

State of South Carolina

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Workers' Compensation Commission

Advisory Notice

March 23, 2022

Form 19

A Form 19 is required to be submitted to the Commission pursuant to Regulation R.67-414 and R.67-1204. Information regarding the costs of Medical Benefits paid must be included on Line 6 on the form. The Commission utilizes this information to monitor the total cost of the system and fulfill its statutory and regulatory obligations to establish fee schedules for medical practitioners, hospital in-patient and out-patient services, and services provided by ambulatory surgery centers as provided by S.C. Code Ann. § 42-15-90 and S.C. Code Regs. 67-1302-1304.

It has come to our attention that individuals submitting the Form 19 have incorrectly included costs for items other than medical benefits on Line 6 on Form 19. Please reference the footnote at the bottom of the Form 19 which cites an inexhaustive list of items not included in a calculation of the total amount of Medical Benefits paid. Examples of items not to be included on line 6 are: Attorneys' fees, fees paid for expert testimony, fees for determining carriers, liability, costs of autopsy, birth and death certificates and impartial examination costs.

Please be advised that only costs of medical benefits paid should be included in the total amount on Line 6. Carriers submitting Form 19s are reminded that submitting a Commission required form that is factually inaccurate does not satisfy the reporting requirements. Carriers may be penalized a maximum of \$200.00 for each occurrence. Regulation 67-417D mandates that repeated violations of reporting standards be reported to the SC Department of Insurance.

For additional information about this matter please contact:

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