

4121-3-22 Inspection of claim files**Effective: July 1, 2011**

(A) Authorizations for representation shall be in writing and signed by the authorizing party. When the authorization is on behalf of the injured worker, there shall be a separate authorization filed with the bureau for each claim to which the authorization is to extend, and the authorization shall be made a part of the claim file. When the authorization is on behalf of the employer, a blanket authorization may be filed with the claims section in Columbus or with the local district office. Whenever an employer has two representatives, one for actuarial purposes and another for hearings, there must be a specific designation which representative is to be given notice of hearing.

(B) Authorizations on behalf of the injured worker shall not be accepted for filing when they do not bear the claim number unless the following identifying information is furnished:

- (1) A specific year of injury;
- (2) Name and address of employer at time of injury;
- (3) Injured worker's date of birth;
- (4) City where accident occurred;
- (5) Nature of disability.

(C) An authorization may be cancelled by the filing of a notice to that effect with the bureau or by filing a new authorization by another representative. In either event, the party should notify the former representative of the party's action.

(D) The inspection of claim files shall be limited to:

- (1) The parties or their duly authorized representatives as outlined in paragraphs (A), (B) and (C) of this rule;
- (2) Any other person authorized, in writing, by either the injured worker or the employer; such authorization having been executed within one year prior to its use.
- (3) Members of the general assembly when in the course of their duties as such, acting under authorization from a claimant or employer.
- (4) The governor, a select committee of the general assembly, a standing committee of the general assembly, the auditor of state, the attorney general, or their designee, in the pursuance of any duty imposed by Chapters 4121. and 4123. of the Revised Code;
- (5) Duly authorized employees of governmental agencies whose official duties, by law, require the information contained in the claim files;
- (6) Such other persons as are specifically authorized by a member of the commission or the administrator pursuant to the provisions of section 4123.88 of the Revised Code.

(E) A person entitled to inspect a claim file shall complete and file a request for inspection at the time of each inspection. Such request shall bear the signature of the person inspecting the claim file and shall be incorporated in the claim file when the inspection is completed.

(F) When a party desires to inspect a claim at a point other than that where the claim is located, the claim file will be forwarded to that point. If such request is made by an authorized representative, the representative shall be required to pay the amount of the postal charges involved. Claims which are forwarded to another point for inspection shall be

held at that point for seven days following notification of the party or the party's representative that the claim is available for inspection.

(G) Request for inspection shall not be honored where the request is made by a person representing a claimant unless such person is an attorney at law, authorized to practice in the state of Ohio, or unless such person certifies on the authorization that he or she is not receiving a fee for his or her participation in the claim.

(H) No person shall, without prior authorization from a member of the commission, the administrator, or their authorized representatives, remove a claim file, or any portion thereof, from the immediate area in which they receive the file.