
A. Definitions.
2. “Division” means the Division of Adjudication within the Labor Commission.
3. “Application for Hearing” means Adjudication Form 001 Application for Hearing Industrial Accident Claim, Adjudication Form 026 Application for Hearing Occupational Disease Claim, Adjudication Form 025 Application for Dependent's Benefits and Burial Benefits Industrial Accident, Adjudication Form 027 Application for Dependent's Benefits Occupational Disease, or other request for agency action complying with Section 63G-4-102 et seq. filed by an employer or insurance carrier regarding a workers compensation claim.
4. “Supporting medical documentation” means Adjudication Form 113 Summary of Medical Record or other medical report or treatment note completed by a physician that indicates the presence or absence of a medical causal connection between benefits sought and the alleged industrial injury or occupational disease.
5. “Authorization to Release Medical Records” is Adjudication Form 308 Authorization to Disclose, Release and Use Protected Health Information authorizing the injured workers' medical providers to provide medical records and other medical information to the commission or a party.
6. “Supporting documents” means supporting medical documentation, Adjudication Form 307 Medical Treatment Provider List, Adjudication Form 308 Authorization to Disclose, Release and Use Protected Health Information and, when applicable, Adjudication Form 152 Appointment of Counsel.
7. “Petitioner” means the person or entity who has filed an Application for Hearing.
8. “Respondent” means the person or entity against whom the Application for Hearing was filed.
9. “Discovery motion” includes a motion to compel or a motion for protective order.
10. “Designated agent” is the agent authorized to receive all notices and orders in workers' compensation adjudications pursuant to Section 34A-2-113. Designated agents shall provide the Adjudication Division an electronic address to receive delivery of documents from the Adjudication Division.

B. Application for Hearing.
1. Whenever a claim for compensation benefits is denied by an employer or insurance carrier, the burden rests with the injured worker, authorized representative of a deceased worker's estate, dependent of a deceased worker or medical provider, to initiate agency action by filing an appropriate Application for Hearing with the Division. Applications for hearing shall include an original, Adjudication Form 308 Authorization to Disclose, Release and Use Protected Health Information.
2. An employer, insurance carrier, or any other party with standing under the Workers Compensation Act may obtain a hearing before the Adjudication Division by filing a request for agency action with the Division complying with the Section 63G-4-102 et seq.
3. An Application for Hearing shall include supporting medical documentation of the claim where there is a dispute over medical issues. Applications for Hearing without supporting documentation and a properly completed Adjudication Form 308 Authorization to Disclose, Release and Use Protected Health Information may not be mailed to the employer or insurance carrier for answer until the appropriate documents have been provided. In addition to respondent's answer, a respondent may file a motion to dismiss the Application for Hearing where there is no supporting medical documentation filed to demonstrate medical causation when such is at issue between the parties.
4. When an Application for Hearing with appropriate supporting documentation is filed with the Division, the Division shall mail to the respondents a copy of the Application for Hearing, supporting documents and Notice of Formal Adjudication and Order for Answer.
5. In cases where the injured worker is represented by an attorney, a completed and signed Adjudication Form 152 Appointment of Counsel form shall be filed with the Application for Hearing or upon retention of the attorney.
6. Answer.
   1. The respondent shall have 30 days from the date of mailing the Order for Answer to file a written answer to the Application for Hearing.
   2. The answer shall admit or deny liability for the claim and shall state the reasons liability is denied. The answer shall state all affirmative defenses with sufficient accuracy and detail that the petitioner and the Division may be fully informed of the nature and substance of the defenses asserted.
   3. An answer shall include a summary of benefits which have been paid to date on the claim, designating such payments by category, such as medical expenses, temporary total disability, permanent partial disability.
   4. When liability is denied based upon medical issues, copies of reasonably available, admissible medical reports sufficient to support the denial of liability shall be filed with the answer.
   5. If the answer filed by the respondents fails to sufficiently explain the basis of the denial, fails to include medical reports or records to support the denial, or contains affirmative defenses without sufficient factual detail to support the affirmative defense, the Division may strike the answer filed and order the respondent to file within 20 days a new answer which conforms with the requirements of this rule.
   6. An answer must state whether the respondent is willing to mediate the claim.
7. Petitioners are allowed to timely amend the Application for Hearing, and respondents are allowed to timely amend the answer, as newly discovered information becomes available that would warrant the amendment. The parties shall not amend their pleadings later than 45 days prior to the scheduled hearing without leave of the Administrative Law Judge.

