ~~address(es)~~ email address(es), and mailing address(es) of the party(ies) party or parties responding to the ~~Request for Hearing~~, request for hearing and their legal counsel.

(c) ~~Utilization of a A Form 33R, Response to Request for Hearing, 33R Response to Request that Claim be Assigned for Hearing, which is completed in full and filed with the Docket Section of the Commission, shall be the sole means of constitute compliance with this Rule. A copy of the Form 33R Response to Request that Claim be Assigned for Hearing Response to Request for Hearing shall be forwarded to the attorneys for all opposing parties or attorneys, if such have been retained. the opposing parties themselves, if unrepresented. In the event of a request for hearing by a defendant, the employee shall not be required to respond. Extensions of time within which to file a response shall be granted for good cause shown.~~

*History Note: Authority G.S. 97-80(a); 97-83;
Eff. January 1, 1990;
Amended Eff. April 1, 2014; June 1, 2000.*

Rule 04 NCAC 10A .0605 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10A .0605 DISCOVERY

In addition to depositions ~~and production of books and records~~ provided for in G.S. 97-80, parties may obtain discovery by the use of interrogatories and requests for production of documents as follows:

(1) Any party may serve upon any other parties written interrogatories, up to 30 in number, including subparts thereof, to be answered by the party served or, if the party served is a public or private corporation or a partnership or association or governmental agency, by any officer or agent, who shall furnish such information as is available from the party interrogated.

~~(a)(2)~~ Interrogatories may, without leave of the ~~Industrial~~ Commission, be served upon any party after the filing of a Form ~~48~~, 18 Notice of Accident to Employer and Claim of Employee, Representative, or Dependent, Form ~~48B~~, 18B Claim by Employee, Representative, or Dependent for Benefits for Lung Disease, or Form ~~33~~, 33 Request that Claim be Assigned for Hearing, or after the acceptance of liability for a ~~[claim]~~ claim by the employer.

~~(b)(3)~~ Each interrogatory shall be answered separately and ~~fully~~ in writing under oath, unless it is objected to, in which event the reasons for objection shall be stated in lieu of an answer. The answers ~~are to~~ shall be signed by the person making them and the objections shall be signed by the party making them. The party on whom the interrogatories have been served shall serve a copy of the ~~answers~~, answers and objections, if any, within 30 days after service of the interrogatories. The parties may stipulate to an extension of time to respond to the interrogatories. A motion to extend the time to respond shall represent state that an attempt to reach agreement with the opposing party to informally extend the time for response has been unsuccessful and the opposing ~~parties'~~ party's position or that there has been a reasonable an attempt to contact the opposing party to ascertain its position.

~~(c)(4)~~ If there is an objection to or other failure to answer an interrogatory, the party submitting the interrogatories may move the ~~Industrial~~ Commission for an order compelling answer. If the ~~Industrial~~ Commission orders answer to an interrogatory within a time certain and no answer is made or the objection is still lodged, the ~~Industrial~~ Commission may issue an order with appropriate sanctions, sanctions, including but not limited to the sanctions specified in Rule 37 of the North Carolina Rules of Civil Procedure.

~~(2)(5)~~ Interrogatories and requests for production of documents shall may relate to matters ~~which that~~ are not privileged privileged, ~~which that~~ are relevant to an issue ~~presently in~~ dispute dispute, or ~~which that~~ the requesting party reasonably believes may later be disputed. ~~Signature~~ The signature of a party or attorney serving interrogatories or requests for production of documents constitutes a certificate by such person that he or she has personally read each of the interrogatories and requests for production of documents, that no such interrogatory or request for production of

documents will oppress a party or cause any unnecessary expense or delay, that the information requested is not known or equally available to the requesting party, and that the interrogatory or requested document relates to an issue presently in dispute or which that the requesting party reasonably believes may later be in dispute. A party may serve an interrogatory, however, to obtain verification of facts relating relevant to an issue presently in dispute. Answers to interrogatories may be used to the extent permitted by the rules of evidence. [Chapter 8C] Chapter 08C of the North Carolina General Statutes.

(6) ~~[Up to the time]~~ Until a matter is calendared for a hearing, parties may serve requests for production of documents without leave of the Commission.

~~(3)(7)~~ Additional methods of discovery as provided by the North Carolina Rules of Civil Procedure may be used only upon motion and approval by the Industrial Commission or by agreement of the parties. The Commission shall approve the motion if it is shown to be in the interests of justice or to promote judicial economy.

~~(4)~~ Notices of depositions, discovery requests and responses pertinent to a pending motion, responses to discovery following a motion or order to compel, and responses shall be filed with the Commission, as well as served on the opposing party. Otherwise, discovery requests and responses, including interrogatories and requests for production of documents shall not be filed with the Commission.

(8) Discovery requests and responses, including interrogatories and requests for production of documents, shall not be filed with the Commission, except for the following:

(a) notices of depositions;

(b) discovery requests and responses deemed by filing party to be pertinent to a pending motion;

(c) responses to discovery following a motion or order to compel; and

(d) post-hearing discovery requests and responses.

The ~~[above listed]~~ above-listed documents shall be filed with the Commission, as well as served on the opposing party.

~~(5)(9)~~ Sanctions may shall be imposed under this Rule for failure to comply with a Commission order compelling discovery. A motion by a party or its attorney to compel discovery under this Rule and 4 NCAC 10A .607 Rule .0607 of this Subchapter shall represent that informal means of resolving the discovery dispute have been attempted in good faith and state briefly the opposing parties' position or that there has been a reasonable attempt to contact the opposing party and ascertain its position.

History Note: Authority G.S. 97-80(a); 97-80(f);
Eff. January 1, 1990;
Amended Eff. April 1, 2014; January 1, 2011; June 1, 2000.

1 Rule 04 NCAC 10A .0608 is amended as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014, with changes as follows:

3
4 **04 NCAC 10A .0608 STATEMENT OF INCIDENT LEADING TO CLAIM**

5 (a) ~~At the outset of taking a statement,~~ Upon the request of the employer or his or her agent to take a written or a
6 recorded statement, the employer or his agent shall advise the employee that the statement ~~is being taken to~~ may be
7 used ~~in part~~ to determine whether the claim will be paid or denied. Any plaintiff who gives his or her employer, ~~or~~
8 its carrier carrier, or any agent either a written or recorded statement of the facts and circumstances surrounding his
9 or her injury shall be furnished a copy of ~~such~~ the statement within 45 days after request. Further, any plaintiff who
10 shall give a written or recorded statement of the facts and circumstances surrounding his or her injury shall, without
11 request, be furnished a copy no less than 45 days from the filing of a Form 33 *Request that Claim be Assigned for*
12 *Hearing*. ~~Such~~ The copy shall be furnished at the expense of the person, firm or corporation at whose direction the
13 statement was taken.

14 (b) If any person, firm or corporation unreasonably fails to comply with this ~~rule~~, Rule, then an order may be
15 entered by a Commissioner or Deputy Commissioner prohibiting that person, firm or corporation, or its
16 representative, from introducing the statement into evidence or using any part of ~~it~~ the statement.

17
18 *History Note: Authority G.S. 97-80(a);*
19 *Eff. January 1, 1990;*
20 *Amended Eff. April 1, 2014; June 1, 2000.*

1 Rule 04 NCAC 10A .0609A is amended as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014, with changes as follows:

3
4 **04 NCAC 10A .0609A MEDICAL MOTIONS AND EMERGENCY MEDICAL MOTIONS**

5 ~~(a) Expedited Medical Motions:~~

6 ~~(1) Medical motions pursuant to N.C. Gen. Stat. §97-25 brought before the Office of the Executive~~
7 ~~Secretary for an administrative ruling shall comply with applicable provisions of Rule 609 and~~
8 ~~shall be submitted electronically to medicalmotions@ic.nc.gov, unless electronic submission is~~
9 ~~unavailable to the party.~~

10 ~~(2) A party may file with the Deputy Commissioner Section a request for an administrative ruling on~~
11 ~~a medical motion. A party, also, may appeal an Order from the Executive Secretary's Office on an~~
12 ~~Expedited Medical Motion by giving notice of appeal to the Dockets Department within 15 days~~
13 ~~of receipt of the Order or receipt of the ruling on a Motion to Reconsider the Order filed pursuant~~
14 ~~to Rule 703(1). The Motion shall contain a designation as an administrative "Expedited Medical~~
15 ~~Motion", documentation in support of the request, including the most recent medical record/s and~~
16 ~~a representation that informal means of resolving the issue have been attempted in good faith, and~~
17 ~~the opposing party's position, if known.~~

18 ~~(A) A Pre Trial Conference will be held immediately to clarify the issues. Parties are~~
19 ~~encouraged to consent to a review of the contested issues by electronic mail submission~~
20 ~~of only relevant medical records and opinion letters.~~

21 ~~(B) If depositions are deemed necessary by the Deputy Commissioner, only a brief period for~~
22 ~~taking the same will be allowed. Preparation of the transcript will be expedited and will~~
23 ~~initially be at the expense of defendants. Requests for independent medical examinations~~
24 ~~may be denied unless there is a demonstrated need for the evaluation.~~

25 ~~(C) Written arguments and briefs shall be limited in length, and are to be filed within five~~
26 ~~days after the record is closed.~~

27 ~~(3) A party may appeal an Order by a Deputy Commissioner on an Expedited Medical Motion by~~
28 ~~giving notice of appeal to the Full Commission within 15 days of receipt of the Order or receipt of~~
29 ~~the ruling on a Motion to Reconsider the Order filed pursuant to Rule 703(1).~~

30 ~~(A) A letter expressing an intent to appeal a Deputy Commissioner's Order on an Expedited~~
31 ~~Medical Motion shall be considered notice of appeal to the Full Commission, provided~~
32 ~~that it clearly specifies the Order from which appeal is taken.~~

33 ~~(B) After receipt of notice of appeal, the appeal will be acknowledged by the Dockets~~
34 ~~Department within three (3) days by sending an appropriate Order under the name of the~~
35 ~~Chair of the Panel to which the appeal is assigned. The parties may be permitted to file~~
36 ~~briefs on an abbreviated schedule in the discretion of the panel chair. The panel chair will~~
37 ~~also determine if oral arguments are to be by telephone, in person, or waived. All~~

correspondence, briefs, or motions related to the appeal shall be addressed to the panel chair with a copy to the law clerk of the panel chair.

(b) ~~Emergency Medical Motions:~~

(1) ~~Motions requesting emergency medical relief administratively shall contain the following:~~

~~(A) A boldface, or otherwise emphasized, designation as "Emergency Medical Motion."~~

~~(B) An explanation of the need for a shortened time period for review, including any hardship that warrants immediate attention/action by the Commission.~~

~~(C) A statement of the time sensitive nature of the request, with specificity.~~

~~(D) Detailed dates and times related to the issue raised and to the date a ruling is requested.~~

~~(E) Documentation in support of the request, including the most recent medical records.~~

~~(F) A representation that informal means of resolving the issue have been attempted in good faith, and the opposing party's position, if known.~~

(2) ~~A party may file an Emergency Medical Motion with the Executive Secretary's Office, the Chief Deputy Commissioner, or the Office of the Chair. A proposed Order shall be provided with the motion. The non moving party(ies) will be advised regarding any time allowed for response and may be advised whether informal telephonic oral argument is necessary.~~

(3) ~~Emergency Medical Motions and responses thereto shall be submitted electronically, unless electronic submission is unavailable to the party.~~

~~(A) Emergency Medical Motions and responses thereto filed with the Executive Secretary's Office shall be submitted to medicalmotions@ic.nc.gov.~~

~~(B) Emergency Medical Motions filed with the Chief Deputy Commissioner shall be submitted electronically directly to the Chief Deputy Commissioner and his/her legal assistant.~~

~~(C) Emergency Medical Motions filed with the Chair of the Commission shall be submitted electronically to the Chair, his/her legal assistant, and his/her law clerk.~~

(a) Medical motions brought pursuant to G.S. 97-25, and responses thereto, shall be brought before the Office of the Chief Deputy Commissioner and shall be submitted electronically to medicalmotions@ic.nc.gov. Motions and responses shall be submitted simultaneously to the Commission and the opposing party ~~or~~ and opposing party's counsel, if ~~any,~~ represented.

(b) Once notification has been received by the parties that a medical motion has been assigned to a Deputy Commissioner, subsequent filings and communication shall be submitted directly to the Deputy Commissioner assigned.

(c) Upon receipt of a medical motion, carriers, third-party administrators, and employers ~~who are not represented~~ shall immediately ~~assign counsel and~~ send notification of the ~~counsel's~~ name, email address, telephone number and fax number ~~of the attorney appearing on their behalf~~ to medicalmotions@ic.nc.gov. An attorney who is retained by a party in any proceeding before the Commission shall also file a ~~Notice~~ notice of ~~Representation~~

1 representation with the Docket Director at dockets@ic.nc.gov [with] and send a copy of the notice [sent] to all other
2 counsel and all other unrepresented parties involved in the proceeding.

3 (d) Motions submitted pursuant to G.S. 97-25 and requesting medical relief other than emergency relief shall
4 contain the following:

5 (1) a designation as a "Medical Motion" brought pursuant to G.S. 97-25;

6 (2) the claimant's [name] name. [and, if] If the claimant is unrepresented, claimant's email address,
7 telephone number, and fax number. If the claimant is represented, the name, email address,
8 telephone number and fax number of claimant's counsel;

9 (3) the employer's name and employer code;

10 (4) the carrier or third party administrator's name, carrier code, email address, telephone number and
11 fax number;

12 (5) the adjuster's name, email address, telephone number and fax number if counsel for the
13 [employer/carrier] employer and carrier has not been retained;

14 (6) the counsel for [employer/carrier's] employer and carrier's name, email address, telephone
15 number and fax number;

16 (7) a statement of the treatment or relief requested;

17 (8) a statement of the medical diagnosis of claimant and the treatment recommendation and name of
18 the health care provider that is the basis for the motion;

19 (9) a statement as to whether the claim has been admitted on a Form 60, Form 63, Form 21 or is
20 subject to a prior Commission Opinion and Award or Order finding [compensability]
21 compensability, with supporting documentation attached;

22 (10) a statement of the time-sensitive nature of the request;

23 (11) an explanation of opinions known and in the possession of the employee of additional medical or
24 other relevant experts, independent medical examiners, and second opinion examiners;

25 (12) if the motion requests a second opinion examination pursuant to G.S. 97-25, the motion shall
26 specify whether the plaintiff has made a prior written request to the defendants for the
27 examination, as well as the date of the request and the date of the denial, if any;

28 (13) a representation that informal means of resolving the issue have been attempted in good faith, and
29 the opposing party's position, if known; and

30 (14) a proposed Order.

31 (e) Motions submitted pursuant to G.S. 97-25 and requesting emergency medical relief shall contain the following:

32 (1) a boldface or otherwise emphasized, designation as "Emergency Medical Motion";

33 (2) the claimant's [name] name. [and, if] If the claimant is unrepresented, claimant's email address,
34 telephone number, and fax number. If the claimant is represented, the name, email address,
35 telephone number and fax number of claimant's counsel;

36 (3) the employer's name and employer code;

- (4) the carrier or third party administrator's name, carrier code, email address, telephone number and fax number;
- (5) the adjuster's name, email address, telephone number and fax number if counsel for the employer/carrier has not been retained;
- (6) the counsel for employer/carrier's name, email address, telephone number and fax number;
- (7) an explanation of the medical diagnosis and treatment recommendation of the health care provider that requires emergency attention;
- (8) a statement of the need for a shortened time period for review, including relevant dates and the potential for adverse consequences if the recommended treatment is not provided emergently;
- (9) an explanation of opinions known and in the possession of the employee of additional medical or other relevant experts, independent medical examiner, and second opinion examiners;
- (10) a representation that informal means of resolving the issue have been attempted in good faith, and the opposing party's position, if known; ~~and~~
- (11) documentation known and in the possession of the employee in support of the request, including relevant medical records; and
- ~~(11)~~(12) a proposed Order.

