

Own Motion Processing Checklist

Before submitting an Own Motion Recommendation, a carrier must be sure to include the following information (if applicable):

- _____ A copy of the date-stamped Own Motion request. See OAR 438-012-0020(1); OAR 438-012-0030(1)(b), (2)(b); WCB Bulletin No. 1-2005, eff. January 1, 2006.
- _____ A copy of the first Notice of Closure, Determination Order, and Notice(s) of Acceptance. See WCB Bulletin No. 1-2005.
- _____ A copy of the claim processing documents regarding any new and/or omitted medical condition(s) initiated after expiration of aggravation rights.
- _____ For "post-aggravation rights" new/omitted medical condition claims, a copy of the Modified Notice of Acceptance and/or any litigation order demonstrating that the requested new/omitted medical condition(s) has been determined to be compensable.
- _____ For "worsened condition" claims where the compensability decision was made by a litigation order, a copy of that litigation order.
- _____ For "worsened condition" claims, medical evidence of an inability to work (e.g., a doctor's release from work or release to modified work).
- _____ For "worsened condition" claims, medical evidence that the prior accepted condition(s) has worsened requiring hospitalization, inpatient or outpatient surgery, or "other curative treatment prescribed in lieu of hospitalization that is necessary to enable the injured worker to return to work."
- _____ For "worsened condition" claims where work force status is in dispute, submit support for your position that the claimant does not satisfy the criteria in *Dawkins v. Pacific Motor Trucking*, 308 Or 254 (1989).
- _____ For "worsened condition" claims, a copy of the claim processing documents regarding the reasonableness and necessity of the curative treatment. ORS 656.245; ORS 656.260; ORS 656.327.