



South Carolina
House of Representatives
Legislative Oversight Committee

WORKERS' COMPENSATION COMMISSION STUDY REPORT



2024



South Carolina House of Representatives Legislative Oversight Committee

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LEGISLATIVE OVERSIGHT COMMITTEE OVERVIEW

AUTHORITY

The Legislative Oversight Committee, created in December 2014, is a vehicle for oversight used by the House of Representatives. The Committee's specific task is to conduct legislative oversight studies and investigations of state agencies at least once every seven years. The Committee has the authority to conduct studies at any time of state agencies within the Committee's jurisdiction, even outside of the seven-year cycle.

VISION

For South Carolina agencies to become, and continuously remain, the most effective state agencies in the country through processes which eliminate waste and efficiently deploy resources thereby creating greater confidence in state government.

MISSION

Determine if agency laws and programs are being implemented and carried out in accordance with the intent of the General Assembly and whether they should be continued, curtailed, or eliminated. Inform the public about state agencies.

SUBCOMMITTEES



Economic Development, Transportation, and Natural Resources



Education and Cultural Affairs



Healthcare and Regulatory



Law Enforcement, Civil and Criminal Justice

METHODOLOGY

The Committee evaluates:

- ❖ the application, administration, execution, and effectiveness of the agency's laws and programs;
- ❖ the organization and operation of the agency; and
- ❖ any conditions or circumstances that may indicate the necessity or desirability of enacting new or additional legislation pertaining to the agency.

STUDY PROCESS

01

Full Committee schedules agency for study and gathers initial information from agency and the public

02

Subcommittee investigates through meetings and information requests

03

Subcommittee publishes report

04

Full Committee considers subcommittee report and may conduct further investigation

05

Full Committee publishes report

AGENCY OVERVIEW

WORKERS' COMPENSATION COMMISSION

The South Carolina Workers' Compensation Commission was created on September 1, 1935, in response to the rising number of industrial accidents and resulting negligence litigation plaguing both employees and employers. The South Carolina Workers' Compensation Act sought to relieve employers from burdensome litigation in exchange for an expedited process limiting their liability to payment for medical bills and lost wages while simultaneously providing a reliable framework for employees to seek compensation for work-related injuries without regard to an employer's negligence.

The Workers' Compensation Commission is responsible for administering the workers' compensation law in South Carolina. The Commission works closely with the Governor, the General Assembly, and the Commission's many constituents to ensure that the workers' compensation system is fair, equitable, and responsive to the needs of the citizens of South Carolina.

MISSION

The mission of the South Carolina Workers' Compensation Commission is to provide an equitable and timely system of benefits to injured workers and employers in the most responsive, accurate, and reliable manner possible.

CHAIRMAN

T. Scott Beck

EXECUTIVE DIRECTOR

Gary M. Cannon

EMPLOYEES

53

Authorized FTEs

FUNDING

\$8,400,000

Annual Operating Budget

ORGANIZATION UNITS

Commissioners
Office of Executive Director
Information Technology
Claims
Judicial
IMS

SUCSESSES & CHALLENGES

Identified by the agency.

SUCSESSES

- ❖ Current WCCIT Staff have multiple years and extensive levels of related experience to form a cohesive team.
- ❖ Institutional Knowledge
- ❖ Employment with State Government, benefits, and sense of pride for serving the public good.
- ❖ Cooperative relationships with state agencies and local governments for attaining venues for hearings.

COMMITTEE MEETINGS

05

3/9/2023
6/6/2023
7/19/2023
11/21/2023
2/29/2024

CHALLENGES

- ❖ Institutional Knowledge -Eligible for Retirement
- ❖ Salaries of current employees have not maintained a level to be competitive with other state agencies and the private sector.
- ❖ The potential safety and security of the Commissioners.

FINDINGS

During the study of the Workers' Compensation Commission (Commission), the Law Enforcement and Criminal and Civil Justice Subcommittee adopted **18 findings** pertaining to leadership, the budget, compensation coverage, funding, fines, collections, efficiency, security, payment of benefits, filing claims, technology, fraud, legal representation, and staffing.

Findings note information a member of the public or the General Assembly may seek to know or upon which they may desire to act.

FINDING #1

Since its inception, 65 individuals have served on the Commission, 29 of whom have been attorneys and 36 of whom have been non-attorneys.

In 1935, the South Carolina General Assembly created the South Carolina Industrial Commission to administer the state's first workers' compensation laws. In 1986, the General Assembly renamed the Commission the South Carolina Workers' Compensation Commission.¹ The Commission consists of seven commissioners appointed by the governor upon the advice and consent of the Senate for six-year staggered terms.² The seven commissioner offices are independent offices subject only to the supervisory authority of the governor.³ The governor also designates one commissioner as chairman of the Commission upon the advice and consent of the Senate who serves a two-year term.⁴ The chairman executes policies established by the Commission. Since

its creation, there have been 65 commissioners, 29 of whom have been attorneys and 36 of whom have been non-attorneys.⁵

FINDING #2

From 2009-2023, the executive director of the Commission served as the chief financial officer, chief procurement officer, and ombudsman for the Commission.

In 2009, the Commission employed a full-time finance manager and a full-time ombudsman.⁶ After those positions became vacant, the Commission analyzed the duties and responsibilities of each position and determined that neither constituted full-time positions.⁷ Instead, the Commission determined that the duties of the finance officer and ombudsman could be absorbed into the executive director's office and shared by the

NEIGHBORING STATES WORKERS' COMPENSATION SYSTEMS

	South Carolina	Georgia	North Carolina	Virginia
Population	5.3 million	11 million	10.7 million	8.7 million
Claims filed	58,000	111,075	57,616	33,716
Budget	\$8,527,641	\$20,117,470	\$22,847,114	\$44,000,000
Staff	53	145	140	299

Figure 1. Workers' Compensation Systems of neighboring states in the southeast.

executive director and his executive assistant.⁸ See Agency Internal Change #1.

FINDING #3

Compared to surrounding states, the Commission operates with a modest staff and budget.

The Commission receives an annual \$8.4 million budget appropriation.⁹ The Commission’s 52 employees¹⁰ process approximately 26,000 WCC Form 12(A) claims annually.¹¹ Although it is difficult to make exact comparisons to other state compensation systems, a review of appropriations, number of personnel, and number of claims filed in surrounding southeastern

states suggests the Commission operates with a modest staff and budget.

FINDING #4

With certain exceptions, South Carolina employers with four or more employees employed in the state are required to maintain workers’ compensation coverage.

With certain exceptions, every employer with four or more employees employed in the state on a full-time or part-time basis is required to maintain workers’ compensation insurance coverage.¹² The exceptions include agricultural employees, railroad and railway

WORKERS COMPENSATION COVERAGE REQUIREMENTS

States in which employers with <u>5 or more employees</u> must carry workers’ compensation insurance	Alabama, Mississippi, Missouri, Tennessee
States in which employers with <u>4 or more employees</u> must carry workers’ compensation insurance	Florida, Rhode Island, South Carolina
States in which employers with <u>3 or more employees</u> must carry workers’ compensation insurance	Arkansas, Georgia, New Mexico, North Carolina, Wisconsin
States in which employers with <u>2 or more employees</u> must carry workers’ compensation insurance	Virginia
States in which employers with <u>1 or more employees</u> must carry workers’ compensation insurance	Alaska, Arizona, California, Colorado, Connecticut, Delaware, District of Columbia, Hawaii, Idaho, Illinois, Kentucky, Maine, Maryland, Michigan, Nebraska, Nevada, New Jersey, Ohio, Oklahoma, Oregon, Pennsylvania, Vermont, Washington
States in which number of employees has <u>no bearing</u> on coverage requirements	Indiana, Iowa, Kansas, Louisiana, Massachusetts, Minnesota, Montana, New Hampshire, New York, North Dakota, South Dakota, Utah, West Virginia, Wyoming
States in which employers have the <u>option</u> of carrying workers’ compensation insurance	Texas
Note: most states have at least one industry exception to their general workers’ compensation insurance requirement (e.g., Florida generally requires businesses with four or more employees to carry coverage, but the state requires construction businesses with one or more employees to carry coverage).	

Figure 2. Worker compensation coverage requirements per state.

companies, federal employees, certain casual employees, certain real estate salespersons, corporate officers who elect to opt out, and “any person . . . who had a total annual payroll during the previous calendar year of less than three thousand dollars regardless of the number of persons employed during that period.”¹³ In other states, the required number of employees varies: one state allows optional coverage, while most states require anywhere between one and five employees for coverage to be mandatory.¹⁴

FINDING #5

Five compensation coverage options are available to employers in South Carolina: (1) commercial insurance carriers; (2) a self-insured fund; (3) individual self-insurance; (4) the State Accident Fund; (5) the South Carolina Assigned Risk Pool.

Employers covered by the provisions of the South Carolina Workers’ Compensation Act are required to maintain insurance sufficient for the payment of compensation.¹⁵ The State of South Carolina does not underwrite workers’ compensation coverage for employees. Instead, employers in the state with four or more employees are required to secure compensation for their covered employees through one of the following: (1) a commercial insurance carrier of their choosing; (2) by becoming a member of a self-insured fund; (3) by becoming individually self-insured; (4) through the State Accident Fund; or (5) through the South Carolina Assigned Risk Pool, a program administered by the National Council on Compensation Insurance.¹⁶

FINDING #6

Less than 25% of the Commission’s funding comes from general appropriations.

Less than 25% of the Commission’s funding comes from general appropriations. The remainder of the Commission’s yearly funding comes from fines and fees that the Commission collects internally.¹⁷ Fines include those issued to insurance carriers for failure to respond to requests for information¹⁸ and fines issued to employers for failure to maintain compensation coverage.¹⁹

FINDING #7

Prior to January 2024, the Commission had not requested an increase in the amount of funds received from the self-insurance tax in nearly a decade.

