



TEXAS DEPARTMENT OF INSURANCE

Division of Workers' Compensation - Office of General Counsel (MS-15)

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To: Workers' Compensation System Participants

From: Nicholas Canaday, III, General Counsel

Date: September 5, 2019

RE: Revisions to DWC Form-073, *Work Status Report*

The Texas Department of Insurance, Division of Workers' Compensation (DWC) has revised DWC Form-073, *Work Status Report*. The revised form is available at www.tdi.texas.gov/forms/form20numeric.html.

The revised DWC Form-073 reflects that advanced practice registered nurses (APRNs) may complete and file the form as authorized by House Bill (HB) 387 (86th Legislature, Regular Session, 2019). Other changes were made to the form to make it appear less cluttered and to update unnecessary, outdated information.

On August 7, 2019, DWC posted a proposed draft of DWC Form-073 and requested informal comments. Because the draft was not a formal rule proposal under the Administrative Procedures Act, comments were not treated as formal public comments. However, based on the comments received, DWC made further revisions to the form, as described below:

- Enlarged box 1, entitled "Injured Employee's Name," by editing box 5a, "Doctor's Name and Degree or Delegating Doctor and Degree" to read "Doctor's/Delegating Doctor's Name and Degree."
- Edited box 15, entitled "Restrictions Specific To," specifically deleting the space beneath the words "Restrictions Specific To" to add additional space to write near "Other" at the bottom of the box.

DWC encourages system participants to continue accepting the former DWC Form-073 through the end of the calendar year to allow doctors, physician assistants, and APRNs time to transition to the updated form.