

ADVISORY NO. 205

TOPIC: TWCC FORM UPDATE

We are attaching the following recently adopted TWCC Forms:

- TWCC-32 - Notice of Maximum Medical Improvement/
Impairment Rating Dispute
- TWCC-33 - Carrier's Request for Reduction of Income
Benefits Due to Contribution
- TWCC-53 - Employee's Request to Change Treating Doctors
- TWCC-102 - Accident Prevention Plan Cover Sheet

Also attached is information pertaining to TWCC-66a. Should you have questions regarding any of the forms, please call Robbin Stull, TWCC Forms Manager at: (512) 440-3899.