8. Responses and answers to amended pleadings shall be filed within ten days of service of the amended pleading without further order of the Labor Commission.

D. Default.
1. If a respondent fails to file an answer as provided in Subsection (c), the Division may enter a default against the respondent.
2. If default is entered against a respondent, the Division may conduct any further proceedings necessary to take evidence and determine the issues raised by the Application for Hearing without the participation of the party in default pursuant to Subsection 63G-4-209(4).
3. A default of a respondent shall not be construed to deprive the Employer's Reinsurance Fund or Uninsured Employers' Fund of any appropriate defenses.
4. The defaulted party may file a motion to set aside the default under the procedures in Subsection 63G-4-209(3). The Adjudication Division shall set aside defaults upon written and signed stipulation of parties to the action.

E. Hearing.
1. Hearings shall take place through an electronic platform as noticed by the Division. An administrative law judge may grant permission for an in-person hearing when good cause is shown.
2. Waiver of Hearing
   a. The parties may, with the approval of the administrative law judge, waive their right to a hearing and enter into a stipulated set of facts, which may be submitted to the administrative law judge. The administrative law judge may use the stipulated facts, medical records and evidence in the record to make a final determination of liability or refer the matter to a Medical Panel for consideration of the medical issues pursuant to Section R602-2-2.
   b. Stipulated facts shall include sufficient facts to address the issues raised in the Application for Hearing and answer.
   c. In cases where Medical Panel review is required, the administrative law judge may forward the evidence in the record, including medical records, fact stipulations, radiographs and deposition transcripts, to a medical panel for assistance in resolving the medical issues.

F. Discovery.
1. Upon filing the answer, the respondent and the petitioner may commence discovery. Discovery documents may be delivered by electronic transmittal. Discovery allowed under this rule may include interrogatories, requests for production of documents, depositions, and medical examinations. Discovery shall not include requests for admissions. Appropriate discovery under this rule shall focus on matters relevant to the claims and defenses at issue in the case. Discovery requests are deemed continuing and shall be promptly supplemented by the responding party as information becomes available.
2. Without leave of the administrative law judge, or written stipulation, any party may serve upon any other party written interrogatories, not exceeding 25 in number, including discrete subparts, to be answered by the party served. The frequency or extent of use of interrogatories, requests for production of documents, medical examinations or depositions shall be limited by the administrative law judge if it is determined that:
   a. the discovery sought is unreasonably cumulative or duplicative, or is obtainable from another source that is more convenient, less burdensome, or less expensive;
   b. the party seeking discovery has had ample opportunity by discovery in the action to obtain the discovery sought; or
   c. the discovery is unduly burdensome or expensive, taking into account the needs of the case, the amount in controversy, limitations on the parties' resources, and the importance of the issues at stake in the adjudication.
3. Upon reasonable notice, the respondent may require the petitioner to submit to a medical examination by a physician of the respondent's choice.
   a. Petitioner may seek relief from the medical examination detailed in Subsection (3), and the administrative law judge may provide such relief, upon the showing by a petitioner of an unreasonable demand by respondent related to such medical examination.
   b. Respondent shall send any questionnaire, consent or release forms requested by the examining physician or insurance carrier to the petitioner at least 14 days prior to the scheduled medical examination.
   c. After a reasonable attempt between the parties to resolve any issues which may arise due to the forms in Subsection (b), a petitioner shall file objections to any questionnaire, consent or release forms requested by the examining physician or insurance carrier with the administrative law judge at least seven days prior to the scheduled medical examination.
4. Parties may conduct depositions pursuant to the Utah Rules of Civil Procedure and Section 34A-1-308.
5. Requests for production of documents are allowed, but limited to matters relevant to the claims and defenses at issue in the case, and shall not include requests for documents provided with the petitioner's Application for Hearing, nor the respondents' answer.
6. Parties shall diligently pursue discovery so as not to delay the adjudication of the claim. If a hearing has been scheduled, discovery motions shall be filed no later than 45 days prior to the hearing unless leave of the administrative law judge is obtained.
7. Discovery motions shall contain copies of relevant documents pertaining to the discovery at issue, such as mailing certificates and follow up requests for discovery. The responding party shall have ten days from the date the discovery motion is mailed to file a response to the discovery motion.
8. Parties conducting discovery under this rule shall maintain mailing certificates and follow up letters regarding discovery to submit in the event Division intervention is necessary to complete discovery. Discovery documents shall not be filed with the Division at the time they are forwarded to opposing parties.