Self-insured employers are required to provide all appropriate workers’ compensation benefits to their injured workers in accordance with South Carolina law, secure excess insurance, and post with the Commission a surety in the form of a surety bond or letter-of-credit to be determined by the Self-Insurance Division.²⁰ The Commission approves all applications for employers to be self-insured for workers’ compensation insurance.²¹ The Commission’s Self-Insurance Division oversees 85 self-insured employers and nine funds, providing coverage to about 2,053 employers and 350,000 workers.²² Approved self-insurers are required to pay the state a self-insurance tax at the end of their fiscal year. The tax rate is 2.5% of the self-insurer’s total paid expenses for the program in South Carolina.²³ Over the last ten years, no self-insured South Carolina employer failed to pay the benefits afforded an injured employee under the Workers’ Compensation Act.²⁴

The self-insurance tax generates \$5 million annually. In 2014, the General Assembly amended section 42-5-190 of the Code, which authorized the Commission to retain annually the greater of 50% or \$2.2 million to use to pay the salaries and expenses of the Commission.²⁵ The balance of the tax revenue is transferred to the general fund.²⁶

The Commission may soon face a loss of revenues in its earmarked fund, however. Specifically, as the Commission implements upgrades to its IT Legacy System, “Stakeholders will have access and the ability to download and print case file documents at no charge. This will result in the loss of current revenues.”²⁷ In addition, “With the upgrade, insurance carriers will be able to file required reports electronically, decreasing the potential for being fined for not filing the report by the required date.”²⁸ Finally, “As the outreach program expands, businesses will become educated about the requirements of workers’ compensation insurance,

which could decrease the amount of fine operating revenues.”²⁹

During this study, the Commission acknowledged that in order to offset these eventual losses, it is time for the Commission to request an increase in the amount of funds received from the self-insurance tax, something the Commission has not requested since the legislature amended section 42-5-190 in 2014.³⁰ See Agency Internal Change #2.

FINDING #8

In FY 2022, the Commission’s Compliance Division assessed \$4.9 million in fines and penalties but collected only \$686,000 from noncompliant employers.

Section 42-5-40 of the Code provides that an employer who is required to maintain coverage but neglects to do

so “shall be punished by a fine of one dollar for each employee at the time of the insurance becoming due, but not less than ten dollars nor more than one hundred dollars for each day of such refusal or neglect”³¹ Additionally, section 42-3-105 provides that the Commission “is authorized to double the amount of fines and penalties assessed for each violation of the workers’ compensation law [T]he minimum amount of the penalty assessed shall be seven hundred fifty dollars a year of noncompliance and the maximum amount of the penalty shall be one thousand dollars a year of noncompliance.”³² Section 42-3-105 expressly provides that the Commission “is further authorized to retain and expend all revenues received as a result of these collections.”³³

On average, the Commission’s four compliance officers initiate about 1,700 investigations annually.³⁴ However, in FY2022, of the \$4.9 million in assessed fines and penalties for noncompliance, the Commission waived

FIVE-YEAR EMPLOYER NON-COMPLIANCE FINES ACTIVITY REPORT

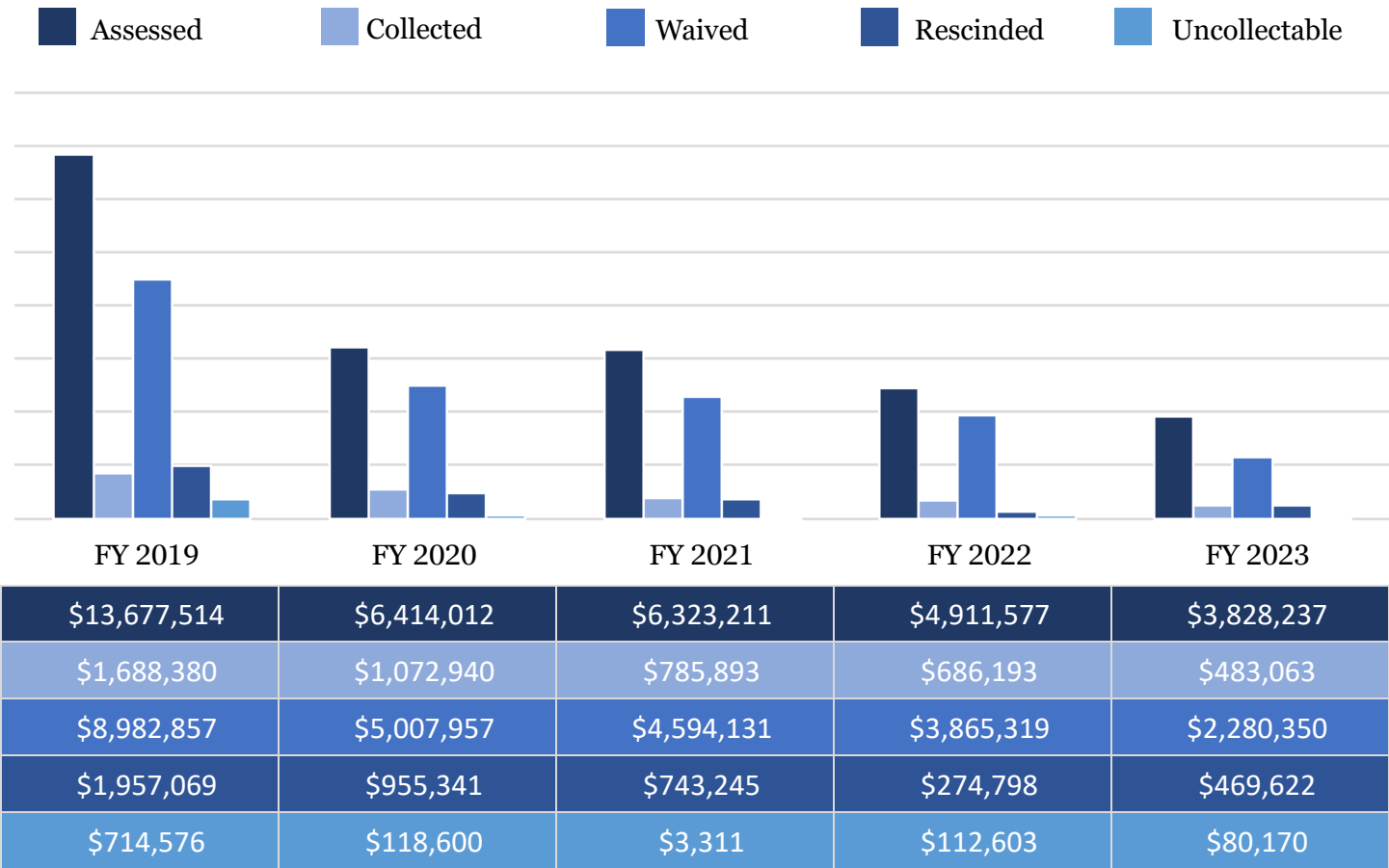


Figure 3. Amounts of employer non-compliance fines assessed, collected, waived, rescinded, and uncollected for the past five years.

FIVE-YEAR EMPLOYER COMPLIANCE ACTIVITY REPORT

	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
Number of <u>Employers</u> brought into compliance	571	433	397	460	287
Number of <u>Employees</u> now covered due to employer compliance	5,212	3,813	3,718	3,814	2,573

Figure 4. Number of employers brought into compliance and subsequent employees now covered due to employer compliance for the past five years.

\$3.8 million and collected \$686,000, which represents only 14% of the assessed amount.³⁵ Similarly, in FY2023, of the \$3.8 million in assessed fines and penalties, the Commission waived \$2.28 million³⁶ and collected \$483,063, which represents only 13% of the assessed amount. Indeed, over the last five fiscal years, the Commission collected a high of 17% in assessed fines and penalties (FY 2020), and a low of 12% (FY 2019 and 2021).

According to the Commission, the goal is to bring employers into compliance with coverage requirements, not merely to assess and collect fines and penalties from noncompliant employers.³⁷ The Commission reported that the discrepancy between the amount assessed and the amount collected is because the original amount assessed is the maximum amount allowed by statute that the noncompliant employer would pay if a commissioner ordered a hearing. According to the Commission, if the noncompliant employer obtains coverage, the Commission has the discretion to reduce the assessed fine to the minimum amount required by statute.³⁸ The Commission believes this practice accomplishes the goal of increasing the number of covered employees.³⁹ Indeed, FY 2022 resulted in 460 employers obtaining coverage, which provided compensation coverage to over 3,800 employees who were not previously covered.⁴⁰ Likewise, FY 2023 resulted in 287 employers obtaining coverage, which provided compensation coverage to over 2,573 employees who were not previously covered.⁴¹

However, the Commission acknowledged that part of the discrepancy is also a reflection of the difficulties inherent in attempting to collect from noncompliant employers.⁴²

FINDING #9

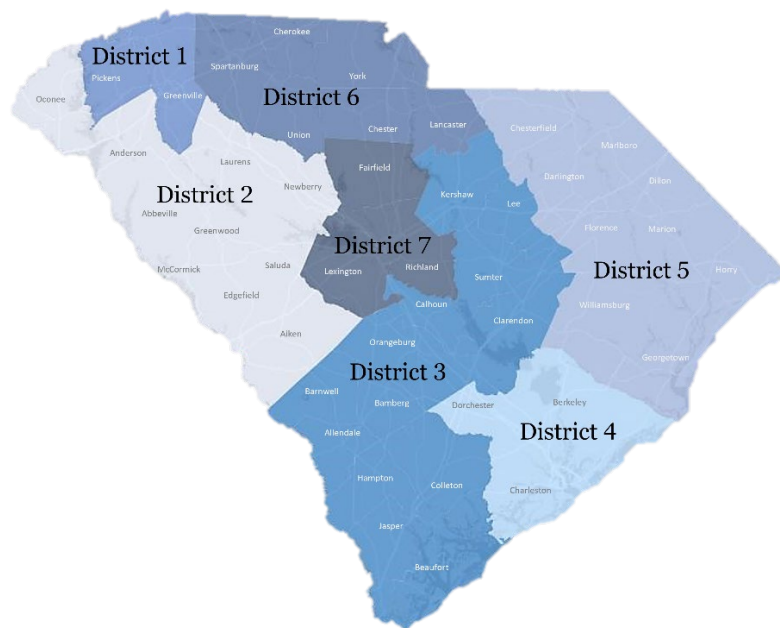
The Commission lacks an effective means of collecting assessed fines.

