



Ohio Administrative Code

Rule 4123-14-06 Bureau of workers' compensation adjudicating committee.

Effective: October 1, 2024

(A) The administrator of the bureau of workers' compensation may delegate the authority granted to the administrator under Chapters 4121., 4123., and 4131. of the Revised Code and the rules adopted by the bureau of workers' compensation for determining employer premium, assessment, or penalty obligations or liabilities, eligibility for alternative premium plans or discount programs, or other employer-related disputes or issues as may be authorized under the workers' compensation statutes and rules. For this purpose, the administrator may appoint an adjudicating committee to provide employers with hearings on such matters referred by the administrator.

(1) An employer may file with the bureau a request for a hearing with the adjudicating committee only after the employer's request, protest, petition, or application has been reviewed by the appropriate bureau business unit and only after that business unit has notified the employer of the bureau's initial decision regarding the employer's request, protest, petition, or application.

(2) Unless a different time is provided by the Revised Code or the Administrative Code for such matter, an employer shall file a protest or appeal of the bureau's decision on the request, protest, petition, or application within two years of receipt of the bureau's determination.

(3) The employer shall state the specific grounds or reasons for the protest or appeal of the bureau's determination, and include supporting documentation. The bureau may refuse to grant a hearing to the employer where the employer has failed to state the specific grounds or reasons for the protest or appeal or has failed to provide supporting documentation as set forth by this rule.

(B) The adjudicating committee consists of three members appointed by the administrator who have expertise or experience in matters relating to employers.

(C) The adjudicating committee shall hold meetings and hearings to determine matters referred to it by the administrator. With the approval of the administrator, the adjudicating committee members may delegate alternate bureau employees to act on their behalf. The adjudicating committee may



issue decisions without formal hearing, but shall afford an employer the opportunity for a formal hearing upon request. A prompt, efficient, and expeditious determination of matters will be ensured to protect the interests of employers and the state insurance fund.

(D) If an employer requests a hearing before the adjudicating committee, and has complied with paragraph (A)(1) of this rule, or the adjudicating committee determines that a hearing is in the best interests of the employer or the state insurance fund, the adjudicating committee shall notify the employer and its representatives not less than fourteen days before the date of such hearing, setting forth the date, time and place of the hearing. In justifiable cases, an emergency hearing may be arranged with the adjudicating committee and the fourteen day time period for notice may be waived.

(E) The adjudicating committee shall keep a record of its dockets and proceedings. The adjudicating committee's decisions shall be reduced to writing and mailed to all interested parties and state the reason for the adjudicating committee's decision, including the evidence upon which the decision was based. The decision of the adjudicating committee is the decision of the administrator. If the employer files a written appeal within thirty days of the employer's receipt of the decision, the administrator or the administrator's designee shall hear the appeal of the decision and conduct a hearing for such purpose. Mail service may be waived by any party where e-mail or alternative means of delivery is agreed upon.

(F) The administrator may authorize the adjudicating committee to consider the following matters:

(1) Requests for waiver of a default in the payment of a premium under section 4123.37 of the Revised Code;

(2) Requests for settlement of liability of a non-complying employer under section 4123.75 of the Revised Code;

(3) Petitions objecting to assessment of premium under rule 4123-14-02 of the Administrative Code and section 4123.37 of the Revised Code;

(4) Employer's request for abatement of penalties under rule 4123-14-03 of the Administrative Code



and section 4123.32 of the Revised Code;

(5) Protests of audit findings, manual classifications, experience ratings, retrospective ratings, or transfers or combinations of risk experience;

(6) Any other risk or premium matter under Chapters 4121., 4123., and 4131. of the Revised Code;
and

(7) Petitions objecting to the amount of security required under division (D) of section 4125.05 of the Revised Code and the rules adopted pursuant to that section or under division (D) of section 4133.07 of the Revised Code and the rules adopted pursuant to that section.