

# ENFORCEMENT DECREE OF THE INDUSTRIAL ACCIDENT COMPENSATION INSURANCE ACT

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Presidential Decree No. 16871, Jun. 27, 2000  
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Presidential Decree No. 20947, Jul. 29, 2008  
Presidential Decree No. 20966, Aug. 7, 2008

## CHAPTER I

### General Provisions

#### Article 1 (Purpose)

The purpose of this Decree is to provide for the matters delegated by the Industrial Accident Compensation Insurance Act and those necessary for the enforcement thereof.

#### Article 2 (Businesses Excluded from Application of the Act)

(1) "Businesses prescribed by the Presidential Decree" in the proviso of Article 6 of the Industrial Accident Compensation Insurance Act (hereinafter referred to as "the Act") mean businesses or workplaces (hereinafter referred to as "businesses") which fall under any of the following subparagraphs: *<Amended by Presidential Decree No. 20966, Aug. 7, 2008> <Enforcement Date Jan. 1, 2009>*

1. Businesses for which accident compensation is made under the Public Officials' Pension Act or the Veteran's Pension Act ;
2. Businesses for which accident compensation is made under the Seaman Act, the Act on Accident Compensation Insurance for Fishermen and Fishing Boats or the Private School Teachers Pension Act ;

3. Construction work falling under any of the following items and carried out by those other than housing constructors under the Housing Act, constructors under the Framework Act on the Construction Industry, constructors under the Electrical Construction Business Act, information and communication-related constructors under the Information and Communication Work Business Act, fire-fighting systems constructors under the Fire-fighting Systems Construction Act or repair business operators of cultural properties under the Protection of Cultural Properties Act :
    - A. Construction work whose total construction amount (hereinafter referred to as "total construction amount") prescribed in Article 2 (1) 2 of the Enforcement Decree of the Act on the Collection, etc., of Premiums for Employment Insurance and Industrial Accident Compensation Insurance is less than 20 million won; and
    - B. Construction work involving the construction of a building with a total floor area of 100m<sup>2</sup> or less or renovation of a building with a total floor area of 200 m<sup>2</sup> or less;
  4. Employment activities within households;
  5. Businesses other than those referred to in subparagraphs 1 through 4, where the number of workers who are employed ordinarily does not exceed one. In this case, the method of calculating the number of workers who are employed ordinarily shall be prescribed by the Ordinance of the Ministry of Labor; and
  6. Businesses other than incorporations in the fields of agriculture, forestry (excluding the logging industry), fishery and hunting, where the number of workers who are employed ordinarily is less than five. In this case, the method of calculating the number of workers who are employed ordinarily shall be prescribed by the Ordinance of the Ministry of Labor.
- (2) Unless otherwise provided in this Decree, the scope of the businesses referred to in the subparagraphs of paragraph (1) shall be subject to the Korean Standard Industrial Classification announced publicly by the head of the National Statistical Office under the Statistics Act.
- (3) If construction work whose total construction amount is less than twenty million won becomes subject to the blanket application under Article 8 (1) or (2) of the Act on the

Collection, etc., of Premiums for Employment Insurance and Industrial Accident Compensation Insurance (hereinafter referred to as the "Insurance Premium Collection Act"), or the total construction amount becomes more than twenty million won due to a design change (including cases where an actual change is made to the design), it shall be subject to the Act from that time.

**Article 3 (Functions of Industrial Accident Compensation Insurance Deliberation Committee)**

The Industrial Accident Compensation Insurance Deliberation Committee (hereinafter referred to as the "Committee") referred to in Article 8 (1) of the Act shall deliberate matters described in any of the following subparagraphs:

1. Matters concerning the criteria for calculating medical care benefits, such as the scope and amount of medical care benefits, referred to in Article 40 (5) of the Act;
2. Matters concerning the determination of the rates of industrial accident compensation insurance premiums referred to in Article 14 (3) and (4) of the Insurance Premium Collection Act;
3. Matters concerning the establishment of the plan for the operation of the Industrial Accident Compensation Insurance and Prevention Fund referred to in Article 98 of the Act; and
4. Other matters referred to discussion by the Minister of Labor with respect to industrial accident compensation insurance activities (hereinafter referred to as "insurance activities").

**Article 4 (Composition of the Committee)**

The members of the Committee shall be appointed or commissioned by the Minister of Labor as follows:

1. Members representing workers shall be five persons who are recommended by trade unions which are a confederation of trade unions;
2. Members representing employers shall be five persons who are recommended by employers' organizations representing the whole country; and
3. Members representing the public interests shall be five persons, each described in the following items.
  - A. Vice Minister of Labor
  - B. One public official of Grade III in charge of industrial accident compensation insurance affairs in the Ministry

of Labor or one general public official in the Senior Civil Service

- C. Three persons among those recommended by citizens' groups (referring to non-profit private organizations prescribed in Article 2 of the Assistance for Non-Profit Non-Governmental Organizations Act) and those with plenty of academic knowledge or experiences in social insurance

**Article 5 (Term of Office of Members)**

(1) The term of office of the members shall be three years and may be renewed: Provided that in case of the members who are the Vice Minister of Labor and a public official of Grade III in charge of industrial accident compensation insurance affairs or a general public official in the Senior Civil Service, it shall be the tenure of their offices.

(2) The term of any member filling a vacancy shall be the remaining period of his predecessor's term.

**Article 6 (Chairman and Vice Chairman)**

(1) The Committee shall have a chairman and a vice chairman.

(2) The chairman shall be the Vice Minister of Labor, and the vice chairman shall be elected by the Committee from among the members representing the public interest.

(3) The chairman shall represent the Committee, and take general control over the affairs of the Committee.

(4) The vice chairman shall assist the chairman, and if the chairman cannot perform his/her duties for inevitable reasons, he/she shall act for the chairman.

**Article 7 (Meeting of Committee)**

(1) The chairman shall convene a meeting of the Committee, and preside at it.

(2) A meeting of the Committee shall be convened at the request of the Minister of Labor or a majority of all the members.

(3) A meeting of the Committee shall be held with the attendance of a majority of all the members, and make a decision with the approval of a majority of the members present.

**Article 8 (Expert Committees)**

(1) A policy expert committee and a medical care expert committee shall be set up in the Committee pursuant to Article 8 (3) of the Act.

(2) The policy expert committee shall professionally examine and coordinate matters concerning the finances, application, collection, benefits, rehabilitation and welfare of industrial accident compensation insurance on the order of the chairman of the Committee and the medical care expert committee shall examine and coordinate medical care benefit standards, such as the scope and amounts of medical care benefits, and matters concerning medical care, on the order of the chairman of the Committee and then both shall report the results to the Committee.

(3) Each expert committee shall be composed of less than 25 non-standing members.

(4) The members of the policy expert committee shall be commissioned by the chairman from among those falling under any of the following subparagraphs:

1. General public officials of Grade IV or higher in charge of industrial accident compensation insurance affairs in the Ministry of Labor;

2. Persons recommended by trade unions which are a confederation of trade unions or nationwide employers' organizations; and

3. Persons with plenty of academic knowledge or experience in the finances, application, collection, benefits, etc., of social insurance.

(5) The members of the medical care expert committee shall be commissioned by the chairman from among those falling under any of the following subparagraphs:

1. General public officials of Grade IV or higher in charge of industrial accident compensation insurance affairs in the Ministry of Labor;

2. Persons recommended by trade unions which are a confederation of trade unions or nationwide employers' organizations; and

3. Persons with plenty of medical knowledge and experience in each professional field, such as industrial medicine.

(4) The composition and operation of the expert committees and other necessary matters shall be determined by the chairman after resolution of the Committee.

#### **Article 9 (Executive Secretary of Committee)**

(1) The Committee shall have an executive secretary for the management of its affairs.

(2) The executive secretary shall be appointed by the Minister

of Labor from among public officials under his/her control.

**Article 10 (Allowances of Member)**

Members of the Committee or the expert committee, who attend a meeting of the Committee or the expert committee may be paid allowances within the limits of the budget: Provided that this shall not apply in case members who are a public official attend the committee concerning work directly related to their duties.

**Article 11 (Operational Regulations)**

Except as provided in this Act, matters necessary for the operation of the Committee shall be determined by the chairman after resolution of the Committee.

**Article 12 (Vicarious Implementation of Survey and Research Projects)**

The Minister of Labor, pursuant to Article 9 (2) of the Act, may have a research institution established in accordance with Article 8 of the Act on the Establishment, Operation and Fosterage of Government-Invested Research Institutions, etc., carry out part of survey and research projects concerning industrial accident compensation insurance affairs. In this case, when selecting the research institution, the institution's research staff and performance records regarding industrial accident compensation insurance affairs shall be considered.

## *CHAPTER II*

### **Korea Workers' Compensation & Welfare Service**

**Article 13 (Non-standing Director of Corporation)**

(1) The ex officio directors of the Korea Workers' Compensation & Welfare Service under Article 10 of the Act (hereinafter referred to as the "Corporation") shall be any of the persons described in the following subparagraphs :

1. Public officials of Grade III in charge of the budget of the Corporation in the Ministry of Strategic Planning and Finance or general public officials in the Senior Civil Service ; and
2. Public officials of Grade III in charge of insurance activities in the Ministry of Labor or general public officials in the Senior Civil Service.

(2) Non-standing directors excluding the ex officio directors of the Corporation shall be a person falling under any of the following subparagraphs. In this case, the number of non-standing directors falling under subparagraphs 1 and 2 shall be equal:

1. Persons recommended by trade unions which are a confederation of trade unions

2. Persons recommended by nationwide employers' organizations; and

3. Persons with plenty of academic knowledge or experience in social insurance or labor welfare activities.

#### **Article 14 (Approval of Budgets and Operational Plan)**

(1) If the Corporation intends to obtain approval from the Minister of Labor concerning budgets for the following fiscal year pursuant to Article 25 (1) of the Act, it shall submit a request for budgets and business prospectus based on the budgets to the Minister of Labor until before the start of the following fiscal year:

(2) If the Corporation intends to obtain approval from the Minister of Labor concerning an operational plan pursuant to Article 25 (1) of the Act, it shall establish an operational plan and submit it to the Minister of Labor without delay after the approved budgets are confirmed.

(2) If the Corporation intends to modify the operational plan and budget approved under paragraphs (1) and (2), it shall submit a document specifying the reason and contents of such modification to the Minister of Labor to obtain his/her approval.

#### **Article 15 (Submission of Statement of Accounts)**

When the Corporation submits a statement of accounts for each fiscal year to the Minister of Labor under Article 25 (2) of the Act, it shall be accompanied by the following documents:

1. The financial statements (including written audit opinions expressed by a certified public accountant or an accounting firm) and all documents annexed thereto; and

2. Other documents necessary for clarifying the contents of the statement of accounts.

#### **Article 16 (Approval of Corporation Regulations)**

When the Corporation intends to establish or revise its regulations on matters described in the following subparagraphs, it shall obtain the approval of the Minister of Labor:

1. Matters concerning the organization and the full number of personnel of the Corporation;

2. Matters concerning the personnel administration and remuneration of the officers and employees;
3. Matters concerning the accounting of the Corporation; and
4. Other important matters concerning the operation, insurance activities and labor welfare activities of the Corporation.

**Article 17 (Application for Approval on Borrowing, etc. of Funds)**

(1) If the Corporation intends to obtain approval on any borrowing of funds under Article 27 (1) of the Act, it shall submit to the Minister of Labor the application for approval specifying the following matters:

1. Reasons for the borrowing;
2. Source from which the funds are borrowed;
3. Amount of borrowed money;
4. Conditions of the borrowing;
5. Repayment method and period; and
6. Other matters necessary for the borrowing and repayment

(2) If the Corporation intends to obtain approval on the appropriation by bringing in funds from the Industrial Accident Compensation Insurance and Prevention Fund under Article 27 (2) of the Act, it shall submit to the Minister of Labor the application for approval specifying matters concerning reasons for the appropriation by bringing in funds, the amount, etc.

**Article 18 (Delegation of Authority of President of Corporation)**

(1) The scope of the work of the Corporation over which the authority of the president of the Corporation may be delegated to the head of its branch office (hereinafter referred to as "affiliate organization") is shown in Table 1.

(2) Notwithstanding the delegation of the authority of the president of the Corporation under paragraph (1), the authority over litigation proceedings, requests for appeal under the Administrative Appeals Act and requests for examination under the Board of Audit and Inspection Act, to which the Corporation is a party, shall rest with the president of the Corporation.

**Article 19 (Entrustment of Affairs)**

(1) The scope of the work entrusted by the Corporation pursuant to Article 29 (1) of the Act is as follows :

1. Matters concerning the payment of insurance benefits; and
2. Work incidental to those matters referred to in subparagraph 1



- (2) If the Corporation has entrusted its work pursuant to paragraph (1), it may pay the entrusted person fees resulting from the entrustment.