When the Commission becomes aware of a noncompliant employer, the Compliance Division institutes an investigation of the employer and sends a notice of violation to the employer.⁴³ If the noncompliant employer fails to respond to multiple notice of violation letters, a rule to show cause hearing is set before a jurisdictional commissioner at which the Compliance Division requests the jurisdictional commissioner to assess maximum fines and penalties against the employer.⁴⁴ If the employer fails to pay the fines and penalties, the matter is turned over to Governmental Enterprise Accounts Receivable Collections (GEAR) for collection.⁴⁵

GEAR is a collection program authorized by Section 12-4-580 of the Code that allows the South Carolina Department of Revenue (SCDOR) to assist qualifying entities in collecting debts owed to claimant agencies.⁴⁶ GEAR collection efforts include individual income tax refund garnishments, wage garnishments, tax liens, bank account levies, and license revocations.⁴⁷ GEAR also allows debtors to set up payment plans to satisfy debts.⁴⁸

According to the Commission, GEAR's utility as a tool for debt collection is limited because the program is helpful only when used to collect debts from individuals with verifiable social security numbers.⁴⁹ See Agency Internal Change #3.

HEARING DISTRICT MAP



District 1 – Greenville

Greenville, Pickens

District 2 – Anderson

Abbeville, Aiken, Anderson, Edgefield, Greenwood, Laurens, McCormick, Newberry, Oconee, Saluda

District 3 – Orangeburg

Allendale, Bamberg, Barnwell, Beaufort, Calhoun, Clarendon, Colleton, Hampton, Jasper, Kershaw, Lee, Orangeburg, Sumter

District 4 – Charleston

Berkeley, Charleston, Dorchester

District 5 – Florence

Chesterfield, Darlington, Dillon, Florence, Georgetown, Horry, Marion, Marlboro, Williamsburg

District 6 – Spartanburg

Cherokee, Chester, Lancaster, Spartanburg, Union, York

District 7 – Richland

Fairfield, Lexington, Richland

Figure 5. Map of Workers' Compensation Commission hearing districts and the counties included in each one.

FINDING #10

It is not known when or by what method of determination the Commission created the seven long-existing jurisdictional districts.

The Commission determines the assignment of districts within the state and the district assignment of each commissioner.⁵⁰ Over 30 years ago, the Commission divided the state into seven jurisdictional districts for the purpose of conducting individual commissioner hearings. The Commission created the districts in an effort to evenly distribute the hearing caseload of commissioners across the state.⁵¹ Prior to 2018, section 42-17-20 of the Code required the Commission to hold hearings in all of the state's 46 counties.⁵² In 2018, the General Assembly amended section 42-17-20 of the Code to allow the Commission to conduct hearings "in the district in which the injury occurred, but no greater than 75 miles from the county seat of the county in which the injury occurred, unless otherwise agreed to by the parties and authorized by the commission."⁵³ The amendment fixed the districts "as those designated by the commission and in effect as of January 1, 2018."⁵⁴

FINDING #11

The Commission lacks designated venues in which to hold single commissioner hearings.

Except for Richland, Greenville, and Spartanburg counties, the Commission does not have designated venues in which to hold single commissioner hearings. Instead, subject to availability, various local governments allow the Commission to use county and municipal courtrooms, county and municipal council chambers, and conference rooms.⁵⁵ Technical colleges provide classrooms, training rooms, and conference rooms.⁵⁶ Currently, 82 sites are available on a limited basis in the seven districts in which hearings can be conducted.⁵⁷ However, site availability is not guaranteed. According to the Commission, the availability of hearing venues is "a moving target for us that we struggle with on a regular basis."⁵⁸

FINDING #12

The Commission lacks recurring funding for security (e.g., officers, technology).

Even when the Commission is successful in securing venues to hold commissioner hearings, the venues often lack adequate security. Commission Chairman Beck stated that he has been “verbally accosted . . . and threatened” at hearings.⁵⁹ When it comes to known threats, the Commission “typically bring[s] those cases to Columbia” because the Commission currently has “a relationship with the City of Columbia and the Richland County Sheriff's Office, where [the Commission] can request armed security” paid for by the Commission.⁶⁰ No such relationship exists with many other jurisdictions, however, and the Commission lacks the funds to provide the needed security. Chairman Beck believes that the need to implement security measures for all commissioner hearings is imperative because “we’re getting to the point where we’re . . . on borrowed time dealing with some of these [security] issues.”⁶¹

FINDING #13

Payment of benefits by paper check remains the default method of payment.

The Commission recognizes the many problems inherent in payment of compensation benefits by paper check—namely, such a system is inefficient, does not bolster the agency’s desire to provide good customer service, and, given the advances in technology since payment by check was adopted as the norm, it is no longer a good business practice.⁶² S.C. Code Ann. Regs 67-1602(C) provides that “[t]he employer, employer’s representative, or other payer shall make each payment in the form of a check, unless the parties mutually agree to an alternative payment method as provided for in this section. An employer, employer’s representative, or other payer may use an electronic payment system . . .”⁶³ Thus, although electronic payment of benefits is permitted by regulation, as of 2023, “[d]efault payment shall be by check.”⁶⁴ See Agency Internal Change #4.

FINDING #14

Regulation 67-206, which governs the filing of a claim, does not properly reflect the parties who may file a claim.

According to the Commission, “Filing a claim, at its essence, is delivering to the Commission enough

information for the Commission to create a record that [a] claim has been asserted.”⁶⁵ Pursuant to S.C. Code Ann. Regs. 67-206, an injured worker may file a claim for benefits in two ways: (1) by filing a WCC Form 50 (or, in the event of a death claim, a WCC Form 52); or (2) by filing a letter with the Commission in accordance with S.C. Code Ann. Regs. 67-206(C).⁶⁶ “Filing a claim does not request a hearing nor is the employer’s representative required to file a Form 51 or 53.”⁶⁷

Yet, as acknowledged by the Commission during its testimony before the House Oversight subcommittee, an employer (or its insurance carrier) may file a claim by filing a WCC Form 12A using Electronic Claims Reporting (EDI).⁶⁸ However, this method of filing a claim is not expressly reflected in S.C. Code Ann. Regs. 67-206 or any other regulation.

FINDING #15

The Commission is replacing its claims management system, which will allow all parties involved in workers’ compensation claims to submit claims, complete required reports and forms, and pay applicable fines and fees electronically.

The first phase of the upgrade, which has been completed, allows parties to register, log on, and view all documents associated with their case, as well as print documents free of charge.⁶⁹ The focus of the second phase is the filing of forms with no associated filing fee, which is being tested by law firms and other stakeholders. The Commission expects this phase to be complete “any time now.”⁷⁰ The focus of the third phase is the filing of forms with an associated filing fee, which the Commission anticipates will be available by the end of January 2024.⁷¹

The goal is to equip parties with the ability and option to e-pay, e-view, and e-file any form involving a workers’ compensation claim. According to the Commission, “Upon implementation of the upgrade[,] the cost savings to all stakeholders is calculated to be \$75,000 per year by eliminating charges for copies of records and documents requested by stakeholders.”⁷² Additionally, because stakeholders will be allowed to submit required reports electronically thereby reducing the costs of fines and

penalties associated with late fees, the savings to stakeholders is estimated to be \$500,000 annually.⁷³

FINDING #16

The Commission has not invested in training designed to improve commissioners' ability to identify and mitigate workers' compensation fraud.

Pursuant to section 42-9-440 of the Code, "The commission shall report all cases of suspected false statement or misrepresentation . . . to the Insurance Fraud Division of the Office of Attorney General for investigation and prosecution, if warranted . . ." ⁷⁴ From 2016 to 2022, the Commission has referred only 13 cases of suspected fraud to the Attorney General's Office.⁷⁵

The Commission admits that its members and staff have not had any formal fraud training to help them identify, prevent, and report fraud, nor has the Commission ever requested or reached out to a third-party vendor to secure such training.⁷⁶ Instead, in identifying potential fraud, the Commission chairman stated that the Commission relies on common sense, among other factors.⁷⁷

FINDING #17

The Commission encounters difficulty obtaining approval from the South Carolina Attorney General's Office to hire counsel.

Section 1-7-170(A) of the Code provides that with the exception of attorneys hired by the General Assembly and the judicial department, "[a] department or agency of state government may not engage on a fee basis an attorney at law except upon the written approval of the Attorney General and upon a fee as must be approved by him."⁷⁸ According to the Commission, in recent years it has seen an increase in pro se litigants filing complaints naming commissioners as defendants.⁷⁹ However, the Commission states that it has been unable to obtain approval from the Attorney General's Office to hire representation.⁸⁰

Specifically, the Commission testified it was unable to obtain approval from the Attorney General's Office to

provide legal counsel for a commissioner involved in litigation as a result of decisions made during the course of his or her official duties and responsibilities. Upon receipt of the decision not to provide the commissioner legal representation from the Attorney General's Office, the Commission requested approval to engage outside counsel to represent the commissioner in the litigation. According to the Commission, the request was denied without explanation. Since legal representation was not approved, it was necessary for the commissioner to use personal funds to pay for legal representation.

The Commission also reported issues with obtaining approval to retain outside counsel for highly specialized areas of the law. According to the Commission, on more than one occasion, it needed outside counsel to represent it in highly specialized areas of law. Even after justifying the request for a higher rate due to the specialization in that area of the law, the requests were denied.⁸¹

Chairman Beck met with the Attorney General and his staff concerning obtaining approval from the Attorney General's Office to provide legal counsel for commissioners involved in litigation as a result of decisions made during the course of their official duties and responsibilities. According to the Commission, "The Attorney General's Office took the position that [it] will continue to consider each request for approval to hire outside counsel on a case-by-case basis."⁸²

FINDING #18

Forty-six percent of the Commission's employees are eligible for retirement in five years.⁸³

As of June 30, 2023, the Commission had 52 employees, 50 of which are considered full-time.⁸⁴ There has been very little turnover at the Commission during the last 15 years.⁸⁵ However, of the 50 current full-time employees, seven are working retirees, 16 are currently eligible to retire, and seven will be eligible to retire in the next five years. Thus, 32% are currently eligible to retire at any time, and 46% will be eligible to retire in the next five years.⁸⁶

STUDY-RELATED INTERNAL CHANGES

During the study process, the Commission implemented **six internal changes** related to participation in the study process.

