



**willson jones
carter & baxley**

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www.wjcbllaw.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*

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

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>

ATTORNEY CONTACT INFORMATION

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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	Notice of Accident	Sent to Claimant with Form 19	Employee/Attorney
Form 19	Employer's Report of Injury	Medicals exceeding \$4,000 or more than 1 day lost time	NCIC
Form 22	Employee's Wage Statement	To calculate benefits owed	Employee/Attorney
Form 24	Application to Terminate Benefits	Plaintiff non-compliance with medical/vocational or Refusal to return to work	NCIC; Employee/Attorney
Form 26A	Employee's Right to PPD	Plaintiff assigned PPD rating after MMI	NCIC; Employee/Attorney
Form 28	Return to Work Report	Plaintiff returns to work without restrictions	NCIC; Employee/Attorney
Form 28T	Trial Return to Work Report	Plaintiff returns to work with restrictions	NCIC; Employee/Attorney
Form 28B	Report of Compensation Paid	Final disability payments (including PPD) paid- No clincher agreement used	NCIC; Employee/Attorney
Form 28C	Report of Compensation Paid-Clincher	Final payment issued pursuant to clincher agreement	NCIC; Employee/Attorney
Form 33	Request That Claim Be Assigned for Hearing	Requesting IC hearing on any issue	NCIC; Employee/Attorney
Form 33R	Response to Request for Hearing	To answer Form 33; Must be filed within 45 days	NCIC; Employee/Attorney
Form 60	Employer's Admission of Right to Compensation	When claim is accepted-Must be filed within 30 days of notice of claim to avoid penalty	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