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: 9792.23.4, 9792.24.7

Repeal sections:

NOTICE OF FILING AND PRINTING ONLY

Government Code Section 11343.8

OAL Matter Number: 2023-0925-01

OAL Matter Type: File and Print Only (FP)

This file and print action by the Division of Workers' Compensation (Division) of the Department of Industrial Relations amends two sections in title 8 of the California Code of Regulations to make evidence-based updates to the Medical Treatment Utilization Schedule (MTUS) pursuant to Labor Code section 5307.27. The updates relate to the Hand, Wrist, and Forearm Disorder Guideline.

OAL filed these regulations with the Secretary of State and will publish the regulations in the California Code of Regulations.

Date:

November 2, 2023

Thanh Huynh Senior Attorney

For:

Kenneth J. Pogue

Director

Original: George Parisotto, Administrative

Director

Copy:

Nicole L. Richardson

STATE OF CALIFORNIA-OFFICE OF ADMINISTRATI	REGULATIONS SU	BMIS SION	See instruc		For use by Secretary of State only
OAL FILE NOTICE FILE NUMBER NUMBERS Z	REGULATORY ACT	ON NUMBER 25-0	1 EMERGENCY NUMBER	3	
	For use by Office of Admin	istrative Law (OAL) only			ENDORSED - FILED in the office of the Secretary of State of the State of California
OFFICE OF AT 2023 SEP 25			IDMIN. LAW 25 AM10:40		NOV 0 2 2023 1:50 Pm
					1.30 771
NOTICE REGULATIONS					
Division of Workers' Compensation within the Department of Industrial Relations					AGENCY FILE NUMBER (If any)
A. PUBLICATION OF NOTIC	E (Complete for pub	lication in Notice R	egister)		
1. SUBJECT OF NOTICE		TITLE(S)	FIRST SECTION AFFEC	CTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE Notice re Proposed Regulatory Action Othe	4. AGENCY CON	NTACT PERSON	TELEPHONE NUMBER		FAX NUMBER (Optional)
OAL USE ACTION ON PROPOSED Approved as Submitted	NOTICE Approved as Modified	Disapproved/ Withdrawn	NOTICE REGISTER NU	IMBER	PUBLICATION DATE
B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)					
1a. SUBJECT OF REGULATION(S) 1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)					
Medical Treatment Utilization Schedule (MTUS) 2023-0705-01; 2021-05					6-02; 2019-0329-01-
2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)					per agency 11/2/2023
SECTION(S) AFFECTED ADOPT					request TB
(List all section number(s) individually. Attach	AMEND				
additional sheet if needed.)	9792.23.4; 9792.24.7				
TITLE(S)	REPEAL				
3. TYPE OF FILING					
Regular Rulemaking (Gov. Code §11346) Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §\$11346.2-11347.3 either					Changes Without Regulatory Effect (Cal. Code Regs., title
withdrawn nonemergency before the emergency regulation was adopted or filing (Gov. Code §§11349.3, within the time period required by statute. File & Print 11349.4)					1, \$100) Print Only
Emergency (Gov. Code, §11346.1(b)) Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1) 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, §44 and Gov. Code §11347.1)					
5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100) Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a)) Effective on filing with Secretary of State Regulatory Effect Regulatory					
6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY Department of Finance (Form STD. 399) (SAM §6660) Fair Political Practices Commission State Fire Marshal					
Other (Specify) 7. CONTACT PERSON		TELEPHONE NUMBER	FAX NUMBER (C	Ontional)	E-MAIL ADDRESS (Optional)
Nicole Richardson		510-286-0656	510-286-0		richardson@dir.ca.gov
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 9/22 23					NOV 02 2023
TYPED NAME AND JITLE OF SIGNATORY George Parisotto, Administrative Director, Division of Workers' Compensation				Offic	e 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

§ 9792.23.4. Hand, Wrist, and Forearm Disorders Guideline.

The Administrative Director adopts and incorporates by reference the Hand, Wrist, and Forearm Disorders Guideline (ACOEM January 7, 2019 June 28, 2023) into the MTUS from the ACOEM Practice Guidelines.

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.

§ 9792.24.7. COVID-19 Guideline.

The Administrative Director adopts and incorporates by reference the COVID-19 Guideline (March 6, 2023 June 28, 2023) into the MTUS from the ACOEM Practice Guidelines.

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.

Text of Regulations – Effective November 10, 2023 Evidence-Based Updates to the Medical Treatment Utilization Schedule (MTUS) California Code of Regulations, title 8, sections 9792.23.4 and 9792.24.7.