INTERNAL CHANGE #1

As noted in Finding 2, from 2009-2023, the executive director of the Commission also served as the chief financial officer, chief procurement officer, and ombudsman for the Commission. According to the Commission, as a result of the in-depth analysis of the Commission's duties, responsibilities, and business processes for the House Legislative Oversight Committee as well as the resignation of the Commission's human resources manager in July of 2023, the executive director and the chairman expanded the duties of the Commission's human resources manager position to include management of the financial accounting, budgeting, and procurement programs along with human resources.⁸⁷ The Division of Human Resources approved the reclassification from Human Resources Manager I to Administrative Manager I in August of 2023. This newly classified position is a direct report to the executive director.⁸⁸ The employee, who was promoted from within the agency, began in the new position on August 17, 2023.⁸⁹ The executive director's office continues to handle the ombudsman duties and responsibilities.⁹⁰

INTERNAL CHANGE #2

As noted in Finding 7, section 42-5-190 of the Code authorizes the Commission to assess a maintenance tax of 2.5% of the self-insured actual costs for the previous year and allows the Commission to retain annually the greater of 50% or \$2.2 million dollars of the maintenance tax revenues to be used to pay the salaries and expenses of the Commission. The balance of the funds must be remitted to the State Treasurer.

Because of continual increases in its annual operating expenses and projected continual declines in annual operating revenues, in its FY 2024-2025 Agency Budget Plan the Commission proposed that the General

Assembly adopt a proviso suspending for the current fiscal year the provision in section 42-5-190 requiring the Commission to remit the balance of the maintenance tax revenues to the General Fund.⁹¹

INTERNAL CHANGE #3

As noted in Finding 9, the current GEAR Program is an ineffective collection tool against corporate entities because the program is limited to using social security numbers to track individual debtors. During this study, the Commission became aware of a new SCDOR pilot program that will enable qualified agencies to pursue corporate entities using federal tax identification numbers. Participation in the program promises to provide the Commission with another avenue to collect outstanding fines for noncompliance of coverage requirements from employers. On October 25, 2023, the Commission contacted the SCDOR and, after submitting the required information, SCDOR accepted the Commission into the pilot program on November 13, 2023.⁹²

INTERNAL CHANGE #4

In 2023, the Commission convened an advisory committee to consider whether the paper check default method remained the best method to deliver workers' compensation benefits to claimants.⁹³ On November 13, 2023, pursuant to S.C. Code Ann. section 1-23-110(A)(3) (2005 & Supp. 2023), the Commission submitted proposed language and Notice of a Public Hearing to the State Register to amend S.C. Code Ann. Regs. 67-1602 to allow payments of temporary disability and reimbursements for expenses under S.C. Code Ann. Regs. 67-1601 to be made by electronic payment systems subject to certain conditions.⁹⁴ The proposed language was published in the State Register on November 27, 2023, and the Commission held a public hearing on January 22, 2024.⁹⁵ Following the public hearing, on

January 24, 2024, the Commission submitted the proposed amendment to Reg. 67-1602 to the State Register.⁹⁶

INTERNAL CHANGE #5

Upon the filing of a WCC Form 12A, an employer may deny the case by filing a WCC Form 19 with the Claims Department.⁹⁷ Prior to 2024, nothing on WCC Form 19 expressly notified an injured worker that he or she was responsible for requesting a hearing or taking further action to preserve his or her potential claim for benefits.⁹⁸ However, the Commission has recently revised WCC Form 19, adding language that states, “A Claimant whose case has been denied may file a WCC

Form 50 Employee Request for Hearing to request a hearing and file the claim with the Commission.”

INTERNAL CHANGE #6

As noted in Finding 17, the Commission has experienced issues with obtaining approval from the Attorney General’s Office to engage outside counsel to represent employees of the Commission when actions are brought against them for decisions made in the course of their employment. In its FY 2024-2025 Agency Budget Plan, the Commission requested a proviso revision exempting the Commission from the provisions of S.C. Code Ann. § 1-7-170.⁹⁹

RECOMMENDATIONS

During the study of the Commission, the Law Enforcement, Criminal and Civil Justice Subcommittee (Subcommittee) of the House Legislative Oversight Committee (Committee) adopts **10 recommendations**.

With any study, the Committee recognizes **these recommendations (e.g., continue, curtail, improve areas potentially, and/or eliminate agency programs, etc.) will not satisfy everyone nor address every issue or potential area of improvement at the agency**. Recommendations are based on the Commission’s self-analysis requested by the Committee, discussions with Commission personnel during multiple meetings, and analysis of the information obtained by the Committee. This information, including, but not limited to, the Initial Request for Information, Accountability Report, Restructuring Report, and videos of meetings with agency personnel, is available on the Committee’s website.

EFFICIENCY

RECOMMENDATION #1

The Committee recommends that the Commission conduct a study to determine the effectiveness of the SCDOR pilot program.

As noted in Agency Internal Change #3, the Commission became aware of a new SCDOR pilot program that will enable qualified agencies to pursue corporate entities by using federal tax identification numbers. According to the Commission, SCDOR has approved the Commission’s application and has accepted the Commission into the

program, which will provide the Commission an additional avenue to collect outstanding fines for noncompliance of coverage requirements from employers.

The Committee recommends that Commission leadership conduct a study assessing the effectiveness of the pilot program regarding the Commission’s corporate fine and penalty collection efforts by comparing collection of fines and penalties from corporate entities in past years with collection of those fines and penalties post pilot program implementation. The Commission must submit the report to the House Legislative

Oversight Committee within one year of the issuance of the study.

RECOMMENDATION #2

Once the Commission's case management system is fully upgraded, the Committee recommends that the Commission conduct a study to evaluate the efficiency of online payment of claims and report the findings to the House Oversight Committee within six months of publication of this report.

As noted in **Finding 15**, the Commission is upgrading its claims management system with the goal of equipping parties with the ability and option to e-pay, e-view, and e-file any form involving a workers' compensation claim. The Commission should inform the House Legislative Oversight Committee when the upgrade is complete. The Committee recommends that the Commission conduct a study to evaluate the efficiency of online payments of claims. The Commission shall report its findings to the House Legislative Oversight Committee within six months of publication of this report.

RECOMMENDATION #3

The Committee recommends that the Commission conduct a study to determine the funding needed for Commission security.

As noted in **Finding 12**, the Commission expressed a need for additional funding for security given current and future security concerns. The Committee recommends that the Commission conduct a study to determine the funding needed for adequate Commission security and update the Committee with the Commission's findings within six months of the publication of the Full Committee report.

FRAUD

RECOMMENDATION #4

The Committee recommends that the Commission post contact information for the Insurance Fraud Division of the South Carolina Department of Insurance conspicuously on the agency's website to provide a way for the public to report fraud, waste,

abuse, and wrongdoing specific to workers' compensation benefits.

Of the suspected fraud cases referred to the Attorney General's Office each year by the Commission, most are made by commissioners following commissioner hearings.¹⁰⁰ However, the Commission recognizes that fraud can be perpetrated in a variety of ways, including by those who knowingly elect to operate businesses without compensation insurance.¹⁰¹ Posting contact information for the Insurance Fraud Division of the South Carolina Department of Insurance on the Commission's website will make the public aware that the Commission welcomes the public's assistance in reporting suspected compensation benefits fraud.

HUMAN RESOURCES

RECOMMENDATION #5

The Committee recommends that the Commission identify key positions within the Commission that may be vacant within the next five years and develop a plan for individuals to assume those positions.

Recruitment of employees is an issue for state agencies. Identifying a pool of potential employees to fill key positions in an agency takes time, strategy, and effort. As observed in Finding 18, 46% of agency staff is eligible to retire in five years. This finding underscores the significance of succession planning to avert risks associated with retirement and unexpected departures. Therefore, it is essential that the Commission identify key positions that may be vacant within the next five years and develop a plan for individuals to assume those positions. The plan should consider identifying and mentoring individuals from within the agency to assume key positions, as well as developing a recruitment and marketing strategy designed to identify and recruit individuals outside the agency to assume the potentially vacant positions.

RECOMMENDATION #6

The Committee recommends that the Commission request the Office of the State Inspector General (SIG) to conduct an employee satisfaction survey.

Commission leadership must report survey findings to the House Legislative Oversight Committee and include an action plan to address identified opportunities for improvement. The survey must be conducted within one year of approval of this report, and the results must be provided to the House Legislative Oversight Committee. Subsequent employee satisfaction surveys should be conducted every two years.

This recommendation requests the agency utilize the experience and expertise of the SIG to survey employee morale. The SIG has partnered with the House Legislative Oversight Committee in prior studies to provide this human resource information at no cost to the participating agency. The SIG's independence as a third party may mitigate any employee concern regarding the anonymous nature of the survey and its results, resulting in more candid and constructive responses. Agency leadership is disadvantaged if unaware of challenges or systemic issues within the agency.

Agency personnel did state that the Commission has utilized employee satisfaction reviews.¹⁰² The Commission should compare the results of its own internal employee satisfaction reviews to the results of the SIG's independent assessment.

— MODERNIZATION OF LAWS —

RECOMMENDATION #7

The Committee recommends the General Assembly consider amending S.C. Code Ann. Regs. 67-206 to clarify that the provisions of this regulation apply only to a claimant filing a claim with the Commission. The Commission further recommends that following the submission of the amended regulation to the General Assembly, the General Assembly approve S.C. Code Ann. Regs. 67-206 as amended.

As noted in Finding 14, the Commission testified that there are three ways a compensation claim can be filed with the Commission. The two ways that a claimant can file a claim are set forth in S.C. Code Ann. Regs. 67-206. This amendment amends the title of S.C. Code Ann. Regs. 67-206 to clarify that the provisions of Regulation 67-206 apply to a claimant.

RECOMMENDATION #8

The Committee recommends that the Commission amend S.C. Code Ann. Regs. 67-411 to provide that an employer files a claim when the employer files a WCC Form 12A with the Commission and that a claim is deemed to have been filed even if the employer's representative subsequently denies the case by filing a WCC Form 19 pursuant to S.C. Code Ann. Regs. 67-414(B). The Committee further recommends that following the submission of the amended regulation to the General Assembly, the General Assembly approve S.C. Code Ann. Regs. 67-411 as amended.

Regulation 67-411, which governs WCC Form 12A, does not expressly acknowledge an employer's filing of WCC Form 12A as the filing of a claim. This amendment makes clear that an employer's filing of a WCC Form 12A with the Commission constitutes the third way a compensation claim may be filed with the Commission.

RECOMMENDATION #9

The Committee recommends the General Assembly consider amending Section 1-7-170 of the South Carolina Code (Supp. 2023) to expressly exempt the Commission from the requirement of seeking approval from the Attorney General to engage on a fee basis an attorney at law.