9. Any party who fails to obey an administrative law judge's discovery order shall be subject to the sanctions available under the Utah Rules of Civil Procedure, Rule 37.

10. Notwithstanding the disclosures required under Section R602-2-1, parties shall remain obligated to respond timely and appropriately to discovery requests.

G. Subpoenas.
1. Commission subpoena forms shall be used in discovery proceedings to compel the attendance of witnesses. Subpoenas shall be signed by the administrative law judge assigned to the case, or the duty judge where the assigned judge is not available. Subpoenas to compel the attendance of witnesses shall be served at least 14 days prior to the hearing consistent with the Utah Rules of Civil Procedure, Rule 45. Witness fees and mileage shall be paid by the party which subpoenas the witness.

2. A subpoena to produce records shall be served on the holder of the record at least 14 days prior to the date specified in the subpoena as provided in the Utah Rule of Civil Procedure, Rule 45. Fees associated with the production of documents shall be paid by the party which subpoenas the record.

H. Medical Records Exhibit.
1. The parties are expected to exchange medical records during the discovery period. Subpoenas to compel the attendance of witnesses shall be served at least 14 days prior to the hearing.

3. The respondent shall prepare a joint medical record exhibit containing all relevant medical records. The medical record exhibit shall include all relevant treatment records that tend to prove or disprove a fact in issue. Hospital nurses' notes, duplicate materials, and other non-relevant materials need not be included in the medical record exhibit.

4. The medical records shall be indexed, paginated, arranged by medical care provider in chronological order and bound. The medical records shall be filed via electronic transmittal.

5. The medical record exhibit prepared by the respondent shall be delivered to the Division and the petitioner or petitioner's counsel at least ten working days prior to the hearing. Late-filed medical records may or may not be admitted at the discretion of the administrative law judge by stipulation or for good cause shown.

6. The administrative law judge may require the respondent to submit an additional copy of the joint medical record exhibit in cases referred to a medical panel.

7. The petitioner is responsible to obtain radiographs and diagnostic films for review by the medical panel. The administrative law judge shall issue subpoenas where necessary to obtain radiology films.

I. Hearing.
1. Notices of hearing shall be mailed to the addresses of record of the parties. The parties shall provide current addresses to the Division for receipt of notices or risk the entry of default and loss of the opportunity to participate at the hearing.

2. Judgment may be entered without a hearing after default is entered or upon stipulation and waiver of a hearing by the parties.

3. No later than 45 days prior to the scheduled hearing, parties shall file a signed pretrial disclosure form that identifies: (a) fact witnesses the parties actually intend to call at the hearing; (b) expert witnesses the parties actually intend to call at the hearing; (c) language translator the parties intend to use at the hearing; (d) exhibits, including reports, the parties intend to offer in evidence at the hearing; (e) the specific benefits or relief claimed by the petitioner; (f) the specific defenses that the respondent actually intends to litigate; (g) whether, or not, a party anticipates that the case will take more than two hours of hearing time; (h) the job categories or titles the respondents claim the petitioner is capable of performing if the claim is for permanent total disability, and: (i) any other issues the parties intend to ask the administrative law judge to adjudicate. The administrative law judge may exclude witnesses, exhibits, evidence, claims, or defenses as appropriate of any party who fails to timely file a signed pretrial disclosure form as set forth above. The parties shall supplement the pre-trial disclosure form with information that newly becomes available after filing the original form. The pre-trial disclosure form does not replace other discovery allowed under these rules.

4. If the petitioner requires the services of language translation during the hearing, the petitioner has the obligation of providing a person who can translate between the petitioner's native language and English during the hearing. If the respondents are dissatisfied with the proposed translator identified by the petitioner, the respondents may provide a qualified translator for the hearing at the respondent's expense.

5. The petitioner shall appear at the hearing prepared to outline the benefits sought, such as the periods for which compensation and medical benefits are sought, the amounts of unpaid medical bills, and a permanent partial disability rating, if applicable. If mileage reimbursement for travel to receive medical care is sought, the petitioner shall bring documentation of mileage, including the dates, the medical provider seen and the total mileage.