**Article 20 (Investment, etc.)**

If the Corporation intends to make any investment or contribution pursuant to Article 32 (1) of the Act, it shall submit to the Minister of Labor an application specifying the following matters to obtain his/her approval:

1. Needs for the investment or contribution;
2. Kinds and value of the property to be invested or contributed;
3. Outline of the business; and
4. Other matters necessary for the investment or contribution

*CHAPTER III*

**Insurance Benefits**

**SECTION 1**

**Insurance Benefit Standards**

**Article 21 (Claim for Insurance Benefits, Notification of Decision, etc.)**

(1) A person who intends to receive any of the following insurance benefits pursuant to Article 36 (2) of the Act shall file an application or a claim for such insurance benefits with the Corporation:

1. Wage replacement benefits;
  2. Lump sum disability compensation or disability compensation annuities (including the lump sum payments prescribed in Article 57 (5) of the Act);
  3. Nursing benefits;
  4. Lump sum survivors' compensation or survivors' compensation annuities (including the lump sum payments prescribed in Article 62 (4) of the Act);
  5. Injury-disease compensation annuities;
  6. Funeral expenses; and
  7. Vocational rehabilitation benefits
- (2) The Corporation shall, upon receiving an application or

a claim for insurance benefits as referred to in paragraph (1), decide whether or not to pay the insurance benefits, the contents of the payment, etc., and inform the claimant of them.

(3) If the Corporation has decided to pay disability compensation annuities or survivors' compensation annuities, it shall deliver an annuity certificate to the person entitled thereto.

#### **Article 22 (Increase or Decrease in Average Wage)**

(1) The criteria for and methods of calculating the rate of increase or decrease in the average wage of all workers and the rate of increase or decrease in consumer prices under Article 36 (3) and (4) of the Act are shown in Table 2.

(2) The increase or decrease of the average wage under Article 36 (3) of the Act may be made at the request of the person entitled to the insurance benefits or by virtue of the authority of the Corporation.

#### **Article 23 (Scope of Workers in Unusual Type of Employment)**

"The cases prescribed by the Presidential Decree where it is deemed inappropriate to apply the average wage of the worker due to his/her unusual type of employment" in Article 36 (5) of the Act refer to cases of applying average wages for workers (hereinafter referred to as "daily workers") who are employed on a daily basis or paid wages on a daily basis (referring to the wages paid as a reward for the set number of working hours in one day) for the number of days worked : Provided that if a daily worker falls under any of the following subparagraphs, he/she shall be seen as such :

1. Where his/her employment relations have continued for three months or more ;
2. Where his/her type of employment is considered similar to that of a permanent worker after comprehensive consideration of the working conditions, type of employment contract, specific employment conditions, etc., of other daily workers engaged in the same kind of job in the same business as the worker concerned.

#### **Article 24 (Method of Calculation of Average Wage for Workers in Unusual Type of Employment)**

(1) "An amount calculated according to the calculation method prescribed by the Presidential Decree" in Article 36 (5) of the Act refers to an amount calculated by multiplying the daily wage of the daily worker concerned by the working day coefficient (hereinafter referred to as "ordinary working day coefficient") announced by the Minister of Labor after

taking into account the number of days actually worked by daily workers for a month, etc.

(2) A daily worker who has worked in the business concerned for not less than one month as of the date of occurrence of causes for calculating the average wage may apply for exclusion from the application of the calculation method referred to in paragraph (1) to the Corporation by submitting the application together with documents proving the actual wage and number of days worked, if given the actual wage and number of days worked, it is not appropriate to take the amount calculated according to the calculation method referred to in paragraph (1) as the average wage.

**Article 25 (Special Case for Calculation of Average Wages for Persons with Occupational Disease)**

(1) "The occupational diseases prescribed by the Presidential Decree, such as pneumoconiosis" in Article 36 (6) of the Act refer to diseases (hereinafter in this Article referred to as "occupational diseases") falling under any of the following subparagraphs among the work-related diseases (hereinafter referred to as "work-related diseases") referred to in Article 37 (1) 2 of the Act : Provided that diseases that acutely arise due to temporary exposure to large amounts of harmful or hazardous elements shall be excluded :

1. Pneumoconiosis;
2. Any of the diseases described in subparagraph 2 A and B, subparagraph 4 B, subparagraphs 5 through 7, subparagraph 8 A and B, subparagraph 9, subparagraph 10 A, subparagraph 11 A, subparagraph 12 A, subparagraph 13 A, subparagraph 14 A, subparagraph 15 A and B, subparagraph 16 A, subparagraph 17 A, subparagraph 18, subparagraph 19 A and B, subparagraph 20, subparagraph 21 and subparagraph 22 E through I in Table 3; and
3. Other diseases which result from long-term exposure to harmful or hazardous elements or are recognized as having occurred after a latent period after exposure to harmful or hazardous elements.

(2) "An amount calculated according to the calculation methods prescribed by the Presidential Decree refers to an amount obtained by dividing the sum of all the average monthly wages of workers with similar wage levels to that of the worker for the one year preceding the last day of the quarter two quarters before the occupational disease is

confirmed by the total number of days in that period.

(3) The day when the occupational disease is confirmed, referred to in paragraph (2), shall be the date of issuance of the medical certificate or medical opinion issued when it is confirmed that the occupational disease is eligible for insurance benefits : Provided that in any of the following cases, it shall be the date described therein:

1. In case there is time and medical continuity between the examination, treatment, etc., of the occupational disease and the issuance of the medical certificate or medical opinion, the start date of the medical care; or

2. In case of noise-induced hearing loss, the date on which the worker has stopped engaging in work involving exposure to noise

(4) All the average monthly wages of workers with similar wage levels referred to in paragraph (2) shall be all the average monthly wages of workers who are similar to the worker with the occupational disease in terms of sex, occupation, and type and size of business they belong to according to data on average monthly wages for workers from the survey on wage and working hours at establishments (hereinafter referred to as the "survey on wages and working hours at establishments") prepared by the Minister of Labor as the designated statistics prescribed in Article 3 of the Statistics Act. In this case, the criteria for judging such workers similar to the worker in terms of sex, occupation and type and size of business they belong to shall be determined by the Corporation.

(5) In applying the provisions of Article 36 (6) of the Act, if the occupational disease is confirmed after the shutdown or closure of the business to which the worker belongs (including cases where the worker has retired before the business shutdown or closure), an amount obtained by increasing or decreasing the amount calculated on the basis of the date of the business shutdown or closure pursuant to paragraph (2) in accordance with subparagraph 1 of Table 2 shall be regarded as the average wage of the worker.

(6) If a person entitled to insurance benefits intends to be subject to the special case for the calculation of average wages as referred to in article 36 (6) of the Act, he/she shall apply for the special case for the calculation of average wages to the Corporation.

#### **Article 26 (Method of Calculating Maximum and Minimum Standard**

**Amount of Compensation)**

(1) The average wages of all workers used as the basis for calculating the maximum standard amount of compensation (hereinafter referred to as the "maximum standard amount of compensation) and the minimum standard amount of compensation (hereinafter referred to as the "minimum standard amount of compensation) referred to in Article 36 (7) of the Act shall be an amount obtained by dividing the sum of all the average monthly wages of every worker from July 1st of the insurance year two insurance years ago to June 30th of the preceding insurance year by 365 (or 366 in case the month of February during that period has 29 days).

(2) When calculating the maximum standard amount of compensation and the minimum standard amount of compensation, amounts less than one Won shall be rounded off.

(3) The application period for the maximum standard amount of compensation and the minimum standard amount of compensation shall be from January 1st to December 31st of the insurance year concerned.

**SECTION 2****Criteria for Recognition of Work-related Accidents****Article 27 (Accidents While Performing Duties)**

(1) An accident that happens while the worker is carrying out any of the following acts shall be seen as the work-related accident under Article 37, (1) 1 A of the Act:

1. Acts of performing his/her duties in accordance with his/her employment contract;

2. Physiologically necessary acts, such as going to the toilet, in the course of performing his/her duties;

3. Acts of preparing for or wrapping up work and other necessary acts incidental to his/her duties; and

4. Acts expected as a social norm, such as acts of emergency refuge or rescue caused by unexpected accidents, such as natural disasters, fires, etc., which happen inside the workplace

(2) An accident that happens while the worker is performing his/her duties outside the workplace following instructions from the employer shall be seen as the work-related accident under Article 37 (1) 1 A of the Act : Provided that an accident that happens while the worker is carrying out an act

violating specific instructions from the employer or his/her private act or is off his/her normal business travel course shall not be seen as a work-related accident.

(3) An accident that happens in relation to the work a worker who has no fixed place of work because of the nature of his/her duties performs from the time when he/she starts to work after first arriving at the place of work until he/she leaves work after finally completing work shall be seen as the work-related accident under Article 37 (1) 1 A of the Act.

**Article 28 (Accidents Due to Defect, etc., in Facilities, etc.)**

(1) An accident that happens due to a defect in, or the careless management by the employer of, the facilities, equipment, vehicles, etc., (hereinafter referred to as "facilities, etc.") provided by the employer shall be seen as the work-related accident under Article 37 (1) 1 B of the Act.

(2) An accident that happens due to the use of the facilities, etc., provided by the employer in violation of specific instructions from the employer and an accident that happens during the management or use of the facilities, etc., while the worker has entire and exclusive responsibility to manage or use them shall not be seen as the work-related accident under Article 37 (1) 1 B of the Act.

**Article 29 (Accidents During Commute to and from Work)**

(1) If an accident that happens while the worker is commuting to and from work meet all of the following conditions, it shall be seen as the work-related accident under Article 37 (1) 1 C of the Act:

1. The accident should happen while the worker is using a means of transport which either is provided by the employer for the worker's commute to and from work or can be regarded as being provided by the employer;

2. The worker should not have entire and exclusive responsibility to manage or use the means of transport used for his/her commute to and from work.

**Article 30 (Accidents During Events)**

(1) If a worker's participation in various events, (hereinafter referred to as "events") such as sports events, picnics and mountain-climbing events, is deemed necessary for labor management or business operation under social norms, and the case falls under any of the following subparagraphs, an accident happening during his/her participation in such events (including

preparation and rehearsal for such events) shall be seen as the work-related accident under Article 37 (1) 1 D of the Act :

1. Where for the worker participating in the event, the employer recognizes his/her hours spent to participate in the event as hours worked;

2. Where the employer orders the worker to participate in the event;

3. Where the worker participates in the event after obtaining approval from the employer in advance; and

4. Other cases equivalent to subparagraphs 1 through 3 where the employer has usually and customarily recognized the worker's participation in the event.

#### **Article 31 (Accidents in Particular Place)**

- (1) An accident that happens due to natural disasters, such as typhoons, floods, earthquakes and avalanches, or unexpected incidents, while the worker is doing an act deemed possible to do inside the workplace under social norms shall be seen as the work-related accident under Article 37 (1) 1 F of the Act, except when it is obvious that the accident happens while the worker is engaging in an act not related to his/her work, such as private acts and walking out on his/her jobs.

#### **Article 32 (Accidents During Medical Care)**

- (1) If an accident falling under any of the following subparagraphs happens to a worker who is receiving medical care for a work-related injury or disease, the accident shall be seen as the work-related accident under Article 37 (1) 1 F of the Act:

1. Medical accident happening in relation to medical care benefits; or

2. Accident happening in relation to medical care for work-related injuries or diseases at the industrial accident insurance-related medical institution where the worker is receiving medical care

#### **Article 33 (Accidents Caused by Third Person's Acts)**

- (1) In case where an accident happens to a worker because of a third person's act, if the work the worker are in charge of is deemed possible, by nature, to cause the third person to do an harmful act under social norms, the accident shall be seen as the work-related accident under Article 37 (1) 1 F of the Act.

#### **Article 34 (Criteria for Recognition of Work-related Diseases)**

(1) If a worker gets a disease included in the scope of work-related diseases referred to in Article 44 (1) and Table 5 of the Enforcement Decree of the Labor Standards Act and meets all of the following conditions, the disease shall be seen as the work-related disease under Article 37 (1) 2 A of the Act:

1. The worker has ever handled, or been exposed to, harmful or hazardous elements while performing his/her duties;

2. The disease is deemed possible to arise in the light of the hours for which the worker has handled or been exposed to harmful or hazardous elements, the period during which the worker has been engaged in such work, work environments, etc.,; and

3. The fact that the worker's exposure to or handling of harmful or hazardous elements has caused the disease to arise should be medically recognized.

(2) If a disease that arises in a worker suffering from a work-related injury meets all of the following conditions, the disease shall be seen as the work-related disease under Article 37 (1) 2 B of the Act:

1. The causal relationship between the work-related injury and the disease should be medically recognized; and

2. The underlying illness or existing disease should not be a naturally happening symptom.

(3) The specific criteria for the recognition of work-related diseases (excluding pneumoconiosis) under paragraphs (1) and (2) are shown in Table 3.

(4) When deciding whether to recognize a worker's work-related diseases or death caused by such work-related disease, the Corporation shall take into account the worker's sex, age, health, physical constitution, etc.

#### **Article 35 (Criteria for Recognition of Work-related Diseases Due to Pneumoconiosis)**

(1) If a worker contracts pneumoconiosis as a result of engaging in the dust work prescribed by the Ordinance of the Ministry of Labor, he/she shall be seen as having the work-related disease under Article 37 (1) 2 A of the Act.