As noted in Finding 17, Section 1-7-170(A) of the Code expressly exempts the General Assembly and the judicial department from the requirement that agencies of the state secure written approval of the Attorney General prior to hiring an attorney to represent employees of the agency when actions are brought against them. According to the Commission, it has experienced issues with obtaining approval from the Attorney General's

Office to engage outside counsel to represent the Commission as well as individual employees of the Commission when actions are brought against them for decisions made in the course of their employment at great cost to the employees.¹⁰³ The Commission maintains it has the funds to engage outside counsel to represent the Commission and employees of the Commission when actions are brought against Commissioners for exercising their official duties.¹⁰⁴ The Commission therefore desires to have the responsibility and authority for approving outside counsel in specialized areas of law to represent the Commission and its individual employees.

RECOMMENDATION #10

The Committee recommends that following submission of amended S.C. Code Ann. Regs. 67-1602 to the General Assembly, the General Assembly should approve the amended regulation.

As noted in Agency Internal Change #4, on January 24, 2024, the Commission submitted a proposed amendment to the State Register making electronic payment of benefits the default method of delivering workers' compensation benefits to claimants. The Committee recommends that following submission of amended S.C. Code Ann. Regs. 67-1602 to the General Assembly, the General Assembly should approve the amended regulation.

APPENDIX A

LAW CHANGE #1			
Law	Summary of Current Law(s) and Recommended Change(s)	Basis for Recommendation	Approval and Others Impacted
S.C. Regs. 67-206	<p><u>Current Law:</u> S.C. Regs. 67-206 sets forth the ways that a claimant may file a claim with the Commission.</p> <p><u>Recommendation:</u> Amend the title to specify that this regulation applies to the claimant.</p>	<p><u>Basis:</u> The Commission testified that there are three ways to file a claim. The two ways that a claimant may file are set forth in Reg. 67-206. This amendment clarifies that Reg. 67-206 applies to the claimant only.</p>	
Current Law Wording		Proposed Revisions to Law Wording	
<p>67-206. Filing a Claim.</p> <p>A. To file a claim, file with the Commission's Claims Department a Form 50, Form 52, or a letter as provided below.</p> <p>B. To file a claim on a Form 50 or Form 52, mark the box at the signature line which states "I am filing a claim. I am not requesting a hearing at this time."</p> <p>(1) Address and deliver the form to the Claims Department.</p> <p>(2) Filing a claim requires the WCC file number or the Coverage Coding Form 39 must be included. This requirement may be waived for unrepresented claimants.</p> <p>(3) Filing a claim does not request a hearing nor is the employer's representative required to file a Form 51 or 53.</p> <p>C. A letter filed with the Commission also files a claim. The letter should include the information listed in items (1) through (13) below:</p> <p>(1) Claimant's name (and worker's name, if different);</p> <p>(2) Claimant's address (and worker's address, if different);</p> <p>(3) Claimant's home and work telephone numbers (and worker's home and work telephone numbers, if different);</p>		<p>67-206. Filing a Claim, <u>Claimant.</u></p> <p>A. To file a claim, file with the Commission's Claims Department a Form 50, Form 52, or a letter as provided below.</p> <p>B. To file a claim on a Form 50 or Form 52, mark the box at the signature line which states "I am filing a claim. I am not requesting a hearing at this time."</p> <p>(1) Address and deliver the form to the Claims Department.</p> <p>(2) Filing a claim requires the WCC file number or the Coverage Coding Form 39 must be included. This requirement may be waived for unrepresented claimants.</p> <p>(3) Filing a claim does not request a hearing nor is the employer's representative required to file a Form 51 or 53.</p> <p>C. A letter filed with the Commission also files a claim. The letter should include the information listed in items (1) through (13) below:</p> <p>(1) Claimant's name (and worker's name, if different);</p> <p>(2) Claimant's address (and worker's address, if different);</p> <p>(3) Claimant's home and work telephone numbers (and worker's home and work telephone numbers, if different);</p>	

<p>(4) Claimant's social security number (and worker's social security number, if different);</p> <p>(5) Employer's name;</p> <p>(6) Employer's address;</p> <p>(7) Employer's telephone number;</p> <p>(8) Employer's insurance carrier, if known;</p> <p>(9) Date of injury;</p> <p>(10) The county in which the injury occurred;</p> <p>(11) Type of injury (to which area of body);</p> <p>(12) Description of the accident;</p> <p>(13) The WCC file number or Coverage Coding Form must be included.</p> <p>D. Failure to include any of the information above does not bar the claim if the information necessary to an issue in the claim is given to the Commission upon request.</p> <p>E. The Commission will notify the employer's representative a claim has been filed. The employer's representative shall immediately contact the claimant.</p>	<p>(4) Claimant's social security number (and worker's social security number, if different);</p> <p>(5) Employer's name;</p> <p>(6) Employer's address;</p> <p>(7) Employer's telephone number;</p> <p>(8) Employer's insurance carrier, if known;</p> <p>(9) Date of injury;</p> <p>(10) The county in which the injury occurred;</p> <p>(11) Type of injury (to which area of body);</p> <p>(12) Description of the accident;</p> <p>(13) The WCC file number or Coverage Coding Form must be included.</p> <p>D. Failure to include any of the information above does not bar the claim if the information necessary to an issue in the claim is given to the Commission upon request.</p> <p>E. The Commission will notify the employer's representative a claim has been filed. The employer's representative shall immediately contact the claimant.</p>
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LAW CHANGE #2

Law	Summary of Current Law(s) and Recommended Change(s)	Basis for Recommendation	Approval and Others Impacted
S.C. Regs. 67-411	<p><u>Current Law:</u> S.C. Regs. 67-411 governs WCC Form 12A, the employer's Report of Injury</p> <p><u>Recommendation:</u> Amend the regulation to provide that an employer files a claim when the employer files a WCC Form 12A with the Commission and that a claim is deemed to have been created even if the employer's representative subsequently denies the case by filing a WCC Form 19 pursuant to S.C. Regs. 67-414(B).</p>	<p><u>Basis:</u> Reg. 67-411, which governs WCC Form 12A is vague as it does not explicitly acknowledge an employer's filing of WCC Form 12A as the filing of a claim. This amendment makes it clear that the filing of a Form 12A by an employer creates a claim.</p>	

Current Law Wording	Proposed Revisions to Law Wording
<p>67-411. Employer's Report of Injury, Form 12A.</p> <p>A. Each employer shall keep a record of all injuries, fatal or otherwise, received by its employees in the course of their employment.</p> <p>(1) The record must be made on the Form 12A and retained or filed according to section B below.</p> <p>(2) The Commission shall not construe the filing of a Form 12A as an admission of liability on the part of the employer or the employer's representative.</p> <p>B. Employer's Responsibilities</p> <p>(1) The employer shall make a record of all work-related injuries reported by its employees on the Form 12A and retain the record for a period of two years.</p> <p>(2) When an injury requires less than five hundred dollars in medical treatment and does not cause more than one lost workday or permanency, the employer may pay for the medical treatment. The employer is not required to make a written report to the employer's representative or to the Commission.</p> <p>(3) If the employer denies the claim for injuries or does not elect to pay for the medical treatment, the employer shall send a copy of the Form 12A to the employer's representative immediately after the occurrence and knowledge of the injury.</p> <p>(4) When an injury requires five hundred dollars or more in medical treatments or when it is determined more than one workday will be missed as a result of the injury or there is likely to be permanency, the employer shall send a copy of the Form 12A to the employer's representative immediately.</p> <p>(5) The employer shall report all fatalities to its representative.</p> <p>C. Employer's Representative's Responsibilities</p> <p>(1) When an injury requires less than two thousand five hundred dollars in medical treatments and does not result in compensable lost time or permanency, the employer's representative shall retain the Form 12A filed by the employer for two years. The employer's representative shall make a report of the injuries</p>	<p>. 67-411. Employer's Report of Injury, Form 12A.</p> <p>A. Each employer shall keep a record of all injuries, fatal or otherwise, received by its employees in the course of their employment.</p> <p>(1) The record must be made on the Form 12A and retained or filed according to section B below.</p> <p>(2) The filing of a Form 12A by the employer with the Commission creates a claim, even if the employer's representative subsequently denies the case by filing a WCC Form 19 pursuant to R67-414B.</p> <p>(23) The Commission shall not construe the filing of a Form 12A as an admission of liability on the part of the employer or the employer's representative.</p> <p>B. Employer's Responsibilities</p> <p>(1) The employer shall make a record of all work-related injuries reported by its employees on the Form 12A and retain the record for a period of two years.</p> <p>(2) When an injury requires less than five hundred dollars in medical treatment and does not cause more than one lost workday or permanency, the employer may pay for the medical treatment. The employer is not required to make a written report to the employer's representative or to the Commission.</p> <p>(3) If the employer denies the claim for injuries or does not elect to pay for the medical treatment, the employer shall send a copy of the Form 12A to the employer's representative immediately after the occurrence and knowledge of the injury.</p> <p>(4) When an injury requires five hundred dollars or more in medical treatments or when it is determined more than one workday will be missed as a result of the injury or there is likely to be permanency, the employer shall send a copy of the Form 12A to the employer's representative immediately.</p> <p>(5) The employer shall report all fatalities to its representative.</p> <p>C. Employer's Representative's Responsibilities</p>

in this category to the Commission as required in R.67-412.

(2) When an injury requires two thousand five hundred dollars or more in medical treatments or results in compensable lost time or permanency, the employer's representative shall send the Form 12A to the Commission within ten business days after the occurrence and the employer's knowledge of the injury. In the event the injury was previously processed under section C(1) above, the Form 12A shall be filed with the Commission within ten business days of the employer's representative's knowledge the limits set in section C(1) above have been exceeded. The Form 12A shall be marked "Previously Processed As Medical Only."

(3) If the employer's representative, or the employer, denies the claim for injuries, the employer's representative shall notify the claimant in writing and send the Form 12A, a Form 19 (reference R.67-414), and a copy of the letter denying the claim to the Commission within ten business days after the occurrence and the employer's knowledge of the reportable injury.

(4) The employer's representative is required to report all fatalities to the Commission.

D. An unqualified self-insured employer shall file a Form 12A with the Commission within ten business days after the occurrence and knowledge of an injury, regardless of the nature or seriousness of the injury.

(1) When an injury requires less than two thousand five hundred dollars in medical treatments and does not result in compensable lost time or permanency, the employer's representative shall retain the Form 12A filed by the employer for two years. The employer's representative shall make a report of the injuries in this category to the Commission as required in R.67-412.