(f) The parties shall receive notice of the date and time of an initial informal telephonic conference to be conducted by a Deputy Commissioner to determine whether the motion warrants an expedited or emergency hearing and to clarify the issues presented. During the initial informal telephonic conference each party shall be afforded an opportunity to state its position and ~~submit~~ discuss documentary evidence which shall be submitted electronically to the Deputy Commissioner prior to the initial informal telephone conference. ~~Prior to the initial informal telephonic conference, the parties shall submit a brief medical chronology and procedural history of three pages or less, the relevant Form 60, Form 63, Form 21 or Commission Opinion and Award, and relevant medical information including medical records.]~~

(g) At or prior to the initial informal telephonic conference, the parties may consent to a review of the contested issues by electronic mail submission of only relevant medical records and opinion letters.

(h) Depositions deemed necessary by the Deputy Commissioner shall be taken on the Deputy Commissioner's order within 35 days of the date the motion is filed. Transcripts of depositions shall be submitted electronically to the Commission within 40 days of the date of the filing of the motion. The Deputy Commissioner may reduce or enlarge the timeframe contained in this Subsection for good cause shown.

(i) At the initial informal telephonic conference, each party shall notify the Commission and the other party as to whether a second informal telephonic conference is necessary. This second informal telephonic conference does not extend the time for resolution of the ~~Motion~~ motion.

(j) Upon receipt of an emergency medical motion, the non-moving party(ies) shall be advised by the Commission of any time allowed for response and whether informal telephonic oral argument is necessary.

(k) A party may appeal a Deputy Commissioner's Order on a motion brought pursuant to G.S. 97-25 by giving notice of appeal to the Full Commission within 15 days of receipt of the Order or receipt of the ruling on a Motion to

1 Reconsider the Order filed pursuant to Rule .0703(b) of this Subchapter. A letter expressing an intent to appeal a
2 Deputy Commissioner's Order on a motion brought pursuant to G.S. 97-25 shall be considered notice of appeal to
3 the Full Commission, provided that the letter [specifies] specifically identifies the Order from which appeal is taken.
4 After receipt of notice of appeal, the appeal shall be acknowledged by the Docket Section within three days by
5 sending an Order under the name of the Chair of the Panel to which the appeal is assigned. [The parties may file
6 briefs on an abbreviated schedule when necessary for a determination of the issues.] The Order shall indicate
7 whether the parties may file briefs and the schedule for filing them. At the time the motion is set for informal
8 hearing, [The] the [panel chair] Chair of the Panel shall also [determine] indicate to the parties if oral arguments are
9 to be by telephone, in person, or waived. All correspondence, briefs, or motions related to the appeal shall be
10 addressed to the [panel chair] Chair of the Panel with a copy to [the] his or her law [clerk of the panel chair.]
11 (l) The Commission [will] shall accept the filing of documents by non-electronic methods if electronic transmission
12 is unavailable to the party.

13
14 *History Note: Authority G.S. 97-25; 97-78(f)(2); 97-78(g)(2); 97-80(a);*
15 *Eff. January 1, 2011;*
16 *Amended Eff. April 1, 2014.*

Rule 04 NCAC 10A .0612 is adopted as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10A .0612 DEPOSITIONS

(a) ~~When additional testimony is necessary to the disposition of a case, a Commissioner or Deputy Commissioner may order the deposition of witnesses to be taken on or before a day certain not to exceed 60 days from the date of the ruling; provided, the time allowed may be enlarged for good cause shown. The costs of such depositions shall be borne by the defendants for those medical witnesses who examined plaintiff at defendants' expense, in those instances in which defendants are requesting the depositions, and in any other case which, in the discretion of the Commissioner or Deputy Commissioner, it is deemed appropriate.~~

(b) ~~In cases where a party, or an attorney for either party, refuses to stipulate medical reports and the case must be reset or depositions ordered for testimony of medical witnesses, a Commissioner or Deputy Commissioner may in his discretion assess the costs of such hearing or depositions, including reasonable attorney fees, against the party who refused the stipulation.~~

(c) ~~Except under unusual circumstances, all lay evidence must be offered at the initial hearing. Lay evidence can only be offered after the initial hearing by order of a Commissioner or Deputy Commissioner. The costs of obtaining lay testimony by deposition shall be borne by the party making the request unless otherwise ordered by the Commission.~~

(a) Prior to a hearing before a Deputy Commissioner, the parties shall confer to determine the methods by which medical evidence, if any, will be submitted. In doing so, absent a well-grounded objection, the parties shall stipulate to the admission of all relevant medical records, reports, and forms, as well as opinion letters from the employee's health care providers with the goal of minimizing the use of post hearing depositions. When a Pre Trial Agreement is required by the Commission, the parties shall certify in the Pre Trial Agreement that the parties have conferred to determine the methods by which medical evidence, if any, will be submitted, and the parties shall state whether there is any disagreement about the stipulation of medical evidence. The parties shall state in the Pre Trial Agreement all experts to be deposed post hearing. ~~Prior to a hearing before a Deputy Commissioner, the parties shall confer to determine the methods by which medical evidence will be submitted. The parties shall stipulate in a Pre-Trial Agreement to the admission of all relevant medical records, reports, and forms, as well as opinion letters from the employee's health care providers with the goal of minimizing the use of post-hearing depositions. The parties shall state all experts to be deposed post-hearing. The parties shall certify that the parties have conferred to determine the methods by which medical evidence will be submitted. If there is a disagreement about the stipulation of medical evidence, the parties shall state the nature and basis of the disagreement.~~

(b) When medical or other expert testimony is requested by the parties for the disposition of a case, a Deputy Commissioner or Commissioner may order expert depositions to be taken on or before a day certain not to exceed 60 days from the date of the hearing; provided, however, the time allowed may be enlarged or shortened in the interests of justice or to promote judicial economy, or where required by the Act.

(c) The employer shall pay for the costs of up to two post-hearing depositions [selected] requested by the employee of health care providers who evaluated or treated the employee. ~~[employee shall be borne by the employer.] The employer~~

1 shall also bear the costs of a deposition of a second opinion doctor selected jointly by the parties or ordered by the
2 Commission pursuant to G.S. 97-25. ~~[The employee shall designate the health care providers the employee will depose~~
3 ~~at employer's expense in the Pre-Trial Agreement.]~~

4 (d) The parties may notice depositions of additional experts, and the costs thereof shall be borne by the party noticing the
5 depositions; provided, however, if a ruling favorable to the employee is rendered and is not timely appealed by the
6 employer, or the employer's appeal is dismissed or withdrawn, then the employer shall reimburse the employee the costs
7 of such additional expert depositions. ~~[Notwithstanding this provision, the parties may come to a separate agreement~~
8 ~~regarding reimbursement of deposition costs, which shall be submitted to the Commission for approval.]~~

9 (e) ~~[Provided further, in (i)]~~ In claims pursuant to G.S. 97-29(d) ~~[and] or [(ii)]~~ cases involving exceptional, unique, or
10 complex injuries or diseases, the Commission may allow additional depositions of experts to be taken at the employer's
11 expense, when requested by the employee and when necessary to address the issues in dispute, in which case the
12 employee shall state, and the Commission shall ~~[consider, at a minimum,]~~ consider ~~[the following factors]~~ when
13 determining whether or not the employer shall bear the costs of such depositions such factors as:

14 (1) ~~[The]~~ the name and profession of the proposed deponent;

15 (2) ~~[If]~~ if the proposed deponent is a health care provider, whether the health care provider evaluated,
16 diagnosed or treated the employee;

17 (3) ~~[The]~~ the issue to which the testimony is material, relevant and necessary;

18 (4) ~~[The]~~ the availability of alternate methods for submitting the evidence and the efforts made to utilize
19 alternate methods;

20 (5) ~~[The]~~ the severity or complexity of the employee's condition;

21 (6) ~~[The]~~ the number and complexity of the issues in dispute;

22 (7) ~~[Whether]~~ whether the testimony is likely to be duplicative of other evidence; and

23 (8) ~~[The]~~ the opposing party's position on the request.

24 (f) The term "costs" as used in this ~~[rule]~~ Rule shall mean the expert's fee as approved by the Commission for the
25 deposition, including the expert's time preparing for the deposition, if ~~[applicable, and]~~ applicable. The term shall include
26 fees associated with the production and delivery of a transcript of the deposition to the Commission, including the court
27 reporter's appearance ~~[fee, but]~~ fee. The term shall not include costs for a party to obtain his or her own copy of the
28 deposition transcript, or attorney's fees associated with the deposition, unless so ordered by the Commission pursuant to
29 G.S. 97-88.1.

30 (g) ~~Notwithstanding (c) and (d) of this Rule, the parties may come to a separate agreement regarding reimbursement of~~
31 ~~deposition costs, which shall be submitted to the Commission for approval.~~

32 ~~[(e)]~~(h) If the claimant is unrepresented at the time of a full evidentiary hearing before a Deputy Commissioner, the
33 Commission shall confer with the parties and determine the best method for presenting medical evidence, if necessary,
34 and the party responsible for bearing associated costs.

35 ~~[(d)]~~(i) If a party ~~[unreasonably]~~ refuses to stipulate to relevant medical evidence, and as a result, the case is reset or
36 depositions are ordered for testimony of medical or expert witnesses, a Deputy Commissioner or Commissioner may

1 assess the costs of such hearing or depositions, including reasonable attorney fees, against the party who refused the
2 stipulation, pursuant to G.S. 97-88.1.

3 ~~(e)~~(j) All evidence and witnesses other than those tendered as an expert witness shall be offered at the hearing before
4 the Deputy Commissioner. Non-expert evidence may be offered after the hearing before the Deputy Commissioner by
5 order of a Deputy Commissioner or Commissioner. The costs of obtaining non-expert testimony by deposition shall be
6 borne by the party making the request unless otherwise ordered by the Commission in the interests of justice or to
7 promote judicial economy.

8
9 *History Note: Authority G.S. 97-26.1; 97-80(a); 97-88; 97-88.1;*
10 *Eff. June 1, 1990;*
11 *Amended Eff. April 1, 2014; June 1, 2000.*

Rule 04 NCAC 10A .0613 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10A .0613 EXPERT WITNESSES AND FEES

~~(a) Dismissals:~~

~~(1) — No claim filed under the Workers' Compensation Act shall be dismissed without prejudice at plaintiff's instance except upon order of the Industrial Commission and upon such terms and conditions as justice requires; provided, however, that no voluntary dismissal shall be granted after the record in a case is closed.~~

~~(2) — Unless otherwise ordered by the Industrial Commission, a plaintiff shall have one year from the date of the Order of Voluntary Dismissal to refile his claim.~~

~~(3) — Upon proper notice and an opportunity to be heard, any claim may be dismissed with or without prejudice by the Industrial Commission on its own motion or by motion of any party for failure to prosecute or to comply with these Rules or any Order of the Commission.~~

~~(b) Removals:~~

~~(1) — A claim may be removed from the hearing docket by motion of the party requesting the hearing or by the Industrial Commission upon its own motion.~~

~~(2) — Upon settlement of a case or approval of a form agreement, the parties shall submit a request for removal and/or a dismissal and proposed Order.~~

~~(3) — A removed case may be reinstated by motion of either party; provided that cases wherein the issues have materially changed since the Order of Removal or where the motion to reinstate is filed more than one year after the Order of Removal, a Form 33 Request for Hearing will be required.~~

~~(4) — When a plaintiff has not requested a hearing within two years of the filing of an Order of Removal requested by the plaintiff or necessitated by the plaintiff's conduct, and not pursued the claim, upon proper notice and an opportunity to be heard, any claim may be dismissed with prejudice by the Industrial Commission, in its discretion, on its own motion or by motion of any party.~~

(a) The parties shall file with the Deputy Commissioner or Commission within 15 days following the hearing, a list identifying all expert witnesses to be deposed and the deposition dates unless otherwise extended by the Commission in the interests of justice and judicial economy.

(b) [Within 10 days after] After the deposition of each expert, the party that noticed the deposition shall, within 10 days after receiving the expert's fee invoice, submit to the Deputy Commissioner or Commissioner, via email, a request to approve the costs related to the expert deposition. In these requests, the party shall provide to the Deputy Commissioner or Commissioner, in a cover letter along with the invoice (if available), the following:

(1) the name of the expert and the expert's practice;

(2) the expert's fax number;

(3) the expert's area of specialty and board certifications, if any;

(4) the length of the deposition;

- 1 (5) the length of time the expert spent preparing for the deposition, excluding any time meeting with
2 parties' counsel;
3 (6) whether the Commission determined that the claim was filed pursuant to G.S. 97-29(d) or involved an
4 exceptional, unique, or complex injury or disease;
5 (7) whether the deponent was selected by the employee in the Pre-Trial Agreement as an expert to be
6 deposed at employer's expense; and
7 (8) the party initially responsible for payment of the deposition fee pursuant to [04 NCAC 10A] Rule
8 .0612 of this Section.

9 At the time the request is made, the requesting party shall submit a proposed Order that shows the expert's name, practice
10 name and fax number under the "Appearances" section. The proposed [order] Order shall also reflect the party initially
11 responsible for payment of the deposition fee pursuant to [04 NCAC 10A] Rule .0612 of this Section.

12 (c) The Commission shall issue an order setting the deposition costs of the expert. The term "costs" as used in this [rule]
13 Rule shall mean the expert's fee as approved by the Commission for the deposition, including the expert's time preparing
14 for the deposition, if applicable. [applicable, and shall include fees associated with the production and delivery of a
15 transcript of the deposition to the Commission, including the court reporter's appearance fee, but shall not include costs
16 for a party to obtain his or her own copy of the deposition transcript, or attorney's fees associated with the deposition,
17 unless so ordered by the Commission pursuant to G.S. 97-88.1]

18 (d) Failure to make payment to an expert witness within 30 days following the entry of a fee order shall result in an
19 amount equal to 10 percent being added to the fee [ordered to be paid to the expert,] granted in the Order.

20 (e) A proposed fee for cancellation of a deposition within five days of scheduled deposition may be submitted to the
21 Deputy Commissioner for consideration and approval if in the interest of justice and judicial economy.

22 (f) This [rule] Rule applies to all expert fees for depositions; provided, however, either party may elect to reimburse a
23 retained expert that did not treat or examine the employee the difference between the fee awarded by the Commission and
24 the contractual fee of the expert.

25
26 History Note: Authority G.S. 97-26.1; 97-80(a); G.S. 97-80(d); 97-80(f);
27 Eff. January 1, 1990;
28 Amended Eff. April 1, 2014; January 1, 2011; June 1, 2000.