6. The respondent shall appear at the hearing prepared to address the merits of the petitioner's claim and provide evidence to support any defenses timely raised.

7. Parties are expected to be prepared to present their evidence on the date the hearing is scheduled. Requests for continuances may be granted or denied at the discretion of the administrative law judge for good cause shown. Lack of diligence in preparing for the hearing shall not constitute good cause for a continuance.

8. Subject to the continuing jurisdiction of the Labor Commission, the evidentiary record shall be deemed closed at the conclusion of the hearing, and no additional evidence will be accepted without leave of the administrative law judge.

J. Motions-Time to Respond.
Responses to all motions shall be filed within ten days from the date the motion was filed with the Division. Reply memoranda shall be filed within five days from the date a response was filed with the Division.

K. Motions - Length and Type
   1. Without prior leave of the Administrative Law Judge, supporting memorandum shall not exceed a total of 10 pages, opposing memorandum shall not exceed seven pages and reply memorandum shall not exceed three pages. Pleadings shall be double spaced.
      a. The page limitations are inclusive of headings, table of contents, introduction, background, conclusion, statement of issues and facts, and arguments.
      b. The text of motions and memoranda shall be typeset in 12-point.
      c. The Administrative Law Judge shall not consider anything contained on pages which exceed the page limits.
      d. If a memorandum is to exceed the page limitations set forth in this rule, leave of the Administrative Law Judge must first be obtained. A motion for leave to file a lengthy memorandum must include a statement of the reasons why additional pages are needed and specify the number required. The Administrative Law Judge will approve such requests only for good cause and a showing of exceptional circumstances that justify the need for an extension of the specified page limitations. Absent such a showing by the requesting party, such requests will not be approved. A lengthy memorandum must not be filed with the Division prior to an entry of an order authorizing its filing.
   2. Other than one supporting and one opposing and one reply memorandum, no other memoranda shall be considered by the Administrative Law Judge.

L. Orders on Continuances
   The Administrative Law Judge may rule, ex parte, on requests for continuances.

M. Notices
   1. Orders and notices mailed by the Division to the last address of record provided by a party are deemed served on that party.
   2. Where an attorney appears on behalf of a party, notice of an action by the Division served on the attorney is considered notice to the party represented by the attorney.

N. Form of Decisions
   Decisions of the presiding officer in any adjudicative proceeding shall be issued in accordance with the provisions of Section 63G-4-203 or 63G-4-208.

O. Motions for Review
   1. Any party to an adjudicative proceeding may obtain review of an Order issued by an Administrative Law Judge by filing a written request for review with the Adjudication Division in accordance with the provisions of Section 63G-4-301 and Section 34A-1-303. Unless a request for review is properly filed, the Administrative Law Judge's Order is the final order of the Commission. If a request for review is filed, other parties to the adjudicative proceeding may file a response within 15 calendar days of the date the request for review was filed. If such a response is filed, the party filing the original request for review may reply within five calendar days of the date the response was filed. Thereafter the Administrative Law Judge shall:
      a. reopen the case and enter a Supplemental Order after holding such further hearing and receiving such further evidence as may be deemed necessary;
      b. amend or modify the prior Order by a Supplemental Order; or
      c. refer the entire case for continuation.
   2. Motions for Review shall not exceed a total of 15 pages. Response briefs shall not exceed a total of 12 pages. Reply briefs shall not exceed a total of five pages. All motions and briefs shall be double spaced.
      a. The page limitations herein are inclusive of headings, table of contents, introduction, background, conclusion, statement of issues and facts, and arguments.
      b. The text of motions and memoranda shall be typeset in 12-point font.
      c. The Commission and the Appeals Board may disregard argument or other writing contained on pages which exceed the page limits.
   3. If the Administrative Law Judge enters a Supplemental Order under Subsection (1)(a) or (b), it shall be final unless a request for review of the same is filed.

P. Procedural Rules
   In formal adjudicative proceedings, the Division shall generally follow the Utah Rules of Civil Procedure regarding discovery and the issuance of subpoenas, except as the Utah Rules of Civil Procedure are modified by the express provisions of Section 34A-2-802 or as may be otherwise modified by these rules.