(2) When an injury requires two thousand five hundred dollars or more in medical treatments or results in compensable lost time or permanency, the employer's representative shall send the Form 12A to the Commission within ten business days after the occurrence and the employer's knowledge of the injury. In the event the injury was previously processed under section C(1) above, the Form 12A shall be filed with the Commission within ten business days of the employer's representative's knowledge the limits set in section C(1) above have been exceeded. The Form 12A shall be marked "Previously Processed As Medical Only."

(3) If the employer's representative, or the employer, denies the claim for injuries, the employer's representative shall notify the claimant in writing and send the Form 12A, a Form 19 (reference R.67-414), and a copy of the letter denying the claim to the Commission within ten business days after the occurrence and the employer's knowledge of the reportable injury.

(4) The employer's representative is required to report all fatalities to the Commission.

D. An unqualified self-insured employer shall file a Form 12A with the Commission within ten business days after the occurrence and knowledge of an injury, regardless of the nature or seriousness of the injury.

APPENDIX B

WORKERS' COMPENSATION FORMS

- ❖ WCC 12A
- ❖ WCC 12M
- ❖ WCC 19
- ❖ WCC 50
- ❖ WCC 51
- ❖ WCC 53

S.C. WORKERS' COMPENSATION COMMISSION – FIRST REPORT OF INJURY OR ILLNESS

EMPLOYER (NAME & ADDRESS INCL ZIP)		CARRIER/ADMINISTRATOR CLAIM NUMBER	OSHA LOG NUMBER	REPORT PURPOSE CODE
		JURISDICTION	JURISDICTION CLAIM NUMBER	
		INSURED REPORT NUMBER		
		EMPLOYER'S LOCATION ADDRESS (IF DIFFERENT)		LOCATION #
INDUSTRY CODE	EMPLOYER FEIN			PHONE #

CARRIER/CLAIMS ADMINISTRATOR		
CARRIER (NAME, ADDRESS, & PHONE #)	POLICY PERIOD TO	CLAIMS ADMINISTRATOR (NAME, ADDRESS & PHONE NO)
	CHECK IF APPROPRIATE <input type="checkbox"/> SELF INSURANCE	
CARRIER FEIN	POLICY/SELF-INSURED NUMBER	ADMINISTRATOR FEIN
AGENT NAME & CODE NUMBER		

EMPLOYEE/WAGE				
NAME (LAST, FIRST, MIDDLE)	DATE OF BIRTH	SOCIAL SECURITY NUMBER	DATE HIRED	STATE OF HIRE
ADDRESS (INCL ZIP)	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown	MARITAL STATUS <input type="checkbox"/> Unmarried/Single/Divorced <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unknown	OCCUPATION/JOB TITLE	
			EMPLOYMENT STATUS	
PHONE	# OF DEPENDENTS	NCCI CLASS CODE		
RATE PER: <input type="checkbox"/> DAY <input type="checkbox"/> MONTH <input type="checkbox"/> WEEK <input type="checkbox"/> OTHER:	DAYS WORKED/WEEK	FULL PAY FOR DAY OF INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO DID SALARY CONTINUE? <input type="checkbox"/> YES <input type="checkbox"/> NO		

OCCURRENCE/TREATMENT				
TIME EMPLOYEE BEGAN WORK <input type="checkbox"/> AM <input type="checkbox"/> PM	DATE OF INJURY/ILLNESS	TIME OF OCCURRENCE (<input type="checkbox"/>) CANNOT BE DETERMINED <input type="checkbox"/> AM <input type="checkbox"/> PM	LAST WORK DATE	DATE EMPLOYER NOTIFIED DATE DISABILITY BEGAN
CONTACT NAME/PHONE NUMBER	TYPE OF INJURY/ILLNESS		PART OF BODY AFFECTED	
DID INJURY/ILLNESS/EXPOSURE OCCUR ON EMPLOYER'S PREMISES? <input type="checkbox"/> YES <input type="checkbox"/> NO	TYPE OF INJURY/ILLNESS CODE		PART OF BODY AFFECTED CODE	
DEPARTMENT OR LOCATION WHERE ACCIDENT OR ILLNESS EXPOSURE OCCURRED		ALL EQUIPMENT, MATERIALS, OR CHEMICALS EMPLOYEE WAS USING WHEN ACCIDENT OR ILLNESS EXPOSURE OCCURRED		
SPECIFIC ACTIVITY THE EMPLOYEE WAS ENGAGED IN WHEN THE ACCIDENT OR ILLNESS EXPOSURE OCCURRED		WORK PROCESS THE EMPLOYEE WAS ENGAGED IN WHEN ACCIDENT OR ILLNESS EXPOSURE OCCURRED		
HOW INJURY OR ILLNESS/ABNORMAL HEALTH CONDITION OCCURRED. DESCRIBE THE SEQUENCE OF EVENTS AND INCLUDE ANY OBJECTS OR SUBSTANCES THAT DIRECTLY INJURED THE EMPLOYEE OR MADE THE EMPLOYEE ILL				CAUSE OF INJURY CODE
DATE RETURN(ED) TO WORK	IF FATAL, GIVE DATE OF DEATH	WERE SAFEGUARDS OR SAFETY EQUIPMENT PROVIDED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
		WERE THEY USED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
PHYSICIAN/HEALTH CARE PROVIDER (NAME & ADDRESS)		HOSPITAL OR OFF SITE TREATMENT (NAME & ADDRESS)	INITIAL TREATMENT	
			0 <input type="checkbox"/> No Medical Treatment	
			1 <input type="checkbox"/> MINOR: BY EMPLOYER	
			2 <input type="checkbox"/> MINOR CLINIC/HOSP	
			3 <input type="checkbox"/> EMERGENCY CARE	
			4 <input type="checkbox"/> HOSPITALIZED > 24 HOURS	
		5 <input type="checkbox"/> FUTURE MAJOR MEDICAL/ LOST TIME ANTICIPATED		

OTHER			
WITNESSES (NAME & PHONE #)			
DATE ADMINISTRATOR NOTIFIED	DATE PREPARED	PREPARER'S NAME & TITLE	PHONE NUMBER

South Carolina Workers' Compensation Commission

1333 Main Street, Suite 500

P.O. BOX 1715

Columbia, SC 29202-1715

(803) 737-5722



(For Commission Use Only:
ATTACH MAILING LABEL IDENTIFYING
INSURANCE CARRIER IN THIS AREA)

Minor Medical Claims for
Calendar Year _____

I. Carrier Identification

If missing or incorrect above

Insurance Carrier FEIN: _____ Insurance Carrier SCWCC Code No.: _____

Insurance Carrier Name: _____

II. Reporting Contact Address

☐ The address shown above is the correct contact for completion of this form.

OR

☐ Future editions of this form should be sent to the following address:

Address: _____

City: _____ State: _____ Zip: _____

III. Statistical Report includes ALL minor medical claims paid in the name of or under the authority of the named Carrier/Self-insurer during the calendar year.

Submitted by: _____ Telephone: _____
Preparer's Name

Total # minor medical claims filed during calendar year: _____

Total medical costs paid during calendar year: \$ _____

File this form with the Accident Reporting Division on or before April 1 following the reporting year. Only one report per carrier will be accepted.

South Carolina Workers' Compensation Commission

1333 Main Street, Suite 500

P.O. BOX 1715

Columbia, SC 29202-1715

(803) 737-5723



WCC File #: _____

Carrier File #: _____

Carrier Code #: _____

Employer FEIN #: _____

Claimant's Name: _____

Employer's Name: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Insurance Carrier: _____

Preparer's Name: _____ Law Firm: _____

Preparer's Phone #: _____

Compensation Paid:	Number of Weeks	From (m/d/yyyy)	To (m/d/yyyy)	Amount
1. Number of Weeks T.T.	_____	_____	_____	\$ _____
2. Number of Weeks T.P.	_____	_____	_____	\$ _____
3. Number of Weeks P.P.	_____	_____	_____	\$ _____
4. Disfigurement	_____	_____	_____	\$ _____
5. Agreement and Final Release	_____	_____	_____	\$ _____
Total Compensation Paid				\$ 0.00
6. Total Medical Benefits* Paid	_____	_____	_____	\$ _____
7. Funeral Benefits	_____	_____	_____	\$ _____

☐ Case Denied

Date of Injury: _____

(m/d/yyyy)

By signing this receipt, I acknowledge that I have received the compensation shown above.

By: _____

Claimant

By: _____

Employer's Representative

Date
(m/d/yyyy)

Print or type the name of the person, other than the claimant, receiving benefits and sign below.

By: _____

Report of Additional Fees and Recoupment

A. Carrier Reimbursement by Third Party	\$ _____
B. Attorney's Fee Paid by Employer	\$ _____
C. Attorney's Fee Paid by Claimant (Non-contingent fees only)	\$ _____

File this form with the Claims Department according to R.67-414 and R.67-1204. A person, other than the claimant, receiving benefits should sign on the line provided. * Do not include as medical costs fees paid for expert testimony, fees for determining carrier's liability, costs of autopsy, birth and death certificates and impartial examination. Form 19 must be filed within 16 days of final payment of compensation. Form 19 must be filed when a claim is denied.

South Carolina Workers' Compensation Commission

1333 Main Street, Suite 500 • Post Office Box 1715

Columbia, South Carolina 29202-1715

(803) 737-5723 www.wcc.sc.gov

WCC File #: _____

Carrier File #: _____

Carrier Code #: _____

Employer FEIN #: _____

Claimant's Name: _____ SSN: _____ - - Employer's Name: _____

Address: _____ Address: _____

City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____

Home Phone: () - Work Phone: () - Insurance Carrier: _____

Preparer's Name: _____ Law Firm: _____ Preparer's Phone #: () -

A claim for workers' compensation benefits is made based on the following grounds:☐ Injury ☐ Illness ☐ Repetitive Trauma ☐ Occupational Disease ☐ Physical Brain Injury ☐ Concurrent Jurisdiction

1. The claimant sustained an injury to _____ (Part(s) of Body Injured) on _____ (Month/Day/Year) in _____ county, state of _____.

2. Body part(s) affected are: _____

Briefly describe how the accident occurred. _____

3. Both the claimant and the employer were subject to the South Carolina Workers' Compensation Act at the time of injury.