1 Rule 04 NCAC 10A .0701 is amended as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014, with changes as follows:

3
4 **SECTION .0700 - APPEALS**
5

6 **04 NCAC 10A .0701 REVIEW BY THE FULL COMMISSION**

7 ~~(a) A letter expressing an intent to appeal shall be considered notice of appeal to the Full Commission within the~~
8 ~~meaning of N.C. Gen. Stat. §97-85, provided that it clearly specifies the Order or Opinion and Award from which appeal~~
9 ~~is taken.~~

10 ~~(b) After receipt of notice of appeal, the Industrial Commission will supply to the appellant a Form 44 Application for~~
11 ~~Review upon which appellant must state the grounds for the appeal. The grounds must be stated with particularity,~~
12 ~~including the specific errors allegedly committed by the Commissioner or Deputy Commissioner and, when applicable,~~
13 ~~the pages in the transcript on which the alleged errors are recorded. Failure to state with particularity the grounds for~~
14 ~~appeal shall result in abandonment of such grounds, as provided in paragraph (3). Appellant's completed Form 44 and~~
15 ~~brief must be filed and served within 25 days of appellant's receipt of the transcript or receipt of notice that there will be~~
16 ~~no transcript, unless the Industrial Commission, in its discretion, waives the use of the Form 44. The time for filing a~~
17 ~~notice of appeal from the decision of a Deputy Commissioner under these rules shall be tolled until a timely motion to~~
18 ~~reconsider or to amend the decision has been ruled upon by the Deputy Commissioner.~~

19 ~~(c) Particular grounds for appeal not set forth in the application for review shall be deemed abandoned, and argument~~
20 ~~thereon shall not be heard before the Full Commission.~~

21 ~~(d) Appellant's Form 44 and brief in support of his grounds for appeal shall be filed in triplicate with the Industrial~~
22 ~~Commission, with a certificate indicating service on appellee by mail or in person, within 25 days after receipt of the~~
23 ~~transcript, or receipt of notice that there will be no transcript. Thereafter, appellee shall have 25 days from service of~~
24 ~~appellant's brief within which to file a reply brief in triplicate with the Industrial Commission, with written statement of~~
25 ~~service of copy by mail or in person on appellant. When an appellant fails to file a brief, appellee shall file his brief~~
26 ~~within 25 days after appellant's time for filing brief has expired. A party who fails to file a brief will not be allowed oral~~
27 ~~argument before the Full Commission. If both parties appeal, they shall each file an appellant's and appellee's brief on~~
28 ~~the schedule set forth herein. If the matter has not been calendared for hearing, any party may file with the Docket~~
29 ~~Director a written stipulation to a single extension of time not to exceed 15 days. In no event shall the cumulative~~
30 ~~extensions of time exceed 30 days.~~

31 ~~(e) After notice of appeal has been given to the Full Commission, any motions related to the issues before the Full~~
32 ~~Commission shall be filed in triplicate with the Full Commission, with service on the other parties.~~

33 ~~(f) No new evidence will be presented to or heard by the Full Commission unless the Commission in its discretion so~~
34 ~~permits.~~

35 ~~(g) Cases should be cited by North Carolina Reports, and, preferably, to Southeastern Reports. Counsel shall not discuss~~
36 ~~matters outside the record, assert personal opinions or relate personal experiences, or attribute unworthy acts or motives~~
37 ~~to opposing counsel.~~

1 ~~(h) The Industrial Commission or any one of the parties with permission of the Industrial Commission may waive oral~~
2 ~~argument before the Full Commission. In the event of such waiver, the Full Commission will file a decision, based on the~~
3 ~~record, assignments of error and briefs.~~

4 ~~(i) A plaintiff appealing the amount of a disfigurement award shall personally appear before the Full Commission to~~
5 ~~permit the Full Commission to view the disfigurement.~~

6 ~~(j) Briefs to the Full Commission shall not exceed 35 pages, excluding attachments. No page limit shall apply to the~~
7 ~~length of attachments. Briefs shall be prepared entirely using a 12 point font, shall be double spaced, and shall be~~
8 ~~prepared with non justified right margins. Each page of the brief shall be numbered at the bottom right of the page. When~~
9 ~~quoting or paraphrasing testimony or other evidence in the transcript of the evidence, a parenthetical entry in the text, to~~
10 ~~include the exact page number location within the transcript of the evidence of the information being referenced shall be~~
11 ~~placed at the end of the sentence citing the information [Example: (T.p.38)]. When quoting or paraphrasing testimony or~~
12 ~~other evidence in the transcript of a deposition, a parenthetical entry in the text to include the name of the person deposed~~
13 ~~and exact page number location within the transcript of the deposition of the information being referenced shall be placed~~
14 ~~at the end of the sentence citing the information. [Example: (Smith p.15)].~~

15 (a) Application for review shall be made to the Commission within 15 days from the date when notice of the Deputy
16 Commissioner's Opinion and Award shall have been given. A letter expressing a request for review is considered an
17 application for review to the Full Commission within the meaning of G.S. 97-85, provided that the letter specifies the
18 Order or Opinion and Award from which appeal is taken.

19 (b) After receipt of a request for review, the Commission shall acknowledge the request for review by letter. The
20 Commission shall prepare the official transcript and exhibits and provide them along with a Form 44 *Application for*
21 *Review* to the parties involved in the appeal at no charge within 30 days of the acknowledgement letter. The official
22 transcript and exhibits and a Form 44 *Application for Review* shall be provided to the parties electronically, where
23 possible. In such cases, the Commission shall send an e-mail to the parties containing a link to the secure [FTP] File
24 Transfer Protocol (FTP) site where the official transcript and exhibits can be downloaded. The e-mail shall also provide
25 instructions for the submission of the parties' acknowledgement of receipt of the Form 44 *Application for Review* and the
26 official transcript and exhibits to the Commission. The Commission shall save a copy of the parties' [acknowledgement
27 e-mails] acknowledgements in the file for the claim to serve as record of the parties' electronic receipt of the Form 44
28 *Application for Review* and the official transcript and exhibits. In cases where it is not possible to provide a party with
29 the official transcript and exhibits electronically, the Commission shall provide the official transcript and exhibits and a
30 Form 44 *Application for Review* via certified U.S. Mail, with return receipt requested. The Commission shall save a copy
31 of the return receipt to serve as record of the party's receipt of the official transcript and exhibits and Form 44
32 *Application for Review*.

33 (c) A motion to reconsider or to amend the decision of a Deputy Commissioner shall be filed with the Deputy
34 Commissioner within 15 days of receipt of notice of the award with a copy to the Docket Director. The time for filing a
35 request for review from the decision of a Deputy Commissioner under the rules in this Subchapter shall be tolled until a
36 motion to reconsider or to amend the decision has been ruled upon by the Deputy Commissioner. However, if either
37 party files a letter expressing a request for review as set forth in Paragraph (a) of this Rule, jurisdiction shall be

1 [immediately] transferred to the Full Commission, and the Docket Director shall notify the Deputy Commissioner. Upon
2 transfer of jurisdiction to the Full Commission, any party who had a pending motion to reconsider or amend the decision
3 of the Deputy Commissioner may file a motion with the Chairman of the Commission requesting remand to the Deputy
4 Commissioner with whom the motion was pending. Within the Full Commission's discretion, the matter may be so
5 remanded. Upon the Deputy Commissioner's ruling on the motion to reconsider or amend the decision, either party may
6 thereafter file a letter expressing a request for review of the Deputy Commissioner's decision as set forth in Paragraph (a)
7 of this Rule.

8 (d) The appellant shall submit a Form 44 *Application for Review* upon which appellant shall state the grounds for the
9 review. The grounds shall be stated with particularity, including the errors allegedly committed by the Commissioner or
10 Deputy Commissioner and, when applicable, the pages in the transcript on which the alleged errors are recorded.
11 Grounds for review not set forth in the Form 44 *Application for Review* are deemed abandoned, and argument thereon
12 shall not be heard before the Full Commission.

13 (e) The appellant shall file the Form 44 *Application for Review* and brief in support of the grounds for review with the
14 Commission with a certificate of service on the appellee within 25 days after receipt of the transcript or receipt of notice
15 that there will be no transcript. The appellee shall have 25 days from service of the *Form 44 Application for Review and*
16 appellant's brief to file a responsive brief with the Commission. The [Appellee's] appellee's brief [must] shall include a
17 certificate of service on the appellant. When an appellant fails to file a brief, an appellee shall file its brief within 25 days
18 after the appellant's time for filing the Form 44 *Application for Review* and appellant's brief has expired. A party who
19 fails to file a brief shall not participate in oral argument before the Full Commission. If multiple parties request review,
20 each party shall file an appellant's brief and appellee's brief on the schedule set forth in this Paragraph. If the matter has
21 not been calendared for hearing, any party may file with the Docket Director a written stipulation to a single extension of
22 time not to exceed 15 days. In no event shall the cumulative extensions of time exceed 30 days.

23 (f) After a request for review has been [given] submitted to the Full Commission, any motions related to the issues for
24 review [before the Full Commission] shall be filed with the Full Commission, with service on the other parties. Motions
25 related to the issues for review including motions for new trial, to supplement the record, including, but not limited to,
26 documents from offers of proof, or to take additional evidence, filed during the pendency of a request for review to the
27 [Full Commission] Full Commission, shall be argued before the Full Commission at the time of the hearing of the request
28 for review, except motions related to the [appellate record] official transcript and exhibits. The Full Commission, for
29 good cause shown, may rule on such motions prior to oral argument.

30 (g) [Cases] Case citations shall be [cited] to the North Carolina Reports, the North Carolina Court of Appeals Reports, or
31 the North Carolina Reporter, and when possible, to the [Southeastern] South Eastern Reporter. If no reporter citation is
32 available at the time a brief is filed or if an unpublished decision is referenced in the brief, the party citing to the case
33 shall attach a copy of the case to its brief. Counsel shall not discuss matters outside the record, assert personal opinions
34 or relate personal experiences, or attribute wrongful acts or motives to opposing counsel or members of the Commission.

35 (h) Upon the request of a party or on its own motion, the Commission may waive oral argument in the interests of justice
36 or to promote judicial economy. In the event of such waiver, the Full Commission shall file an award, based on the
37 record and briefs.

(i) Briefs to the Full Commission shall not exceed 35 pages, excluding attachments. No page limit applies to the length of attachments. Briefs shall be prepared using a 12 point type, shall be double spaced, and shall be prepared with non-justified right margins. Each page of the brief shall be numbered at the bottom of the page. When a party quotes or paraphrases testimony or other evidence from the appellate record in the party's brief, the party shall include, at the end of the sentence in the brief that quotes or paraphrases the testimony or other evidence, a parenthetical entry that designates the source of the quoted or paraphrased material and the page number [location] within the applicable source. The party shall use "T" to refer to the transcript of hearing testimony, "Ex" for exhibit, and "p" for page number. For example, if a party quotes or paraphrases material located in the hearing transcript on page 11, the party shall use the following format ["(T p 11)", "(T p 11),"] and if a party quotes or paraphrases material located in an exhibit on page 12, the party shall use the following format ["(Ex p 12)", "(Ex p 12)."] When a party quotes or paraphrases testimony in the transcript of a deposition in the party's brief, the party shall include the last name of the deponent and the page on which such testimony is located. For example, if a party quotes or paraphrases the testimony of John Smith, located on page 11 of such deposition, the party shall use the following format ["(Smith p 11)", "(Smith p 11)."]

(j) An employee appealing the amount of a disfigurement award shall personally appear before the Full Commission to permit the Full Commission to view the disfigurement.

History Note: Authority G.S. 97-80(a); 97-85;
Eff. January 1, 1990;
Amended Eff. April 1, 2014; January 1, 2011; August 1, 2006; June 1, 2000.

1 Rule 04 NCAC 10A .0704 is adopted as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014, with changes as follows:

3
4 **04 NCAC 10A .0704 REMAND FROM THE APPELLATE COURTS**

5 [(a)] When a case is remanded to the Commission from the appellate courts, each party may file a statement, with or
6 without a brief, to the Full Commission setting forth its position on the actions or proceedings, including evidentiary
7 hearings or depositions, required to comply with the court's decision. This statement shall be filed within 30 days of
8 the issuance of the court's mandate and shall be filed with the Commissioner who authored the Full Commission
9 decision or the Commissioner designated by the Chairman of the Commission if the Commissioner who authored
10 the decision is no longer a member of the Industrial Commission. The deadline to submit the statement to the
11 Commission shall be stayed automatically upon a party filing a petition for discretionary review or rehearing to the
12 appellate courts. The stay shall be automatically lifted if the petition for discretionary review or rehearing is denied
13 by the appellate courts.

14 ~~[(b) Application may be made in the first instance to the Supreme Court for a writ of supersedeas to stay the~~
15 ~~execution or enforcement of a judgment, order, or other determination mandated by the Court of Appeals when a~~
16 ~~notice of appeal of right or a petition for discretionary review has been or will be timely filed, or a petition for~~
17 ~~review by certiorari, mandamus, or prohibition has been filed to obtain review of the decision of the Court of~~
18 ~~Appeals.]~~

19
20 *History Note: Authority G.S. 97-80(a); 97-86;*
21 *Eff. April 1, 2014.*

1 Rule 04 NCAC 10A .0801 is amended as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014, with changes as follows:

3
4 **SECTION .0800 – RULES OF THE COMMISSION**

5
6 **04 NCAC 10A .0801 WAIVER OF RULES**

7 ~~In the interest of justice, these rules may be waived by the Industrial Commission. The rights of any unrepresented~~
8 ~~plaintiff will be given special consideration in this regard, to the end that a plaintiff without an attorney shall not be~~
9 ~~prejudiced by mere failure to strictly comply with any one of these rules.~~

10 In the interests of justice or to promote judicial economy, the Commission may, except as otherwise provided by the
11 [Rules] rules in this Subchapter, waive or vary the requirements or provisions of any of the rules in this Subchapter
12 in a case pending before the Commission upon written application of a party or upon its own initiative only if the
13 employee is not represented by counsel. Factors the Commission shall use in determining whether to grant the
14 waiver are:

- 15 (1) the necessity of a waiver;
16 (2) the party's responsibility for the conditions creating the need for a waiver;
17 (3) the party's prior requests for a waiver;
18 (4) the precedential value of such a waiver;
19 (5) notice to and opposition by the opposing parties; and
20 (6) the harm to the party if the waiver is not granted.

21
22 *History Note: Authority G.S. 97-80(a);*
23 *Eff. January 1, 1990;*
24 *Amended Eff. April 1, 2014.*
25

1 Rule 04 NCAC 10B .0501 is amended as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014 with changes, as follows:

3
4 **SECTION .0500 – RULES OF THE COMMISSION**

5
6 **04 NCAC 10B .0501 WAIVER OF RULES**

7 ~~In the interest of justice, these rules may be waived by a Commissioner, Deputy Commissioner, or the Full~~
8 ~~Commission.~~

9 In the interests of justice or to promote judicial economy, the Commission may, except as otherwise provided by the
10 [Rules] rules in this Subchapter, waive or vary the requirements or provisions of any of the rules in this Subchapter
11 in a case pending before the Commission upon written application of a party or upon its own initiative only if the
12 employee is not represented by counsel. Factors the Commission shall use in determining whether to grant the
13 waiver are:

- 14 (1) the necessity of a waiver;
15 (2) the party's responsibility for the conditions creating the need for a waiver;
16 (3) the party's prior requests for a waiver;
17 (4) the precedential value of such a waiver;
18 (5) notice to and opposition by the opposing parties; and
19 (6) the harm to the party if the waiver is not granted.

20
21 *History Note: Authority G.S. 143-291; 143-300;*
22 *Eff. January 1, 1989;*
23 *Amended Eff. April 1, 2014; May 1, 2000.*

Rule 04 NCAC 10C .0103 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10C .0103 DEFINITIONS

As used in this Subchapter:

(a)(1) ~~RPs are~~ **"Rehabilitation professional"** means a **medical** case ~~managers and manager, a~~ coordinators coordinator of medical rehabilitation ~~services services, and/or or a vocational~~ rehabilitation professional providing vocational rehabilitation services, including ~~but not limited~~ to, state, private, or carrier based, whether on site, telephonic, or in or out of state. ~~RPs do not~~ include direct care providers, e.g., physical therapists, occupational therapists, or speech therapists. Physical therapists, occupational therapists, speech therapists, and other direct care providers are not rehabilitation professionals under the Rules in this Subchapter.

~~(b) The "parties" are the worker, the worker's attorney, the employer, the workers' compensation carrier (including claims administrator, third party administrator), and the employer or carrier's attorney(s).~~

~~(c) "Physician" means medical doctor, chiropractor, other physician, and, where the context requires, other health care providers.~~

~~(d)(2)~~ "Medical rehabilitation" ~~refers to~~ means the planning and coordination of health care ~~services.~~ services by a medical case manager or coordinator, with the goal of assisting an injured worker to be restored ~~The goal of medical rehabilitation is to assist in the restoration of injured workers as~~ nearly as possible to the workers' worker's pre-injury level of physical function. Medical case management ~~may include but is not limited to~~ includes:

(a) case assessment; assessment, including a personal interview with the injured worker;

(b) development, implementation and coordination of a care plan with health care providers providers, and with the worker worker, and his or her family;

(c) evaluation of treatment results;

(d) planning for community re-entry; re-entry and return to work work; with the employer of injury and/or and

(e) referral for further vocational rehabilitation services.