(2) The types of pneumoconiosis and criteria for judging cardiopulmonary disabilities to consider when insurance benefits are paid to a worker suffering from pneumoconiosis as prescribed in paragraph (1) are shown in Table 4.

(3) If a worker has type 1 pneumoconiosis referred to in Table 4, and is deemed in need of medical care as she/he falls



under any of the following subparagraphs, the worker shall be eligible for medical care benefits :

1. As a complication of pneumoconiosis, the worker has active pulmonary tuberculosis (including cases where the type of pneumoconiosis is suspected pneumoconiosis), pleuritis, bronchitis, bronchiectasis, pneumothorax, pulmonary emphysema (limited to cases where the cardiopulmonary function has a mild disability or worse), cor pulmonale, primary lung cancer (limited to those who have ever engaged in dust work in the mining industry) or atypical mycobacterial infection; or

2. The cardiopulmonary function has a severe disability due to pneumoconiosis

- (4) If a worker has type 4 pneumoconiosis and is deemed in need of the prevention of complications or other measures as the size of large opacity is more than half of one lung, the worker shall be eligible for medical care benefits.

#### **Article 36 (Criteria for Recognition of Work-related Diseases Due to Self-Harm)**

"The cause prescribed by the Presidential Decree" in the proviso of Article 37 (2) of the Act refers to cases falling under any of the following subparagraphs :

1. Where a person who received or is receiving medical treatment for mental illness arising for work-related reasons does self-harm in a state of mental disorder;

2. Where a person who is receiving medical care due to an work-related accident does self-harm in a state of mental disorder caused by the work-related accident; or

3. Other cases where the fact that self-harm is done in a state of mental disorder due to work-related reasons is medically recognized

#### **Article 37 (Presumption of Death)**

- (1) Cases where a person is presumed to be dead under Article 39 (1) of the Act shall be those falling under any of the following subparagraphs :

1. Where an accident happens in which a ship is sunk, capsized, destroyed or missing, or aircraft is crushed, destroyed or missing, and the life or death of a worker aboard the ship or aircraft has been unknown for three months after the accident occurs;

2. Where a worker aboard a ship or aircraft on voyages went missing, and his/her life or death has been

- unknown for three months after he/she went missing; or
3. Where the life and death of a worker on the site of various accidents such as natural disasters, fires and building collapses, etc., has been unknown for three months after the accident occurs.
- (2) A person who is presumed dead under paragraph (1), shall be presumed to have died on the day the accident occurred or he/she went missing.
- (3) If a person whose life or death has been unknown due to any of the causes as referred to in each subparagraph of paragraph (1) is confirmed to be dead within three months after the accident occurred, or he/she went missing, but the date of his/her death is obscure, he/she shall be presumed to be dead on the day as referred to in paragraph (2).
- (4) An insurance subscriber shall make without delay a report on the confirmation of the missing or death of the worker to the Corporation, when any of the causes as referred to in subparagraphs of paragraph (1) occurs, or when the death is confirmed (including the case where the worker is presumed dead under paragraph (3)).
- (5) If after the payment of insurance benefits under Article 39 (1) of the Act, the worker's survival was confirmed, the person who has received the insurance benefits and the insurance subscriber shall make a report on the confirmation of the worker's survival to the Corporation, within fifteen days after the survival was confirmed.
- (6) If the worker's survival is confirmed, the Corporation shall notify the person who has received the insurance benefits that he/she should pay the amount referred to in Article 39 (2) of the Act.
- (7) A person who is given notification pursuant to paragraph (6) shall pay the notified amount to the Corporation within thirty days after he/she is given the notification.

### SECTION 3

#### **Medical Care Benefits, etc.**

##### **Article 28 (Claim, etc., for Medical Care Expenses)**

- (1) The medical care expenses an entitled person can receive pursuant to the proviso of Article 40 (2) of the Act are described in the following subparagraphs :
1. Medical care expenses incurred in case the person

receives urgent medical care, such as emergency treatment, at a medical institution other than the industrial accident insurance-related medical institutions (hereinafter referred to as "industrial accident insurance-related medical institutions") referred to in Article 43 (1) of the Act;

2. Expenses (limited to cases where such expenses are not provided by industrial accident insurance-related medical institutions) spent for any of the following medical care benefits:

A. Provision of artificial limbs or other prosthetic devices under Article 40 (4) 2 of the Act;

B. Patient caring under Article 40 (4) 6 of the Act; and

C. Transfers under Article 40 (4) 7 of the Act

3. Other medical care expenses deemed by the Corporation to have a justifiable cause

(2) A person who intends to receive the medical care expenses referred to in paragraph (1) shall file the claim with the Corporation.

(3) If it is urgent or there are other inevitable reasons, the Corporation may pay in advance the expenses required for the transfers referred to in Article 40 (4) 7 of the Act after receiving the claim from the worker concerned.

#### **Article 39 (Criteria for Imposition and Payment of Penalties)**

(1) If the Corporation intends to impose penalties pursuant to Article 44 (1) of the Act, it shall investigate and confirm the offense and then notify the person subject to the imposition that he/she should pay such penalties, specifying the facts of offense, the amount of penalties, how to file an objection, the period for filing an objection, etc.

(2) The person notified pursuant to paragraph (1) shall pay the penalties to the agency designated by the Corporation within twenty days after receiving the notification: Provided that in case he/she is unable to pay the penalties within the said period for a natural disaster or other inevitable reasons, he/she shall pay the penalties within seven days after the reason has disappeared.

(3) The agency which has received the penalties pursuant to paragraph (2) shall issue a receipt to the person who paid the penalties.

(4) The agency responsible for receiving penalties, upon receiving penalties pursuant to paragraph (2), shall inform the Corporation of the receipt without delay.

(5) The criteria for the imposition of penalties by type and

degree of offense, etc., referred to in Article 44 (2) of the Act are shown in Table 5.

**Article 40 (Submission of Medical Treatment Plans)**

(1) An industrial accident insurance-related medical institution shall include the following matters in a medical treatment plan (hereinafter referred to as "medical treatment plan") referred to in Article 47 (1) of the Act:

1. Name of the injury or disease the worker is suffering from due to a work-related accident;
2. Progress in, details of the treatment of, and current state of, the injury or disease of the worker;
3. Medical necessity of extending the medical care period;
4. Methods, contents and period of future treatment, such as in-hospital treatment, outpatient treatment or treatment while in employment; and
5. Other matters necessary for the treatment of the worker

(2) An industrial accident insurance-related medical institution shall prepare a medical treatment plan referred to in paragraph (1) on a three monthly basis (on a yearly basis if the injury or disease requires long-term medical care lasting one year or longer due to its characteristics and is the ones determined by the Corporation) and submit it to the Corporation at least seven days before the end of the previous medical care period (referring to the changed medical care period in case the Corporation makes changes pursuant to Article 41 (2) 1).

**Article 41 (Examination of Medical Treatment Plan and Measures to Change)**

(1) When the Corporation examines a medical treatment plan pursuant to Article 47 (2) of the Act, it may seek advice from an advisory doctor referred to in Article 42 or undergo deliberation by a panel of advisory doctors referred to in Article 43:

(2) "The necessary measures prescribed by the Presidential Decree" in Article 47 (2) of the Act refer to the measures described in the following subparagraphs:

1. Termination of treatment or reduction of scheduled treatment periods;
2. Changes to treatment methods, such as hospitalization, outpatient treatment, etc.;
3. Transfer to another hospital; and
4. Other changes to medical treatment plans

(3) If the Corporation intends to take any of the measures referred to in paragraph (2) with regard to a medical treatment plan, it shall notify the worker and industrial accident insurance-related medical institution concerned of its content.

**Article 42 (Advisory Doctor)**

(1) The Corporation may commission or appoint doctors, dentists or oriental medicine doctors (including doctors, dentists or oriental medicine doctors who are an employee of the Corporation) as advisory doctors in order to give medical advice necessary for making decisions on the payment of insurance benefits, medical expenses, medicine expenses, etc., resulting from work-related accidents or for other insurance activities.

(2) Necessary matters concerning qualifications for advisory doctors (hereinafter referred to as "advisory doctors") referred to in paragraph (1) and procedures, etc., for the commission and appointment thereof shall be determined by the Corporation

**Article 43 (Panel of Advisory Doctors)**

(1) The Corporation shall have a panel of advisory doctors under its affiliate organization in order to give systematic advice on decisions on the payment of insurance benefits, medical expenses, medicine expenses, etc., resulting from work-related accidents and on matters relating to other insurance activities, which need medical judgments.

(2) The panel of advisory doctors shall be composed of five advisory doctors or more.

(3) The panel of advisory doctors shall deliberate on the following matters which need medical judgments, in response to a request for advice by the Corporation:

1. Whether to terminate treatment for a worker receiving medical care (limited to cases where there is a difference of medical opinion regarding the termination of treatment between doctor in charge and advisory doctor);

2. Adequacy of reasons for a transfer to another hospital under Article 48 (1) 4 of the Act;

3. Medical opinions regarding the calculation of the amount of lump-sum insurance benefits referred to in Article 72;

4. Medical opinions regarding the adjudication or judgment referred to in the proviso of Article 118 (4); and

5. Other matters concerning insurance benefits, medical expenses and medicine expenses, which the head of the affiliate organization of the Corporation deems in need of deliberation

by the panel of advisory doctors

(4) Matters necessary for the composition and operation of the panel of advisory doctors shall be determined by the Corporation.

**Article 44 (Hospital Transfer)**

"The procedures prescribed by the Presidential Decree" in Article 48 (1) 4 of the Act refer to the procedures for deliberation by the panel of advisory doctors.

**Article 45 (Additional Injury or Disease)**

Injuries or diseases resulting from the accidents during medical care under Article 32 shall be regarded as the additional injury or disease under Article 49 of the Act in applying for medical care benefits.

**Article 46 (Industrial Accident Insurance-related Medical Institutions Subject to Evaluation)**

(1) "The medical institutions prescribed by the Presidential Decree" in the former part of Article 50 (1) of the Act shall be the industrial accident insurance-related medical institutions referred to in Article 43 (1) 3 of the Act : Provided that the medical institutions evaluated pursuant to Article 58 of the Medical Service Act shall be evaluated only against the evaluation categories relating to the quality of medical care, which are excluded from the evaluation under the same Act.

(2) The Corporation may select medical institutions to be evaluated from among the industrial accident insurance-related medical institutions subject to evaluation pursuant to paragraph (1) after taking into consideration their manpower, facilities, size, outcomes of medical treatment for workers suffering from a work-related accident, amount of medical expenses claimed, results, etc., of previous evaluations regarding medical care benefits, etc.

**Article 47 (Method, etc., of Evaluating Industrial Accident Insurance-related Medical Institutions)**

(1) The method of the evaluation of industrial accident insurance-related medical institutions under Article 50 of the Act shall be either on-site evaluation or written evaluation. In this case, industrial accident insurance-related medical institutions selected for on-site evaluation shall be so notified in advance.

(2) The evaluation criteria for industrial accident insurance-related medical institutions are as follows:

1. Manpower, facilities and equipment;
  2. Content and level of medical service;
  3. Satisfaction levels of workers who have received medical care
  4. Outcomes of medical treatment for workers suffering from a work-related accident; and
  5. Other matters concerning the quality of medical care for workers suffering from a work-related accident
- (3) Details necessary for the evaluation under paragraph (2) shall be determined by the Corporation.

**Article 48 (Requirements and Procedures for Additional Medical Care)**

(1) The additional medical care (hereinafter referred to as "additional medical care") under Article 51 of the Act shall be provided in cases where a person has received medical care benefits (or disability benefits in the case of injuries or diseases for which disability benefits not medical care benefits have been received) for a work-related injury or disease and satisfy all of the following requirements :

1. There is causal relations between the work-related injury or disease cured and the injury or disease subject to additional medical care;

2. The state of the injury or disease subject to additional medical care has deteriorated compared with when the person was cured and the deterioration is not due to age or other reasons unrelated to work;

3. Active treatments, such as surgical operations (including operations to remove a fixed object from the body or reoperations on mutilated parts in order to attach artificial limbs), are deemed necessary for improving the state of the injury or disease subject to additional medical care; and

4. The injury or disease subject to additional medical care should be expected to be able to be treated by the additional medical care

(2) A person who intends to receive additional medical care shall apply for additional medical care to the Corporation under the conditions prescribed by the Ordinance of the Ministry of Labor.

## SECTION 4

### Wage Replacement Benefits

**Article 49 (Requirements for Payment of Partial Wage Replacement Benefits)**

A person who intends to receive the partial wage replacement benefits referred to in Article 53 of the Act shall meet all of the following requirements:

1. While receiving medical care, the person should be employed in a fixed business, be engaged in a fixed job and has fixed working hours; and

2. There should be a doctor's opinion that even the worker's employment will neither delay the cure of, nor aggravate, his/her injury and disease.

**Article 50 (Procedures for Payment of Partial Wage Replacement Benefits)**

(1) A person who intends to receive partial wage replacement benefits shall file the claim with the Corporation with the documents prescribed by the Ordinance of the Ministry of Labor attached thereto.