4. The relationship of employer and employee existed at the time of injury.

5. At the time of the injury the claimant was performing services arising out of and in the course of employment.

6. Notice of the accidental injury was given to the Employer on _____ (Month/Day/Year) in the following manner: _____

☐ 7. Due to injury, the claimant is in need of (check one):☐ (a) medical examination and treatment for: _____☐ (b) additional medical examination and treatment for: _____☐ 8. Due to injury, the claimant requests temporary total disability benefits because of lost compensable time from work and wages for the period of: _____☐ 9. Due to the injury, the Claimant has permanent disability of the following nature and extent (check one):☐ (1) General Disability: ☐ Total ☐ Partial☐ (2) Specific Disability: ☐ Total ☐ Partial☐ (3) Wage Loss9a. Claimant at MMI: ☐ Yes ☐ No☐ 10. Due to the injury, the Claimant has a serious bodily disfigurement consisting of: _____

10a. At the time of the injury, the Claimant was paid weekly wages of \$_____, and demands accounting of days worked and wages earned as provided by law.

10b. Give names and addresses of all employers for whom the Claimant has worked since the date of the accident: _____

11. Further grounds or unusual aspects of claim: _____

11a. List names and addresses of all physicians or other medical specialists who have seen or treated the Claimant as a result of the accident: _____

11b. To the best of your knowledge, did you have any prior permanent disability? _____

If yes, describe: _____

12. Appropriate benefits as provided in the Act for the above grounds and other relief as the Workers' Compensation Commission may direct as just and proper.

☐ 13. I am filing a claim. I am not requesting a hearing at this time.

Estimated time needed for hearing: _____

☐ 14. I am requesting a hearing. A \$50 fee is required.☐ **Mediation**☐ a. Mediation is requested to be ordered pursuant to Reg. 67-1801 B.☐ b. Mediation is required pursuant to Reg. 67-1802.☐ c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803.☐ d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse.Questions regarding mediation may be submitted to mediation@wcc.sc.gov.I certify I have served this document pursuant to Reg. 67-211 by delivering a copy to _____
address _____ on the _____ day of _____, 20____, by ☐ first class postage ☐ certified mail ☐ personal service ☐ electronic service

I verify the contents of this form are accurate and true to the best of my knowledge.

Preparer's Signature _____ Title _____ Email _____ Date _____

Questions about the use of this form should be directed to the Claims Department at 803.737.5723. Refer to Regulations 67-204 through 67-211 and Regulations 67-601 through 67-615 as well as Reg. 67-1801.

WCC Form # 50

Revised 1/19

50**Employee's Notice of Claim and/or
Request for Hearing**

South Carolina Workers' Compensation Commission

1333 Main Street, Suite 500 • Post Office Box 1715

Columbia, South Carolina 29202-1715

(803) 737-5675 www.wcc.sc.gov

WCC File #: _____

Carrier File #: _____

Carrier Code #: _____

Employer FEIN #: _____

Claimant's Name: _____ SSN: _____ Employer's Name: _____

Address: _____ Address: _____

City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Insurance Carrier: _____

Date of Injury: _____

Preparer's Name: _____ Law Firm: _____ Preparer's Phone #: _____

Date of Injury or Illness: _____ **Estimated time for hearing:** _____**Complete each information blank. Clearly specify when contentions are admitted in part and denied in part. The Employer/Carrier in answer to the claim, respectfully shows:**

1. It is ☐ **Admitted** ☐ **Denied** the employee sustained an injury or illness on or about the date set forth in the Form 50. The reasons for denial are: _____
2. It is ☐ **Admitted** ☐ **Denied** both the employer and employee were subject to the Workers' Compensation Act at the time in question. The reasons for denial are: _____
3. It is ☐ **Admitted** ☐ **Denied** the relationship of employer and employee existed at the time in question. The reasons for denial are: _____
4. It is ☐ **Admitted** ☐ **Denied** at the time in question the employee was performing services arising out of and in the course of employment. The reasons for denial are: _____
5. It is ☐ **Admitted** ☐ **Denied** notice of injury was given the employer. The reasons for denial are: _____
6. It is ☐ **Admitted** ☐ **Denied** the employee ☐ **Needs** ☐ **Is Entitled to Additional** medical care as a result of injury or illness. The reasons for denial are: _____
7. It is ☐ **Admitted** ☐ **Denied** the employee is entitled to temporary total disability for the period(s) of : _____
8. It is ☐ **Admitted** ☐ **Denied** the employee is permanently disabled. The reasons for denial are: _____
9. It is ☐ **Admitted** ☐ **Denied** the employee has serious disfigurement.
10. It is contended that an average weekly wage of \$ _____ applies, according to attached Form 20 as provided by law.
11. Further contentions, grounds of defense, or unusual aspects are: _____

**Mediation**

- ☐ a. Mediation is requested to be ordered pursuant to Reg. 67-1801 B.
- ☐ b. Mediation is required pursuant to Reg. 67-1802.
- ☐ c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803.
- ☐ d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse.

Questions regarding mediation may be submitted to mediation@wcc.sc.gov.

I certify I have served this document pursuant to Reg. 67-211 by delivering a copy to _____

Address _____ on the ____ day of _____ 20____, by:

☐ first class postage ☐ certified mail ☐ personal service ☐ electronic service

I verify the contents of this form are accurate and true to the best of my knowledge.

Preparer's Signature _____ Title _____ Email _____ Date _____

Refer to R.67-204 through R.67-210 and R.67-601 through R.67-615. Refer to R. 67-1801 for mediation. Questions about the use of this form may be directed to the Commission's Judicial Department at 803-737-5675 or judicial@wcc.sc.gov or mediation@wcc.sc.gov. Pursuant to R.67-606, a Form 20 must be filed with the Claims Department at least 30 days from the date of filing this form.

South Carolina Workers' Compensation Commission

1333 Main Street, Suite 500

P.O. BOX 1715

Columbia, SC 29202-1715

(803) 737-5675 www.wcc.sc.gov

WCC File #: _____

Carrier File #: _____

Carrier Code #: _____

Employer FEIN #: _____

Decedent's Name: _____ SSN: _____ - - Employer's Name: _____

Claimant's Name: _____ SSN: _____ Address: _____

Address: _____ City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____ Insurance Carrier: _____

Home Phone: _____ Work Phone: _____

Preparer's Name: _____ Law Firm: _____ Preparer's Phone #: _____

Date of Injury or Illness: _____

Complete each information blank. Clearly specify when contentions are admitted in part or denied in part.**The Employer-insurance Carrier in answer to the claim due to the death of _____ (employee's name) respectfully shows:**

1. It is ☐ admitted ☐ denied the employee sustained an injury on or about the date set forth in the application.
2. It is ☐ admitted ☐ denied both the employer and employee were subject to the Workers' Compensation Act at the time in question. The reasons for denial are:

3. It is ☐ admitted ☐ denied the relationship of employer and employee existed at the time in question. The reasons for denial are:

4. It is ☐ admitted ☐ denied at the time in question the employee was performing services arising out of and in the course of employment.
5. It is ☐ admitted ☐ denied notice of injury was given the employer as specified in the application.
6. It is ☐ admitted ☐ denied the employee was entitled to medical care as a result of the injury.
7. It is ☐ admitted ☐ denied the employee lost compensable time from work and wages for period(s) of:

8. It is ☐ admitted ☐ denied the employee's death resulted proximately from accidental injury arising out of and in the course of employment on _____ (m/d/yyyy).
9. It is contended that an average weekly wage of \$_____ applies, according to the attached accounting of employee's earnings, as provided by law.
10. Further grounds of claim:

Mediation

- a. Mediation is required to be ordered pursuant to Reg. 67-1801 B.
- b. Mediation is required pursuant to Reg. 67-1802.
- c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803.
- d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse.

Questions regarding mediation may be submitted to mediation@wcc.sc.gov.

I certify I have served this document pursuant to Reg. 67-211 by delivering a copy to _____
 address _____ on the _____ day of _____ 20____,
 by ☐ first class postage ☐ certified mail ☐ personal service ☐ electronic service.

Preparer's Signature _____ Title _____ Email _____ Date _____

Questions about the use of this form should be directed to the Judicial Department at 803.737.5675 or judicial@wcc.sc.gov or mediation@wcc.sc.gov.
 Refer to Regulations 67-205 through 67-211, 67-215, Regulations 67-601 through 67-615; and Regulations 67-901-905 as well as Reg. 67-1801.

ENDNOTES

¹ June 6, 2023 video presentation at 00:07:23—00:07:57.

² S.C. Code Ann. § 42-3-20(A) (2015); 2023 Annual Accountability Report at 1.

³ June 6, 2023 video presentation at 00:17:58—00:19:34.

⁴ S.C. Code Ann. § 42-3-20(B) (Supp. 2023). A new chairman is selected by the governor upon the advice and consent of the Senate from among the existing seven commissioners. *Id.*

⁵ June 6, 2023 video presentation at 00:13:24—00:13:56.

⁶ Letter from the Comm’n responding to Subcomms. Request for Further Info. (Aug. 11, 2023); June 6, 2023 video presentation at 00:43:31—00:35:49.

⁷ Letter from the Comm’n responding to Subcomms. Request for Further Info. (Aug. 11, 2023).

⁸ *Id.*

⁹ July 19, 2023 video presentation at 00:02:36—00:04:41.

¹⁰ As noted by the Commission’s Chairman, when the seven commissioners and their administrative assistants are excluded, the “heavy lifting” and management this billion dollar South Carolina industry is carried out by only 39 employees. See Nov. 8, 2023 video presentation at 00:55:21—00:56:06.

¹¹ During testimony before the House Oversight subcommittee, the Commission stated that pre-COVID, its employees processed 64,000 claims annually. See June 6, 2023 video presentation at 00:36:47—00:37:49; 00:42:03—00:42:25. However, following that testimony, the Commission concluded that a more accurate “claims processed” comparison with other states would exclude WCC Form 12M employer’s report of injury (minor medical claims) from the claims processed number and only compare the number of WCC 12A claims filed annually with the Commission. See Jan. 18, 2024 video presentation before the Transportation and Regulatory Subcommittee of the House Ways and Means Committee at 01:02:40—01:05:22.

¹² S.C. Code Ann. § 42-1-360(2) (2015).

¹³ *Id.*; June 6, 2023 video presentation at 00:48:55–00:49:26.

¹⁴ See <https://www.insureon.com/small-business-insurance/workers-compensation/state-laws> (last visited Mar. 7, 2024).

¹⁵ 2023 Annual Accountability Report at 1.

¹⁶ June 6, 2023 video presentation at 00:47:35—00:48:55.