~~(e)(3) "Vocational Rehabilitation"~~ "Vocational rehabilitation" ~~refers to~~ means the delivery and coordination of services under an individualized written plan, with the goal of assisting the injured ~~workers worker~~ worker to return to suitable ~~employment. employment or participate in education or retraining, as defined by [subsection] Item (5) of this Rule or applicable statute.~~

~~(1) Specific vocational rehabilitation services may include, but are not limited to: vocational assessment, vocational exploration, counseling, job analysis, job modification, job development and placement, labor market survey, vocational or psychometric testing, analysis of transferable skills, work adjustment counseling, job seeking skills training, on the job training and retraining, and follow up after re-employment.~~

1 ~~(2) The vocational assessment is based on the RP's evaluation of the worker's social, medical, and~~
2 ~~vocational standing, along with other information significant to employment potential and on a~~
3 ~~face to face interview between the worker and the RP, to determine whether the worker can~~
4 ~~benefit from vocational rehabilitation services, and, if so, to identify the specific type and~~
5 ~~sequence of appropriate services. It should include an evaluation of the worker's expectations in~~
6 ~~the rehabilitation process, an evaluation of any specific requests by the worker for medical~~
7 ~~treatment or vocational training, and a statement of the RP's conclusion regarding the worker's~~
8 ~~need for rehabilitation services, benefits expected from services, and a description of the proposed~~
9 ~~rehabilitation plan.~~

10 ~~(3) Job placement activities may be commenced after completion of a vocational assessment and~~
11 ~~formulation of an individualized plan for vocational services which specifies its goals and the~~
12 ~~priority for return to work options in each case. Placement shall only be directed toward~~
13 ~~prospective employers offering the opportunity for suitable employment, as defined herein.~~

14 ~~(f)(4)~~ "Return to work" means placement of the injured worker into suitable employment, as defined
15 ~~herein, by Item (5) of this Rule or applicable statute. Return to work options generally should be~~
16 ~~considered in the following priority:~~

17 ~~(1) Current job, current employer;~~

18 ~~(2) New job, current employer;~~

19 ~~(3) On the job training, current employer;~~

20 ~~(4) New job, new employer;~~

21 ~~(5) On the job training, new employer;~~

22 ~~(6) Formal vocational training to prepare worker for job with current or new employer.~~

23 ~~(7) Due to the high risk of small business failure, self employment should be considered only when its~~
24 ~~feasibility is documented with reference to worker's aptitudes and training, adequate~~
25 ~~capitalization, and market conditions.~~

26 ~~(g)(5) "Suitable employment" For claims arising before June 24, 2011, "suitable employment" means~~
27 ~~employment in the local labor market or self-employment which that is reasonably attainable and~~
28 ~~which that offers an opportunity to restore the worker as soon as possible and as nearly as~~
29 ~~practicable to pre-injury wage, while giving due consideration to the worker's qualifications (age,~~
30 ~~education, work experience, physical and mental capacities), impairment, vocational interests, and~~
31 ~~aptitudes. No one factor shall be considered solely in determining suitable employment. For~~
32 ~~claims arising on or after June 24, 2011, the statutory definition of "suitable employment," G.S.~~
33 ~~97-2(22), applies.~~

34 ~~(6) "Conditional rehabilitation professional" means a rehabilitation professional who has not met the~~
35 ~~requirements for qualified rehabilitation professionals under Paragraph (d) of Rule .0105 of this~~
36 ~~Subchapter and who desires to provide services as a rehabilitation professional in cases subject to~~
37 ~~the [Rules] rules in this Subchapter.~~

1

2 *History Note:* Authority G.S. 97-2(22); 97-25.4; 97-25.5; 97-32.2; 97-80;

3 *Eff. January 1, 1996;*

4 *Recodified from 4 NCAC 10C .0101, Eff. April 17, 2000;*

5 *Amended Eff. April 1, 2014; June 1, 2000.*

Rule 04 NCAC 10C .0108 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10C .0108 INTERACTION WITH PHYSICIANS

(a) At the initial visit with a physician the RP-rehabilitation professional shall provide ~~professional~~ identification in the form of a company identification or business card and ~~shall~~ explain the RP's rehabilitation professional's role in the case.

(b) In all cases, the RP-rehabilitation professional shall advise the worker that ~~he or she~~ the worker has the right to a private examination by the ~~medical health care~~ provider outside of the presence of the RP-rehabilitation professional. If the worker prefers, he or she may request that the RP-rehabilitation professional accompany him or her during the examination. However, if the worker or the worker's attorney notifies the RP-rehabilitation professional in writing that the worker desires a private examination, no subsequent waiver of that right shall be effective unless the waiver is ~~revoked-made~~ made in writing by the worker or, if represented, by the worker's attorney.

(c) If the RP-rehabilitation professional ~~wishes~~ needs to have a an in-person conference with the physician following an examination, the RP-rehabilitation professional ~~should~~ shall reserve with the physician sufficient appointment time for ~~a-the~~ conference. The worker ~~must~~ shall be offered the opportunity to attend ~~this the~~ conference with the physician. If the worker or the physician does not consent to a joint conference, or if in the physician's opinion it is medically contraindicated for the worker to participate in the conference, the RP-rehabilitation professional ~~will~~ shall note this in his or her report, ~~and may in such case~~ communicate directly with the physician, and shall report the substance of the communication.

(d) When the RP-rehabilitation professional determines that it is necessary to communicate with a physician other than at a joint meeting, the RP-rehabilitation professional shall first notify the injured worker, or ~~his/her~~ his or her attorney if represented, of the RP's rehabilitation professional's intent to communicate and the reasons therefore. The RP-rehabilitation professional ~~need is~~ is not required to obtain the injured worker's or his or her attorney's prior consent ~~for the following types of communication- if:~~

- (1) The communication is limited to scheduling issues or requests for time-sensitive medical records;
- (2) A medical emergency is involved;
- (3) The injured worker's health or medical treatment would either be adversely affected by a delay or benefited by immediate action;
- (4) The communication is limited to advising the physician of the employer or carrier approval for recommended testing or treatment;
- (5) The injured worker or attorney has consented to ~~such the communications~~ communications; ~~through a valid, current authorization;~~
- (6) The communication is initiated by the physician; or
- (7) The injured worker failed to show up for a scheduled appointment or arrived at a time other than the scheduled appointment time.

1 ~~Whenever an RP~~ When a rehabilitation professional communicates with a physician without the prior consent or
2 presence of the injured worker, the ~~RP~~ rehabilitation professional must ~~promptly~~ document the reasons for and the
3 substance of the communication and ~~promptly report such~~ the reasons and substance to the injured worker or his or
4 her attorney, if represented, pursuant to Rule ~~VI~~ VI.0106 of this Subchapter.

5 ~~(e) The RP may assist in scheduling second opinions requested by the treating physician, as well as supporting~~
6 ~~treatment. In such case, the worker shall receive at least 10 calendar days notice of an appointment for a second~~
7 ~~opinion unless otherwise agreed by the parties or required by statute.~~

8 ~~(f) The RP may assist in obtaining from the treating physician an opinion as to the degree of permanent partial~~
9 ~~impairment retained by the worker at maximum medical improvement. The decision to obtain a second physician's~~
10 ~~opinion on the degree of impairment is not within the practice of rehabilitation. However, if requested by the party~~
11 ~~who desires a second opinion, the RP may assemble information, schedule, coordinate, and, with the worker's~~
12 ~~consent, attend the appointment with that physician.~~

13 ~~(g) If a party requests a second opinion or an independent medical examination, the RP's involvement is limited to~~
14 ~~assembling and forwarding medical records and information, and scheduling, coordinating, and, with the worker's~~
15 ~~consent, attending the appointment with that physician.~~

16 (e) The following requirements apply to interactions regarding impairment ratings, independent medical
17 examinations, second opinions or consults:

18 (1) When a party or health care provider requests a consult, second opinion, or independent medical
19 examination that is authorized or ordered, the rehabilitation professional ~~[may]~~ may, if requested,
20 assemble and forward medical records and information, schedule and coordinate an appointment,
21 and, if the worker consents, have a joint meeting with the health care provider and the worker after
22 a private ~~[exam, if requested,]~~ exam.

23 (2) When any such exam is requested by the carrier, the worker shall receive at least 10 calendar days'
24 notice of the appointment unless the parties agree otherwise or unless otherwise required by
25 statute.

26 ~~(h)(f)~~ The RP ~~rehabilitation professional~~ shall simultaneously send ~~copies~~ to the parties copies of all written
27 communications ~~to with medical health care providers, providers~~ and shall accurately and completely record and
28 report all oral communications.

30 *History Note: Authority G.S. 97-25.4; 97-25.5; 97-32.2; 97-80;*

31 *Eff. January 1, 1996;*

32 *Amended Eff. April 1, 2014; June 1, 2000.*

Rule 04 NCAC 10C .0109 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10C .0109 VOCATIONAL REHABILITATION SERVICES AND RETURN TO WORK

(a) When performing the vocational assessment and formulating and drafting the individualized written rehabilitation plan for the employee required by G.S. 97-32.2(c), the vocational rehabilitation professional shall follow G.S. 97-32.2.

(b) Job placement activities may not be commenced until after a vocational assessment and an individualized written rehabilitation plan for vocational rehabilitation services specifying the goals and the priority for return-to-work options have been completed in the case in accordance with G.S. 97-32.2. Job placement activities shall be directed only toward prospective employers offering the opportunity for suitable employment, as defined by Item (5) of Rule .0103 of this Subchapter or by applicable statute.

(c) Return-to-work options shall be considered in the following order of priority:

(1) current job, current employer;

(2) new job, current employer;

(3) on-the-job training, current employer;

(4) new job, new employer;

(5) on-the-job training, new employer;

(6) formal education or vocational training to prepare the worker for a job with current or new employer; and

(7) self-employment, only when its feasibility is documented with reference to the employee's aptitudes and training, adequate capitalization, and market conditions.

(d) When an employee requests retraining or education as permitted in G.S. 97-32.2(a), the vocational rehabilitation professional shall provide a written assessment of the employee's request that includes an evaluation of:

(1) the retraining or education requested;

(2) the availability, location, cost, and identity of providers of the requested retraining or education;

(3) the likely duration until completion of the requested retraining or education and the likely class schedules, class attendance requirements, and out-of-class time required for homework and study;

(4) the current or projected availability of employment upon completion; and

(5) the anticipated pay range for employment upon completion.]

(1) the retraining or education requested;

(2) the availability, location, cost, and identity of providers of the requested retraining or education;

(3) the likely duration until completion of the requested retraining or education and the likely class schedules, class attendance requirements, and out-of-class time required for homework and study;

(4) the current or projected availability of employment upon completion; and

(5) the anticipated pay range for employment upon completion.

1 ~~(a)(e)~~ The RP shall obtain from the medical provider work restrictions which fairly address the demands of any
2 proposed employment. If ordered by a physician, the RP should obtain a Functional Capacity Evaluation (FCE) or
3 Physical Capacity Evaluation (PCE). Any FCE or PCE obtained should measure the worker's capacities and
4 impairments. The rehabilitation professional shall obtain work restrictions from the health care provider that address
5 the demands of any proposed employment. If ordered by a physician, the rehabilitation professional shall schedule
6 an appointment with a third party provider to evaluate an injured worker's functional capacity, physical capacity, or
7 impairments to work.

8 ~~(b)(f)~~ The ~~RP~~ rehabilitation professional shall refer the worker only to opportunities for suitable employment, as
9 defined ~~herein~~ by Item (5) of Rule .0103 of this Subchapter or by applicable statute.

10 ~~(c)(g)~~ If the ~~RP~~ rehabilitation professional intends to utilize written or videotaped job descriptions in the return-to-
11 work process, the ~~RP~~ rehabilitation professional shall provide a copy of the description to all parties for review
12 before the job description is provided to the doctor. The worker or the worker's attorney shall have seven business
13 days from the mailing of the description to notify the ~~RP~~ rehabilitation professional, all parties, and the
14 physician of any objections or amendments ~~to the job description thereto~~. The job description and the objections or
15 amendments, if any, shall be submitted to the physician simultaneously. This process ~~may~~ shall be expedited ~~on~~
16 ~~occasions~~ when job availability is critical. This waiting period does not apply if the worker or the worker's attorney
17 has [pre-approved] given prior approval to the job description.

18 ~~(d)(h)~~ In preparing written job descriptions, the ~~RP~~ rehabilitation professional shall utilize standards including, but
19 not limited to, ~~recognized standards which may include but not be limited to the Dictionary of Occupational Titles~~
20 ~~and/or and the Handbook for Analyzing Jobs published by the U.S. United States Department of Labor. Labor, which~~
21 ~~are recognized as national standard references for use in vocational rehabilitation.~~ These standards can be accessed
22 at no cost at <http://www.oalj.dol.gov/LIBDOT.HTM> and www.wopsr.net/etc/dot/RHAJ.pdf, respectively. The
23 Handbook for Analyzing Jobs may also be purchased from major online booksellers for approximately \$85.00.

24 ~~(e)~~ In identifying proposed employment for the injured worker, the RP should consider the worker's transportation
25 requirements.

26 ~~(f)(i)~~ The rehabilitation professional may conduct [follow-up] follow-up after job placement ~~may be carried out to~~
27 verify the appropriateness of the job placement.

28 ~~(g)(j)~~ The ~~RP~~ rehabilitation professional shall not initiate or continue placement activities ~~which that~~ do not appear
29 reasonably likely to result in placement of the injured worker in suitable employment. The ~~RP~~ rehabilitation
30 professional shall report to the parties when efforts to place the worker in suitable employment do not appear
31 reasonably likely to result in placement of the injured worker in suitable employment.

32
33 History Note: Authority G.S. 97-2(22); 97-25.4; 97-25.5; 97-32.2; [97-2(22);]
34 Eff. January 1, 1996;
35 Amended Eff. April 1, 2014; June 1, 2000.

1 Rule 04 NCAC 10C .0201 is adopted as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014 with changes, as follows:

3
4 **SECTION .0200 - RULES OF THE COMMISSION**

5
6 **4 NCAC 10C .0201 WAIVER OF RULES**

7 In the interests of justice or to promote judicial economy the Commission may, except as otherwise provided by the
8 [Rules] rules in this Subchapter, waive or vary the requirements or provisions of any of the rules in this Subchapter
9 in a case pending before the Commission upon written application of a party or upon its own initiative only if the
10 employee is not represented by counsel. Factors the Commission shall use in determining whether to grant the
11 waiver are:

- 12 (1) the necessity of a waiver;
13 (2) the party's responsibility for the conditions creating the need for a waiver;
14 (3) the party's prior requests for a waiver;
15 (4) the precedential value of such a waiver;
16 (5) notice to and opposition by the opposing parties; and
17 (6) the harm to the party if the waiver is not granted.

18
19 *History Note: Authority G.S. 97-25.4; 97-80;*
20 *Eff. April 1, 2014.*

1 Rule 04 NCAC 10D .0110 is amended as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014 with changes, as follows:

3
4 **04 NCAC 10D .0110 WAIVER OF RULES**

5 ~~For good cause, and in its discretion, subject to statutory requirements, the Commission may waive adherence to any~~
6 ~~of these Rules.~~ In the interests of justice or to promote judicial economy, the Commission may, except as otherwise
7 provided by the [Rules] rules in this Subchapter, waive or vary the requirements or provisions of any of the rules in
8 this Subchapter in a case pending before the Commission upon written application of a party or upon its own
9 initiative only if the employee is not represented by counsel. Factors the Commission shall use in determining
10 whether to grant the waiver are:

- 11 (1) the necessity of a waiver;
12 (2) the party's responsibility for the conditions creating the need for a waiver;
13 (3) the party's prior requests for a waiver;
14 (4) the precedential value of such a waiver;
15 (5) notice to and opposition by the opposing parties; and
16 (6) the harm to the party if the waiver is not granted.

17
18 *History Note:* Authority G.S. 97-25.2; 97-80(a);
19 Eff. January 1, 1996;
20 Amended Eff. April 1, 2014.

Rule 04 NCAC 10E .0103 is adopted as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10E .0103 ADMISSION OF OUT-OF STATE ATTORNEYS TO APPEAR BEFORE THE COMMISSION

(a) Attorneys residing in and licensed to practice law in another state who seek to be admitted to practice before the Commission to represent a client in a [particular] claim pursuant to N.C. Gen. Stat. § 84-4.1 [may] shall file a motion with the Commission that complies with the requirements of N.C. Gen. Stat. § 84-4.1. [If the *pro hac vice* motion is filed in a case involving a stipulated Opinion and Award regarding a death claim, the motion shall be filed with the Chief Deputy Commissioner.] The North Carolina attorney with whom the out-of-state attorney associates pursuant to N.C. Gen. Stat. § 84-4.1(5) may [also] file the [motion.] motion instead as long as it complies with the requirements of N.C. Gen. Stat. § 84-4.1.

(b) The motion shall be filed with the Executive Secretary of the Commission except under the following circumstances:

(1) If the [pertinent] motion is filed in a claim that is set for hearing before or pending decision by a Deputy Commissioner or the Full Commission, the motion shall be filed with the Deputy Commissioner or chair of the Full Commission panel, respectively.

(2) If the motion is filed in a [case] claim involving a form application regarding a death claim, the motion shall be filed with the Director of Claims Administration.

