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FORMS WHICH REQUIRE IMMEDIATE ATTENTION AND SHOULD CAUSE ALARM

> WC-RICATEE Employee Request for Catastrophic Designation

- The employee or the employee's attorney shall file: If the employer/insurer fail to timely designate the claim catastrophic and the employee believes the case to qualify for catastrophic designation;
- With supporting documentation;
- Presenting a choice for a Board-Certified catastrophic rehabilitation supplier.

Absent written objections within 20 days of the date mailed, the request for catastrophic designation will be considered unopposed and will be approved. If there is an objection, it must be in writing, must be copied to all case parties and to any/all involved rehabilitation suppliers. The SBWC will issue an Order.

> WC-14 Notice of Claim/Request for Hearing or Mediation

After receipt of a Notice of Hearing, you have 21 days from the date of notice to notify the Board of the name of the attorney representing you.

> WC-102 Request for Documents to Parties

Prior or subsequent to a hearing being requested in a claim, the parties are entitled to request copies of documents listed. Requested documents must be provided to the requesting party within 30 days of the date of certificate of service.

WC-102d Motion/Objection to Motion

This form is used to make or object to a motion (if no other specific Board form exists for the motion or request). A copy is served on all counsel and unrepresented parties. A response must be filed, using the WC-102d, with the Board within 15 days of the date of the certificate of service.

WC-200b Request/Objection for Change of Physician/Additional Treatment

This form is used to request a change of physician or additional treatment without consent, or to object to such a request. The requesting party must serve a copy on all counsel and unrepresented parties. Objections must be filed within 15 days of the date on the certificate of service for the request.

WC-205 Request for Authorization of Treatment or Testing by Authorized Treating Medical Provider

Authorized medical providers seeking approval for treatment or testing shall send this form by fax or e-mail directly to the insurer/self-insurer who must fax or e-mail a response within 5 business days. Neither the request nor response is to be filed with the Board, unless otherwise requested. If initially refused, you have 21 days (not business days) from the initial receipt of the WC-205 to file a WC-3 controverting the treatment or the treatment is deemed authorized.

FORMS WHICH REQUIRE IMMEDIATE ATTENTION (CONTINUED)

> Discovery once the case is in litigation

In Georgia, the party served with discovery has 30 days from the date of certificate of service to respond to discovery.

> Notification of approved settlement

O.C.G.A. §34-9-221 provides for a 20% penalty if the settlement amount is not paid within 20 calendar days of the approval date. If mailed from within the State of Georgia, payment is considered made when mailed and postmarked; if mailed from outside the State of Georgia, payment is considered made 3 days from the date of postmark and mailing.

> WC-PMT Petition to Show Cause Regarding Medical Treatment/Testing Recommended by Authorized Medical Provider

The employee or the employee's attorney files WC-PMT in order to request a show-cause conference with a judge about authorization of medical treatment.

> WC-PMT(b) Petition to Show Cause Regarding Medical Treatment – Employee's Failure to Attend Medical Appointment with an Authorized Treating Physician

Should the employee not attend medical treatment after submitting a response agreeing to do so, or following a Board Order directing attendance, employers and insurers can then file an additional PMT(b) requesting a suspension of income benefits. Upon filing PMT(b) petitioning for a suspension of income benefits, a conference call with a judge will be scheduled and the employee must show cause why an Order should not be issued suspending income benefits.

