



To the Claimant's Representative - General Information On Using This Form

You may file this form with the Workers' Compensation Board when you want the Board to take a specific action in your client's case, or if you need to alert the Board to any problem or situation that is affecting your client's case. Many of the most frequently requested actions/situations are contained in Section 8. However, you are not limited to those listed. Check all that apply and/or add additional information or explanation in the space provided (p). If an attorney/ licensed representative fee is requested, submit Form OC-400.1. Please note: in order to receive an expedited (45-day hearing) you must check box 'a' and enter the date the claimant stopped working, AND you must check the box below it for "An expedited (45-day) hearing is requested under WCL 25(2)(a)".

Complete the identifying information at the top of Form RFA-1LC and send the form, WITH ALL APPLICABLE EVIDENCE ATTACHED, to the Workers' Compensation Board (see address below). The Board will contact you and all parties when it takes action on your client's case.

YOU MUST CERTIFY THAT YOU HAVE DISCUSSED THE ISSUE(S) OR ATTEMPTED TO CONTACT THE INSURER/EMPLOYER AND HAVE BEEN UNABLE TO SETTLE THE OUTSTANDING ISSUE(S).

YOU MUST SEND A COPY OF THIS FORM TO YOUR CLIENT, THE INSURER(S), OR DIRECTLY TO THE EMPLOYER OR ITS THIRD PARTY ADMINISTRATOR IF THE EMPLOYER IS SELF-INSURED.

Additional information about the Board, including information about Board forms, is available at the Board's web site: www.wcb.ny.gov. If you would like on-line access to your client's case, you can register for eCase using the registration instructions available on the Board website under the eCase link.

ADDITIONAL INFORMATION

Upon the submission of this form with the applicable documentary evidence, the Board will take immediate action to advance your client's claim toward resolution. Some of these actions include, but are not limited to the following:

- Proposing an Administrative Determination An Administrative Determination (AD) is a decision concerning your client's claim rendered by the Board. All the evidence in your client's file is examined prior to an AD being issued. Once an AD is sent to the parties, any party may object to the determination within 30 days. If there is no objection, the determination becomes final. Appearance at the Board is not necessary because acceptance of an AD indicates that all parties are satisfied with the resolution of the issue(s).

- Placing the claim into Conciliation for resolution If your client's claim is not controverted, the Board works with the parties and their representatives to secure all necessary documentation and resolve all outstanding issues in the claim. Once the file has been thoroughly reviewed, the Board will issue a Proposed Decision (PD) and send it to the parties, or will schedule a meeting at the Board with the parties, if a meeting is necessary. Once a PD is sent to the parties, any party may object to the determination within 30 days. If there is no objection, the determination becomes final. Appearance at the Board is not necessary because acceptance of a PD indicates that all parties are satisfied with the resolution of the issue(s).

- Notifying the parties of a Hearing before a WCL Judge If your client's claim involves an issue that requires a hearing or may require testimony, a hearing before a Workers' Compensation Law Judge may be necessary for resolution. A formal hearing requires a personal, virtually or telephonic appearance by all parties in the case at the Board hearing location most convenient to the claimant. The hearing will be recorded and an official record kept by the Board. While the WCL Judge will generally render a decision orally at the hearing, a written decision will be sent to all parties following the hearing. Parties may appeal the written decision to the Board's Administrative Review Division within 30 days of its filing.

- Referring the claim to the Administrative Review Division If your client's claim has been previously resolved by a lump sum settlement or a Section 32 Waiver Agreement, the Administrative Review Division will review your client's file to determine whether your client's claim should be reopened and further action taken.

Medical Treatment - Medication/Durable Medical Equipment/Treatment/Test - This form is to be used when a medical request has been denied and your client is requesting assistance from the Board regarding one of the reasons listed. If prior authorization has not been requested yet and is required, the health care provider must submit a Prior Authorization Request (PAR). Information regarding submitting Prior Authorization Requests or unpaid medical bills can be found on the WCB website www.wcb.ny.gov.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD PRESENTS, CAUSES TO BE PRESENTED, OR PREPARES WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO, OR BY AN INSURER, OR SELF INSURER, ANY INFORMATION CONTAINING ANY FALSE MATERIAL STATEMENT OR CONCEALS ANY MATERIAL FACT SHALL BE GUILTY OF A CRIME AND SUBJECT TO SUBSTANTIAL FINES AND IMPRISONMENT.

Notification Pursuant to the New York Personal Privacy Protection Law (Public Officers Law Article 6-A) and the Federal Privacy Act of 1974 (5 U.S.C. § 552a).

The Workers' Compensation Board's (Board's) authority to request that claimants provide personal information, including their social security number, is derived from the Board's investigatory authority under Workers' Compensation Law (WCL) § 20, and its administrative authority under WCL § 142. This information is collected to assist the Board in investigating and administering claims in the most expedient manner possible and to help it maintain accurate claim records. Providing your social security number to the Board is voluntary. There is no penalty for failure to provide your social security number on this form; it will not result in a denial of your claim or a reduction in benefits. The Board will protect the confidentiality of all personal information in its possession, disclosing it only in furtherance of its official duties and in accordance with applicable state and federal law.