U. S. Department of Labor

Office of Workers' Compensation Programs Division of Longshore and Harbor Workers' Compensation 200 Constitution Avenue NW, Room C-4319 Washington, DC 20210



April 23, 2020

Industry Notice No. 180

TO: INSURANCE CARRIERS AND SELF-INSURED EMPLOYERS UNDER THE LONGSHORE AND HARBOR WORKERS' COMPENSATION ACT (LHWCA) AND ITS EXTENSIONS AND OTHER INTERESTED PERSONS

SUBJECT: Procedures for Requesting DLHWC Intervention in Claims using New DLHWC Forms effective May 4, 2020.

To expedite delivery of benefits to injured workers covered by the LHWCA and its extensions (Act), the Office of Workers' Compensation Program's (OWCP) DLHWC has created six new forms for parties to use when requesting DLHWC action in a claim. The forms are now available on the OWCP/DLHWC website, https://www.dol.gov/owcp/dlhwc/lsforms.htm

Form LS-4 (Attorney Fee Approval Request)
Form LS-5 (Application for Special Fund Relief)
(Commutation Application)
Form LS-7 (Request for Intervention)
Form LS-8 (Settlement Approval Request Section 8(i))
Form LS-9 (Stipulation Approval Request)

The forms will be used by OWCP to obtain required information and documents, and to formalize, in a uniform manner, requests for DLHWC action.

If a party wishes to request DLHWC intervention in a claim, the appropriate form(s) must be completed and submitted to OWCP for the corresponding request. The party must use the correct form for the intervention requested, or the request will not be considered complete. Use of the correct form will speed processing of requests for action by DLHWC.

Following is a brief description of each form and when it should be used:

LS-4 (Attorney Fee Approval Request): This form is for requesting approval of attorney fees by the District Director under Section 28 of the LHWCA. The party must include a complete statement of the extent and character of the necessary work done, described with particularity as to the professional status, the normal billing rate, and the hours spent by each person in representing the claimant as set forth in 20 C.F.R. §702.132.

- 2. **LS-5 (Application for Special Fund Relief):** This form is for applying for Special Fund Relief under Section 8(f) of the LHWCA. The application requires relevant information, including a statement of the grounds for relief. To fully complete the application, relevant documentary support as described in 20 C.F.R. §702.321(a) must be submitted with the form, and the application must be filed within the time limits set forth in 20 C.F.R. §702.321(b). Please do not submit documentation that is not directly relevant to the request for Special Fund Relief (e.g., medical documentation that does not pertain to the Section 8(f) elements).
- 3. **LS-6 (Commutation Application):** This form is for applying for commutation of benefits under Section 9(g) of the LHWCA and Section 2(b) of the Defense Base Act as set forth in 20 C.F.R. §702.142 and §704.102. It must be accompanied by supporting documentation, if not already submitted.
- 4. <u>LS-7 (Request for Intervention)</u>: This form is for requesting intervention by DLHWC to assist in resolving issues. Title 20 C.F.R. §702.311 empowers the District Directors to resolve issues with respect to claims in a manner designed to protect the rights of the parties and to resolve such issues at the earliest practicable date. The form allows a party to request either an informal conference or other non-conference assistance and requests information that will identify the issues in the claim.

Examples of non-conference intervention include an injured worker's request for DLHWC assistance in obtaining authorization for a medical procedure, diagnostic test, or prescriptions, or a request that DLHWC investigate the timeliness of a compensation payment to determine whether a party is in default of an award of benefits.

Based on the information provided on the LS-7, the District Director, or designee, will determine the most effective means for resolving the issues.

- 5. **LS-8 (Settlement Approval Request Section 8(i)):** This form is for requesting approval of a settlement under Section 8(i) of the LHWCA. The completed form must be accompanied by a fully executed settlement agreement that conforms to the requirements set forth in 20 C.F.R. §702.242, §702.243. This form and attachments must be directly uploaded to the case via SEAPortal, or sent by certified mail with return receipt requested or commercial delivery service with tracking capability to the DLHWC mail receipt site.
- 6. **LS-9 (Stipulation Approval Request):** This form is for requesting an agreed compensation order by the District Director approving joint stipulations. The regulations empower District Directors to resolve claims amicably and promptly, and issue formal compensation orders when the parties reach agreement on issues as described in 20 C.F.R. §702.301, §702.311, §702.315(a). The parties must attach to the form the signed joint stipulations they wish to have approved.

All fields on the forms must be completed. With the exception of the LS-8 Settlement Approval Request (please see submission instructions above), forms should be submitted to the OWCP via one of the following methods:

- 1. DLHWC's Secure Electronic Access Portal (SEAPortal) uploads the forms directly to the case file and is the preferred method. (See Industry Notice No. 148, issued October 31, 2014.) The SEAPortal can be accessed at: https://seaportal.dol-esa.gov.
- 2. Alternatively, the forms may be sent by mail or commercial delivery service to the DLHWC Central Mail Receipt Site at:

U.S. Department of Labor, Office of Workers' Compensation Programs Division of Longshore and Harbor Workers' Compensation 400 West Bay Street, Suite 63A, Box 28 Jacksonville, FL 32202

Any questions regarding this Industry Notice or the revised Longshore Forms should be directed to the DLHWC Director, Washington, DC.

ANTONIO A. RIOS Acting Director, Division of Longshore and Harbor Workers' Compensation