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EFFECTIVE FOR ALL DATES OF INJURY (DOIs)*

Note: Exceptions may apply.

Attorneys' Fees	If an employer files an DOR on a case where the IW is unrepresented, the employer is liable for attorneys' fees in connection with the application (LC § 4064(c)). If an employer files an application contesting an AME evaluation, then AA fees will assess (LC § 4066).
Chiropractors	For DOIs on/after 1/1/04 (and arguably prior dates): A chiropractor cannot be a treating physician after 24 visits per industrial injury (LC §§ 4600(c) & 4604.5(c)(1)).
Home Health Care (HHC) Limitations	Defendants are only liable for HHC that has been prescribed by a physician <i>and</i> surgeon; defendants are not liable for HHC that was provided more than 14 days prior to the date of the defendant's receipt of the prescription (LC § 4600(h)).
Independent Bill Review (IBR)	Lien claimants (whether potential or actual) must supply defendants with evidence in support of their liens (LC § 4903.05(a); <i>Kunz</i> (2002) 67 CCC 1588). If a bill is valid, jurisdiction over its value lies with bill review subject to a second bill review and then IBR (LC §§ 4603.6, 4603.2(e), & 4622).
Independent Medical Review (IMR)	Only applicants can appeal UR decisions to IMR; applicants have 30 days from service of the contested UR decision to submit an IMR request (LC § 4610.5(h)(1)).
Interpreters	A defendant has a duty to provide an interpreter when reasonable, but it is not liable for payment unless the interpreter is certified or provisionally certified (LC § 4600(g)).
Liens	Statute of limitations for filing is 18 months for all liens where the last date of service occurred on/after 7/1/13 (LC § 4903.5(a)). If the filing fee is not paid timely, the lien is invalid/dismissed with prejudice (LC § 4903.05). Lien proceedings are automatically stayed if criminal charges regarding fraud are filed against a medical provider (LC § 4615).
PD Advances (PDAs)	PDAs are not required if an employer has offered the IW a position that pays at least 85% of the wages that the IW earned at the time of injury or if the employee is employed elsewhere with earnings equal or greater than 100% of the wages that the IW earned at the time of injury (LC § 4650(b)(2)).
PQME Service Process	Medical and non-medical evidence must be served to the AA 20 days prior to sending the evidence to the PQME; the AA may object to non-medical evidence within 10 days after service to him/her (LC § 4062.3(b) & (e); 8 CCR § 35(c)).
Pre-Designation	An IW can pre-designate a treating physician <i>prior</i> to the DOI (LC § 4600(d)).
Treatment Limitations	Per industrial injury, an IW is limited to 24 chiropractic, occupational therapy, <i>and</i> physical therapy visits (each); a defendant's provision of more visits is not a waiver of such limitations (LC §§ 4604.5(c) & 4909).
Vocational Experts	No testimony is allowed, unless a judge finds good cause to allow it (LC § 5703(j)).
Utilization Review (UR)	Requests for Authorization (RFAs) do not have to be put through to UR on denied cases (LC § 4610(g)(7)). Decisions to fully or partially decertify treatment are valid for 12 months for the same treatment, unless IMR overturns the UR decision (LC § 4610(g)(6)).

* applicable to all DOIs unless specified otherwise

EFFECTIVE FOR DATES OF INJURY ON/AFTER 1/1/13

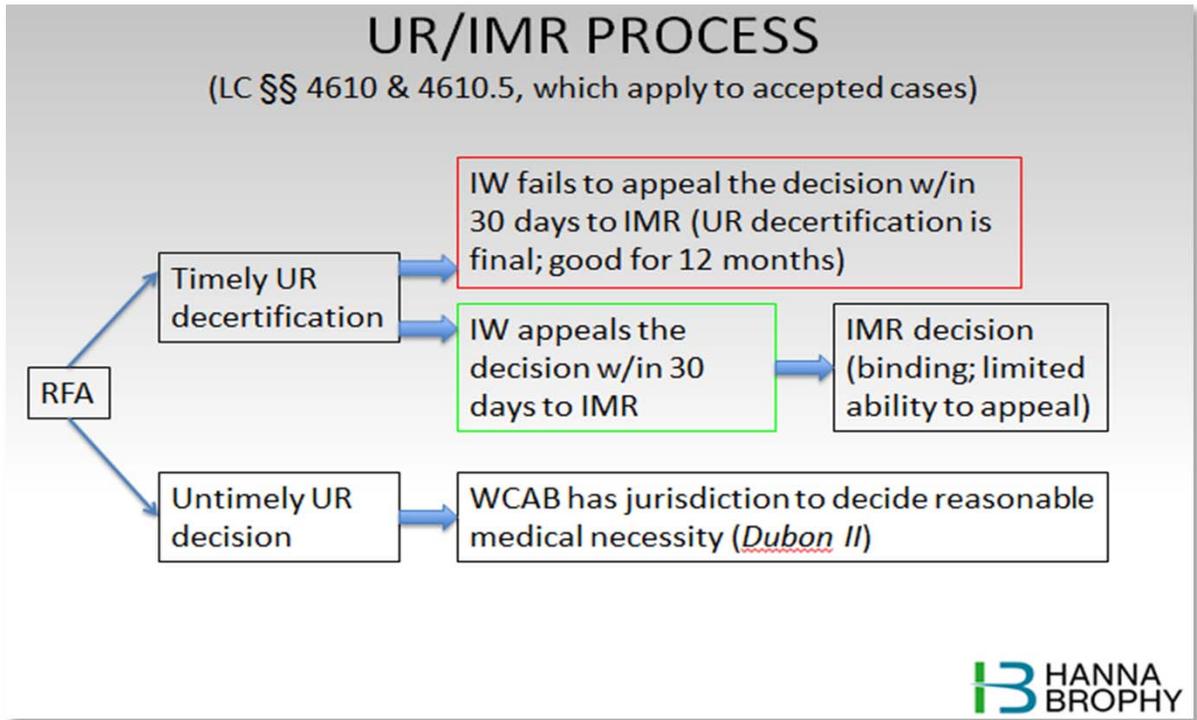
Note: Exceptions may apply.

Death Benefits	Reimbursable burial expense is increased to \$10,000 (LC § 4701(a)(3)).
Permanent Disability (PD)	PD is no longer increased or decreased by 15% pursuant to Labor Code section 4658(d). There are no PD "add-ons" to physical injuries for psyche, sleep, or sexual dysfunction complaints unless the applicant was the victim of either a violent act or a catastrophic injury (LC § 4660.1(c)). The Diminished Future Earnings Capacity (DFEC) factor in a ratings string is replaced by a multiplier of 1.4 (LC § 4660.1(b)).
Voucher	Total value of the Supplemental Job Displacement Benefit (SJDB) voucher is \$6,000 and applies when there is any PD plus failure to provide the injured worker with a timely return-to-work offer. Voucher issues may be "resolved" in denied cases; there must be at least one serious and good-faith issue, which, if resolved against the injured worker, would defeat all of the injured worker's rights to compensation benefits, including any SJDB voucher. (<i>Beltran v. Structural Steel Fabricators</i> (2016).)

CA Workers' Compensation Quick Reference Guide

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Claims examiners must provide Maximus with everything listed in Title 8 CCR section 9792.10.5.



Lien claimants (regarding treatment, med-legal services, or costs) must file a \$150 filing fee and a declaration (LC § 4903.05). Defendants must petition re: non-IBR med-legal disputes prior to IBR process (8 CCR § 10451.1). Lien proceedings are automatically stayed if criminal fraud charges are filed against a medical provider (LC § 4615).

