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STATE OF OKLAHOMA

WORKERS' COMPENSATION COMMISSION

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ALERT REGARDING RULES AND FORMS CHANGES

TO: Workers' Compensation Insurance Carriers, Self-Insured Employers, Group Self-Insurance Associations, CompSource Oklahoma, Third-Party Administrators, Injured Workers, Attorneys, Other Interested Persons
FROM: Rick Farmer, Executive Director
DATE: April 23, 2014

Emergency Rules Renumbered

This is to advise that the Workers' Compensation Commission's Emergency Rules were renumbered recently to conform to formatting requirements of the Oklahoma Secretary of State, Office of Administrative Rules. The renumbered rules, and all forms with corresponding changes (see below), are available on the Commission website, www.wcc.ok.gov. They are for immediate use.

COMMISSION FORM NUMBER	TITLE
CC-Form-2A	Employer's Intent to Accept or Controvert Claim
CC-Form-2A Extension	Employer's Application for Extension of Time to File Form 2A
CC-Form-7	Designation of Service Agent
CC-Form-71	Authorization for Attorney Representation
CC-Form-93	Application and Order for Leave to Withdraw as Attorney of Record
CC-Form-100	Claimant's Application and Order for Dismissal
CC-Form-463	Application for Independent Medical Examiner
CC-Form-926	Application for Appointment as Certified Workers' Compensation Mediator
CC-Form-M	Request for Appointment of Independent Medical Examiner, Rehabilitation Evaluator or Medical Case Manager
CC-Form-A Order	CC-Form-A Order for Change of Treating Physician

CC-Form-2 (Employer's First Notice of Injury)

In addition to forms changes mentioned above, the CC-Form-2 (Employer's First Notice of Injury) was amended to relate **only to injuries/deaths occurring on or after February 1, 2014**. This was done to promote forms compliance. To access the form, go to the Commission website, www.wcc.ok.gov. For injuries occurring BEFORE February 1, 2014, use the Court of Existing Claims' Form 2 posted online at www.cec.ok.gov.

Note the law in effect on the date of injury controls when the Employer's First Notice of Injury should be filed. For injuries occurring BEFORE February 1, 2014, file the Court of Existing Claims' Form 2 within 10 days of knowledge of death or injury with loss of time beyond the shift or need for medical attention away from the work site. See 85 O.S., §322. For injuries occurring **on and after February 1, 2014**, file the Workers' Compensation Commission CC-Form-2 within 10 days of knowledge of death or injury that results in more than 3 days' absence from work. See 85A O.S., §63 and Commission Rule 810:10-1-4.

Questions about forms may be directed to the Commission's Counselor Division, 405-522-8760 (Oklahoma City), 918-581-2714 (Tulsa), 800-522-8210 (in-state toll free), or counselors@wcc.ok.gov.