



**willson jones
carter & baxley**

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3600 S. College Road
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Wilmington, NC 28412
Fax (919) 322-2754

www.wjcblaw.com



NORTH CAROLINA WORKERS' COMPENSATION

WEEKS ALLOWED FOR SCHEDULED MEMBERS (§97-31)

| BODILY LOSS | MAXIMUM WEEKS |
|-----------------------|---------------|
| Thumb | 75 |
| Finger - Index (1st) | 45 |
| Finger - Middle (2nd) | 40 |
| Finger - Ring (3rd) | 25 |
| Finger - Little (4th) | 20 |
| Toe - Great | 35 |
| Toe - Other | 10 |
| Hand | 200 |
| Arm | 240 |
| Foot | 144 |
| Leg | 200 |
| Eye | 120 |
| Back | 300* |

** Loss of 75% or more of the back is Total Industrial Disability and compensated for 100% loss*

MAXIMUM COMPENSATION RATE

| Year | Comp Rate |
|------|------------|
| 2015 | \$920.00 |
| 2016 | \$944.00 |
| 2017 | \$978.00 |
| 2018 | \$992.00 |
| 2019 | \$1,028.00 |
| 2020 | \$1,066.00 |
| 2021 | \$1,102.00 |
| 2022 | \$1,184.00 |
| 2023 | \$1,254.00 |
| 2024 | \$1,330.00 |
| 2025 | \$1,380.00 |
| 2026 | \$1,446.00 |

NC INDUSTRIAL COMMISSION

403 N. Salisbury St., Raleigh, NC 27603
Mail: 27699

PHONE (919) 807-2501 AND FAX (919) 715-0282

Claims Administration (919) 807-2506
(including Ltr of Rep and IC File No. requests)
Dockets Director (919) 807-2606
(including hearing requests)
Executive Secretary (919) 807-2575
Medical Fees (919) 807-2503
Information Specialist/. (919) 807-2501
General Questions
Accident Report (Form 19) now available for e-file at
<http://www.ic.nc.gov/EDIFORM19.HTML>

NC MILEAGE RATES

| | |
|---------------------------|---------------------|
| 2019 | 58 cents per mile |
| 2020 | 57.5 cents per mile |
| 2021 | 56 cents per mile |
| 2022 (January 1-June 30) | 58.5 cents per mile |
| 2022 (July 1-December 31) | 62.5 cents per mile |
| 2023 | 65.5 cents per mile |
| 2024 | 67 cents per mile |
| 2025 | 70 cents per mile |
| 2026 | 72.5 cents per mile |

ATTORNEY CONTACT INFORMATION

Charlotte Office

| | | |
|--------------------------|----------------|-------------------------|
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| | | |
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Wilmington Office

| | | |
|------------------|----------------|-------------------------|
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NORTH CAROLINA WORKERS' COMPENSATION

IMPORTANT INFORMATION

TIME PERIODS

- Waiting Period (§97-28) 7 days
- Time After Which Waiting Period is Recoverable (§97-28) . . 21 days
- Employer's First Report of Injury (§97-92) 5 days
from knowledge of injury if absence of more than
1 day or medicals exceeding \$4,000.
- Admit or Deny Employee's 30 days
Right to Compensation (Rule 601) from notice from IC
- Payment Without Prejudice (§97-18)
Payments may continue for 90 days from date Employer
has written or actual notice of injury/death (may apply
for 30-day extension). Must file form to deny before
expiration of 90-day period / extension or waive right
to contest compensability of, and liability for, the claim.
- Time for Filing of Form 33R. 45 days*
- Time for Selection of Mediator. 55 days*
- Time for Mediation of Claim. 120 days*
* from filing of Employee's Form 33

STATUTE OF LIMITATIONS

- FILE INITIAL CLAIM - INJURY BY ACCIDENT (§97-24) 2 years
- FILE INITIAL CLAIM - OCCUPATIONAL DISEASE (§97-58) . 2 years
from diagnosis by competent medical authority
- CHANGE OF CONDITION (§97-47) 2 years

BENEFITS

AVERAGE WEEKLY WAGE (AWW)

Compute wages for 1 year prior to injury, then divide by 52. Omit any period of time during which employee missed more than 7 consecutive calendar days. If employee worked less than 1 year, divide wages by number of weeks actually worked. (§97-2(5))

