

Disputes

R94-1-14

No Response Self-Insurers

August 10, 1994

(R94-1-14 is also referenced under '**Contested Issues**', '**Self-Insurer Issues**', and '**Time Frames**')

WHEREAS, Section 4121.34(B)(3) of the Ohio Revised Code provides that District Hearing Officers have original jurisdiction on contested claims matters under Chapters 4121, 4123, 4127, and 4131 of the Ohio Revised Code, except for those matters over which Staff Hearing Officers have original jurisdiction; and

WHEREAS, Section 4123.511(B)(3) of the Ohio Revised Code provides that in contested claims, other than state fund claims, the administrator is to forward the claim file within seven (7) days of receipt of the claim to the Industrial Commission to refer the claim to an appropriate District Hearing Officer for hearing in accordance with Division (C) of Section 4123.511 of the Ohio Revised Code; and

WHEREAS, Section 4123.511(C) of the Ohio Revised Code provides that in case of other contested claims other than state fund claims, the Commission is to refer the claim to an appropriate District Hearing Officer; and

WHEREAS, Ohio administrative Code Rule 4123-3-13 provides that in the event there is a dispute or disagreement between the employee and the self-insured employer, concerning the compensability of any claim or the amount and type of compensation and benefits to be paid, either the employee or the employer may file an application with the Bureau of Workers' Compensation in duplicate describing the issue or issues in dispute; and

WHEREAS, Ohio administrative Code Rule 4123-3-13(C) provides that upon the filing of the application provided for in paragraph (A) of this rule, the Bureau shall immediately notify the opposite party of the filing of such application and shall furnish the party a copy of the application and a copy of the proof submitted in support of the application. Such notice shall advise the opposite party that unless such party files an answer setting forth the position of the party within such period of time as required by the rules of the Industrial Commission, a decision and order shall be issued upon the facts stated in the application; and

WHEREAS, pursuant to Ohio administrative Code Rule 4123-19-03(L)(5), the employer shall pay hospital, medical, nursing, and bills for medication duly incurred by the claimant within thirty (30) days of the receipt of such bill unless the employer contests any such matters, in which case the self-insured employer shall immediately notify the employee, the Bureau of Workers' Compensation, or the Industrial Commission; and

WHEREAS, pursuant to Ohio administrative Code Rule 4123-19-03(L)(10), the self-insured employer shall inform the claimant and the Bureau of Workers' Compensation in writing within thirty (30) days from filing of a claim as to which conditions the self-insured employer recognizes as related to the injury or occupational disease, and what conditions, if any, it refuses to recognize; and

WHEREAS, it has come to the attention of the Industrial Commission that some applications for payment of compensation and benefits filed by claimants failed to receive a timely response or no response has been received from a self-insured employer, and it has also come to the attention of the Industrial Commission that, in some instances, requests by self-insured employers filed with the Bureau of Workers' Compensation have not been forwarded to the Industrial Commission for hearing; and

WHEREAS, the Industrial Commission desires that there be a timely adjudication of any contested claims matter involving a dispute raised by application of a claimant or a request by a self-insured employer in a claim where the employer is a self-insuring employer; and

WHEREAS, Section 4121.03(E) of the Ohio Revised Code provides that the Commission is responsible for the establishment of the overall adjudicatory policy and management of the Industrial Commission.

THEREFORE, BE IT RESOLVED that in the event a self-insured employer either disputes an application for compensation and benefits made by a claimant or fails to respond to such a request within thirty (30) days of receipt of such request, the claimant may request that the Industrial Commission to schedule the contested claims matter for hearing by a District Hearing Officer pursuant to Sections 4123.34(B)(3) and 4123.511(C) Revised Code. Upon receipt of such request, the Commission shall immediately refer the claim file for hearing before a District Hearing Officer.

BE IT FURTHER RESOLVED that in the event the self-insured employer requests a hearing before a District Hearing Officer in a contested claims matter, the self-insured employer may, in addition to notifying the Bureau of Workers' Compensation of the existence of the disputed claims matter, also notify the Industrial Commission of the existence of a dispute. Upon receipt of such notification, the Industrial Commission shall refer the claim to the appropriate District Hearing Officer for hearing pursuant to Section 4123.511(C).

Other Self-Insurer Issues Resolutions

R95-1-03
Compliance with Prior Hearing Orders/Reconsiderations
March 21, 1995

Other Time Frames Resolutions

R94-1-16
Post. H.B 107 Procedure
October 3, 1994

R98-1-01
Waiver of Time Frames for State of Emergency of Disaster
January 7, 1998