(2) Upon receipt of the claim referred to in paragraph (1), the Corporation shall decide whether to make that payment after taking into consideration the worker's state of injury or disease, work, working hours, etc., and inform the worker of the decision.

**Article 51 (Grace Period Before Payment of Wage Replacement Benefits in Reduced Amount for the Aged)**

"The period prescribed by the Presidential Decree" in the proviso of Article 55 of the Act refers to two years after the start of medical care due to a work-related accident.

**Article 52 (Date of Occurrence of Reasons for Calculating Average Wage Due to Additional Medical Care)**

"The date of the occurrence of reasons for calculating the average wage" in the latter part of Article 56 (1) of the Act refers to any of the following days:

1. The day when the injury or disease subject to additional medical care is diagnosed as requiring additional medical care: Provided that if there is time or medical continuity between the diagnosis and the examination or treatment of the injury or disease subject to additional medical care prior to the diagnosis, the start day of the examination or treatment; or

2. In the case of diseases for which whether or not they are subject to additional medical care should be judged following



the procedures prescribed by the Ordinance of the Ministry of Labor because of the characteristics of the diseases, the date of issuance on the medical certificate or medical opinion available at the time of applying for such judgment

## SECTION 5

### Disability Benefits

#### Article 53 (Criteria, etc., for Disability Grades)

(1) The criteria for disability grades referred to in Article 57 (2) of the Act shall be governed by Table 6. In this case, detailed criteria, etc., for the judgement of disability grades by body part shall be prescribed by the Ordinance of the Ministry of Labor.

(2) If there are two or more disabilities falling under the criteria for disability grades as prescribed in Table 6, the disability grade of the worker concerned shall be that of the more severe disability, and if there are two or more disabilities falling under grade 13 or higher, the disability grade of the worker concerned shall be the one adjusted according to the following subparagraphs: Provided that if the disability grade is arithmetically higher than grade 1 as a result of the adjustment, grade 1 shall be the disability grade of the worker concerned, and if the degree of the disability is deemed obviously lower than the degree of the other disabilities set forth for the adjusted grade, the grade just below the adjusted grade shall be the disability grade of the worker concerned:

1. If there are two or more disabilities falling under grade 5 or higher, the grade shall be adjusted upwards by three;
2. If there are two or more disabilities falling under grade 8 or higher, the grade shall be adjusted upwards by two; and
3. If there are two or more disabilities falling under grade 13 or higher, the grade shall be adjusted upwards by one.

(3) If there is a disability not prescribed in Table 6, the grade of a similar disability shall be the grade of the disability.

(4) If a person, who already has a disability, has disabilities in the same body part aggravated due to a work-related injury or disease, the amount of disability benefits shall be the one calculated on the basis of the number of

payment days for lump-sum disability compensation or disability compensation annuities by grade of disability as shown in Table 2 in accordance with the following subparagraphs :

1. When the benefits are paid in the form of lump-sum disability compensation : the number of payment days for lump-sum disability compensation corresponding to the aggravated disability minus the number of payment days for lump-sum disability compensation corresponding to the existing disability and then multiplied by the amount of average wage at the time when the reason for claiming the payment of the benefits occurs; or
  2. When the benefits are paid in the form of disability compensation annuities: the number of payment days for disability compensation annuities corresponding to the aggravated disability minus the number of payment days for disability compensation annuities corresponding to the existing disability (if the existing disability is a disability falling under grades 8 through 14, the number of payment days for lump-sum disability compensation corresponding to such disability multiplied by 22.2/100) and then multiplied by the amount of average wage at the time of the payment of the annuities.
- (5) "The disability grades prescribed by the Presidential Decree, which are characterized as a complete loss of work ability" in the proviso of Article 57 (4) of the Act refer to disability grades 1 to 3 as set forth in Table 6.
- (6) A person who intends to receive a lump sum payment pursuant to Article 47 (5) of the Act shall make the claim with the Corporation.

**Article 54 (Interest Rate for Disability Compensation Annuities Paid in Advance)**

If disability compensation annuities are paid in advance pursuant to Article 57 (4) of the Act, the payment shall be made after subtracting 2/100 of the annuities to be paid in advance.

**Article 55 (Persons Subject to Redetermination of Disability Grades)**

(1) Those subject to the redetermination of disability grades pursuant to Article 59 (3) of the Act shall be persons entitled to disability compensation annuities, who fall under any of the

following subparagraphs:

1. Where the person has one or more of the disabilities eligible for disability compensation annuities, which fall under grades 1-3, 2-5, 3-3, 5-8, 7-4, 9-15 or 12-15 set forth in Table 6;

2. Where the person has one or more of the disabilities eligible for disability compensation annuities, which fall under grades 6-5, 7-14, 8-2, 9-17, 10-8, 11-7 or 12-16 set forth in Table 6 (limited to cases where the disability grade is determined based on spinal nerve root disorder);

3. Where the person has one or more of the disabilities eligible for disability compensation annuities, which fall under grades 1-6, 1-8, 4-6, 5-4, 5-5, 6-6, 6-7, 7-7, 7-11, 8-4, 8-6, 8-7, 9-11, 9-13, 10-10, 10-13, 10-14, 11-9, 11-10, 12-9, 12-10, 12-12, 12-14, 13-8 or 13-11 set forth in Table 6 (limited to cases where the disability grade is determined based on the motor functions of body joints);

4. Where the person is left with any of the disabilities (limited to disabilities related to pneumoconiosis) eligible for disability compensation annuities, which fall under grades 3-6, 5-9 or 7-15 set forth in Table 6 ; or

5. Where the person has disabilities referred to in Article 53 (3), which are eligible for disability compensation annuities and include one or more of the disabilities prescribed in subparagraphs 1 through 3

(2) Notwithstanding the provision of paragraph (1), if the final disability grade of a person entitled to disability compensation annuities has not changed because of his/her other disabilities even though the grades of some of his/her disabilities have changed pursuant to subparagraphs of paragraph (1), he/she shall be excluded from those subject to the redetermination of disability grades.

**Article 55 (Period, etc., for Redetermination of Disability Grades)**

(1) The redetermination of disability grades under Article 59 of the Act shall be made within one year after two years have passed since the day when the decision to pay disability compensation annuities was made.

(2) Notwithstanding the provision of paragraph (1), if a person subject to the redetermination of disability grades receives additional medical care, the redetermination shall be made within one year after two years have passed since the day when he/she was cured after the additional medical care (in case his/her disability grade has changed, the day when the

decision to pay disability compensation annuities according to that change was made).

(3) If the Corporation intends to redetermine a disability grade pursuant to paragraphs (1) or (2), it shall demand the person subject to the redetermination to undergo the medical examination under Article 117 (1) 2.

(4) A person who intends to have his/her disability grade redetermined pursuant to Article 59 (1) of the Act shall make the application to the Corporation under the conditions prescribed by the Ordinance of the Ministry of Labor.

(5) If the Corporation intends to redetermine a disability grade, it shall inform the worker concerned of the industrial accident insurance-related medical institution which will examine the degree of disability, the date of medical examination or other matters necessary for the redetermination at least 30 days before the date of the medical examination.

**Article 57 (Method of Payment of Disability Benefits According to Redetermination of Disability Grades)**

(1) If a person files a claim for disability compensation annuities as his/her disability grade has changed as a result of the redetermination of disability grades pursuant to Article 59 of the Act, disability compensation annuities corresponding to the changed disability grade shall be paid beginning from the month following the month in which the date of medical examination falls.

(2) If a person files a claim for lump-sum disability compensation as his/her disability grade has changed as a result of the redetermination of disability grades pursuant to Article 59 of the Act, the payment shall be made in accordance with the following subparagraphs:

1. In case the disability has worsened : the person shall be paid the number of payment days for lump-sum disability compensation corresponding to the changed disability grade minus the sum of the numbers of days obtained by dividing the amount of disability compensation annuities already paid by each average wage at the time of the payment and then multiplied by the average wage; or

2. In case the disability has improved (including cases where the changed disability grade is between grade 8 and grade 14) : only when the number of payment days for lump-sum disability compensation corresponding to the changed disability grade is larger than the sum of the numbers of days

obtained by dividing the amount of disability compensation annuities already paid by each average wages at the time of the payment, shall the person be paid the amount of average wage multiplied by the difference in the number of days.

(3) In the case of paying disability compensation annuities pursuant to paragraph (1), Article 57 (4) of the Act shall not apply.

**Article 58 (Disability Benefits After Additional Medical Care)**

(1) If a person who has received disability compensation annuities files a claim for disability compensation annuities as his/her disability grade has changed after receiving additional medical care, disability compensation annuities corresponding to the changed disability grade shall be paid beginning from the month following the month in which the day he/she was cured after additional medical care falls.

(2) If a person who has received disability compensation annuities files a claim for lump-sum disability compensation as his/her disability grade has changed after receiving additional medical care, the payment shall be made in accordance with the following subparagraphs :

1. In case where the disability has worsened : the person shall be paid the number of payment days for lump-sum disability compensation corresponding to the changed disability grade minus the sum of the numbers of days obtained by dividing the amount of disability compensation annuities already paid by each average wage at the time of the payment and then multiplied by the average wage; or

2. In case where the disability has improved (including cases where the changed disability grade is between grade 8 and grade 14) : only when the number of payment days for lump-sum disability compensation corresponding to the changed disability grade is larger than the sum of the numbers of days obtained by dividing the amount of disability compensation annuities already paid by each average wages at the time of the payment, shall the person be paid the amount of average wage multiplied by the difference in the number of days

(3) If a person who has received lump-sum disability compensation has his/her disability worsened compared with before after additional medical care, the disability benefits shall be paid according to the following methods:

1. In case where he/she files a claim for the payment in the form of disability compensation annuities : disability

compensation annuities corresponding to the changed disability grade shall be paid beginning from the month following the month in which the day he/she was cured after additional medical care falls, but he/she shall not be paid the amount of disability compensation annuities corresponding to the number of days for which the lump-sum disability compensation has been paid;

2. In case where he/she files a claim for the payment in the form of lump-sum disability compensation : he/she shall be paid the number of payment days for lump-sum disability compensation corresponding to the changed disability grade minus the number of payment days for lump-sum disability compensation corresponding to the previous disability grade and then multiplied by the average wage.

(4) The average wage used to calculate disability benefits after additional medical care shall be the amount obtained by increasing or decreasing the average wage (the average wage at the time of the termination of the previous medical care in case disability benefits have not been received before) used to calculate the previous disability benefits pursuant to Article 22.

(5) In the case of paying disability compensation annuities after additional medical care, Article 57 (4) shall not apply : Provided that this shall not apply if a person who was previously ineligible for disability benefits receives disability compensation annuities after additional medical care.

## SECTION 6

### **Nursing Benefits**

#### **Article 59 (Payment Standard and Method of Nursing Benefits)**

(1) Those eligible for the nursing benefits referred to in Article 61 (1) of the Act are shown in Table 7.

(2) Nursing benefits shall be paid for days during which a person eligible for nursing benefits pursuant to paragraph (1) actually receives nursing care.

(3) The standard amount of nursing benefits shall be the one announced by the Minister of Labor on the basis of total monthly wages, etc., by occupation according to the survey on labor conditions by type of employment prepared by the Minister of Labor among the designated statistics referred to in Article 3 of the Statistics Act. In this case, the amount of

nursing benefits to be paid to those eligible for occasional nursing benefits shall be two thirds of the amount to be paid to those eligible for permanent nursing benefits.

(4) Notwithstanding the provision of paragraph (1), a person eligible for nursing benefits spends no nursing expenses as he/she enters a free-of-charge nursing home, etc., or spends less than the standard amount under paragraph (3), the amount actually spent shall be paid as his/her nursing benefits.

(5) If a person entitled to nursing benefits receives additional medical care pursuant to Article 51 of the Act, nursing benefits shall not be paid during the additional medical care.

(6) The method of claiming nursing benefits shall be prescribed by the Ordinance of the Ministry of Labor.

## SECTION 7

### **Survivors Benefits**

#### **Article 60 (Appointment, etc., of Representative for Claiming Survivors' Compensation Annuity)**

(1) If there are two or more persons entitled to a survivors' compensation annuity, one of them may be appointed as a representative to claim and receive the survivors' compensation annuity.

(2) If a representative is appointed under paragraph (1), or the appointed representative is dismissed, it shall be reported without delay to the Corporation together with documents to attest such appointment or dismissal.

#### **Article 61 (Scope of Surviving Family Members Supported by Worker)**

(1) "The surviving family members whose livelihood was supported by the worker" in Article 63 (1) of the Act refer to persons falling under any of the following subparagraphs :

1. A surviving family member who is described as having lived with the worker in the same household in the resident registration index book under the Resident Registration Act and all or substantial part of whose livelihood was maintained by the worker's incomes;

2. A surviving family member all or substantial part of whose livelihood was maintained by the worker's incomes but who is registered as having resided in a different household

from, or did not live with, the worker due to study, employment, medical care and other residential circumstances;

3. Surviving family members other than those referred to in paragraphs (1) and (2), all or most part of whose livelihood was maintained with the help of money and other valuable goods or economic support regularly provided by the worker

**Article 62 (Suspension, etc., of Payment of Survivors' Compensation Annuity)**

(1) In case the right to receive a survivors' compensation annuity has been transferred pursuant to Article 64 (2) of the Act, a person who intends to newly receive a survivors' compensation annuity shall file with the Corporation for a change of the person entitled to survivors' compensation annuities.