(3) If the motion is filed in a [case] claim involving a stipulated Opinion and Award regarding a death claim, the motion shall be filed with the Chief Deputy Commissioner.

(c) A proposed Order granting *pro hac vice* admission that includes the facsimile numbers for all counsel of record shall be provided with the motion.

(d) Following review of the motion, the Commission shall issue an Order granting or denying the motion. The Commission has the discretionary authority to deny such motions even if they comply with the requirements of N.C. Gen. Stat. § 84-4.1

~~(d)~~(e) Upon receipt of an Order granting a motion for *pro hac vice* admission, the admitted attorney or the associated North Carolina attorney shall pay [Following the payment of] the fees to the North Carolina State Bar and General Court of Justice [as] required by N.C. Gen. Stat. § [84-4.1, the out of state attorney or the associated North Carolina attorney shall] and file a statement with the Executive Secretary documenting payment of said fees and the submission of any *pro hac vice* admission registration statement required by the North Carolina State Bar.

History Note: Authority G.S. 84-4.1; 97-80(a);
Eff. April 1, 2014.

Rule 04 NCAC 10E .0104 is adopted as published on the OAH website for the public comment period beginning January 31 through February 26, 2014 with changes, as follows:

04 NCAC 10E .0104 SECURE LEAVE PERIODS FOR ATTORNEYS

(a) ~~In order to secure for the parties to actions and proceedings pending before the Industrial Commission, and to the public at large, the heightened level of professionalism that an attorney is able to provide when the attorney enjoys periods of time that are free from the urgent demands of professional responsibility and to enhance the overall quality of the attorney's personal and family life, any~~ Any attorney may ~~from time to time designate and enjoy~~ request one or more secure leave periods each year as provided in this Rule.

(b) During any calendar year, an attorney's secure leave periods pursuant to this Rule shall not ~~exceed, in the aggregate,~~ exceed an aggregate of three ~~calendar~~ calendar weeks.

(c) To request a secure leave period an attorney shall file a written request, by letter or motion, containing the information required by ~~subsection~~ Paragraph (d) of this Rule with the Office of the Chair within the time provided in ~~subsection~~ Paragraph (e). Upon such filing, the Chair shall review the request and, if ~~appropriate,~~ the request complies with Paragraphs (d) and (e) of this Rule, issue a letter allowing the requested secure leave ~~period,~~ period. ~~and the~~ The attorney shall not be required to appear at any trial, hearing, deposition, or other proceeding before the Commission during that secure leave period.

(d) The request shall contain the following information:

(1) the attorney's name, address, telephone number and state bar ~~number,~~ number:

(2) the date(s) for which secure leave is being ~~requested,~~ requested:

(3) the dates of all other secure leave periods during the current calendar year that have previously been designated by the attorney pursuant to this ~~Rule,~~ Rule:

(4) ~~A~~ A a statement that the secure leave period is not being designated for the purpose of delaying, hindering or interfering with the timely disposition of any matter in any pending action or ~~proceeding,~~ proceeding; and

(5) a statement that no action or proceeding in which the attorney has entered an appearance has been scheduled, tentatively set, or noticed for trial, hearing, deposition or other proceeding during the designated secure leave period.

(e) To be allowed, the request shall be filed:

(1) no later than ninety (90) days before the beginning of the secure leave ~~period,~~ period; and

(2) before any trial, hearing, deposition or other matter has been regularly scheduled, peremptorily set or noticed for a time during the designated secure leave period.

An untimely request will be ~~automatically~~ denied by letter. In the event that a party has been denied secure leave because the request was not timely filed and there are extraordinary circumstances, the attorney may file a motion requesting an exception. If the case has been scheduled for hearing before a Deputy Commissioner, the motion shall be addressed to the Deputy Commissioner. If the matter is scheduled for hearing before the Full Commission, the

1 motion shall be addressed to the ~~[chair of the panel]~~ Chair of the Panel before which the hearing will be held. In all
2 other cases, the motion should be directed to the Office of the Chair.

3 (f) If, after a secure leave period has been allowed pursuant to this Rule, any trial, hearing, deposition, or other
4 proceeding is scheduled or tentatively set for a time during the secure leave period, the attorney shall file with the
5 Deputy Commissioner or chair of the Full Commission panel before which the matter was calendared or set, and
6 serve on all parties, a copy of the letter allowing the secure leave period with a certificate of service attached. Upon
7 receipt, the ~~[pertinent]~~ proceeding shall be rescheduled for a time that is not within the attorney's secure leave
8 period.

9 (g) If, after a secure leave period has been allowed pursuant to this Rule, any deposition is noticed for a time during
10 the secure leave period, the attorney may serve on the party that noticed the deposition a copy of the letter allowing
11 the secure leave period with a certificate of service attached, and that party shall reschedule the deposition for a time
12 that is not within the attorney's secure leave period.

13 ~~[(h) Nothing in this Rule shall limit the inherent power of the Commission to reschedule a case to allow an attorney~~
14 ~~to enjoy a leave during a period that has not been allowed pursuant to this Rule, but there shall be no entitlement to~~
15 ~~any such leave.]~~

16
17 *History Note: Authority G.S. 97-80(a);*
18 *Eff. April 1, 2014.*

1 Rule 04 NCAC 10E .0201 is adopted as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014, with changes as follows:

3
4 **SECTION .0200 – FEES**

5
6 **04 NCAC 10E .0201 DOCUMENT AND RECORD FEES**

7 (a) The fees in this Rule apply to all subject areas within the authority of the Commission.

8 (b) Upon written request, to the extent permitted by Article 1 of Chapter 97, Article 31 of Chapter 143, and Chapter
9 132 of the North Carolina General Statutes, copies of documents and audio recordings of Commission hearings are
10 available at the “actual cost” as defined by G.S. 132-6.2(b). The Commission shall provide the “actual cost” on the
11 Commission’s website. Certification of documents in the Commission’s claim files is available upon request at a
12 cost of one dollar (\$1.00) per certification in addition to the “actual cost” for the copies of the documents.
13 Electronic copy certification is not available.

14 (c) Documents shall be sent via certified mail upon request at the actual cost established by the United States Postal
15 Service.

16 ~~(d) North Carolina sales tax shall be added if applicable.~~

17
18 *History Note: Authority G.S. ~~7A-305~~; 97-73; 97-79; 97-80; 132-6.2; 143-291.1; 143-291.2; 143-300;*
19 *Eff. April 1, 2014.*

Rule 04 NCAC 10E .0202 is adopted as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10E .0202 HEARING COSTS OR FEES

(a) The following hearing costs or fees apply to all subject areas within the authority of the Commission:

- (1) one hundred twenty dollars (\$120.00) for a hearing before a Deputy Commissioner to be charged after the hearing has been held;
- (2) one hundred twenty dollars (\$120.00) if a case is continued after the case is calendared for a specific hearing date, to be paid by the requesting party or parties;
- (3) one hundred twenty dollars (\$120.00) if a case is withdrawn, removed, or dismissed after the case is calendared for a specific hearing date;
- (4) two hundred twenty dollars (\$220.00) for a hearing before the Full Commission to be charged after the hearing has been held; and
- (5) ~~one hundred twenty dollars (\$120.00) if an appeal or request for review to the Full Commission is withdrawn or for the dismissal of an appeal or request for review due to the failure to prosecute or perfect the appeal or request for review after the appeal or request for review is scheduled for a specific hearing date;~~ one hundred twenty dollars (\$120.00) if one of the following occurs after an appeal or request for review is scheduled for a specific hearing date before the Full Commission:
 - (A) the appeal or request for review is withdrawn; or
 - (B) the appeal or request for review is dismissed for failure to prosecute or perfect the appeal or request for review.

In workers' compensation cases, these fees shall be paid by the employer unless the Commission orders otherwise, except as specified in subsection (2) above.

(b) The Commission may waive fees set forth in Paragraph (a) of this Rule, or assess such fees against a party or parties pursuant to G.S. 97-88.1 if the Commission determines that the hearing has been brought, prosecuted, or defended without reasonable ground.

~~(c) Failure to pay fees or costs assessed by the Commission may result in penalties. The Commission may issue a notice and order to show cause as to why a fee or cost assessed by the Commission has not been paid.~~

History Note: Authority G.S. ~~7A-305~~; 97-73; 97-80; 97-88.1; 143-291.1; 143-291.2; 143-300;
Eff. April 1, 2014.

Rule 04 NCAC 10E .0203 is adopted as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10E .0203 FEES SET BY THE COMMISSION

(a) In workers' compensation cases, the Commission sets the following fees:

- (1) four hundred dollars (\$400.00) for the processing of a compromise settlement agreement to be paid 50% by the employee and 50% by the employer(s) or the employer's carrier(s). Unless the parties agree otherwise, the employer(s) or the employer's carrier(s) shall pay such fee in full when submitting the agreement to the Commission, and shall then be entitled to a credit for the employee's 50% share of such fee against settlement proceeds;
- (2) three hundred dollars (\$300.00) for the processing of a Form 21 *Agreement for Compensation for Disability*, Form 26 *Supplemental Agreement as to Payment of Compensation*, or Form 26A *Employer's Admission of Employee's Right to Permanent Partial Disability* to be paid by the employee and the employer or the employer's carrier in equal shares. The employer or the employer's carrier shall pay such fee in full when submitting the agreement to the Commission. Unless the parties agree otherwise or the award totals \$3,000 or less, the employer and the employer's carrier shall be entitled to a credit for the employee's 50% share of such fee against the award;
- (3) two hundred dollars (\$200.00) for the processing of a I.C. Form MSC5, *Report of Mediator*, to be paid 50% by the employee and 50% by the employer(s) or the employer's carrier(s). The employer(s) or the employer's carrier(s) shall pay such fee in full upon receipt of an invoice from the Commission and, unless the parties agree otherwise, shall be reimbursed for the employee's share of such fees when the case is concluded from [benefits] any compensation that may be determined to be due to the [employee, and the] employee. The employer(s) or the employer's carrier(s) may withhold funds from any award for this [purpose.] purpose; and
- (4) a fee equal to the filing fee required to file of a civil action in the Superior Court division of the General Court of Justice for the processing of a Form 33I *Intervenor's Request that Claim be Assigned for Hearing*, to be paid by the intervenor.

(b) In tort claims cases, the filing fee is an amount equal to the filing fee required to file a civil action in the Superior Court division of the General Court of Justice.

History Note: Authority G.S. [97-10.2;] 7A-305; 97-17; [97-18.2;] 97-26(i); 97-73; 97-80; 143-291.2; 143-300; Eff. April 1, 2014.

1 Rule 04 NCAC 10E .0301 is adopted as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014 with changes, as follows:

3
4 **SECTION .0300 – RULES OF THE COMMISSION**

5
6 **04 NCAC 10E .0301 WAIVER OF RULES**

7 In the interests of justice or to promote judicial economy, the Commission may, except as otherwise provided by the
8 [Rules] rules in this Subchapter, waive or vary the requirements or provisions of any of the rules in this Subchapter
9 in a case pending before the Commission upon written application of a party or upon its own initiative only if the
10 employee is not represented by counsel. Factors the Commission shall use in determining whether to grant the
11 waiver are:

- 12 (1) the necessity of a waiver;
13 (2) the party's responsibility for the conditions creating the need for a waiver;
14 (3) the party's prior requests for a waiver;
15 (4) the precedential value of such a waiver;
16 (5) notice to and opposition by the opposing parties; and
17 (6) the harm to the party if the waiver is not granted.

18
19 *History Note: Authority G.S. 97-25.2; 97-25.4; 97-73; 97-80; 130A-425(d); 143-166.4; 143-296; 143-300;*
20 *Eff. April 1, 2014.*

Rule 04 NCAC 10G .0104A is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10G .0104A FOREIGN LANGUAGE INTERPRETERS

~~(a) Services of Foreign Language Interpreters Required Unless Waived. When a person who does not speak or understand the English language is required to attend a mediation conference, the person shall be assisted by a qualified foreign language interpreter unless the right to an interpreter is waived by both parties.~~

~~(b) Qualifications of Interpreters. To qualify as a foreign language interpreter, a person must possess sufficient experience and education, or a combination of experience and education, speaking, and understanding English and the foreign language to be interpreted, to qualify as an expert witness pursuant to N.C. Gen. Stat. §8C-1, Rule 702.~~

~~(c) Notice to Industrial Commission and Opposing Party of Need for Interpreter. Any party who is unable to speak or understand English shall so notify the Industrial Commission and the opposing party, in writing, not less than 21 days prior to the date of the mediation conference. The notice shall state with specificity the language(s) that must be interpreted.~~

~~(d) Designation of Interpreter. Upon notice of the need for an interpreter, the employer or insurer shall retain a qualified, disinterested interpreter, either agreed upon by the parties or approved by the Industrial Commission, to assist at the mediation conference.~~

~~(e) Interpreter Fees. The interpreter's fee shall constitute a cost as contemplated by N.C. Gen. Stat. §97-80. A qualified interpreter who appears at a mediation conference shall be entitled to payment of the fee agreed upon by the interpreter and employer or insurer that retained the interpreter. Except in cases where a claim for compensation has been prosecuted without reasonable ground, the fee agreed upon by the interpreter and employer or insurer shall be paid by the employer or insurer. Where it is ultimately determined by the Commission that the request for an interpreter was unfounded, attendant costs may be assessed against the movant.~~

~~(f) Interpreter Ethics. Foreign language interpreters shall abide by the code of ethical conduct for court interpreters promulgated by the North Carolina Administrative Office of the Courts and adopted by the Industrial Commission and shall interpret, as word for word as is practicable, without editing, commenting, or summarizing, testimony or other communications.~~

(a) Any party who is unable to speak or understand English shall so notify the Commission, the mediator, and the opposing [party(ies)] party or parties in writing, not less than 21 days prior to the date of the mediated settlement conference. The notice shall contain the party's primary language and how the party plans to communicate in English during the mediation.

(b) [If either party shall request assistance by a qualified foreign language interpreter for a party who does not speak or understand the English language, the] The party requesting the assistance of [the] a qualified foreign language interpreter shall bear the costs.

(c) If the certified mediator, in his or her discretion, notifies the parties of the need for a qualified foreign language interpreter, the parties shall retain a disinterested [interpreter], interpreter who possesses the qualifications listed in [paragraph] Paragraph (d) of this [Rule], Rule to assist at the mediated settlement conference. The fee of the

1 foreign language interpreter and any postponement fees necessitated by the need for a qualified foreign language
2 interpreter shall be shared by the parties unless the parties agree otherwise.

3 (d) A qualified foreign language interpreter shall possess sufficient experience and education, or a combination of
4 experience and education, in speaking and understanding English and the foreign language to be interpreted, to
5 qualify as an expert witness pursuant to G.S. 8C-1, Rule 702.

6 (e) Qualified foreign language interpreters shall abide by the Code of Conduct and Ethics of Foreign Language
7 Interpreters and Translators, contained in Part 4 of *Policies and Best Practices for the Use of Foreign Language*
8 *Interpreting and Translating Services in the North Carolina Court System* and promulgated by the North Carolina
9 Administrative Office of the Courts, and shall interpret, as word for word as is practicable, without editing,
10 commenting, or summarizing, testimony or other communications. The Code of Conduct and Ethics of Foreign
11 Language Interpreters and Translators is hereby incorporated by reference and includes subsequent amendments and
12 editions. A copy may be obtained at no charge from the North Carolina Administrative Office of the Court's
13 website, <http://www.nccourts.org/Citizens/CPrograms/Foreign/Documents/guidelines.pdf>, or upon request, at the
14 offices of the Commission, [located in the Dobbs Building, 430 North Salisbury Street, Raleigh, North Carolina,
15 between the hours of 8:00 a.m. and 5:00 p.m.] as set forth in Rule 04 NCAC 10A .0101.

