To comply with prior appellate court decisions and the Industrial Commission’s goals of ensuring that the Form 21/26 agreement review process is consistent, accurate, timely and fair, the Full Commission is implementing the following procedures:

**Claims Department Form 21/26 Review**

All agreements shall be reviewed initially by the Claims Administration Section to ensure that they are completed accurately and that all supporting documentation has been submitted. The Claims Administration Section shall utilize a Form 53 to request missing or incomplete information from carrier/administrators. The Claims Administration Section may issue an order setting time limits for returning requested information to the Industrial Commission.

A complete Form 21/26 package should include the following:

- A fully completed Form 21/26 Agreement;
- The Form 21/26 Agreement must be signed and dated by both parties;
- A correct compensation rate must be indicated. The compensation rate shall be computed by multiplying the average weekly wage x 0.6667. If there is an $0.01 to $0.05 discrepancy in the weekly compensation rate, the agreement will be accepted for review and approval.
- A properly completed Form 25A along with medical records, including the medical record(s) indicating a permanent partial disability rating.
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- Verification of return to work through a Form 28, 28T or 28B in medical only cases.

The complete package would then be assembled as follows:

- Cover sheet (including initials of the reviewer indicating the package is complete)
- Form 21/26
- Form 25A
- Forms 28, 28T, 28B (whichever applies)
- Any other IC Forms sent in with the package
- Medical record(s) – with the first page(s) dealing with the permanent partial disability rating.

If the claimant has no lost time or has returned to work at the same or greater average weekly wage and without restrictions (full duty), and has done so prior to reaching maximum medical improvement and receiving a permanent partial disability rating, the Claims Examiner can approve the Form 21/26 agreement if the claimant has only received one rating and there are no other issues identified by the Claims Examiner during his or her review. The Claims Examiner shall also approve agreements relating to loss of teeth. All cases where there is any doubt regarding approval of the Form 21/26 agreements shall be forwarded to the Deputy Commissioner. If the claimant has reached maximum medical improvement but has not yet returned to work, the package shall automatically be referred to the Deputy Commissioner Section for further review.

**Deputy Commissioner Review**

The Deputy Commissioner (or Special Deputy Commissioner) shall review the medical notes and the other file items with respect to future medical treatment and/or suitable employment issues and/or the most beneficent remedy for claimant. If the Deputy Commissioner does not identify areas of concern, the Deputy
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Commissioner shall approve the Form 21/26 agreement and forward it back to the Claims Administration Section for processing. If the Deputy Commissioner identifies areas of concern, the Deputy Commissioner shall do one or more of the following:

(1) **Address the issues with a letter** (Form letter templates are available). The Deputy Commissioner shall “retain jurisdiction” of the file to receive additional information requested by the Deputy Commissioner. A spreadsheet shall be utilized to track files.

(2) **Address the issues through a telephone conference with both parties**, which may or may not require additional written documentation. If additional written documentation is requested, the Form 21/26 agreement package may be forwarded back to the Claims Administration Section for management or retained by the Deputy Commissioner. A form order similar to the ones utilized by the Special Deputy Commissioners through the Form 24 hearings may be used to notify the parties regarding approval/rejection of a Form 21/26 agreement after a telephone conference. Either party could then “appeal” the decision in the same way that Form 24 hearing appeals are handled, and the cases would go through the appropriate stages to set it for hearing.

(3) **Refer the matter to Chief Deputy Commissioner Stephen Gheen for placement on a hearing docket.** In some cases, the issues may be of such a complicated or complex nature that taking evidence on those issues would be the most appropriate method of resolving them. Hearings shall be a method of last resort. No case shall be placed on a hearing docket until after a telephone conference or letter, or both have failed to resolve the issues raised. The Deputy Commissioner reviewing the agreement shall confer with the Chief Deputy Commissioner before setting the matter for hearing.
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Adopted this the 25 day of May 2005.

Buck Lattimore, Chairman

Thomas J. Boleh
Commissioner

Bernadine S. Ballance
Commissioner

Christopher Scott
Commissioner

Laura K. Mavretic
Commissioner

Pamela T. Young
Commissioner

Dianne C. Sellers
Commissioner