(2) In case a person entitled to a survivors' compensation annuity has been missing for three months or more pursuant to Article 64 (3) of the Act, the payment of the annuity to that missing person shall be suspended at the request of a person (in case no such person exists, the person next in the order) at the same priority level in the order as the entitled person for the period of disappearance starting from the month following the month in which the entitled person went missing and the amount calculated in accordance with Article 62 (2) and Table 3 of the Act shall be paid as a survivors' compensation annuity. In this case, the missing person previously entitled to survivors' compensation annuity shall not be regarded as those entitled to survivors' compensation annuity, to whom additional payment referred to in Article 62 (2) and Table 3 of the Act applies.

(4) A person for whom the payment of a survivors' compensation annuity is suspended pursuant to paragraph (2) may apply any time for the nullification of the suspension.

**Article 63 (Adjustment of Survivors' Compensation Annuity)**

If there occur the causes described in the following subparagraphs, the Corporation may adjust, at the request of a person entitled to survivors' compensation annuities or by virtue of its authority, the amount of survivors' compensation annuities for months following the month in which those causes occur :

1. Where a child who was a fetus at the time of the worker's death is born;
2. Where the suspension of payment is lifted under Article 62 (3)



3. Where the person entitled to survivors' compensation annuities is disqualified under Article 64 (1); and
4. Where the person entitled to survivors' compensation annuities is missing

## SECTION 8

### **Injury-Disease Compensation Annuities**

#### **Article 64 (Payment, etc., of Injury-Disease Compensation Annuities)**

(1) A person who intends to receive an injury-disease compensation annuity as prescribed in Articles 66 through 69 of the Act shall file a claim with the Corporation for injury-disease compensation annuity, together with a medical certificate issued by a doctor, which can attest to his/her state of invalidity.

(2) If the invalidity grade of a worker receiving an injury-disease compensation annuity has changed, the Corporation may pay, at the request of the entitled person or by virtue of its authority, injury-disease compensation annuities based on the new invalidity grade starting from the month following the month in which such a change has taken place.

(3) When a worker receiving injury-disease compensation annuities files a claim for injury-disease compensation annuities due to a change of his/her invalidity grade under paragraph (2), he/she shall attach a medical certificate issued by a doctor, which can attest to his/her state of invalidity.

#### **Article 65 (Criteria, etc., for Invalidity Grades)**

(1) The criteria for invalidity grades based on which injury-disease compensation annuities are paid pursuant to Articles 66 through 69 of the Act are shown in Table 8.

(2) With regard to the adjustment of invalidity grades in case there are two invalidities or more, the provision of Article 53 (2) shall apply *mutatis mutandis*. In this case, "disability grades" shall be read as "invalidity grades" and "disability" as "invalidity" and the disability grades 4 to 14 set forth in Table 6 shall be regarded as respective corresponding invalidity grades.

(3) If an existing invalidity is aggravated due to a new work-related injury or disease, the amount of injury-disease compensation annuity for the aggravated invalidity grade shall be calculated by subtracting the number of payment days for

injury-disease compensation annuities corresponding to the existing validity grade from the number of payment days for injury-disease compensation annuities corresponding to the aggravated validity grade and then multiplying the resulting number by the average wage at the time of the payment of the annuity.

## SECTION 9

### Funeral Expenses

#### **Article 66 (Calculation of Maximum and Minimum Funeral Expenses)**

(1) The maximum and minimum amounts of funeral expenses prescribed in Article 71 (2) of the Act shall be calculated in accordance to the following subparagraphs:

1. Maximum amount of funeral expenses : 90 days of the average funeral expenses per person paid to a person entitled to funeral expenses in the previous year + 30 days of the maximum standard amount of compensation under Article 36 (7) of the Act; and

2. Minimum amount of funeral expenses : 90 days of the average funeral expenses per person paid to a person entitled to funeral expenses in the previous year + 30 days of the minimum standard amount of compensation under Article 36 (7) of the Act

(2) In calculating the maximum and minimum amounts of funeral expenses, amounts less than ten Won shall be rounded off.

(3) The application period for the maximum and minimum amounts of funeral expenses shall be from January 1 to December 31 of the following year.

## SECTION 10

### Vocational Rehabilitation Benefits

#### **Article 67 (Support for Vocational Rehabilitation)**

(1) For the vocational rehabilitation of a person suffering from a work-related accident, the Corporation may provide psychological counseling, information necessary for vocational rehabilitation, vocational assessment in consideration of the worker's vocational desire, skills, etc., assistance in establishing

a plan to return to work or other necessary supports while or after the worker receives medical care.

(2) The Corporation may ask for cooperation in counseling, assessment or other areas from a person suffering from a work-related accident, if such cooperation is needed for providing the support for vocational rehabilitation referred to in paragraph (1).

**Article 68 (Persons Eligible for Vocational Rehabilitation Benefits)**

(1) The training targets (hereinafter referred to as "training targets") referred to in Article 72 (1) 1 of the Act shall be those who meet all of the following requirements :

1. The person should fall under any of disability grades 1 to 9;

2. The person should be aged under 60 when applying for vocational training;

3. The person should be unemployed. In this case, the scope of unemployment shall be defined by the Ordinance of the Ministry of Labor;

4. The person is not receiving any other vocational training; and

5. The person has established a plan to return to work pursuant to Article 67 (1).

(2) Notwithstanding the provisions of paragraph (1) 3, if a training target who is receiving vocational training is employed during the vocational training period, he/she may be allowed to receive the vocational training until it ends, but shall not be paid vocational training allowances for the period of employment.

(3) If the training target referred to in paragraph (1) receives job-seeking benefits under the Employment Insurance Act or wage replacement benefits under this Act during his/her vocational training period, he/she may be allowed to receive the vocational training, but shall not be paid vocational training allowances.

(4) The recipients of disability benefits (hereinafter referred to as "recipients of disability benefits) referred to in Article 72 (1) 2 of the Act shall be those who are left with a disability falling under any of disability grades 1 to 9 when they return to the work concerned.

**Article 69 (Restrictions on Payment of Vocational Training Costs)**

(1) "Such cases as prescribed by the Presidential Decree" in the proviso of Article 73 (2) of the Act refer to cases where a vocational training institution falls under any of the following subparagraphs with regard to vocational training for the training

target concerned:

1. Where it has received support for job adaptation training pursuant to Article 11 of the Act on Employment Promotion and Vocational Rehabilitation for the Disabled and support for vocational skills development training pursuant to Article 12 of the same Act;

2. Where it has received support for vocational skills development training pursuant to Article 29 of the Employment Insurance Act;

3. Where it has received support for vocational skills development training pursuant to Articles 12 through 15, 18 and 21 of the Workers Vocational Skills Development Act;

4. Where the employer who intends to employ the training target has borne the vocational training costs; or

5. Where it has received support equivalent to the vocational training costs under other Acts or subordinate statutes

**Article 70 (Requirements for Payment of Return-to-work Subsidy, etc.)**

(1) The return-to-work subsidy referred to in Article 75 (2) of the Act shall be paid if an employer has retained a recipient of disability benefits for not less than six months since the termination of the medical care and paid resulting wages : Provided that if the recipient of disability benefits voluntarily retires less than six months after the termination of the medical care, the return-to-work subsidy until the retirement day shall be paid.

(2) The work adaption training costs and rehabilitation exercise costs referred to in Article 75 (3) of the Act shall be paid if an employer has provided work adaption training or rehabilitation exercise programs necessary for a recipient of disability benefits to perform his/her duties or switch to other duties and meets all of the following requirements :

1. The employer started the work adaptation training or rehabilitation exercise programs within six months after the termination of the medical care;

2. The employer has retained the worker for six months or more after the end of the work adaptation training or rehabilitation exercise programs : Provided that this shall not apply if the recipient of disability benefits voluntarily retires less than six months after the end of the work adaptation training or rehabilitation exercise programs

**Article 71 (Restrictions on Payment of Return-to-work Subsidy, etc.)**

(1) "Such cases as prescribed by the Presidential Decree" in

Article 75 (4) of the Act refer to cases where an employer employing a recipient of disability benefits fall under any of the following subparagraphs:

1. Where he/she has received support under Articles 23, 27 and 32 of the Employment Insurance Act;

2. Where he/she has received employment subsidy under Article 30 of the Act on Employment Promotion and Vocational Rehabilitation for the Disabled;

3. Where he/she has received support under Article 20 (1) of the Workers Vocational Skills Development Act;

4. Where in the three months before or six months after a recipient of disability benefits returns to work, he/she makes another recipient of disability benefits or a disabled person prescribed by the Act on Employment Promotion and Vocational Rehabilitation for the Disabled retire from the business for the purpose of getting return-to-work subsidy;

5. Where he/she employs a disabled person required to be employed pursuant to Article 28 of the Act on Employment Promotion and Vocational Rehabilitation for the Disabled (limited to return-to-work subsidy); or

6. Where he/she has received support equivalent to the return-to-work subsidy, work adaptation training costs or rehabilitation exercise costs under other Acts or subordinate statutes

## SECTION 11

### **Lump-sum Payment, etc. of Insurance Benefits**

#### **Article 72 (Criteria for Lump-sum Payment of Insurance Benefits)**

"Each amount converted according to the methods prescribed by the Presidential Decree" in Article 76 (2) of the Act refers to the amount of insurance benefits referred to in each subparagraph of the same paragraph minus 2/100 of that amount. In this case, the amount of injury-disease compensation annuity shall be the amount of lump-sum disability compensation for the disability grade corresponding to the invalidity grade and the amount of disability compensation annuity shall be the amount of lump-sum disability compensation for the disability grade.

#### **Article 73 (Criteria, etc., for Payment of Special Disability Benefits)**

(1) "The grades of disability prescribed by the Presidential Decree" in Article 78 (1) of the Act refer to disability grades 1 to 3 as prescribed in Table 6.

(2) "The special disability benefits as prescribed by the Presidential Decree" in Article 78 (1) of the Act refer to the amount calculated by subtracting the lump sum disability compensation referred to in Article 57 of the Act from the amount calculated by multiplying 30 days of average wages by the rate of work ability loss for each disability grade shown in Table 5 and by Leibniz's coefficient corresponding to the period to be employed as prescribed in Table 11.

(3) The period to be employed in the future under paragraph (2) shall be from the date of the determination of disability grade to the day when the person reaches the mandatory retirement age set by the collective agreements or the employment rules. In this case, if the collective agreements or the employment rules do not provide for a mandatory retirement age, sixty years of age shall be considered as the mandatory retirement age.

**Article 74 (Criteria, etc., for Payment of Special Survivors' Benefits)**

(1) "The special survivors' benefits prescribed by the Presidential Decree" in Article 79 (1) of the Act refer to the amount obtained by subtracting the living costs (the amount calculated by multiplying 30 days of his/her average wages by the rate of living costs as set forth in Table 6) of the deceased person from 30 days of his/her average wages and then subtracting the lump sum survivors' compensation referred to in Article 62 of the Act from the resulting amount multiplied by Leibniz's coefficient corresponding to the number of months to be employed as set forth in Table 11.

(2) The provisions of Article 73 (3) shall apply mutatis mutandis to the calculation of the period to be employed as referred to in paragraph (1). In this case, "the date of the determination of disability grade" shall be read as "the date of death".

**Article 75 (Collection of Special Benefits)**

(1) An insurance subscriber may, upon receiving a payment notice on special disability benefits or special survivors' benefits pursuant to Articles 78 (3) and 79 (2) of the Act, pay them in four equal installments over the course of one year.

(2) If special disability benefits or special survivors' benefits are paid in installments pursuant to paragraph (1), the first installment shall be paid by the end of the quarter in which the payment thereof is notified, and thereafter the

remaining installments by the end of respective quarters.

**Article 76 (Criteria for Adjustment to Other Compensation or Indemnity)**

(1) The “amount calculated by converting the money and valuable goods received according to the method as prescribed by the Presidential Decree” in the text of Article 80 (3) of the Act means the amount of insurance benefits corresponding to the number of days obtained by dividing the received money and valuable goods by the average wages at the time of the calculation of the damages : Provided that if the received money and valuable goods are medical care, the amount shall be the one spent for the medical care.

(2) In the application of the provisions of paragraph (1), if the insurance benefits to be paid to an entitled person are survivors’ compensation annuities or wage replacement benefits, the number of days obtained by dividing the survivors’ compensation annuities or wage replacement benefits by the average wages (the minimum wage in the case of the wage replacement benefits referred to in Article 54 (2) and 56 (2) of the Act) at the time of the calculation of the insurance benefits concerned shall be considered as the number of payment days for the insurance benefits and the average wages as the daily amount of the insurance benefits.