Q. Requests for Reconsideration and Petitions for Judicial Review
   A request for reconsideration of an Order on Motion for Review may be allowed and shall be governed by the provisions of Section 63G-4-302. Any petition for judicial review of final agency action shall be governed by the provisions of Section 63G-4-401.

R. Request for Abstract
   1. Timing of Request
      a. A petitioner who seeks an abstract relative to an award of benefits other than permanent total disability benefits shall file the request after the order of the commission becomes final.
      b. A petitioner who seeks an abstract relative to an award of permanent total disability benefits may file the request:
         i. after the order of the commission becomes final; or
where the award has been subject to agency review, after a preliminary determination is issued by the commissioner or the appeals board affirming that the petitioner is permanently and totally disabled, unless that preliminary decision is stayed under Subsection 34A-2-212(3), Section 63G-4-405 or set aside by the Utah Court of Appeals.

c. A motion to stay a preliminary permanent total disability determination shall be filed with the body that conducted agency review pursuant to Subsections R612-200-5(C)(1)(d) and R612-200-5(e).

2. Content of Filing. A request for abstract shall:
   a. set forth verbatim the language of the final order or preliminary decision that awards the benefits at issue;
   b. set forth the specific monetary sums claimed for each benefit that has been awarded and that is at issue;
   c. include evidence available to the petitioner that corroborates the specific monetary sums claimed, such as:
      i. billing statements;
      ii. RBRVS calculations;
      iii. interest calculations; and
   d. include an exact copy, in its entirety, of each order that awards benefits for which the abstract is sought.

3. Adjudication of Contest.
   a. A request for abstract may be adjudicated by the administrative law judge who issued the order awarding the benefits at issue, unless reassigned to another judge.
   b. Any objection to the request for abstract shall be filed within ten days of the filing date of the request.
   c. If an objection is filed, any reply shall be filed within five days of the filing date of the objection.
   d. If a proffer of conflicting evidence demonstrates a need to clarify or modify the abstract, the administrative law judge may schedule a hearing. Any such hearing may be held using electronic means.
      i. the respondent's objection deadline, if the respondent does not object to the abstract;
      ii. the petitioner's reply deadline, if the briefing does not demonstrate a need to clarify or modify the abstract; or
      iii. the date on which the administrative law judge conducts a hearing on the abstract.
   e. The administrative law judge shall issue an order adjudicating the request for abstract within 20 days of:
      i. the respondent's objection deadline, if the respondent does not object to the abstract;
      ii. the petitioner's reply deadline, if the briefing does not demonstrate a need to clarify or modify the abstract; or
      iii. the date on which the administrative law judge conducts a hearing on the abstract.
   f. The administrative law judge's decision regarding the request for abstract shall be subject to agency review only if agency review is requested before the abstract is filed with the district court.


Pursuant to Section 34A-2-601, the Commission adopts the following guidelines in determining the necessity of submitting a case to a medical panel:

A. A panel will be utilized by the Administrative Law Judge where one or more significant medical issues may be involved. Generally a significant medical issue must be shown by conflicting medical reports. Significant medical issues are involved when there are:

   1. Conflicting medical opinions related to causation of the injury or disease;
   2. Conflicting medical opinion of permanent physical impairment which vary more than 5% of the whole person,
   3. Conflicting medical opinions as to the temporary total cutoff date which vary more than 90 days;
   4. Conflicting medical opinions related to a claim of permanent total disability, and/or
   5. Medical expenses in controversy amounting to more than $10,000.

B. Objections and Responses.

1. Time. A written Objection to a medical panel report shall be due within 20 days of the date the medical panel report is served on the parties. A Response to an Objection shall be filed within 10 days from the date the Objection was filed with the Division. A Reply to an Objection shall be filed within 5 days from the date the Response is filed with the Division.

2. Length. Without prior leave of the Administrative Law Judge, Objections shall not exceed 10 pages. Responses shall not exceed 7 pages, and Replies shall not exceed 3 pages. All pleadings shall be double spaced.

   a. The page limitations herein are inclusive of headings, table of contents, introduction and/or background, conclusion, statement of issues and facts, arguments, etc.
   b. The text of motions and memoranda shall be typeset in 12-point font.
   c. The Administrative Law Judge shall not consider anything contained on pages which exceed the page limits.
   d. If a memorandum is to exceed the page limitations set forth in this rule, leave of the Administrative Law Judge must first be obtained. A motion for leave to file a lengthy memorandum must include a statement of the reasons why additional pages are needed and specify the number required. The Administrative Law Judge will approve such requests only for good cause and a showing of exceptional circumstances that justify the need for an extension of the specified page limitations. Absent such a showing by the requesting party, such requests will not be approved. A lengthy memorandum must not be filed with the Division prior to an entry of an order authorizing its filing.

