

**State of California  
Office of Administrative Law**

**In re:**

**Division of Workers Compensation**

**Regulatory Action:**

**Title 8, California Code of Regulations**

**Adopt sections:** 10206, 10206.1, 10206.2,  
10206.3, 10206.4, 10206.5,  
10206.14, 10206.15, 10207,  
10208, 10208.1

**Amend sections:** 10205, 10205.12

**Repeal sections:**

**NOTICE OF APPROVAL OF CERTIFICATE OF  
COMPLIANCE**

**Government Code Section 11349.1 and  
11349.6(d)**

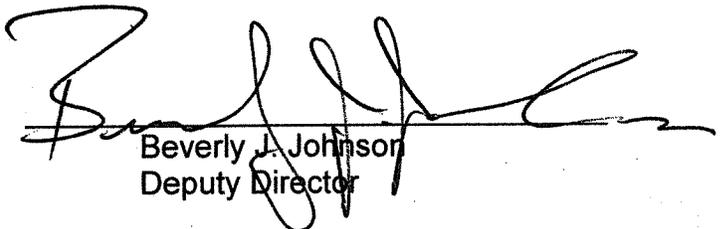
**OAL File No. 2013-1108-01 C**

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The California Division of Worker's Compensation submitted this timely certificate of compliance to make permanent the emergency regulations adopted in OAL file no. 2012-1219-01E, re-adopted in OAL file no. 2013-0620-06EE, and re-adopted again in OAL file no. 2013-0924-01EE. The mandatory electronic filing process for workers' compensation liens, claims of costs, lien filing and activation fees are implemented. A dismissal of liens not activated within the time provided and a statute of limitations for filing liens is established.

OAL approves this regulatory action pursuant to section 11349.6(d) of the Government Code.

**Date:** 12/16/2013

  
Beverly J. Johnson  
Deputy Director

**For:** DEBRA M. CORNEZ  
Director

**Original:** Destie Overpeck  
**Copy:** Destie Overpeck

# NOTICE PUBLICATION/REGULATIONS SUBMISSION

# CERT

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-09)

OAL FILE NUMBERS	NOTICE FILE NUMBER <b>Z-</b>	REGULATORY ACTION NUMBER <b>2013-1108-DIC</b>	EMERGENCY NUMBER
For use by Office of Administrative Law (OAL) only			
NOTICE		REGULATIONS	

ENDORSED FILED IN THE OFFICE OF

2013 DEC 16 PM 3:19

*Jenna Bowen*  
JENNA BOWEN  
SECRETARY OF STATE

2013 NOV -8 AM 9:18  
OFFICE OF ADMINISTRATIVE LAW

AGENCY WITH RULEMAKING AUTHORITY Division of Workers' Compensation	AGENCY FILE NUMBER (if any)
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### 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 Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON	TELEPHONE NUMBER 0	FAX NUMBER (Optional)
OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	ACTION ON PROPOSED NOTICE	NOTICE REGISTER NUMBER <b>2013, 62</b>	PUBLICATION DATE <b>2/8/13</b>

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

1a. SUBJECT OF REGULATION(S) Workers' Compensation - Electronic Document Filing and Lien Filing Fee	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S) 2013-0924-01 EE; 2013-0620-06 EE, 2012-1219-01 E
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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 10206; 10206.1; 10206.2; 10206.3; 10206.4; 10206.5; 10206.14; 10206.15; 10207; 10208; 10208.1
	AMEND 10205; 10205.12
TITLE(S) 8	REPEAL

3. TYPE OF FILING			
<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input checked="" 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 type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))	<input type="checkbox"/> Other (Specify) _____		

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)  
**September 11, 2013 - September 25, 2013** per agency request **12/13/13**

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)

<input type="checkbox"/> Effective 30th day after filing with Secretary of State	<input checked="" type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> §100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify) _____
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6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

<input checked="" 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 Destie Overpeck	TELEPHONE NUMBER 510-286-0656	FAX NUMBER (Optional) 510-286-0687	E-MAIL ADDRESS (Optional) doverpeck@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 <i>Destie Overpeck</i>	DATE <b>11/6/13</b>
TYPED NAME AND TITLE OF SIGNATORY Destie Overpeck, Acting Administrative Director	

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED

DEC 16 2013

Office of Administrative Law