**Article 77 (Decision, etc., on Person With Right to Claim Unpaid Insurance Benefits)**

The provisions of Article 65 (1), (2) and (4) shall apply mutatis mutandis to decisions on a person with the right to claim any unpaid insurance benefits as prescribed in Article 81 of the Act.

**Article 78 (Scope, etc., of Restrictions on Payment of Insurance Benefits)**

(1) If a person entitled to insurance benefits falls under Article 83 (1) 1 of the Act, the Corporation shall not pay him/her an amount equivalent to 20 days (if the period until the occurrence of reasons for the payment is less than 20 days, that period) of the wage replacement benefits or injury-disease compensation annuities whose reason for payment occurs after the decision to restrict the payment of insurance benefits has been made.

(2) If a person entitled to injury-disease compensation annuities falls under Article 83 (1) 2 of the Act, the Corporation shall pay his/her disability benefits in accordance with the following subparagraphs:



1. If the state of disability has worsened compared with the previous disability grade, the Corporation shall pay disability compensation annuities corresponding to the previous disability grade; or

2. If it was confirmed by medical opinions, etc., that the state of disability had improved compared with the previous disability grade but the state of disability has worsened before the redetermination of disability grades, the Corporation shall pay disability benefits corresponding to the improved disability grade.

**Article 79 (Collection of Undue Gains)**

(1) When the Corporation has decided to collect any undue gains as prescribed in Article 84 of the Act, it shall notify without delay the person liable for the payment that he/she should pay such amount.

(2) The person who receives the notification under paragraph (1) shall pay the amount within thirty days after receiving the notification.

**Article 80 (Limit to and Procedure for Appropriation of Insurance Benefits, etc.)**

(1) When the Corporation appropriates insurance benefits, medical expenses and medicine expenses pursuant to Article 86 of the Act, the maximum appropriation limit shall be as follows :

1. If there are any insurance benefits to be paid to a person who has taken undue gains pursuant to Article 84 (1) of the Act, the maximum appropriation limit shall be 1/10 of the insurance benefits to be paid : Provided that if the person entitled to the insurance benefits agrees in writing to have more than 1/10 of the insurance benefits appropriated, under the conditions prescribed by the Ordinance of the Ministry of Labor, it shall be the agreed amount;

2. If a person who has taken undue gains pursuant to Article 84 (1) of the Act or a person held jointly responsible pursuant to paragraph (2) of the same Article is an insurance subscriber, the maximum appropriation limit shall be the amount of insurance benefits (including the subrogated amount, in case the insurance subscriber has subrogated the right to receive insurance benefits pursuant to Article 89 of the Act) to be paid to the insurance subscriber;

3. If there is any medical expenses to be paid to an industrial accident insurance-related medical institution held

jointly responsible pursuant to Article 84 (2) of the Act, the maximum appropriation limit shall be an amount equivalent to the medical expenses; or

4. If there are any medical expenses or medicine expenses to be paid to an industrial accident insurance-related medical institution or a pharmacy which has taken undue gains pursuant to Article 84 (3) of the Act, the maximum appropriation limit shall be an amount equivalent to the medical expenses or medicine expenses

(2) If the Corporation intends to make an appropriation pursuant to paragraph (1), it shall hear opinions from the person entitled to insurance benefits, insurance subscriber, industrial accident insurance-related medical institution or pharmacy and once it has decided to appropriate, shall inform without delay the person entitled to insurance benefits, insurance subscriber, industrial accident insurance-related medical institution or pharmacy of this.

#### **Article 81 (Adjustment of Insurance Benefits for Person Receiving Damages from Third Person)**

If a person entitled to insurance benefits receives damages from a third person, the provisions of Article 76 shall apply mutatis mutandis with regard to the method of converting the damages into an amount in which insurance benefits are not paid pursuant to the proviso of Article 87 (2) of the Act.

#### **Article 82 (Exercise by Proxy of Right to Benefits)**

(1) If an insurance subscriber (including subcontractors referred to in subparagraph 5 of Article 2 of the Insurance Premium Collection Act; hereinafter in this Article, the same shall apply) intends to receive insurance benefits by exercising by proxy the right of a person entitled to insurance benefits pursuant to Article 89 of the Act, he/she shall file the claim with the Corporation, together with documents certifying the fact that he/she has paid the entitled person money or other valuable goods equivalent to the insurance benefits for the same cause as insurance benefits should be paid under the Act.

(2) If an insurance subscriber files a claim to receive insurance benefits by exercising by proxy the right pursuant to paragraph (1), the Corporation shall check whether the person entitled to the insurance benefits has received money or other valuable goods equivalent to the amount of insurance

benefits concerned.

(3) If an insurance subscriber has provided a person entitled to insurance benefits with money or other valuable goods equivalent to his/her disability benefits or survivors' benefits pursuant to Article 89 of the Act, he/she shall be considered to have been provided money or other valuable goods equivalent to the lump sum disability compensation or lump sum survivors' compensation.

**Article 83 (Preparation of Benefit Ledger)**

(1) The Corporation shall, when paying insurance benefits, prepare and keep a benefit ledger by worker who has received the benefits.

(2) The Corporation shall, at the request of a person related to insurance benefits, allow him/her to inspect the benefit ledger and if necessary, may issue a certificate.

*CHAPTER IV*

**Labor Welfare Project**

**Article 84 (Persons Eligible for Loans for Individual Co-payment of Medical Care Benefit Costs under National Health Insurance)**

(1) "The persons prescribed by the Presidential Decree" in Article 93 (1) refer to those who meet all of the following requirements:

1. The Corporation has not take a decision on medical care benefits until after thirty days have passed since the day the worker applied for the medical care benefits pursuant to Article 41 (1) of the Act; and

2. There should be a medical opinion that a causal relationship is presumed to exist between the worker's job and disease in relation to which the worker applies for medical care benefits

**Article 85 (Maximum Limit to and Procedure for Appropriation for Loans)**

(1) When the Corporation makes an appropriation pursuant to Article 93 (2) of the Act, the maximum appropriation limit shall be the full amount of medical care benefits to be paid to the person provided with the loans.

(2) If the Corporation intends to make an appropriation pursuant to paragraph (1), it shall hear opinions from the person entitled to the medical care benefits and once it has decided to appropriate, shall inform without delay the person entitled to the medical care benefits of this.

*CHAPTER V*

## **Industrial Accident Compensation Insurance and Prevention Fund**

### **Article 86 (Operation of Fund)**

(1) "The activities prescribed by the Presidential Decree" in Article 97 (2) 5 refer to those described in the following subparagraphs : <Amended by Presidential Decree No. 20947, Jul. 29, 2008> <Enforcement Date Feb. 4, 2009>

1. Making loans for workers' welfare programs;
2. Buying securities under Article 4 of the Capital Market and Financial Investment Business Act; and
3. Acquiring and disposing of real estate in order to increase the Industrial Accident Compensation Insurance and Prevention Fund (hereinafter referred to as "the Fund") under Article 95 of the Act

(2) "The level prescribed by the Presidential Decree" in Article 97 (3) of the Act means the rate of return set by the Minister of Labor in consideration of interest rates on regular savings with maturity of one year in financial institutions under the Banking Act, which operate nationwide. In this case, the Minister of Labor may set a different rate on loans for workers' welfare programs as referred to in paragraph (1) from the rate of return for other businesses after consulting with the Minister of Strategic Planning and Finance.

### **Article 87 (Establishment of Fund Account)**

The Minister of Labor shall establish the Fund account with the Bank of Korea.

### **Article 88 (Payment, etc. of Premiums, etc. into Fund)**

(1) The Corporation shall pay collected insurance premiums and other charges into the Fund account.

(2) The Corporation shall report in writing to the Minister of Labor the amount of collected insurance premiums and other charges for the previous month, and the current situation of the collection of outstanding amounts, etc., by the end of each month.

### **Article 89 (Fund Operation Plan)**

The fund operational plan referred to in Article 98 of the Act shall include matters described in the following subparagraphs :

1. Matters concerning the revenues and expenditures of the Fund;

2. Matters concerning the business plans, plans on action causing expenditures and funding plans for the year concerned;
3. Matters concerning the settlement of funds carried over from the pervious year;
4. Matters concerning the legal liability reserve; and
5. Other matters necessary for the operation of the Fund.

**Article 90 (Base Amount for Calculation of Legal Liability Reserve)**

The base amount for calculating the legal liability reserve as prescribed in Article 99 (3) of the Act shall be the sum of all insurance benefits determined to be paid from January 1 to December 31 of the previous year as of December 31 of each year.

**Article 91 (Accounting Organization, etc., of Fund)**

(1) The Minister of Labor shall appoint a Fund revenue collector, Fund financial officer, Fund expenditure officer and Fund accounting officer from among the public officials under his/her control to carry out affairs concerning the revenues and expenditures of the Fund.

(2) The Corporation or the president of the Korea Occupational Health and Safety Agency under the Korea Occupational Health and Safety Agency Act may, if entrusted with affairs concerning the management and operation of the Fund under Article 97 (5) of the Act, appoint a director in charge of Fund revenues and a director in charge of actions causing expenditures from among the standing directors and a Fund expenditure employee and Fund cashier from among the employees, and shall report this to the Minister of Labor. In this case, the director in charge of Fund revenues shall perform the duties of the Fund revenue collector, the director in charge of actions causing expenditures those of the Fund financial officer, the Fund expenditure employee those of the Fund expenditure officer, and the Fund cashier those of the Fund accounting officer.

(3) The Minister of Labor shall notify the Chairman of the Board of Audit and Inspection and the governor of the Bank of Korea of the appointment of a Fund revenue collector, Fund financial officer, Fund expenditure officer, Fund accounting officer, director in charge of Fund revenues, director in charge of actions causing expenditures, Fund expenditure employee and Fund cashier under paragraphs (1) and (2).

**Article 92 (Expenditure-causing Action of Fund)**

(1) The Minister of Labor shall allot the monthly expenditure ceiling of the Fund to the Fund financial officer, and notify the Fund expenditure officer of this.

(2) The Fund financial officer shall take actions causing expenditures within the limits of the ceiling allotted under paragraph (1).

**Article 93 (Disbursement of Fund)**

(1) When the Fund financial officer has the Fund expenditure officer disburse money from the Fund, he/she shall send documents related to the action causing expenditures to the Fund expenditure officer.

(2) If the Fund expenditure officer intends to disburse money from the Fund following the expenditure-causing action of the Fund financial officer, he/she shall issue checks whose payer is the Bank of Korea, a financial institution under the Bank Act or a postal service agency.

(3) Any amount not disbursed in the fiscal year for inevitable reasons after the Fund financial officer takes a expenditure-causing action may be carried over to and then executed in, the following year.

**Article 94 (Prohibition of Cash Handling)**

The Fund expenditure officer and Fund accounting officer may not keep, receive or disburse cash : Provided that they may keep, receive or disburse cash in the case of the operating expenses of government agencies prescribed in Article 24 of the National Treasury Management Act.

**Article 95 (Statement of Fund Accounts)**

The Minister of Labor shall prepare the following documents concerning the settlement of the Fund accounts for each fiscal year, and submit them to the Minister of Strategic Planning and Finance by the end of February in the following fiscal year:

1. State of the settlement of the Fund accounts;
2. Financial statements, such as balance sheet, statement of profit and loss, etc.;
3. Table of comparison between the fund operation plans and actual results;
4. Statement of the revenue and expenditures; and
5. Other documents necessary for clarifying the contents of the settlement of accounts.

*CHAPTER VI*

## **Request for Examination and Re-examination**

### **Article 96 (Formalities of Request for Examination)**

(1) The request for examination referred to in Article 103 of the Act shall be made using a document (hereinafter referred to as “written request for examination”) specifying the following matters :

1. Name and address of the person making the request for examination (name and location of the corporation and name of its representative in case the person making the request for examination is a corporation);
2. Details of the decision on insurance benefits referred to in subparagraphs of Article 103 (1) of the Act, which is subject to the request for examination;
3. Date on which the decision on insurance benefits is known;
4. Purpose of and reasons for the request for examination; and
5. Whether the request for examination is notified or not, and the contents of the notification.

(2) If the person making the request for examination is not the worker suffering from the accident (excluding requests for examination filed against the decisions referred to in subparagraphs 2 and 3 of Article 103 (1) of the Act), the following matters shall be specified in the written request for examination in addition to those as referred to in subparagraphs of paragraph (1):

1. Name of the worker suffering from the accident; and
2. Name and location of the workplace to which the worker belonged at the time of the accident.

(3) If a request for examination is made by an appointed representative or agent, the name and address of the appointed representative or agent shall be specified in the written request in addition to those as referred to in paragraphs (1) and (2).

(4) A written request for examination shall be signed or sealed by the requesting person or agent.

### **Article 97 (Correction and Rejection)**

(1) If a request for examination is made after the expiration of the period prescribed in Article 103 (3) of the Act or violates the formalities as prescribed by the Act and its subordinate



statutes to the point of being unable to be corrected, or fails to be corrected within the period as referred to in paragraph (2), the Corporation shall decide to reject it.

