

**State of California  
Office of Administrative Law**

**In re:**  
**Division of Workers' Compensation**

**Regulatory Action:**

**Title 08, California Code of Regulations**

**Adopt sections:**

**Amend sections: 9792.23.8**

**Repeal sections:**

**NOTICE OF FILING AND PRINTING ONLY**

**Government Code Section 11343.8**

**OAL Matter Number: 2021-0616-03**

**OAL Matter Type: File and Print Only (FP)**

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This file-and-print action makes evidence-based updates to the medical treatment utilization schedule (MTUS). This action is exempt from the rulemaking provisions of the Administrative Procedure Act and OAL review pursuant to Labor Code section 5307.27(a).

OAL filed this regulation(s) or order(s) of repeal with the Secretary of State, and will publish the regulation(s) or order(s) of repeal in the California Code of Regulations.

**Date:** July 29, 2021



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**Eric Partridge**  
**Senior Attorney**

**For:** Kenneth J. Pogue  
**Director**

**Original:** George Parisotto, Administrative  
**Director**

**Copy:** John Cortes

# FILE PRINT

See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER	REGULATORY ACTION NUMBER	EMERGENCY NUMBER
	Z-	2021-0616-DBFP	

For use by Office of Administrative Law (OAL) only

NOTICE  AGENCY WITH RULEMAKING AUTHORITY Division of Workers' Compensation within the Department of Industrial Relations	REGULATIONS  2021 JUN 16 P 3:03  OFFICE OF ADMINISTRATIVE LAW
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ENDORSED - FILED  
in the office of the Secretary of State  
of the State of California

JUL 29 2021

1:51 PM

AGENCY FILE NUMBER (if any)

### A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE		TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE	
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed <input type="checkbox"/> Regulatory Action <input type="checkbox"/> Other		4. AGENCY CONTACT PERSON		TELEPHONE NUMBER	FAX NUMBER (Optional)
OAL USE ONLY ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn		NOTICE REGISTER NUMBER		PUBLICATION DATE	

### B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Medical Treatment Utilization Schedule (MTUS)	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT AMEND 9792.23.8 REPEAL
TITLE(S) 8	

3. TYPE OF FILING			
<input type="checkbox"/> Regular Rulemaking (Gov. Code § 11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§ 11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, § 11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, § 100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§ 11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, § 11346.1)	<input checked="" type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, § 11346.1(b))		<input checked="" type="checkbox"/> Other (Specify) pursuant to Labor Code 5307.27(a)	

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, 544 and Gov. Code § 11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, § 100)			
<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code § 11343.4(a))	<input type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> \$100 Changes Without Regulatory Effect	<input checked="" type="checkbox"/> Effective other (Specify) July 19, 2021

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY			
<input type="checkbox"/> Department of Finance (Form STD. 399) (SAM § 6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal	
<input type="checkbox"/> Other (Specify)			

7. CONTACT PERSON John Cortes	TELEPHONE NUMBER 510-286-0519	FAX NUMBER (Optional) 510-286-0676	E-MAIL ADDRESS (Optional) jcortes@dir.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE 	DATE June 15, 2021
TYPED NAME AND TITLE OF SIGNATORY George Parisotto, Administrative Director, Division of Workers' Compensation	

For use by Office of Administrative Law (OAL) only

AUTHORIZED FOR FILING AND PRINTING

JUL 29 2021

Office of Administrative Law

**TITLE 8. INDUSTRIAL RELATIONS  
DIVISION 1. DEPARTMENT OF INDUSTRIAL RELATIONS  
CHAPTER 4.5. DIVISION OF WORKERS' COMPENSATION  
SUBCHAPTER 1. ADMINISTRATIVE DIRECTOR -- ADMINISTRATIVE RULES  
ARTICLE 5.5.2. MEDICAL TREATMENT UTILIZATION SCHEDULE**

**§ 9792.23.8. Workplace Mental Health Guideline.**

(a) The Administrative Director adopts and incorporates by reference the Introduction to the Workplace Mental Health Guideline (ACOEM March 13, 2019) into the MTUS. The Workplace Mental Health Guideline consists of specific modules set forth below from the ACOEM Practice Guidelines addressing the issue of Workplace Mental Health:

(1) Posttraumatic Stress Disorder and Acute Stress Disorder (ACOEM December 18, 2018).

(2) Depressive Disorders (ACOEM January 13, 2020).

(3) Anxiety Disorders (ACOEM April 30, 2021).

Note: Authority cited: Sections 133, 4603.5, 5307.3 and 5307.27, Labor Code.  
Reference: Sections 77.5, 4600, 4604.5 and 5307.27, Labor Code.



AMERICAN COLLEGE OF  
OCCUPATIONAL AND  
ENVIRONMENTAL MEDICINE

# Anxiety Disorders

*Effective Date: April 30, 2021*

## CONTRIBUTORS

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*Panel members for the multidisciplinary Workplace Mental Health Guideline represent expertise in addiction medicine, clinical psychology, educational psychology, forensic psychiatry, internal medicine, neurology, occupational medicine, preventive medicine, psychiatry, and psychology. As required for quality guidelines (Institute of Medicine's (IOM) Standards for Developing Trustworthy Clinical Practice Guidelines and Appraisal of Guidelines for Research and Evaluation (AGREE)), a detailed application process captured conflicts of interest. The above panel has none to declare relevant to this guideline.*

### **Panel Consultant:**

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