16
17 *History Note: Authority G.S. ~~97-80(a),(c)~~; 97-80(a); 97-80(c); 143-296; 143-300;*
18 *Eff. January 1, 2011;*
19 *Amended Eff. April 1, 2014.*

Rule 04 NCAC 10G .0107 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10G .0107 COMPENSATION OF THE MEDIATOR

~~(a) By Agreement. When the mediator is stipulated to by the parties, compensation shall be as agreed upon between the parties and the mediator.~~

~~(b) By Commission Order. When the mediator is appointed by the Commission, the mediator's compensation shall be as follows:~~

~~(1) Conference Fees. The mediator shall be paid by the parties at the rate of \$150.00 per hour for mediation services at the conference.~~

~~(2) Administrative Fees. The parties shall pay to the mediator a one time, per case administrative fee of \$150.00, unless otherwise ordered by the Commission. The mediator's administrative fee shall be paid in full unless, within 10 days after the date that the mediator has been appointed, written notice is given to the mediator and the Dispute Resolution Coordinator that the issues for which a request for hearing had been filed have been fully resolved or the hearing request has been withdrawn.~~

~~(3) Postponement Fees. As used herein, the term "postpone" shall mean to reschedule or otherwise not proceed with a scheduled mediation conference after that conference has been scheduled to convene on a specific date. After a conference is scheduled to convene on a specific date it may not be postponed without the requesting party first notifying all other parties concerning the grounds for the requested postponement, or without the consent and approval of the mediator or the Dispute Resolution Coordinator. If a mediation conference is postponed without good cause, the mediator shall be paid a postponement fee unless, upon application of the party or parties charged with the fee, the fee is waived by the Commission. Unless the Commission otherwise orders, the postponement fee shall be \$300.00 if the mediation conference is postponed within seven calendar days of the scheduled conference, and \$150.00 if the mediation conference is postponed more than seven calendar days prior to a scheduled conference. Postponement fees shall be allocated in equal shares to the party or parties requesting the postponement unless otherwise ordered by the Commission.~~

~~(4) The settlement of a case prior to the scheduled date for mediation shall be good cause for a postponement provided that the mediator was notified of the settlement immediately after it was reached and the mediator received notice of the settlement at least fourteen (14) calendar days prior to the date scheduled for mediation.~~

~~(c) Payment by Parties. Payment shall be due upon completion of the conference; provided, that the State shall be billed at the conference and pay within 30 days of receipt of the billing, and insurance companies or carriers whose written procedures do not provide for payment of the mediator at the conference may pay within 15 days of the conference. Unless otherwise agreed to by the parties or ordered by the Commission, costs of the mediated settlement conference shall be allocated to the parties, as follows: one share by plaintiff(s); one share by the workers' compensation defendant employer or its insurer, or if more than one employer or carrier is involved, or if there is a dispute between employer(s) or carrier(s), one share by each separately represented entity; one share by participating third party tort defendants or their carrier, or if there are conflicting interests among them, one share~~

~~from each such defendant or group of defendants having shared interests; and, one share by the defendant State agency in a State Tort Claims Act case. Parties obligated to pay a share of the costs shall be responsible for equal shares; provided, however, that in workers' compensation claims the defendant shall pay the plaintiff's share of mediation, postponement, and substitution fees, as well as its own. Unless the Dispute Resolution Coordinator enters an Order allocating such fees to a particular party, the fees may be taxed as other costs by the Commission. The defendant shall be reimbursed for the plaintiff's share of such fees when the case is concluded from benefits that may be determined to be due to the plaintiff, and the defendant may withhold funds from any award for this purpose.~~

(a) By Agreement. When the mediator is stipulated to by the parties, compensation shall be as agreed upon between the parties and the mediator.

(b) By Commission Order. When the mediator is appointed by the Commission, the mediator's compensation shall be as follows:

(1) Conference Fees. The mediator shall be paid by the parties at the rate of one hundred fifty dollars (\$150.00) per hour for mediation services provided at the mediated settlement conference.

(2) Administrative Fees. The parties shall pay to the mediator a one time, per case administrative fee of one hundred fifty dollars (\$150.00). The mediator's administrative fee shall be paid in full unless, within 10 days after the mediator has been appointed, written notice is given to the mediator and to the Dispute Resolution Coordinator that the issues for which a request for hearing was filed have been fully resolved or that the hearing request has been withdrawn.

(3) Postponement Fees. As used in this Subchapter, the term "postpone" means to reschedule or otherwise not proceed with a scheduled mediated settlement conference after the conference has been scheduled to convene on a specific date. After a conference is scheduled to convene on a specific date, the conference may not be postponed unless the requesting party notifies all other parties of the grounds for the requested postponement and obtains the consent and approval of the mediator or the Dispute Resolution Coordinator. If the conference is postponed without good cause, the mediator shall be paid a postponement fee. The postponement fee shall be three hundred dollars (\$300.00) if the conference is postponed within seven calendar days of the scheduled date, and one hundred fifty dollars (\$150.00) if the conference is postponed more than seven calendar days prior to the scheduled date. Unless otherwise ordered by the Commission in the interests of justice, postponement fees shall be allocated in equal shares to the party or parties requesting the postponement. As used in this Rule, "good cause" shall mean that the reason for the postponement involves a situation over which the party seeking the postponement has no control, including [but not limited to,] a party or attorney's illness, a death in a party or attorney's family, a demand by a judge that a party or attorney for a party appear in court, or inclement weather such that travel is prohibitive.

(4) The settlement of a case prior to the scheduled date of the mediated settlement conference shall be good cause to cancel the mediation without the approval of the mediator or the Dispute Resolution Coordinator. The parties shall notify the mediator of any cancellation due to settlement. The

mediator may charge a cancellation fee of one hundred fifty dollars (\$150.00) if notified of the cancellation within ~~fourteen~~ 14 days of the scheduled date, or three hundred dollars (\$300.00) if notified within seven days of the scheduled date.

(c) Payment by Parties. Payment is due upon completion of the mediated settlement conference; provided, that the State shall be billed at the conference and shall pay within 30 days of receipt of the bill, and insurance companies or carriers whose written procedures do not provide for payment of the mediator at the conference ~~may~~ shall pay within 15 days of the conference. Unless otherwise agreed to by the parties or ordered by the ~~Commission~~ Dispute Resolution Coordinator due to a party or parties violating a ~~Rule~~ rule in this Subchapter, the costs of the conference shall be allocated to the parties, as follows:

- (1) one share by plaintiff(s);
- (2) one share by the workers' compensation defendant-employer or its insurer, or if more than one employer or carrier is involved, or if there is a dispute between employer(s) or carrier(s), one share by each separately represented entity;
- (3) one share by participating third-party tort defendants or their carrier, or if there are conflicting interests among them, one share from each defendant or group of defendants having shared interests; and
- (4) if applicable, one share by the defendant State agency in a Tort Claims Act case.

Parties obligated to pay a share of the costs are responsible for equal shares; provided, however, that in workers' compensation claims the defendant shall pay the plaintiff's share of mediation, postponement, and substitution fees, as well as defendant's own share. If plaintiff requests postponement of the mediated settlement conference, defendants shall be entitled to a credit for the postponement fee.

(d) Unless the Dispute Resolution Coordinator enters an order allocating such fees to a particular party due to the party violating a Rule in this Subchapter, the fees may be taxed as other costs by the ~~Commission~~ Commission in an Order or Opinion and Award. After the case is concluded, the defendant shall be reimbursed for the plaintiff's share of such fees from ~~benefits~~ any compensation ~~that may be~~ determined to be due to the plaintiff, and the defendant may withhold funds from any award for this purpose.

History Note: Authority G.S. ~~97-80(a),(c);~~ 97-80(a); 97-80(c); 143-296; 143-300; Rule 7 of Rules Implementing Statewide Mediated Settlement Conference in Superior Court Civil Actions; Eff. January 16, 1996; Amended Eff. October 1, 1998; Recodified from 4 NCAC 10A .0616; Amended Eff. April 1, 2014; January 1, 2011; June 1, 2000.

Rule 04 NCAC 10G .0110 is amended as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10G .0110 WAIVER OF RULES

~~In the interest of justice, or to comply with the law from time to time as it may be amended or declared, the Commission may waive any requirement of these rules.~~

In the interests of justice or to promote judicial economy, the Commission may, except as otherwise provided by the [Rules] rules in this Subchapter, waive or vary the requirements or provisions of any of the rules in this Subchapter in a case pending before the Commission upon written application of a party or upon its own initiative only if the employee is not represented by counsel. Factors the Commission shall use in determining whether to grant the waiver are:

- (1) the necessity of a waiver;
- (2) the party's responsibility for the conditions creating the need for a waiver;
- (3) the party's prior requests for a waiver;
- (4) the precedential value of such a waiver;
- (5) notice to and opposition by the opposing parties; and
- (6) the harm to the party if the waiver is not granted.

*History Note: Authority G.S. 97-80(a),(e); 97-80(a); 97-80(c); 143-296; 143-300;
Eff. January 16, 1996;
Amended Eff. October 1, 1998;
Recodified from 4 NCAC 10A .0616;
Amended Eff. April 1, 2014; June 1, 2000.*

Rule 04 NCAC 10H .0206 is adopted as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10H .0206 WAIVER OF RULES

In the interests of justice or to promote judicial economy the Commission may, except as otherwise provided by the [Rules] rules in this Subchapter, waive or vary the requirements or provisions of any of the rules in this Subchapter in a case pending before the Commission upon written application of a party or upon its own initiative only if the employee is not represented by counsel. Factors the Commission shall use in determining whether to grant the waiver are:

- (1) the necessity of a waiver;
- (2) the party's responsibility for the conditions creating the need for a waiver;
- (3) the party's prior requests for a waiver;
- (4) the precedential value of such a waiver;
- (5) notice to and opposition by the opposing parties; and
- (6) the harm to the party if the waiver is not granted.

*History Note: Authority G.S. 97-80(a); 143-166.4;
Eff. April 1, 2014.*

1 Rule 04 NCAC 10I .0204 is adopted as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014, with changes as follows:

3
4 **04 NCAC 10I .0204 WAIVER OF RULES**

5 In the interests of justice or to promote judicial economy the Commission may, except as otherwise provided by the
6 [Rules] rules in this Subchapter, waive or vary the requirements or provisions of any of the rules in this Subchapter
7 in a case pending before the Commission upon written application of a party or upon its own initiative only if the
8 employee is not represented by counsel. Factors the Commission shall use in determining whether to grant the
9 waiver are:

- 10 (1) the necessity of a waiver;
11 (2) the party's responsibility for the conditions creating the need for a waiver;
12 (3) the party's prior requests for a waiver;
13 (4) the precedential value of such a waiver;
14 (5) notice to and opposition by the opposing parties; and
15 (6) the harm to the party if the waiver is not granted.

16
17 *History Note: Authority G.S. 97-80(a); 130A-425(d);*
18 *Eff. April 1, 2014.*

1 Rule 04 NCAC 10J .0101 is amended as published on the OAH website for the public comment period beginning
2 January 31 through February 26, 2014, with changes as follows:

3
4 **SUBCHAPTER 10J – FEES FOR MEDICAL COMPENSATION**

5
6 **SECTION 0100 – FEES FOR MEDICAL COMPENSATION**

7
8 **04 NCAC 10J .0101 FEES FOR MEDICAL COMPENSATION**

9 (a) The Commission ~~has~~ adopted and published a Medical Fee Schedule, pursuant to the provisions of G.S. 97-
10 26(a), setting maximum amounts, except for hospital fees pursuant to G.S. 97-26(b), that may be paid for medical,
11 surgical, nursing, dental, and rehabilitative services, and medicines, sick travel, and other treatment, including
12 medical and surgical supplies, original artificial members as may reasonably be necessary at the end of the healing
13 period and the replacement of such artificial members when reasonably necessitated by ordinary use or medical
14 circumstances. The amounts prescribed in the applicable published Fee Schedule shall govern and apply according
15 to G.S. 97-26(c).

16 (b) The Commission's Medical Fee Schedule contains maximum allowed amounts for medical services provided
17 pursuant to Chapter 97 of the General Statutes. The Medical Fee Schedule utilizes 1995 through the present,
18 Current Procedural Terminology (CPT) codes adopted by the American Medical Association, Healthcare Common
19 Procedure Coding Systems (HCPCS) codes, and jurisdiction-specific codes. A listing of the maximum allowable
20 amount for each code is available on the Commission's website at <http://www.ic.nc.gov/ncic/pages/feesched.asp> and
21 in hardcopy at ~~430 N. Salisbury Street, Raleigh, North Carolina~~ the offices of the Commission as set forth in 04
22 NCAC 10A .0101.

23 (c) The following methodology provides the basis for the Commission's Medical Fee Schedule:

- 24 (1) CPT codes for General Medicine are based on 1995 North Carolina Medicare values multiplied by
25 1.58, except for CPT codes 99201-99205 and 99211-99215, which are based on 1995 Medicare
26 values multiplied by 2.05.
- 27 (2) CPT codes for Physical Medicine are based on 1995 North Carolina Medicare values multiplied
28 by 1.36.
- 29 (3) CPT codes for Radiology are based on 1995 North Carolina Medicare values multiplied by 1.96.
- 30 (4) CPT codes for Surgery are based on 1995 North Carolina Medicare values multiplied by 2.06.

31 (d) The Commission's Hospital Fee Schedule, adopted pursuant to G.S. 97-26(b), provides for payment as follows:

- 32 (1) Inpatient hospital fees: Inpatient services are reimbursed based on a Diagnostic Related
33 Groupings (DRG) methodology. The Hospital Fee Schedule utilizes the 2001 Diagnostic Related
34 Groupings adopted by the State Health Plan. Each DRG amount is based on the amount that the
35 State Health Plan had in effect for the same DRG on June 30, 2001.
36 DRG amounts are further subject to the following payment band that establishes maximum and
37 minimum payment amounts:

- 1 (A) The maximum payment is 100 percent of the hospital's itemized charges.
- 2 (B) For hospitals other than critical access hospitals, the minimum payment is 75 percent of
- 3 the hospital's itemized charges. Effective February 1, 2013, the minimum payment rate is
- 4 the amount provided for under Subparagraph (5) below, subject to adjustment on April 1,
- 5 2013 as provided therein.
- 6 (C) For critical access hospitals, the minimum payment is 77.07 percent of the hospital's
- 7 itemized charges. Effective February 1, 2013, the minimum payment rate is the amount
- 8 provided for under Subparagraph (5) below, subject to adjustment on April 1, 2013 as
- 9 provided therein.
- 10 (2) Outpatient hospital fees: Outpatient services are reimbursed based on the hospital's actual charges
- 11 as billed on the UB-04 claim form, subject to the following percentage discounts:
- 12 (A) For hospitals other than critical access hospitals, the payment shall be 79 percent of the
- 13 hospital's billed charges. Effective February 1, 2013, the payment is the amount provided
- 14 for under Subparagraph (5) below, subject to adjustment on April 1, 2013 as provided
- 15 therein.
- 16 (B) For critical access hospitals, the payment shall be 87 percent of the hospital's billed
- 17 charges. For purposes of the hospital fee schedule, critical access hospitals are those
- 18 hospitals designated as such pursuant to federal law (42 CFR 485.601 et seq.). Effective
- 19 February 1, 2013, the critical access hospital's payment is the amount provided for under
- 20 Subparagraph (5) below, subject to adjustment on April 1, 2013 as provided therein.
- 21 (3) Ambulatory surgery fees: Ambulatory surgery center services are reimbursed at 79 percent of
- 22 billed charges. Effective February 1, 2013, the ambulatory surgery center services are reimbursed
- 23 at the amount provided for under Subparagraph (5) below, subject to adjustment on April 1, 2013
- 24 as provided therein.
- 25 (4) Other rates: If a provider has agreed under contract with the insurer or managed care organization
- 26 to accept a different amount or reimbursement methodology, that amount or methodology
- 27 establishes the applicable fee.
- 28 (5) Payment levels frozen and reduced pending study of new fee schedule: Effective February 1,
- 29 2013, inpatient and outpatient payments for each hospital and the payments for each ambulatory
- 30 surgery center shall be set at the payment rates in effect for those facilities as of June 30, 2012.
- 31 Effective April 1, 2013, those rates shall then be reduced as follows:
- 32 (A) Hospital outpatient and ambulatory surgery: The rate in effect as of that date shall be
- 33 reduced by 15 percent.
- 34 (B) Hospital inpatient: The minimum payment rate in effect as of that date shall be reduced
- 35 by 10 percent.
- 36 (6) Effective April 1, 2013, implants shall be paid at no greater than invoice cost plus 28 percent.

1 (e) ~~Employers, insurers,~~ **Insurers** and managed care organizations, or administrators on their behalf, may review
2 and reimburse charges for **all** medical compensation, including~~;~~ **but not limited to,** medical, hospital, and dental
3 fees, without submitting the charges to the Commission for review and approval.