3. Other than one Objection and one Response and one Reply, no other memoranda shall be considered without prior leave of the Administrative Law Judge.

4. A hearing on objections to the panel report may be scheduled if there is a proffer of conflicting medical testimony showing a need to clarify the medical panel report. Where there is a proffer of new written conflicting medical evidence, the Administrative Law Judge may, in lieu of a hearing, re-submit the new evidence to the panel for consideration and clarification.
C. Any expenses of the study and report of a medical panel or medical consultant and of their appearance at a hearing, as well as any expenses for further medical examination or evaluation, as directed by the Administrative Law Judge, shall be paid from the Uninsured Employers' Fund, as directed by Section 34A-2-601.


Compensation for medical panel services, including records review, examination, report preparation and testimony, shall be $125 per half hour for medical panel members and $137.50 per half hour for the medical panel chair.


A. Pursuant to Section 34A-2-801, the Commission adopts the following rule to ensure decisions on contested workers' compensation cases are issued in a timely and efficient manner.

1. This rule applies to all workers' compensation adjudication cases and motions for review filed on or after July 1, 2013.

B. Timeliness standards.

1. The Adjudication Division will issue all interim decisions and all final decisions within 60 days of the date on which the matter is ready for decision unless the parties agree to a longer period of time or issuing a decision within 60 days is impracticable. The Division will maintain a record of those cases in which a decision is not issued within 60 days.

2. The Commissioner or Appeals Board will issue all decisions on motions for review within 90 days of the date on which the motion for review is filed unless the parties agree to a longer period of time or issuing a decision within 90 days is impracticable. The Commission will maintain a record of those cases in which a decision is not issued within 90 days.

C. Yearly Report

1. The Commission shall annually provide to the Business and Labor Interim Committee a report that includes the following information:
   a. The number of cases for which an application for hearing was filed during the previous calendar year;
   b. The number of cases for which a Division decision was not issued within 60 days of the hearing;
   c. The number of cases for which a decision on a motion for review was not issued within 90 days of the date on which the motion for review was filed;
   d. The number of cases for which an application for hearing was filed during the previous year that resulted in a final Commission decision issued within 18 months of the filing date; and
   e. The number of cases for which an application for hearing was filed during the previous year that did not result in a final Commission issued within 18 months of the filing date and the reason such a decision was not issued.

D. Commission decisions might not be issued within these timeframes if doing so is impracticable.

1. For purposes of this rule, "impracticable" may include but is not limited to:
   a. Cases that are sent to a medical panel;
   b. Cases in which the hearing record is left open at the request of one or more of the parties or by order of the ALJ;
   c. Cases in which one or more parties file post-hearing motions or objections;
   d. Cases in which the parties request mediation or an extension of time to pursue settlement negotiations;
   e. Cases in which due process requires subsequent or additional adjudication;
   f. Cases in which a claimant is required to amend the application for hearing or in which a respondent is required to amend a response or answer; or
   e. Cases in which an appellate decision related to the pending case or a similar case may have bearing on the pending case.

E. The Commission will receive the motion for review immediately after the motion is filed with the Adjudication Division.

1. Preliminary evaluation: motions for review.
   a. Immediately upon transfer of a motion for review from the Adjudication Division to the Commission, staff will review the ALJ's decision and the motion for review. Responses will be reviewed as they are submitted. Based on that review, staff will prioritize cases for decision in the following order:
      i. Cases with statutory mandates to issue quick decisions, such as requests to eliminate or reduce temporary disability compensation.
      ii. Cases that require an immediate decision in order to allow the underlying adjudicative proceeding to proceed.
      iii. Cases that can be resolved without research or extensive decision-writing.
      iv. Cases that need to be decided in a timely manner by the Appeals Board in order to be completed within 90 days.
   b. If none of these factors are present, cases will be completed in the order they are received, with the oldest cases receiving priority.

KEY: workers' compensation, administrative procedures, hearings, abstract of judgment

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