¹⁷ June 6, 2023 video presentation at 03:30:15–03:31:13; S.C. Code Ann. Regs. 67-1401.

¹⁸ *Id.* at 01:48:28–01:49:17.

¹⁹ See Finding 8, *infra*.

²⁰ See S.C. Workers’ Comp. Comm’n, available at <https://wcc.sc.gov/self-insurance-division> (last visited Mar. 8, 2024).

²¹ 2023 Annual Accountability Report at 5.

²² *Id.*

²³ See S.C. Workers’ Comp. Comm’n, available at <https://wcc.sc.gov/self-insurance-division> (last visited Mar. 8, 2024).

²⁴ Letter from the Comm’n responding to Subcomms. Request for Further Info. (July 11, 2023) at 2. The Commission notes that “[i]f the employer was unable to pay claims related expenses, the Commission would implement statutory provisions to draw on the employer’s surety to pay the claims related expenses. To prevent this from occurring, the Commission requires the self-insured employers to maintain a certain level of financial resources to pay medical and compensation costs related to the claim.” *Id.*

²⁵ See S.C. Code Ann. § 42-5-190 (Supp. 2023), editor’s notes (“Notwithstanding another provision of law, the sunset provision provided for in Act 68 of 2017 is suspended for the current fiscal year to allow the commission to continue to collect tax on self-insurers.”)

²⁶ June 6, 2023 video presentation at 01:31:08–01:31:27.

²⁷ Letter from the Comm’n responding to Subcomms. Request for Further Info. (Aug. 11, 2023) at 4.

²⁸ *Id.*

²⁹ *Id.*

³⁰ See *id.*

³¹ S.C. Code Ann. § 42-5-40 (2015).

³² *Id.*

³³ *Id.*

³⁴ June 6, 2023 video presentation at 00:58:14—00:58:33. Generally, the Commission’s Coverage and Compliance Division determines whether an employer is required to maintain compensation insurance after the occurrence of one of three events: (1)

after an employee has filed a claim seeking coverage; (2) after the Compliance Division receives notice of potential uninsured employers from data received from the South Carolina Department of Employment and Workforce (DEW); (3) after receiving an anonymous tip. *See* June 6, 2023 video presentation at 00:55:38-00:57:28; Nov. 21, 2023 video presentation at 00:35:55—00:37:14. If coverage is located after a claim is filed, a claim number is assigned. Conversely, if an employee files a claim and the coverage division cannot locate evidence of coverage, the claim is assigned to the Commission’s Compliance Division for investigation. June 6, 2023 video presentation at 00:55:30-00:55:48.

³⁵ *Id.*

³⁶ According to the Commission, the \$2.28 million in waived assessed fines and penalties represents 263 employers. *See* Letter from Comm’n Supp. Info. for HLOC (Dec. 8, 2023).

³⁷ June 6, 2023 video presentation at 00:58:43—01:02:38; Nov. 21, 2023 video presentation at 00:28:41—00:28:48 (“[W]e’re not in the business of fining to raise money. We’re in the business of fining to gain compliance.”)

³⁸ *See* Commission Response to Inquiry About Authority to Reduce Assessments (February 13, 2024).

³⁹ *Id.*

⁴⁰ *Id.* at 00:58:43—00:59:35.

⁴¹ *Id.*

⁴² *Id.* at 01:03:46-01:04:33.

⁴³ S.C. Code Ann. Regs 17-1402; June 6, 2023 video presentation at 01:04:52-01:06:42.

⁴⁴ *Id.*

⁴⁵ *Id.* at 01:07:31-01:08:05.

⁴⁶ S.C. Code Ann. § 12-4-580 (2014); *see* S.C. Dep’t of Revenue, *available at* <https://dor.sc.gov/about/setoff-debt-and-gear> (last visited 10/11/23).

⁴⁷ *Id.*

⁴⁸ *Id.*

⁴⁹ Nov. 30, 2023 video presentation at 00:43:44-00:44:05.

⁵⁰ S.C. Code Ann. Regs. 67-101(D).

⁵¹ June 6, 2023 video presentation at 03:21:20—03:22:12. The exact date the Commission created the districts is unknown. The commissioners rotate every 2 months. [cite].

⁵² Letter from the Comm’n responding to Subcomms. Request for Further Info. (July 11, 2023).

⁵³ S.C. Code Ann. § 42-17-20 (Supp. 2022).

⁵⁴ *Id.*

⁵⁵ June 6, 2023 video presentation at 03:26:08-03:26:25; 2022 Accountability Report p. 8.

⁵⁶ 2023 Annual Accountability Report at 7.

⁵⁷ *See* June 6, 2023 presentation, slide 158.

⁵⁸ July 19, 2023 video presentation at 01:03:10-01:03:37.

⁵⁹ July 19, 2023 video presentation at 01:11:36-01:11:58.

⁶⁰ *Id.* at 01:12:18-01:12:57.

⁶¹ *Id.* at 01:14:08-01:14:34.

⁶² *Id.* at 00:08:56—00:14:49.

⁶³ S.C. Code Ann. Regs. 67-1602(C).

⁶⁴ S.C. Code Ann. Regs. 67-1602(E); July 19, 2023 video presentation at 00:08:56-00:09:05.

⁶⁵ Nov. 21, 2023 video presentation at 00:06:15-00:06:38; *See* S.C. Code Ann. Regs. 67-205.

⁶⁶ S.C. Code Ann. Regs. 67-206.

⁶⁷ S.C. Code Ann. Regs. 67-206(B)(3). WCC Forms 51 and 53 are an employer’s Answer to Request a Hearing. *See* S.C. Code Ann. Regs. 67-603.

⁶⁸ Nov. 21, 2023 video presentation at 00:05:40-00:06:04.

⁶⁹ Nov. 21, 2023 video presentation at 00:25:50-00:26:30.

⁷⁰ *Id.* at 00:26:31-00:26:55.

⁷¹ *Id.* at 00:26:54-00:27:29.

⁷² *See* S.C. Workers’ Comp. Comm’n FY2024-25 Agency Budget Plan, *available at* <https://admin.sc.gov/sites/admin/files/Documents/Budget/FY25%20R080%20-%20Workers%20Compensation%20Commission.pdf> (last visited Mar. 8, 2024).

⁷³ *Id.*

⁷⁴ S.C. Code Ann. § 42-9-440 (2015).

⁷⁵ Nov. 8, 2023 video presentation at 00:16:30-00:18:12.

⁷⁶ Nov. 8, 2023 video presentation at 00:22:12-00:23:42.

⁷⁷ July 19, 2023 video presentation at 01:00:24-01:01:25; Nov. 8, 2023 video presentation at 00:22:12-00:22:48 (“I mean, it’s sort of like the Supreme Court defined pornography, you know it when you see it. But other than that, there’s not a training program that we put the seven commissioners through to, to detect that.”).

⁷⁸ S.C. Code Ann. § 1-7-170(A) (Supp. 2023). This section also exempts “the employment of attorneys in special cases in inferior courts when the fee to be paid does not exceed two hundred fifty dollars or exceptions approved by the State Budget and Control Board.” *See id.*

⁷⁹ July 19, 2023 video presentation at 01:27:13-01:28:00.

⁸⁰ *Id.* at 01:28:00-01:28:39.

⁸¹ *Id.* at 01:28:11-01:29:00; 01:29:30-01:29:45.

⁸² Letter from Comm’n Supp. Info. for HLOC (Dec. 8, 2023).

⁸³ During testimony before the House Law Enforcement and Criminal and Civil Justice Subcommittee, the Commission testified that 18 Commission employees (36% of its workforce) could retire at any time and 25 Commission employees (50% of its workforce) is eligible to retire in five years. *See* July 19, 2023 video presentation at 01:06:09—01:06:41. Finding 18 of the Committee’s Internal Changes, Findings and Recommendations is based on that testimony. By email dated March 18, 2024, the Commission updated its staffing information with the numbers reflected in Finding 18 of this Study Report.

⁸⁴ *See* Email from Gary Cannon dated Mar. 18, 2024.

⁸⁵ June 6, 2023 video presentation at 00:12:28—00:12:58.

⁸⁶ *See* Email from Gary Cannon dated Mar. 18, 2024.

⁸⁷ Letter from Comm’n responding to Subcomms. Request for Further Info. (Aug. 11, 2023).

⁸⁸ *Id.*

⁸⁹ *Id.*

⁹⁰ *Id.*

⁹¹ *See* S.C. Workers’ Comp. Comm’n FY2024-25 Agency Budget Plan, *available at* <https://admin.sc.gov/sites/admin/files/Documents/Budget/FY25%20R080%20-%20Workers%20Compensation%20Commission.pdf> (last visited Mar. 8, 2024).

⁹² Nov. 11, 2023 video presentation at 00:38:53-00:39:02; Memo from Gary Cannon Draft Supp. Info. (Feb. 2, 2024).

⁹³ July 19, 2023 video presentation at 00:09:08-00:11:48.

⁹⁴ *See* Letter from Comm’n Supp. Info. for HLOC (Dec. 8, 2023).

⁹⁵ *Id.*

⁹⁶ *Id.*

⁹⁷ *See* S.C. Code Ann. Regs. 67-414(B).

⁹⁸ As noted by the Commission, if the employer files a WCC Form 12A and subsequently files a WCC Form 19 denying the case, there is a question as to whether the filing of the 12A tolled the statute of limitations if the employee failed to request a hearing or file a WCC Form 50.

⁹⁹ *See* S.C. Workers’ Comp. Comm’n FY2024-25 Agency Budget Plan, *available at* <https://admin.sc.gov/sites/admin/files/Documents/Budget/FY25%20R080%20-%20Workers%20Compensation%20Commission.pdf> (last visited Dec. 4, 2023).

¹⁰⁰ Nov. 11, 2023 video presentation at 00:16:26-00:17:00.

¹⁰¹ *Id.* at 01:02:23-01:04:41.

¹⁰² Nov. 11, 2023 video presentation at 00:57:53-01:00:12.

¹⁰³ July 19, 2023 video presentation at 01:24:45--01:29:16.

¹⁰⁴ *See* S.C. Workers’ Comp. Comm’n FY2024-25 Agency Budget Plan, *available at* <https://admin.sc.gov/sites/admin/files/Documents/Budget/FY25%20R080%20-%20Workers%20Compensation%20Commission.pdf> (last visited Dec. 4, 2023).