TEMPORARY TOTAL DISABILITY (TTD)

If disability exceeds 7 days, benefits of 66-2/3% of AWW not to exceed the maximum compensation rate for the year in which the injury occurred. (§97-29)

TEMPORARY PARTIAL DISABILITY (TPD)

66-2/3% of the difference between the AWW before the injury and the amount able to earn after the injury up to 500 weeks, with credit for any weeks of TTD paid. (§97-30)

TOTAL DISABILITY

Post-6/24/11: Total Disability limited to 500 weeks, except in certain, statutorily prescribed circumstances. (§97-29)

DEATH BENEFITS

66-2/3% of the AWW of 500 weeks is paid to the employee's dependants within 6 years of the accident or 2 years of the final determination of disability, whichever is later. Benefits are extended beyond 500 weeks in cases of (1) dependent widows or widowers who were physically or mentally disabled on the date of death and (2) dependent minors until the age of 18. Burial expenses of \$10,000 are also allowed (§97-38). Rule 409 sets forth procedures for death claims.

COMMUNICATING WITH MEDICAL PROVIDERS

COMMUNICATION WITH MEDICAL PROVIDERS

Written Communications: An employer may communicate with the employee's authorized health care provider in writing, without express authorization, to obtain specified types of relevant medical information not available in the employee's medical records. Requires contemporaneous written notice to employee. Provider's response must be provided to employee within 10 business days. (§97-25.6(c)(2))

Oral Communications: An employer may communicate with an employee's authorized health care provider in certain circumstances. Requires prior notice to employee of purpose and an opportunity to participate. Summary of communication must be provided to employee within 10 business days if employee did not participate. (§97-25.6(c)(3))

Additional Information Submitted by Employer: An employer may submit additional relevant medical information not already contained in the employee's medical records to the employee's authorized health care provider and may communicate in writing with the health care provider, subject to notice, objection and IC review procedures. (§97-25.6(d))

COMMONLY USED NCIC FORMS (Not an exhaustive list)

| FORM | TITLE OF FORM | WHEN USED | WHO RECEIVES |
|---|--|--|--|
| Form 18 Form 19 | Notice of Accident Employer's Report of Injury | Sent to Claimant with Form 19 Medicals exceeding \$4,000 or more than 1 day lost time | Employee/Attorney NCIC |
| Form 22 Form 24 | Employee's Wage Statement Application to Terminate Benefits | To calculate benefits owed Plaintiff non-compliance with medical/vocational or Refusal to return to work | Employee/Attorney NCIC; Employee/Attorney |
| Form 26A Form 28 Form 28T Form 28B | Employee's Right to PPD Return to Work Report Trial Return to Work Report Report of Compensation Paid | Plaintiff assigned PPD rating after MMI Plaintiff returns to work without restrictions Plaintiff returns to work with restrictions Final disability payments (including PPD) paid- No clincher agreement used | NCIC; Employee/Attorney NCIC; Employee/Attorney NCIC; Employee/Attorney NCIC; Employee/Attorney |
| Form 28C Form 33 Form 33R Form 60 | Report of Compensation Paid-Clincher Request That Claim Be Assigned for Hearing Response to Request for Hearing Employer's Admission of Right to Compensation | Final payment issued pursuant to clincher agreement Requesting IC hearing on any issue To answer Form 33; Must be filed within 45 days When claim is accepted-Must be filed within 30 days of notice of claim to avoid penalty | NCIC; Employee/Attorney NCIC; Employee/Attorney NCIC; Employee/Attorney NCIC; Employee/Attorney |
| Form 61 | Denial of Worker's Compensation Claim | When claim is denied-Must be filed within 30 days of notice of claim to avoid penalty | NCIC; Employee/Attorney |
| Form 62 | Reinstatement or Modification of Compensation | When employee taken out of work after return or Change in benefits owed for disability | NCIC; Employee/Attorney |
| Form 63 | Notice of Payment Without Prejudice | Unable to admit or deny claim within 30 days of notice of claim/Medical only claims | NCIC; Employee/Attorney |
| Form 90 | Report of Earnings | To verify plaintiff not earning income-can be used once every six months | Employee/Attorney |