4 (e)(f) A provider of medical compensation shall submit its statement for services within 75 days of the rendition of
5 the service, or if treatment is longer, within 30 days after the end of the month during which multiple treatments
6 were provided. However, in cases where liability is initially denied but subsequently admitted or determined by the
7 Commission, the time for submission of medical bills shall run from the time the health care provider received
8 notice of the admission or determination of liability. Within 30 days of receipt of the statement, the employer,
9 carrier, or managed care organization, or administrator on its behalf, shall pay or submit the statement to the
10 Commission for approval or send the provider written objections to the statement. If an employer, carrier,
11 administrator, or managed care organization disputes a portion of the provider's bill, the employer, carrier,
12 administrator, or managed care organization, shall pay the uncontested portion of the bill and shall resolve disputes
13 regarding the balance of the charges through its contractual arrangement or through the Commission.

14 (f)(g) Pursuant to G.S. 97-18(i), when the 10 percent addition to the bill is uncontested, payment shall be made to
15 the provider without notifying or seeking approval from the Commission. When the 10 percent addition to the bill is
16 contested, any party may request a hearing by the Commission pursuant to G.S. 97-83 and G.S. 97-84.

17 (g)(h) When the responsible party seeks an audit of hospital charges, and has paid the hospital charges in full, the
18 payee hospital, upon request, shall provide reasonable access and copies of appropriate records, without charge or
19 fee, to the person(s) chosen by the payor to review and audit the records.

20 (h)(i) The responsible employer, carrier, managed care organization, or administrator shall pay the statements of
21 medical compensation providers to whom the employee has been referred by the treating physician authorized by
22 the insurance carrier for the compensable injury or body part, unless the physician has been requested to obtain
23 authorization for referrals or tests; provided that compliance with the request shall not unreasonably delay the
24 treatment or service to be rendered to the employee.

25 (i)(j) Employees are entitled to reimbursement for sick travel when the travel is medically necessary and the
26 mileage is 20 or more miles, round trip, at the business standard mileage rate set by the Internal Revenue Service per
27 mile of travel and the actual cost of tolls paid. Employees are entitled to lodging and meal expenses, at a rate to be
28 established for state employees by the North Carolina Director of Budget, when it is medically necessary that the
29 employee stay overnight at a location away from the employee's usual place of residence. Employees are entitled to
30 reimbursement for the costs of parking or a vehicle for hire, when the costs are medically necessary, at the actual
31 costs of the expenses.

32 (j)(k) Any employer, carrier or administrator denying a claim in which medical care has previously been authorized
33 is responsible for all costs incurred prior to the date notice of denial is provided to each health care provider to
34 whom authorization has been previously given.

36 *History Note:* Authority G.S. 97-18(i); 97-25; 97-25.6; 97-26; 97-80(a); 138-6;

37 *Eff. January 1, 1990;*

Rule 04 NCAC 10L .0101 is adopted as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

SUBCHAPTER 10L – INDUSTRIAL COMMISSION FORMS
SECTION .0100 – WORKERS’ COMPENSATION FORMS

04 NCAC 10L .0101 FORM 21 – AGREEMENT FOR COMPENSATION FOR DISABILITY

(a) The parties to a workers’ compensation claim shall use the following Form 21, *Agreement for Compensation for Disability*, for agreements regarding disability and payment of compensation therefor pursuant to G.S. 97-29 and 97-30. Additional issues agreed upon by the parties such as payment of compensation for permanent partial disability may also be included on the form. This form is necessary to comply with 04 NCAC 10A .0501, where applicable. The Form 21, *Agreement for Compensation for Disability*, shall read as follows:

North Carolina Industrial Commission
Agreement for Compensation for Disability
(G.S. 97-82)

IC File # _____
Emp. Code # _____
Carrier Code # _____
Carrier File # _____
Employer FEIN _____

The Use Of This Form Is Required Under The Provisions of The Workers' Compensation Act

Employee’s Name _____

Address _____

City _____ State _____ Zip _____

Home Telephone _____ Work Telephone _____
Social Security Number: _____ Sex: ☐ M ☐ F Date of Birth: _____

1 Employer's Name Telephone Number

2 _____
3 Employer's Address City State Zip

4 _____
5 Insurance Carrier

6 _____
7 Carrier's Address City State Zip

8 _____
9 Carrier's Telephone Number Carrier's Fax Number

10 _____
11 We, The Undersigned, Do Hereby Agree And Stipulate As Follows:

12 1. All parties hereto are subject to and bound by the provisions of the Workers' Compensation Act and
13 _____ is the carrier/administrator for the employer.

14 2. The employee sustained an injury by accident or the employee contracted an occupational disease arising
15 out of and in the course of employment on or by _____

16 3. The injury by accident or occupational disease resulted in the following injuries:
17 _____

18 4. The employee ☐ was/ ☐ was not paid for the entire day when the injury occurred.

19 5. The average weekly wage of the employee at the time of the injury, including overtime and all allowances,
20 was \$ _____, subject to verification unless otherwise agreed upon in [line] Item 9 below.

21 6. Disability resulting from the injury or occupational disease began on _____

22 7. The employer and carrier/administrator hereby undertake to pay compensation to the employee at the rate
23 of \$ _____ per week beginning _____, and continuing for _____ weeks.

24 8. The employee ☐ has / ☐ has not returned to work for _____
25 on _____, at an average weekly wage of \$ _____.

26 9. State any further matters agreed upon, including disfigurement, permanent partial, or temporary partial
27 disability: _____

28 10. If applicable, the Second Injury Fund Assessment is \$ _____. Check ☐ is ☐ is not attached.

29 11. The date of this agreement is _____. Date of first payment: _____ Amount: _____

30 12. IMPORTANT NOTICE TO EMPLOYEE: The Industrial Commission's fee for processing this agreement
31 is \$300.00 to be paid in equal shares by the employee and the employer. You are not required to pay your portion of
32 the fee in advance, and if your award is \$3,000.00 or less, you are not responsible for any portion of the fee. If your
33 award is more than \$3,000.00, the employer shall deduct \$150.00 from your award, unless you and your employer
34 agree otherwise.

35 Check one of the boxes below if the award is more than \$3,000.00:

36 ☐ The employer will deduct \$150.00 from the amount to be paid pursuant to this agreement.

37 ☐ The employee and employer have agreed that the employer will pay the entire fee.

Name Of Employer Signature Title

Name Of Carrier / Administrator Signature Title

By signing I enter into this agreement and certify that I have read the "Important Notices to Employee" printed on the Pages 1 and 2 of this form.

Signature of Employee Address

Signature of Employee's Attorney Address

North Carolina Industrial Commission

The Foregoing Agreement Is Hereby Approved:

Claims Examiner Date

Attorney's Fee Approved

☐ Check Box If No Attorney Retained.

☐ Check Box If Employee Is In Managed Care.

IMPORTANT NOTICE TO EMPLOYEE CLAIMING ADDITIONAL WEEKLY CHECKS OR LUMP SUM PAYMENTS

Once your compensation checks have been stopped, if you claim further compensation, you must notify the Industrial Commission in writing within two years from the date of receipt of your last compensation check or your rights to these benefits may be lost.

IMPORTANT NOTICE TO EMPLOYEE INJURED BEFORE JULY 5, 1994 CLAIMING ADDITIONAL MEDICAL BENEFITS

If your injury occurred before July 5, 1994, you are entitled to medical compensation as long as it is reasonably necessary, related to your workers' compensation case, and authorized by the carrier or the Industrial Commission.

IMPORTANT NOTICE TO EMPLOYEE INJURED ON OR AFTER JULY 5, 1994 CLAIMING ADDITIONAL MEDICAL BENEFITS

1
2 If your injury occurred on or after July 5, 1994, your right to future medical compensation will depend on several
3 factors. Your right to payment of future medical compensation will terminate two years after your employer or
4 carrier/administrator last pays any medical compensation or other compensation, whichever occurs last. If you think
5 you will need future medical compensation, you must apply to the Industrial Commission in writing within two
6 years, or your right to these benefits may be lost. To apply you may also use Industrial Commission Form ~~18M.~~
7 18M, available at <http://www.ic.nc.gov/forms.html>.

8 9 IMPORTANT NOTICE TO EMPLOYER

10
11 The employee must be provided a copy when the agreement is signed by the employee. Failure to file Form 28B,
12 *Report Of Compensation And Medical Compensation Paid*, within 16 days after last payment pursuant to this
13 agreement may subject the employer or carrier/administrator to a penalty. Pursuant to ~~Rule 501,~~ Rule 04 NCAC
14 10A .0501, within 20 days after receipt of the agreement executed by the employee, the employer or
15 carrier/administrator must submit the agreement to the Industrial Commission, or show ~~good~~ cause for not
16 submitting the agreement.

17 18 NEED ASSISTANCE?

19
20 If you have questions or need help and you do not have an attorney, you may contact the Industrial Commission at
21 (800) 688-8349.

22
23 Form 21
24 4/2014

25
26 Self-Insured Employer or Carrier, Mail to:
27 NCIC - Claims Section
28 4335 Mail Service Center
29 Raleigh, NC 27699-4335
30 Telephone: (919) 807-2502
31 Helpline: (800) 688-8349
32 Website: <http://www.ic.nc.gov/>

33
34 (b) The copy of the form described in Paragraph (a) of this Rule can be accessed at
35 <http://www.ic.nc.gov/forms/form21.pdf>. The form may be reproduced only in the format available at
36 <http://www.ic.nc.gov/forms/form21.pdf> and may not be altered or amended in any way.

- 1 *History Note:* Authority G.S. 97-73; 97-80(a); 97-81(a); 97-82;
- 2 *Eff. April 1, 2014.*

Rule 04 NCAC 10L .0102 is adopted as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

**04 NCAC 10L .0102 FORM 26 – SUPPLEMENTAL AGREEMENT AS TO PAYMENT OF
COMPENSATION**

(a) If the parties to a workers' compensation claim have previously entered into an approved agreement on a Form 21, Agreement for Compensation for Disability, or a Form 26A, Employer's Admission of Employee's Right to Permanent Partial Disability, they shall use the following Form 26, Supplemental Agreement as to Payment of Compensation, for agreements regarding subsequent, additional disability and payment of compensation therefor pursuant to G.S. 97-29 and 97-30. Additional issues agreed upon by the parties such as payment of compensation for permanent partial disability may also be included on the form. This form is necessary to comply with 04 NCAC 10A .0501, where applicable. The Form 26, Supplemental Agreement as to Payment of Compensation, shall read as follows:

North Carolina Industrial Commission
Supplemental Agreement as to Payment
of Compensation (G.S. §97-82)

IC File #

Emp. Code #

Carrier Code #

Carrier File #

Employer FEIN

The Use Of This Form Is Required Under The Provisions of The Workers' Compensation Act

Employee's Name

Address

City State Zip

Home Telephone Work Telephone

Social Security Number: Sex: ☐ M ☐ F Date of Birth:

Employer's Name Telephone Number

Employer's Address City State Zip

Insurance Carrier

Carrier's Address City State Zip

Carrier's Telephone Number Carrier's Fax Number

We, The Undersigned, Do Hereby Agree and Stipulate As Follows:

1. Date of injury: _____

2. The employee ☐ returned to work / ☐ was rated on _____ (date), at a weekly wage of \$ _____.

3. The employee became totally disabled on _____.

4. Employee's average weekly wage ☐ was reduced / ☐ was increased on _____, from \$ _____
per week to \$ _____ per week.

5. The employer and carrier/administrator hereby undertake to pay compensation to the employee at the rate
of \$ _____ per week

Beginning _____, and continuing for _____ weeks. The type of disability compensation is

6. State any further matters agreed upon, including disfigurement or temporary partial disability:

7. IMPORTANT NOTICE TO EMPLOYEE: The Industrial Commission's fee for processing this agreement
is \$300.00 to be paid in equal shares by the employee and the employer. You are not required to pay your portion of
the fee in advance, and if your award is \$3,000.00 or less, you are not responsible for any portion of the fee. If your
award is more than \$3,000.00, the employer shall deduct \$150.00 from your award, unless you and your employer
agree otherwise.

Check one of the boxes below if the award is more than \$3,000.00:

☐ The employer will deduct \$150.00 from the amount to be paid pursuant to this agreement.

☐ The employee and employer have agreed that the employer will pay the entire fee.

8. The date of this agreement is _____.

Name Of Employer Signature Title

Name Of Carrier/Administrator Signature Title

By signing I enter into this agreement and certify that I have read the "Important Notices to Employee" printed on Pages 1 and 2 of this form.

Signature of Employee Address

Signature of Employee's Attorney Address

☐ Check box if no attorney retained.

North Carolina Industrial Commission

The Foregoing Agreement Is Hereby Approved:

Claims Examiner Date

Attorney's fee approved

IMPORTANT NOTICE TO EMPLOYEE CLAIMING ADDITIONAL WEEKLY CHECKS OR LUMP SUM PAYMENTS

Once your compensation checks have been stopped, if you claim further compensation, you must notify the Industrial Commission in writing within two years from the date of receipt of your last compensation check or your rights to these benefits may be lost.

IMPORTANT NOTICE TO EMPLOYEE INJURED BEFORE 5 JULY 1994 CLAIMING ADDITIONAL MEDICAL BENEFITS

If your injury occurred before 5 July 1994, you are entitled to medical compensation as long as it is reasonably necessary, related to your workers' compensation case, and authorized by the carrier or the Industrial Commission.

IMPORTANT NOTICE TO EMPLOYEE INJURED ON OR AFTER 5 JULY 1994 CLAIMING ADDITIONAL MEDICAL BENEFITS

If your injury occurred on or after 5 July 1994, your right to future medical compensation will depend on several factors. Your right to payment of future medical compensation will terminate two years after your employer or carrier/administrator last pays any medical compensation or other compensation, whichever occurs last. If you think you will need future medical compensation, you must apply to the Industrial Commission in writing within two years, or your right to these benefits may be lost. To apply you may also use Industrial Commission Form 18M, available at <http://www.ic.nc.gov/forms.html>.

IMPORTANT NOTICE TO EMPLOYER

1
2 This form is to be used only to supplement Form 21, Agreement for Compensation for Disability (G.S. 97-82), or an
3 award in cases in which subsequent conditions require a modification of a former agreement or award. The
4 employee must be provided a copy of the form when the agreement is signed by the employee. Failure to file Form
5 28B, Report of Compensation and Medical Compensation Paid, within 16 days after last payment pursuant to this
6 agreement may subject the employer or carrier/administrator to a penalty. Pursuant to [~~Rule 501,~~] Rule 04 NCAC
7 10A .0501, within 20 days after receipt of the agreement executed by the employee, the employer or
8 carrier/administrator must submit the agreement to the Industrial Commission, or show [good] cause for not
9 submitting the agreement.

10
11 NEED ASSISTANCE?

12
13 If you have questions or need help and you do not have an attorney, you may contact the Industrial Commission at
14 (800) 688-8349.

15
16 Form 26
17 4/2014

18
19 Self-Insured Employer or Carrier Mail to:
20 NCIC - Claims Administration
21 4335 Mail Service Center
22 Raleigh, North Carolina 27699-4335
23 Main Telephone: (919) 807-2500
24 Helpline: (800) 688-8349
25 Website: <http://www.ic.nc.gov/>

26
27 (b) The copy of the form described in Paragraph (a) of this Rule can be accessed at
28 <http://www.ic.nc.gov/forms/form26.pdf>. The form may be reproduced only in the format available at
29 <http://www.ic.nc.gov/forms/form26.pdf> and may not be altered or amended in any way.

