TDI Division of Workers' Compensation
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To: Texas Workers' Compensation System Participants

From: Kara Mace, Deputy Commissioner, Legal Services

Date: March 9, 2022

RE: DWC Forms Updated for Letterhead and Mailing Address

On June 8, 2021, the Texas Department of Insurance, Division of Workers' Compensation (DWC) issued a plan to update DWC notices and forms with a new letterhead and mailing address.

The plan included updates to the English and Spanish versions of some forms with DWC's new letterhead and return address only (Group Two Forms). There are no updates to the form revision date in the lower left corner or to barcode information.

The forms listed below are ready for immediate use. We will post updated forms to use immediately with no comment period.

- DWC Form-022, *Request for Required Medical Exam*
- DWC Form-049, *Request to Schedule a Medical Contested Case Hearing (MCCH)*
- DWC Form-052, *Application for Supplemental Income Benefits*

For questions or other information, contact Jeff Nelson, director of External Relations, at 512-804-4405 or jeff.nelson@tdi.texas.gov.