(2) Even though a request for examination may violate the legal formalities, if it is possible to correct such violation, the Corporation may demand the person making the request for examination to correct it within a set period of time: Provided that if the matters to be corrected are insignificant, the Corporation may make that correction by virtue of its authority.

(3) If the Corporation corrects a request for examination by virtue of its authority pursuant to the proviso of paragraph (2), it shall notify the requesting person of this.

#### **Article 98 (Suspension of Execution of Decision on Insurance Benefits)**

(1) A request for examination shall not suspend the execution of a decision on the insurance benefits concerned: Provided that if it is deemed that there is an urgent necessity to avoid grave losses to be caused by the execution, the Corporation may suspend the execution.

(2) The Corporation shall, upon suspending the execution under the proviso of paragraph (1), notify this without delay using a document to the person making the request for examination and the affiliate organization of the Corporation which has made the decision about the insurance benefits concerned.

(3) The document referred to in paragraph (2) shall include the following matters :

1. Title of the case involving the request for examination;
2. Decision, etc., on the insurance benefits subject to the suspension of execution, and the details of the suspension of execution;
3. Name and address of the person making the request for examination; and
4. Reasons for the suspension of execution

#### **Article 99 (Composition of Industrial Accident Compensation Insurance Examination Committee)**

(1) The Industrial Accident Compensation Insurance Examination Committee (hereinafter referred to as "the Examination Committee") referred to in Article 104 (1) of the Act shall be composed of less than 60 members, including one chairperson, of which two shall be permanent members.

(2) The members of the Examination Committee shall be commissioned or appointed by the president of the Corporation

from among persons falling under any of the following subparagraphs:

1. Judges, public prosecutors, defence lawyers or certified public labor affairs consultants with 5 years or more of experience;

2. Those who are serving or served as an associate professor or higher at a college prescribed in Article 2 of the Higher Education Act;

3. Those who have been engaged in labor-related services or industrial accident compensation insurance-related services for 10 year or more; and

4. Those with plenty of knowledge and experience in social insurance or industrial medical science

(3) The chairperson of the Examination Committee shall be appointed by the president of the Corporation from among the permanent members.

(4) Two fifths of the members of the Examination Committee shall be commissioned from among persons falling under any subparagraph of paragraph (2) and recommended by workers' and employers' organizations, respectively. In this case, equal numbers of members shall be recommended by workers' and employers' organizations.

(5) The term of office of a member of the Examination Committee shall be three years and renewable : Provided that a member whose term has expired may perform the duties until his/her successor is appointed.

(6) Except as provided in this Decree, matters necessary for the organization of the Examination Committee shall be determined by the Corporation.

#### **Article 100 (Operation of Examination Committee)**

(1) The chairperson of the Examination Committee shall convene and chair meetings of the Examination Committee : Provided that if it is necessary for the smooth operation of the Examination Committee, a permanent member may preside over a meeting of the Examination Committee on the order of the chairperson.

(2) A meeting of the Examination Committee shall consist of the chairperson or a permanent member and six members designated by the chairperson each time for its meeting.

(3) A meeting of the Examination Committee shall be opened with attendance of a majority of the members referred to in paragraph (2) and a decision shall be taken with approval of a majority of the members present.

(4) If the Corporation makes a decision that has to undergo deliberation by the Examination Committee, in regard of a request for examination, it shall draw up a protocol of review as regards progress in the deliberation.

(5) With regard to the preparation, inspection, etc., of the protocol of review under paragraph (4), the provision of Article 110 shall apply *mutatis mutandis*. In this case, "Reexamination Committee" shall be read as "Examination Committee" and "request for reexamination" as "request for examination".

(6) Members, other than the permanent members and those working as an officer or employee of the Corporation, who are present at a meeting of the Examination Committee, may be paid allowances and travel expenses within the limits of the budget.

(7) Except as provided in this Decree, matters necessary for the operation of the Examination Committee shall be determined by the Corporation.

#### **Article 101 (Method of Decision on Request for Examination)**

(1) The decision on a request for examination as prescribed in Article 105 (1) of the Act shall be made in writing.

(2) The decision as referred to in paragraph (1) shall include the following matters :

1. Number and title of the case;
2. Name and address of the person making the request for examination (name and location of the corporation and name of its representative in case the person making the request for examination is a corporation);
3. If the person making the request for examination is not the worker suffering from the accident, the name and address of the affected worker;
4. Main text;
5. Purpose of the request for examination;
6. Reason; and
7. Date of decision

(3) When the Corporation has made a decision on a request for examination pursuant to paragraph (1), it shall send an original copy of the decision on examination to the person making the request for examination.

(4) In case where the Corporation makes a decision on insurance benefits or a request for examination, it shall inform the other party or the person making the request for examination of whether or not he/she can make a request for examination or reexamination with regard to the decision on

insurance benefits or a request for examination, and of the request procedures and period, if he/she makes the request.

**Article 102 (Exclusion from Deliberation by Examination Committee)**

(1) "The reasons prescribed by the Presidential Decree" in Article 105 (2) of the Act refer to cases where the request for examination falls under any of the following subparagraphs:

1. Where the decision on the recognition of work-related disease has been made after deliberation by the Work-related Disease Adjudication Committee under Article 38 of the Act;

2. Where the decision on insurance benefits has been made in accordance with the procedures prescribed by the Ordinance of the Ministry of Labor, such as for the recognition of pneumoconiosis;

3. Where the request for examination falls under any of the reasons for rejection referred to in Article 97 (1);

4. Where the request for examination is filed against a decision on medical expenses or medicine expenses (including medical expenses or medicine expenses belonging to the medical care expenses referred to in the proviso of Article 40 (2) of the Act; or

5. Other cases where it is clear whether or not the decision, etc., on insurance benefits subject to the request for examination is legitimate

(2) Notwithstanding the provision of paragraph (1), if a request for examination falls under any subparagraph of paragraph (1), and the Corporation deems it necessary to make a decision after deliberation by the Examination Committee, the decision may be made after deliberation by the Examination Committee.

**Article 103 (Investigation for Review)**

(1) The investigation for review on a request for examination referred to in Article 105 (4) of the Act shall be requested using a document specifying the following matters :

1. Title of the case relevant to the request for examination;
2. Purpose of and reasons for the request;
3. Names and addresses of related persons asked to appear (limited to the case of Article 105 (4) 1 of the Act);
4. Indication of documents and other things required to be submitted, and the name and address of the owner or custodian thereof (limited to the case of Article 105 (4) 2 of the Act);
5. Matters to be appraised and reasons for the appraisal

- (limited to the case of Article 105 (4) 3 of the Act);
6. Names and location of the workplace and other places to enter, the names and addresses of the employer, workers and other related persons to be questioned, and the indication of the documents and other things to be inspected (limited to the case of Article 105 (4) 4 of the Act); and
  7. Name and address of the worker who is to undergo a medical examination (limited to the case of Article 105 (4) 5 of the Act).

(2) If the Corporation has conducted an investigation pursuant to Article 105 (4) of the Act, it shall prepare a protocol of review specifying the following matters. In this case, if it has had the person making the request for examination or a related person make statements pursuant to Article 105 (4) 1 of the Act, it shall make a record of the statements and attach the record:

1. Number and title of the case;
2. Date, time and place of the investigation;
3. Object and method of the investigation; and
4. Result of the investigation.

#### **Article 104 (Payment of Actual Expenses)**

A related person who turns up at a designated place pursuant to Article 105 (4) 1 of the Act, and an appraiser who makes an appraisal pursuant to subparagraph 3 of the same paragraph shall be paid their actual expenses under the conditions as prescribed by the Ordinance of the Ministry of Labor.

#### **Article 105 (Formalities of Request for Reexamination)**

(1) The request for reexamination as prescribed in Article 106 of the Act shall be made using a document specifying the following matters :

1. Name and address of the person making the request for reexamination (name and location of the corporation and name of its representative in case the person making the request for reexamination is a corporation);
2. Details of the decision on insurance benefits subject to the request for reexamination;
3. Date on which the decision (decision, etc., on insurance benefits in the case of the request for reexamination referred to in the proviso of Article 106 (3) of the Act) on the request for examination is known;
4. Purpose of and reason for the request for reexamination;

5. Whether or not the request for reexamination is informed, and the details thereof; and
  6. Date of the request for reexamination
- (2) The provisions of Article 96 (2) through (4) shall apply mutatis mutandis as regards the formalities for making a request for reexamination. In this case, "person making the request for examination" shall be read as "person making the request for reexamination", "written request for examination" as "written request for reexamination" and "request for examination" as "request for reexamination"..

**Article 106 (Composition of Industrial Accident Compensation Insurance Reexamination Committee)**

- (1) The Industrial Accident Compensation Insurance Reexamination Committee (hereinafter referred to as the "Reexamination Committee") prescribed in Article 107 of the Act shall have a chairperson and two deputy chairpersons or less.
- (2) The deputy chairperson shall be elected by the Reexamination Committee from among the members.
- (3) The chairperson shall represent the Reexamination Committee, and have general control over the affairs of the Examination Committee.
- (4) The deputy chairperson shall assist the chairperson, and if the chairperson is not able to carry out his/her duties owing to unavoidable circumstances, he/she shall act for the chairperson.

**Article 107 (Operation of Examination Committee)**

- (1) The chairperson shall convene and chair meetings of the Examination Committee. : Provided that the deputy chairperson may, if it is necessary for the smooth operation of the Examination Committee, preside over a meeting of the Examination Committee on the order of the chairperson.
- (2) When the chairman intends to convene a meeting of the Examination Committee, he/she shall notify in writing each member of the date, time, place and agenda of the meeting five days before the meeting is held : Provided that if a meeting has to be urgently convened, the notification may be given orally, by phone or through any other means no later than the day before the meeting is held.
- (3) A meeting of the Reexamination Committee shall consist of nine members, including the chairperson or the deputy chairperson, the permanent members and the members designated by the chairperson each time for its meeting. In this

case, the members designated by the chairperson shall include one or more members who have the qualifications prescribed in Article 107 (4) 2 of the Act and one or more members who have the qualification prescribed in subparagraph 5 of the same paragraph.

(4) A meeting of the Reexamination Committee shall take a decision with attendance of a majority of the members as prescribed in paragraph (3) and with approval of a majority of the members present. In this case, one or more members with the respective qualifications referred to in the latter part of paragraph (3) shall be present.

(5) Members other than the permanent members and the ex officio members, who attend a meeting of the Reexamination Committee, may be paid allowances and travel expenses within the limits of the budget.

(6) Except as provided in this Decree, matters necessary for the operation of the Reexamination Committee shall be determined by the chairperson after resolution at the Reexamination Committee.

**Article 108 (Notification, etc., of Date and Place of Review on Request for Reexamination)**

(1) The Reexamination Committee shall, upon receiving a request for reexamination, set the date and place of a review on the request, and notify in writing the party and the Corporation of this at least five days before the review.

(2) The notification as referred to in paragraph (1) shall be delivered directly or given by registered mail.

**Article 109 (Opening of Review)**

(1) A review by the Reexamination Committee shall be open to the public : Provided that it may not be open to the public at the request of the person requesting the reexamination.

(2) The request as referred to in the proviso of paragraph (1) shall be made using a document specifying the purpose and reason.

**Article 110 (Protocol of Review)**

(1) The Examination Committee shall prepare a protocol of review specifying the following matters as regards progress in a review of a request for reexamination:

1. Number and title of the case;
2. Date and place of the review;
3. Names of the members present;

4. Names of the parties present;
  5. Details of the review; and
  6. Other necessary matters
- (2) The protocol of review as referred to in paragraph (1) shall contain the year, month and date of its preparation, and shall be signed or sealed by the chairperson.
- (3) Any party or related person may make a request in writing to inspect the protocol as referred to in paragraph (1).
- (4) If a party or related person makes a request for inspection pursuant to paragraph (3), the Reexamination Committee shall not refuse without justifiable reasons.

**Article 111 (Organization and Operation of Subcommittee)**

- (1) If it is deemed necessary for making an efficient review on a request for reexamination, the Reexamination Committee may organize and operate a subcommittee composed of five members or less, including the following members:
1. Deputy chairperson;
  2. Permanent member who is not the chairperson; and
  3. Member designated by the chairperson
- (2) The subcommittee shall review the case of a request for reexamination which are designated by the chairman, and make a report to the Committee.
- (3) The provisions of the main text of Article 107 (1), and paragraphs (2), (4) and (5) of the same Article shall apply *mutatis mutandis* as regards the operation of the subcommittee. In this case, "chairperson" shall be read as "deputy chairperson" and "Reexamination Committee" as "subcommittee".

**Article 112 (Assignment of Researchers)**

- (1) The Minister of Labor may assign five researchers or less to conduct professional research and surveys necessary for reexamination-related work by the Reexamination Committee, such as on industrial accident compensation insurance, industrial medicine, industrial nursing, management of harmful substances, radioactive rays, etc.
- (2) Necessary matters concerning the qualifications, salaries, etc. of the researchers shall be prescribed by the Ordinance of the Ministry of Labor.



