

AUDIT RULES AND GUIDES

CCR 15403: Audits

- CCR 15201: Definitions:
 - CCR 15201(a): Adjusting Locations
 - CCR 15201(d): Administrator
 - CCR 15201(g): Audit
 - CCR 15201(k): Certificate to Administer
 - CCR 15201(l): Claim File
 - CCR 15201(m): Claim Log
 - CCR 15201(n): Compensation
 - CCR 15201(s): First Aid
 - CCR 15201(t): Group Administrator
 - CCR 15201(v): Group Self Insurer
 - L.C. 3700.1(g): Definition of incurred liabilities
 - CCR 15201(x): Indemnity Claim
 - CCR 15201(cc): Medical-Only Claim
 - CCR 15201(dd): Open Claim
 - CCR 15201(hh): Special Audit
 - CCR 15201(kk): Work-Injury Claim
- 15403(a): audits pursuant to LC 129 and 3702.6
 - L.C. 129: Auditing the employers for prompt and accurate provision of compensation to which they are entitled (at least once every five years)
 - L.C. 3702.6(a): Audits for addressing the adequacy of reserves within a three-year cycle
 - L.C. 3702.8: Continuing obligations of Employers who have ceased to be self-insured
 - CCR 15424: Revoked Certificate Audits
 - CCR 15427: Director's continuing jurisdiction after revocation of a certificate to self-insure
 - CCR 15404.1: Expense of Revoked Certificate Audits
 - L.C. 3702.6(c): Special audits
 - L.C. 3702.5(a): Expense of Special Audits
 - CCR 15403.1: Notice of Special Audits
 - CCR 15404.2: Expense of Special Audits
 - 15403(b): audit of the files of a telecommuting adjuster or files of claims adjusted out of state
 - CCR 15404: Expense of Out-of-State Audits

- L.C. 3701.5(d): Default Audits
 - L.C. 3741(c): Definition of an insolvent self-insurer
- CCR 15431.2: Audit due to complaints
 - CCR 15431.2(a): Complaints of any self-insured employer, administrator, the SISF, or injured employee
 - CCR 15431.2(b): investigation of complaints of an injured employee

Claims Administration:

- Competency:
 - LC 3702.1
 - 3702.1(a): Certificate of consent to administer self-insured employer's workers' compensation claims are required
 - LC 3702.1(b): All denials, acceptance, or decision-making must be made by a person who demonstrates competency by passing the written examination
 - LC 3702.(c): A separate certificate is required for each adjusting location
 - CCR 15452: Administrator Competence
 - CCR 15452(a): Administration of self-insurance program within California
 - CCR 15452(b): Competence of an individual person
 - CCR 15452(f): Competence at each adjusting location; claims decisions, setting of reserves, and proper payment of benefits to injured workers shall be made or reviewed by a person who has passed the self-insurance administrator's examination
 - CCR 15452(g): lack of competent administrator at any adjusting location shall be good cause for revocation of the certificate to administer for that location and may be grounds to revoke the certificate to self-insure.
- CCR 15420: Compliance with Statute and Regulatory Requirements
- CCR 15458: Claims Administration and Recordkeeping in accordance with the provisions of Articles 6 and 9
 - Article 6: Estimating Work and Injury Claims and Medical Reports
 - CCR 15300(a): List of open indemnity claims
 - CCR 15300(b): Estimates of future liability based on information in possession of the administrator at the ending date of the period of time covered by the annual report.
 - CCR 15300(b)(1): Indemnity and Medical Components; 132a, 4553, and 5814 filings
 - CCR 15300(b)(2): Estimating for future permanent disability
 - CCR 15300(b)(3): Estimating for future medical costs in claims where the employee's condition is not MMI/P&S

- CCR 15300(b)(4): Estimating for future medical costs in claims where the employee's condition is MMI/P&S
 - CCR 15300(b)(5): Increases and decreases on average past costs
 - CCR 15300(b)(6): Reductions allowed/not allowed
 - CCR 15300(b)(7): Use of the life expectancy table
 - CCR 15300(b)(8): Estimates of PD and apportionment
 - CCR 15300(b)(9): Present value of future benefits
 - CCR 15300(c): Estimates of medical-only claims
 - CCR 15300(d): Projected third party recoveries or projected reimbursements from aggregate excess insurance
 - CCR 15300(e): Excess claims
 - CCR 15300(f): Availability of estimates immediately upon request of the Manager
 - CCR 15300(g): When to adjust estimates
 - CCR 15301: Revision of estimates by the Manager
 - CCR 15302: Request for medical report if deemed necessary by the Manager
 - CCR 15303: Reserving full cost of medical, surgical, hospital services
- Article 9: Recordkeeping and Audits
 - Claim File Contents
 - CCR 15400(a): Claim File Contents in accordance with Title 8, Section 10101 and 10101.1
 - CCR 15400(b): Claim file contents
 - CCR 15400(c): Claim file organization
 - Claim Log
 - CCR 15400.1: Manual or computerized claim log
 - CCR 15400.2: Maintenance of Records
 - 15400.2(a): Maintenance of a claim files and exception to the destruction
 - 15400.2(b): Inactive and closed claim files
 - 15400.2(c): Location of claim files
 - 15400.2(d): Availability of all files and logs for inspection
 - Change of administrator:
 - CCR 15402: Notice of change of administrator and location of records
 - CCR 15402(b): The new administrator shall report any changes in writing to Manager no later than the date of the change; includes any changes in location(s)
 - CCR 15402.2: Report of Transfer of Records

- CCR 15402.2(a): Former administrative agency's responsibilities at transfer
 - CCR 15402.2(b): All claim files and logs are property of the self-insurer; claim file transfers
 - CCR 15402.2(c): Failure to provide a report of transfer of records
- CCR 15402.4: Transfer of Claim Files and Computerized Claim File Data Information
 - CCR 15402.4(a): Transfer of open claim files
 - CCR 15402.4(b): Transfer of closed claim files
 - CCR 15402.4(c): Transfer of computerized claim file data
- CCR 15428: Administration of Claims after Revocation