

**State of California
Office of Administrative Law**

In re:
Division of Workers Compensation

Regulatory Action:

Title 8, California Code of Regulations

Adopt sections:

Amend sections: 9789.12.2, 9789.12.3,
9789.12.4, 9789.12.8,
9789.19

Repeal sections:

NOTICE OF FILING AND PRINTING ONLY

Government Code Section 11343.8

OAL File No. 2013-1216-03 FP

The Division of Workers' Compensation proposed to amend sections 9789.12.2, 9789.12.3, 9789.12.4, 9789.12.8, and 9789.12.19 of title 8 of the California Code of Regulations to make changes to the workers' compensation Physician Fee Schedule for services rendered on or after January 1, 2014. This filing is submitted to the Office of Administrative Law only for the purpose of filing with the Secretary of State and publication in the California Code of Regulations in that it "...establishes or fixes rates, prices, or tariffs' within the meaning of Government Code section 11340(g)...."

OAL filed this regulation(s) or order(s) of repeal with the Secretary of State, and will publish the regulation(s) or order(s) of repeal in the California Code of Regulations.

Date: 12/26/2013

***AIG TARPENNING**

Craig S. Tarpenning
Assistant Chief Counsel

For: DEBRA M. CORNEZ
Director

Original: Destie Overpeck
Copy: Jacqueline Schauer

NOTICE PUBLICATION REGULATIONS SUBMISSION

FILE PRINT

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

| | | | |
|------------------|--------------------|--------------------------|------------------|
| OAL FILE NUMBERS | NOTICE FILE NUMBER | REGULATORY ACTION NUMBER | EMERGENCY NUMBER |
| | Z- | 2013-1216-03FP | |

ENDORSED FILED IN THE OFFICE OF

2013 DEC 26 PM 4:29

For use by Office of Administrative Law (OAL) only

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|--------|-------------|
| NOTICE | REGULATIONS |
|--------|-------------|

2013 DEC 16 AM 11:18 OFFICE OF ADMINISTRATIVE LAW

Debra Bowen DEBRA BOWEN SECRETARY OF STATE

AGENCY WITH RULEMAKING AUTHORITY
Division of Workers' Compensation, within Dept. of Industrial Relations

AGENCY FILE NUMBER (if any)
None

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

| | | | |
|--|---------------------------|------------------------|-------------------------------|
| 1. SUBJECT OF NOTICE | TITLE(S) | FIRST SECTION AFFECTED | 2. REQUESTED PUBLICATION DATE |
| 3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other | 4. AGENCY CONTACT PERSON | TELEPHONE NUMBER | FAX NUMBER (Optional) |
| OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn | ACTION ON PROPOSED NOTICE | NOTICE REGISTER NUMBER | PUBLICATION DATE |

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

| | |
|---|--|
| 1a. SUBJECT OF REGULATION(S) Workers' Compensation-Official Medical Fee Schedule-Physician | 1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S) |
|---|--|

2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)

| | |
|--|--|
| SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.) | ADOPT |
| | AMEND 9789.12.2, 9789.12.3, 9789.12.4, 9789.12.8, and 9789.19 |
| | REPEAL |

TITLE(S)
8

3. TYPE OF FILING

| | | | |
|---|---|--|---|
| <input type="checkbox"/> Regular Rulemaking (Gov. Code §11346) | <input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute. | <input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h)) | <input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100) |
| <input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4) | <input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1) | <input checked="" type="checkbox"/> File & Print | <input type="checkbox"/> Print Only |
| <input type="checkbox"/> Emergency (Gov. Code, §11346.1(b)) | | <input checked="" type="checkbox"/> Other (Specify) Exempt-Gov't Code section 11340.9(g) | |

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)

| | | | |
|---|--|--|---|
| <input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a)) | <input type="checkbox"/> Effective on filing with Secretary of State | <input type="checkbox"/> \$100 Changes Without Regulatory Effect | <input checked="" type="checkbox"/> Effective other (Specify) January 1, 2014 |
|---|--|--|---|

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

| | | |
|--|--|---|
| <input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660) | <input type="checkbox"/> Fair Political Practices Commission | <input type="checkbox"/> State Fire Marshal |
| <input type="checkbox"/> Other (Specify) | | |

| | | | |
|---|------------------------------------|-----------------------|--|
| 7. CONTACT PERSON Jacqueline Schauer | TELEPHONE NUMBER (510) 286-0563 | FAX NUMBER (Optional) | E-MAIL ADDRESS (Optional) jschauer@dir.ca.gov |
|---|------------------------------------|-----------------------|--|

8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

| | |
|--|---------------------------|
| SIGNATURE OF AGENCY HEAD OR DESIGNEE <i>Destie Lee Overpeck</i> | DATE December 13, 2013 |
| TYPED NAME AND TITLE OF SIGNATORY Destie Lee Overpeck, Acting Administrative Director | |

For use by Office of Administrative Law (OAL) only
ENDORSED APPROVED
DEC 26 2013
Office of Administrative Law