30
31 *History Note: Authority G.S. 97-73; 97-80(a); 97-81(a); 97-82;*
32 *Eff. April 1, 2014.*

Rule 04 NCAC 10L .0103 is adopted as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10L .0103 FORM 26A – Employer’s Admission of Employee’s Right to Permanent Partial Disability

(a) The parties to a workers’ compensation claim shall use the following Form 26A, *Employer’s Admission of Employee’s Right to Permanent Partial Disability*, for agreements regarding the employee’s entitlement to and the employer’s payment of compensation for permanent partial disability pursuant to G.S. 97-31. Additional issues agreed upon by the parties, including, but not limited to, election of payment of temporary partial disability pursuant to G.S. 97-30 may also be included on the form. This form is necessary to comply with 04 NCAC 10A .0501, where applicable. The Form 26A, *Employer’s Admission of Employee’s Right to Permanent Partial Disability*, shall read as follows:

North Carolina Industrial Commission

Employer’s Admission of Employee’s Right to Permanent Partial Disability
(G.S. §97-31)

IC File # _____

Emp. Code # _____

Carrier Code # _____

Carrier File # _____

Employer FEIN _____

The Use Of This Form Is Required Under The Provisions of The Workers' Compensation Act

Employee’s Name

Address

City State Zip

Home Telephone Work Telephone

Social Security Number: Sex: ☐ M ☐ F Date of Birth:

11. If applicable, the Second Injury Fund Assessment is \$. A check ☐ is ☐ is not included.

12. IMPORTANT NOTICE TO EMPLOYEE: The Industrial Commission's fee for processing this agreement is \$300.00 to be paid in equal shares by the employee and the employer. You are not required to pay your portion of the fee in advance, and if your award is \$3,000.00 or less, you are not responsible for any portion of the fee. If your award is more than \$3,000.00, the employer shall deduct \$150.00 from your award, unless you and your employer agree otherwise.

Check one of the boxes below if the award is more than \$3,000.00:

☐ The employer will deduct \$150.00 from the amount to be paid pursuant to this agreement.

☐ The employee and employer have agreed that the employer will pay the entire fee.

The undersigned hereby certify that the material medical and vocational reports related to the injury have been provided to the employee or his attorney and have been filed with the Industrial Commission for consideration pursuant to G.S. 97-82(a) and Industrial Commission Rule 501(3).

Name Of Employer	Signature	Title	Date
------------------	-----------	-------	------

Name Of Carrier/Administrator	Signature	Direct Phone Number	Title	Date
-------------------------------	-----------	---------------------	-------	------

By signing I enter into this agreement and certify that I have read the "Important Notices to Employee" printed on pages 2 and 3 of this form.

Signature of Employee	Address	Date
-----------------------	---------	------

Signature of Employee's Attorney	Address	Date
----------------------------------	---------	------

☐ Check box if no attorney retained.

North Carolina Industrial Commission

The Foregoing Agreement Is Hereby Approved:

Claims Examiner	Date
-----------------	------

Attorney's fee approved

1 IMPORTANT NOTICE TO EMPLOYEE CLAIMING ADDITIONAL WEEKLY CHECKS OR LUMP SUM
2 PAYMENTS

3 Once your compensation checks have been stopped, if you claim further compensation, you must notify the
4 Industrial Commission in writing within two years from the date of receipt of your last compensation check or your
5 rights to these benefits may be lost.

7 IMPORTANT NOTICE TO EMPLOYEE INJURED BEFORE JULY 5, 1994 CLAIMING ADDITIONAL
8 MEDICAL BENEFITS

9 If your injury occurred before July 5, 1994, you are entitled to medical compensation as long as it is reasonably
10 necessary, related to your workers' compensation case, and authorized by the carrier or the Industrial Commission.

12 IMPORTANT NOTICE TO EMPLOYEE INJURED ON OR AFTER JULY 5, 1994 CLAIMING ADDITIONAL
13 MEDICAL BENEFITS

14 If your injury occurred on or after July 5, 1994, your right to future medical compensation will depend on several
15 factors. Your right to payment of future medical compensation will terminate two years after your employer or
16 carrier/administrator last pays any medical compensation or other compensation, whichever occurs last. If you think
17 you will need future medical compensation, you must apply to the Industrial Commission in writing within two
18 years, or your right to these benefits may be lost. To apply you may also use Industrial Commission [18M.] 18M,
19 available at <http://www.ic.nc.gov/forms.html>.

21 IMPORTANT NOTICE TO EMPLOYER

22 The employee must be provided a copy when the agreement is signed by the employee. Failure to file Form 28B,
23 *Report Of Compensation And Medical Compensation Paid*, within 16 days after last payment pursuant to this
24 agreement may subject the employer or carrier/administrator to a penalty. Pursuant to [Rule 504.] Rule 04 NCAC
25 10A .0501, within 20 days after receipt of the agreement executed by the employee, the employer or
26 carrier/administrator must submit the agreement to the Industrial Commission, or show [good] cause for not
27 submitting the agreement.

29 NEED ASSISTANCE?

30 If you have questions or need help and you do not have an attorney, you may contact the Industrial Commission at
31 (800) 688-8349.

33 Form 26A
34 1/2014

36 Self-Insured Employer or Carrier Mail to:
37 NCIC - Claims Administration

4335 Mail Service Center
Raleigh, North Carolina 27699-4335
Main Telephone: (919) 807-2500
Helpline: (800) 688-8349
Website: <http://www.ic.nc.gov/>

(b) A copy of the form described in Paragraph (a) of this Rule can be accessed at
<http://www.ic.nc.gov/forms/form26a.pdf>. The form may be reproduced only in the format available at
<http://www.ic.nc.gov/forms/form26a.pdf> and may not be altered or amended in any way.

*History Note: Authority G.S. 97-30; 97-31; **97-73**; 97-80(a); **97-81(a)**; 97-82;*
Eff. April 1, 2014.

Rule 04 NCAC 10L .0104 is adopted as published on the OAH website for the public comment period beginning January 31 through February 26, 2014, with changes as follows:

04 NCAC 10L .0104 FORM 36 – SUBPOENA

(a) The parties to a claim shall use the following Form 36, *Subpoena*, to subpoena a person(s) to appear and testify and/or produce documents for inspection before the Commission. The Form 36, *Subpoena*, shall read as follows:

STATE OF NORTH CAROLINA File No. _____
_____ County North Carolina Industrial Commission

VERSUS

SUBPOENA

G.S. 1A-1, Rule 45; G.S. 8-59; G.S. 97-80(e)

Party Requesting Subpoena

NCIC/State/Plaintiff Defendant

NOTE TO PARTIES NOT REPRESENTED BY COUNSEL: Subpoenas may be produced at your request, but must be signed and issued by a Commissioner, Deputy Commissioner, or the Executive Secretary.

TO: Name and Address Of Person Subpoenaed

Alternate Address

Telephone No.

Alternate Telephone No.

YOU ARE COMMANDED TO: (check all that apply):

____ appear and testify, in the above entitled action, before the Industrial Commission at the place, date and time indicated below.

____ appear and testify, in the above entitled action, at a deposition at the place, date and time indicated below.

____ produce and permit inspection and copying of the following items, at the place, date and time indicated below. (A party shall not issue a subpoena duces tecum less than 30 days prior to the hearing date except upon prior approval of the Commission. G.S. 97-80(e).)

____ See attached list. (List here if space sufficient)

Location Of Hearing/Place Of Deposition/Place To Produce

Date To Appear/Produce

Time To Appear/Produce : AM PM

Name And Address Of Applicant Or Applicant's Attorney

Date

Signature of Official or Attorney _____
Deputy Commissioner Commissioner Executive Secretary Attorney
Telephone No. Of Applicant Or Applicant's Attorney _____

RETURN OF SERVICE

I certify this subpoena was received and served on the person subpoenaed as follows:

By _____
personal delivery.
registered or certified mail, receipt requested and attached.
service by Sheriff.

I was unable to serve this subpoena. Reason unable to serve: _____

Service Fee \$ _____

Paid _____

Due _____

Date Served _____

Name Of Authorized Server (Type Or Print) _____

Signature of Authorized Server _____

Title _____

NOTE TO PERSON REQUESTING SUBPOENA: A copy of this subpoena must be delivered, mailed or faxed to the attorney for each party in this case. If a party is not represented by an attorney, the copy must be mailed or delivered to the party. [This does not apply in criminal cases.]

NOTE: Rule 45, North Carolina Rules of Civil Procedure, Subsections (c) and (d). (With respect to the provisions of Rule 45 cited below as they apply to this subpoena, the North Carolina Industrial Commission is the "court" and the "court in the county." All motions regarding this subpoena shall be filed with the North Carolina Industrial Commission pursuant to Rule 04 NCAC 10A .0609.)

(c) Protection of Persons Subject to Subpoena

(1) Avoid undue burden or expense. - A party or an attorney responsible for the issuance and service of a subpoena shall take reasonable steps to avoid imposing an undue burden or expense on a person subject to the subpoena. The court shall enforce this subdivision and impose upon the party or attorney in violation of this requirement an appropriate sanction that may include compensating the person unduly burdened for lost earnings and for reasonable attorney's fees.

(2) For production of public records or hospital medical records. - Where the subpoena commands any custodian of public records or any custodian of hospital medical records, as defined in G.S. 8-44.1, to appear for the sole purpose of producing certain records in the custodian's custody, the custodian subpoenaed may, in lieu of personal appearance, tender to the court in which the action is pending by registered or certified mail or by personal delivery, on or before the time specified in the subpoena, certified copies of the records requested together with a copy of the subpoena and an affidavit by the custodian testifying that the copies are true and correct copies and that the records were made and kept in the regular course of business, or if no such records are in the custodian's

1 custody, an affidavit to that effect. When the copies of records are personally delivered under this subdivision, a
2 receipt shall be obtained from the person receiving the records. Any original or certified copy of records or an
3 affidavit delivered according to the provisions of this subdivision, unless otherwise objectionable, shall be
4 admissible in any action or proceeding without further certification or authentication. Copies of hospital medical
5 records tendered under this subdivision shall not be open to inspection or copied by any person, except to the parties
6 to the case or proceedings and their attorneys in depositions, until ordered published by the judge at the time of the
7 hearing or trial. Nothing contained herein shall be construed to waive the physician-patient privilege or to require
8 any privileged communication under law to be disclosed.

9 (3) Written objection to subpoena. - Subject to subsection (d) of this rule, a person commanded to appear at
10 a deposition or to produce and permit the inspection and copying of records, books, papers, documents,
11 electronically stored information, or tangible things may, within 10 days after service of the subpoena or before the
12 time specified for compliance if the time is less than 10 days after service, serve upon the party or the attorney
13 designated in the subpoena written objection to the subpoena, setting forth the specific grounds for the objection.
14 The written objection shall comply with the requirements of [Rule 11.] Rule 11 [of the North Carolina Rules of Civil
15 Procedure]. Each of the following grounds may be sufficient for objecting to a subpoena:

- 16 a. The subpoena fails to allow reasonable time for compliance.
- 17 b. The subpoena requires disclosure of privileged or other protected matter and no exception or
18 waiver applies to the privilege or protection.
- 19 c. The subpoena subjects a person to an undue burden or expense.
- 20 d. The subpoena is otherwise unreasonable or oppressive.
- 21 e. The subpoena is procedurally defective.

22 (4) Order of court required to override objection. - If objection is made under subdivision (3) of this
23 subsection, the party serving the subpoena shall not be entitled to compel the subpoenaed person's appearance at a
24 deposition or to inspect and copy materials to which an objection has been made except pursuant to an order of the
25 court. If objection is made, the party serving the subpoena may, upon notice to the subpoenaed person, move at any
26 time for an order to compel the subpoenaed person's appearance at the deposition or the production of the materials
27 designated in the subpoena. The motion shall be filed in the court in the county in which the deposition or
28 production of materials is to occur.

29 (5) Motion to quash or modify subpoena. - A person commanded to appear at a trial, hearing, deposition, or
30 to produce and permit the inspection and copying of records, books, papers, documents, electronically
31 stored information, or other tangible things, within 10 days after service of the subpoena or before the time specified
32 for compliance if the time is less than 10 days after service, may file a motion to quash or modify the subpoena. The
33 court shall quash or modify the subpoena if the subpoenaed person demonstrates the existence of any of the reasons
34 set forth in subdivision (3) of this subsection. The motion shall be filed in the court in the county in which the trial,
35 hearing, deposition, or production of materials is to occur.

36 (6) Order to compel; expenses to comply with subpoena. - When a court enters an order compelling a
37 deposition or the production of records, books, papers, documents, electronically stored information, or other

1 tangible things, the order shall protect any person who is not a party or an agent of a party from significant expense
2 resulting from complying with the subpoena. The court may order that the person to whom the subpoena is
3 addressed will be reasonably compensated for the cost of producing the records, books, papers, documents,
4 electronically stored information, or tangible things specified in the subpoena.

5 (7) Trade secrets; confidential information. - When a subpoena requires disclosure of a trade secret or other
6 confidential research, development, or commercial information, a court may, to protect a person subject to or
7 affected by the subpoena, quash or modify the subpoena, or when the party on whose behalf the subpoena is issued
8 shows a substantial need for the testimony or material that cannot otherwise be met without undue hardship, the
9 court may order a person to make an appearance or produce the materials only on specified conditions stated in the
10 order.

11 (8) Order to quash; expenses. - When a court enters an order quashing or modifying the subpoena, the court
12 may order the party on whose behalf the subpoena is issued to pay all or part of the subpoenaed person's reasonable
13 expenses including attorney's fees.

14 (d) Duties in Responding to Subpoena

15 (1) Form of response. - A person responding to a subpoena to produce records, books, documents,
16 electronically stored information, or tangible things shall produce them as they are kept in the usual course of
17 business or shall organize and label them to correspond with the categories in the request.

18 (2) Form of producing electronically stored information not specified. - If a subpoena does not specify a
19 form for producing electronically stored information, the person responding must produce it in a form or forms in
20 which it ordinarily is maintained or in a reasonably useable form or forms.

21 (3) Electronically stored information in only one form. - The person responding need not produce the same
22 electronically stored information in more than one form.

23 (4) Inaccessible electronically stored information. - The person responding need not provide discovery of
24 electronically stored information from sources that the person identifies as not reasonably accessible because of
25 undue burden or cost. On motion to compel discovery or for a protective order, the person responding must show
26 that the information is not reasonably accessible because of undue burden or cost. If that showing is made, the court
27 may nonetheless order discovery from such sources if the requesting party shows good cause, after considering the
28 limitations of Rule 26(b)(1a) [Rule 26(b)(1a)] Rule 26(b)(1a) [of the North Carolina Rules of Civil Procedure]. The
29 court may specify conditions for discovery, including requiring the party that seeks discovery from a nonparty to
30 bear the costs of locating, preserving, collecting, and producing the electronically stored information involved.

31 (5) Specificity of objection. - When information subject to a subpoena is withheld on the objection that it is
32 subject to protection as trial preparation materials, or that it is otherwise privileged, the objection shall be made with
33 specificity and shall be supported by a description of the nature of the communications, records, books, papers,
34 documents, electronically stored information, or other tangible things not produced, sufficient for the requesting
35 party to contest the objection.

36 INFORMATION FOR WITNESS

NOTE: If you have any questions about being subpoenaed as a witness, you should contact the person named on Page One of this Subpoena in the box labeled "Name And Address Of Applicant Or Applicant's Attorney."

DUTIES OF A WITNESS

- Unless otherwise directed by the presiding Deputy Commissioner or Commissioner, you must answer all questions asked when you are on the stand giving testimony.
- In answering questions, speak clearly and loudly enough to be heard.
- Your answers to questions must be truthful.
- If you are commanded to produce any items, you must bring them with you to court or to the deposition.
- You must continue to attend court until released by the court. You must continue to attend a deposition until the deposition is completed.

BRIBING OR THREATENING A WITNESS

It is a violation of State law for anyone to attempt to bribe, threaten, harass, or intimidate a witness. If anyone attempts to do any of these things concerning your involvement as a witness in a case, you should promptly report that to the presiding Deputy Commissioner or Commissioner.

[NOTE REGARDING RULE 45 ABOVE]

[With respect to the provisions of Rule 45 cited above as they apply to this subpoena, the North Carolina Industrial Commission is the "court" and the "court in the county." All motions regarding this subpoena shall be filed with the North Carolina Industrial Commission pursuant to Rule 04 NCAC 10A .0609.]

Form 36 (Rev. 1/4/14)

(b) The copy of the form described in Paragraph (a) of this Rule can be accessed at <http://www.ic.nc.gov/forms/form36.pdf>. The form may be reproduced only in the format available at <http://www.ic.nc.gov/forms/form36.pdf> and may not be altered or amended in any way.

History Note: Authority G.S. 1A-1, Rule 45; 8-59; ~~97-80(a),(e)~~; 97-80(a); 97-80(e); 97-81(a); Session Law 2013-294, Section 8.(12).

Eff. April 1, 2014.