**Article 113 (Mutatis Mutandis Application)**

The provisions of Articles 97, 98, 101, 103 and 104 shall apply *mutatis mutandis* as regards the correction and rejection of a request for reexamination, the suspension of execution of decisions, etc. on insurance benefits, the method of ruling, investigation for review, the payment of actual expenses, etc. In this case, “request for examination” shall be read as “request for reexamination”; “person making the request for examination” as “person making the request for reexamination” “Corporation” as “Reexamination Committee”; “affiliate organization of the Corporation” as “Corporation”; “decision on a request for examination” as “ruling on a request for reexamination”; and “written decision” as “written ruling”; “person making the request for examination” in Article 103 (3) as “Corporation and the person making the request for reexamination”; and “request for examination or reexamination” in paragraph (4) of the same Article as “administrative lawsuit”, respectively.

*CHAPTER VII*

**Supplementary Provisions**

**Article 114 (Report, etc. of Changes in Benefit Entitlement)**

(1) "The matters prescribed by the Presidential Decree" in Article 114 (2) of the Act refer to those falling under any of the following subparagraph :

1. Where a person entitled to insurance benefits has received money or valuable goods equivalent to such insurance benefits under the Civil Act and other Acts or subordinate statutes on the same ground as insurance benefits are paid under this Act, the details of such money or goods;
2. Where a person entitled to insurance benefits has received damages from a third party, equivalent to such insurance benefits on the same ground as insurance benefits are paid under this Act, the details of such damages;
3. Where a person entitled to survivors' compensation annuities has changed, the details of such change; and
4. Where other changes have been made to the name, resident registration numbers, address, etc., of a person entitled to insurance benefits, the details of such changes

(2) "The matters prescribed by the Presidential Decree" in Article 114 (3) of the Act refer to those falling under any of the following subparagraphs :

1. Where there occurs a reason for the termination of entitlement to a disability compensation annuity, the details of such reason; and
2. Where there occurs a reason to change entitlement to a survivors' compensation annuity, the details of such reason

**Article 115 (Report of Entitlement of Overseas Residents)**

"Such matters as prescribed by the Presidential Decree" in Article 115 (2) of the Act refer to the following matters. In this case, the provisions of subparagraphs 3 through 5 shall apply only to those entitled to survivors' compensation annuities:

1. Matters concerning survival status;
2. Matters concerning a change of nationality;
3. Matters concerning marital status (including de-facto marriage);
4. Matters concerning any changes in relationships with relatives; and
5. Matters concerning disabilities (limited to cases where a person entitled to survivors' compensation annuities belongs to the disabled prescribed in Article 63 (1) 4 of the Act)

**Article 116 (Demand for Report and Presentation)**

The demand for a report or the presentation of related documents as prescribed in Articles 114 and 118 of the Act shall be made in writing.

**Article 117 (Object, etc., of Demand for Medical Examination)**

(1) The Corporation may demand the following medical examinations under Article 119 of the Act:

1. Medical examination to judge the necessity of continuous medical care for workers receiving medical care due to a work-related accident;
2. Medical examination to determine disability grades or invalidity grades;
3. Medical examination to judge whether or not a disease is related to work ; and
4. Medical examination to judge whether or not additional medical care is needed

(2) Expenses for the medical examination as referred to in paragraph (1) shall be paid in the amount of the actual expenses needed for it.

(3) Among the expenses for medical examinations paid pursuant to paragraph (2), those for the medical examination referred to in paragraph (1) 3 may include medical treatment expenses if a person with symptoms presumed to be caused by a work-related accident receives medical treatment as his/her condition is critical or according to a medical opinion that without immediate medical treatment, his/her condition would deteriorate rapidly, causing an impediment to medical examinations and future treatment.

(4) The demand for a medical examination referred to in Article 119 of the Act shall be made in writing.

**Article 118 (Medical Institutions for Special Examination)**

(1) The medical examination (hereinafter in this Act referred to as "medical examination") referred to in Article 119 of the Act shall be conducted by industrial accident insurance-related medical institutions (hereinafter referred to as "medical institutions for special examination") falling under any of the following subparagraphs :

1. Medical institutions belonging to the Workers Accident Medical Corporation as referred in Article 43 (1) 1 of the Act;

2. Tertiary hospitals referred to in Article 43 (1) 2 of the Act; and

3. General hospitals under Article 3 (3) of the Medical Service Act among industrial accident insurance-related medical institutions which do not fall under any of subparagraphs 1 and 2

(2) When demanding a person to undergo a medical examination, the Corporation may present two medical institutions for special examination, which are deemed appropriate to accomplish the purpose of the medical examination, in consideration of the purpose of the demand for medical examination, the residence of the person who is to undergo the medical examination, the state of the person's injury, disease or disability and let the person who is to undergo the medical examination choose one of them.

(3) The Corporation may determine and operate a separate medical institution for special examination, which conducts the medical examinations referred to in Article 117 (1) 2.

(4) If the result of a medical examination by a medical institution for special examination is different from opinions from the doctor in charge and advisory doctor, the Corporation may make an adjudication or judgment after a second medical

examination : Provided that if after the second medical examination, it is difficult to make an adjudication or judgment in accordance with the purpose of the demand for medical examinations which fall under any subparagraph of Article 117 (1), the adjudication or judgment may be made after deliberation by the panel of advisory doctors.

**Article 119 (Temporary Suspension of Insurance Benefits)**

(1) Before temporarily suspending the payment of insurance benefits pursuant to Article 120 (1) of the Act, the Corporation shall urge in writing the person who intends to receive the insurance benefits to fulfill his/her obligations within a set period.

(3) The insurance benefits that may be suspended temporarily under Article 120 of the Act shall be all the insurance benefits which are to be paid to the person who intends to receive them, but the payment of which is difficult to decide or has been impeded due to his/her failure to fulfill the obligations referred to in paragraph (1), and in the case of Article 120 (1) 1 of the Act, they shall be wage replacement benefits or injury-disease compensation annuities.

(3) The period during which the payment of insurance benefits may be temporarily suspended shall be from the day following the date the Corporation sets for the fulfillment of obligations under paragraph (1) to the day before the obligations are completely fulfilled.

**Article 120 (Designation of Financial Institution)**

A person who intends to receive insurance benefits under the Act or this Decree shall open an account with a financial institution designated by the Corporation.

**Article 121 (Payment, etc., of Insurance Benefits for On-the-job Trainees)**

The provisions of Articles 21 through 85, Articles 96 through 98, Articles 101 through 105 and Articles 113 through 120 shall apply mutatis mutandis as regards the payment, etc. of insurance benefits for on-the-job trainees as prescribed in Article 123 of the Act.

**Article 123 (Scope of Employers of Small and Medium Enterprises)**

(1) The "employers (including those who do not employ any worker ; hereinafter in this Article, the same shall apply.) of small and medium enterprises prescribed by the Presidential Decree" in Article 124 (1) of the Act refer to those falling under

any of the following subparagraphs :

1. An employer who has joined the insurance and employs less than 50 workers; or
  2. A person who does not employ any worker and is engaged in passenger transport service under the Passenger Transport Service Act and cargo transport service under the Trucking Transport Service Act
- (2) If the employer of a small and medium enterprise who has joined the insurance pursuant to paragraph (1) 1 has come to employ 50 workers or more, he/she shall be considered to employ less than 50 workers for the insurance year concerned.
- (3) If the employer of a small and medium enterprise who has joined the insurance pursuant to paragraphs (1) and (2) has come to employ less than 50 workers, he/she shall be considered to join the insurance pursuant to paragraph (1) 1.

**Article 123 (Criteria for Recognition of Work-related Accidents for Employers of Small and Medium Enterprises)**

The provisions of Article 27, Article 28 and Articles 30 through 36 shall apply mutatis mutandis as regards the scope of accidents recognized as work-related for employers of small and medium enterprises. In this case, "worker" shall be read as "employer of a small and medium enterprise" and "acts of performing his/her duties in accordance with his/her employment contract" in Article 27 as "acts of performing the duties needed for the business concerned".

**Article 124 (Restrictions on Payment of Insurance Benefits to Employers of Small and Medium Enterprises)**

The insurance benefits prescribed in Article 36 (1) of the Act shall not be paid for work-related accidents that occur while the employer of a small and medium enterprise has his/her insurance premiums in arrears as prescribed in Article 124 (4) of the Act.

**Article 125 (Scope, etc., of Persons in Special Types of Employment)**

"Persons engaged in the occupations prescribed by the Presidential Decree" in Article 125 (1) of the Act refer to those falling under any of the following subparagraphs :

1. Persons engaged in soliciting insurance policies or mutual aid contracts and falling under any of the following items:
  - A. Insurance agents under Article 83 (1) 1 of the

Insurance Business Act;

B. Employees of any insurance agency or insurance brokerage company under Article 83 (1) 5 of the Insurance Business Act, who are reported to be engaged in insurance solicitation under the same Act;

C. Persons engaged in soliciting mutual aid contracts under the Agricultural Cooperatives Act; and

D. Person engaged in soliciting postal insurance policies under the Postal Savings and Insurance Act as their full-time job

2. Owner-drivers of ready mixed concrete trucks registered under the Construction Machinery Management Act;

3. Those falling into the sub-class of learning-aid tutors in the Korean Standard Classification of Occupation announced by the head of the National Statistical Office under the Statistics Act; and

4. Golf caddies who assist with golf games at a golf course registered as a sports facilities business pursuant to Article 19 of the Installation and Utilization of Sports Facilities Act

**Article 126 (Report etc., of Provision of Labor Service by Persons in Special Types of Employment)**

(1) If an employer begins or ceases to receive labor service from a person in special types of employment for the first time as prescribed in Article 125 (3) of the Act, he/she shall report the following matters to the Corporation not later than the 15th of the month following the month in which the reason has occurred:

1. Name, resident registration numbers and address of the person in special types of employment;

2. Date on which the employer begins to receive labor service from the person in special types of employment and details of the work the person in special types of employment engages in; and

3. Date on which the employer ceases to receive labor service from the person in special types of employment and the reason

(2) Upon receiving the report referred to in paragraph (1), the Corporation shall inform the person in special types of employment of the content.

**Article 127 (Criteria for Recognition of Work-related Accidents for**

**Persons in Special Types of Employment)**

The provisions of Articles 27 through 36 shall apply mutatis mutandis as regards the criteria for the recognition of work-related accidents for persons in special types of employment. In this case, "worker" shall be read as "person in special types of employment".

*CHAPTER VIII*

**Penal Provisions**

**Article 128 (Imposition of Fine for Negligence)**

The amount of a fine for negligence by type of offense is shown in Table 12: Provided that the Minister of Labor may raise or reduce the amount of fine for negligence by up to half in consideration of the seriousness, frequency, motive and consequence of the offense but in the case of the imposition of a heavier fine, the amount shall not exceed the maximum amount of fine for negligence prescribed in Article 129 (1) and (2) of the Act.

**Addenda** <Presidential Decree No. 20966, Aug. 7, 2008>

**Article 1 (Enforcement Date)**

This Decree shall enter into force on January 1, 2009.

**Articles 2 (Application Examples)** The amended provisions of Article 2 (1) 3 B shall apply to construction work involving the construction or renovation of a building, which has started after the enforcement of this Decree.

[Table 1-2]

**Payment Criteria of the Shut-Down Benefits and the  
Injury-Disease Compensation Annuity in Reduced Amount**  
(Relating to Articles 30-3 and 39-2)

Ages Subject to Reduced Payment	Payment Criteria for Reduced Shut-Down Benefits	Payment Criteria for Reduced Injury-Disease Compensation Annuity
65 years or older	65/100 of Average Wages	93/100 of Pension Amount

※ All other Tables were omitted.



[Table 9]

**Criteria for Imposition of Fine for Negligence by Type of Offense**  
(related to Article 114 (3))

**1. General Criteria**

The criteria for the imposition of fines for negligence by frequency of offense shall be applied in case a fine for negligence is imposed for the same types of offenses committed during the recent one-year period. In this case, the date on which a fine for negligence is imposed for the same type of offense and the date on which the offense is discovered again shall be used as a basis for the date of the application of the criteria.

**2. Individual Criteria**

Offense	Relevant Provisions	Amount of Fine for Negligence		
		Once	Twice	Three times or more
1. In case a person uses a similar title in violation of Article 36 of the Act	Article 106 (1) of the Act	One million won	One million won	One million won
2. In case a person does not give an answer or gives a false answer to the questions asked under Article 89 (2) of the Act (including cases where it applies mutatis mutandis under Article 92 (1)) or refuses, interferes with or evades inspection	Article 106 (2) 2 of the Act	100,000 won	300,000 won	500,000 won
3. In case a person fails to make the report prescribed in Article 99 (1) or 102 of the Act or makes a false report	Article 106 (2) 3 of the Act	100,000 won	300,000 won	500,000 won
4. In case a person fails to comply with an order to submit documents or things as prescribed in Article 99 (1) or 102 of the Act	Article 106 (2) 4 of the Act	100,000 won	300,000 won	500,000 won
5. In case a person refuses to answer the questions asked by an employee of the Corporation under Article 101 or 102 of the Act or refuses, interferes with or evades inspection	Article 106 (2) 5 of the Act	100,000 won	300,000 won	500,000 won