Second Regular Session of the 122nd General Assembly (2022)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2021 Regular Session of the General Assembly.

HOUSE ENROLLED ACT No. 1153

AN ACT to amend the Indiana Code concerning labor and safety.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 22-3-3-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 3. (a) The right to compensation under IC 22-3-2 through IC 22-3-6 shall be forever barred unless within two (2) years after the occurrence of the accident, or if death results therefrom, within two (2) years after such death, a claim for compensation thereunder shall be filed with the worker's compensation board. However, in all cases wherein an accident or death results from the exposure to radiation, a claim for compensation shall be filed with the board within two (2) years from the date on which the employee had knowledge of his injury or by exercise of reasonable diligence should have known of the existence of such injury and its causal relationship to his employment.

- (b) If, after the occurrence of an accident, compensation is paid for:
 - (1) temporary total disability under section 7 of this chapter; or
 - (2) temporary partial disability under section 9 of this chapter;

then the two (2) year limitation period to file an application for adjustment of claim begins to run on the last date for which the compensation under subdivision (1) or (2) was paid.

SECTION 2. IC 22-3-3-5.2, AS AMENDED BY P.L.99-2014,



SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2023]: Sec. 5.2. (a) A billing review service shall adhere to the following requirements to determine the pecuniary liability of an employer or an employer's insurance carrier for a specific service or product covered under worker's compensation provided before July 1, 2014, by all medical service providers, and after June 30, 2014, by a medical service provider that is not a medical service facility:

- (1) The formation of a billing review standard, and any subsequent analysis or revision of the standard, must use data that is based on the medical service provider billing charges as submitted to the employer and the employer's insurance carrier from the same community. This subdivision does not apply when a unique or specialized service or product does not have sufficient comparative data to allow for a reasonable comparison.
- (2) Data used to determine pecuniary liability must be compiled on or before June 30 and December 31 of each year.
- (3) Billing review standards must be revised for prospective future payments of medical service provider bills to provide for payment of the charges at a rate not more than the charges made by eighty percent (80%) of the medical service providers during the prior six (6) months within the same community. The data used to perform the analysis and revision of the billing review standards may not be more than two (2) years old and must be periodically updated by a representative inflationary or deflationary factor. Reimbursement for these charges may not exceed the actual charge invoiced by the medical service provider.
- (b) This subsection applies after June 30, 2014, to a medical service facility. The pecuniary liability of an employer or an employer's insurance carrier for a specific service or product covered under worker's compensation and provided by a medical service facility is equal to a reasonable amount, which is established by payment of one (1) of the following:
 - (1) The amount negotiated at any time between the medical service facility and any of the following:
 - (A) The employer.
 - (B) The employer's insurance carrier.
 - (C) A billing review service on behalf of a person described in clause (A) or (B).
 - (D) A direct provider network that has contracted with a person described in clause (A) or (B).
 - (2) Two hundred percent (200%) of the amount that would be



paid to the medical service facility on the same date for the same service or product under the medical service facility's Medicare reimbursement rate, if, an amount has not been negotiated as after conducting the negotiations described in subdivision (1), an agreement has not been reached.

- (c) A medical service provider may request an explanation from a billing review service if the medical service provider's bill has been reduced as a result of application of the eightieth percentile or of a Current Procedural Terminology (CPT) or Medicare coding change. The request must be made not later than sixty (60) days after receipt of the notice of the reduction. If a request is made, the billing review service must provide:
 - (1) the name of the billing review service used to make the reduction;
 - (2) the dollar amount of the reduction;
 - (3) the dollar amount of the service or product at the eightieth percentile; and
 - (4) in the case of a CPT or Medicare coding change, the basis upon which the change was made;

not later than thirty (30) days after the date of the request.

(d) If, after a hearing, the worker's compensation board finds that a billing review service used a billing review standard that did not comply with subsection (a)(1) through (a)(3), as applicable, in determining the pecuniary liability of an employer or an employer's insurance carrier for a medical service provider's charge for services or products covered under worker's compensation, the worker's compensation board may assess a civil penalty against the billing review service in an amount not less than one hundred dollars (\$100) and not more than one thousand dollars (\$1,000).

SECTION 3. IC 22-3-3-10, AS AMENDED BY P.L.32-2021, SECTION 63, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2023]: Sec. 10. (a) With respect to injuries in the schedule set forth in subsection (d) occurring on and after July 1, 1979, and before July 1, 1988, the employee shall receive, in addition to temporary total disability benefits not to exceed fifty-two (52) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred twenty-five dollars (\$125) average weekly wages, for the period stated for the injury.

(b) With respect to injuries in the schedule set forth in subsection (d) occurring on and after July 1, 1988, and before July 1, 1989, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a



weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred sixty-six dollars (\$166) average weekly wages, for the period stated for the injury.

- (c) With respect to injuries in the schedule set forth in subsection (d) occurring on and after July 1, 1989, and before July 1, 1990, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred eighty-three dollars (\$183) average weekly wages, for the period stated for the injury.
- (d) (a) With respect to injuries in the following schedule occurring on and after July 1, 1990, and before July 1, 1991, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed two hundred dollars (\$200) average weekly wages, for the period stated for the injury.
 - (1) Amputation: For the loss by separation of the thumb, sixty (60) weeks, of the index finger forty (40) weeks, of the second finger thirty-five (35) weeks, of the third or ring finger thirty (30) weeks, of the fourth or little finger twenty (20) weeks, of the hand by separation below the elbow joint two hundred (200) weeks, or the arm above the elbow two hundred fifty (250) weeks, of the big toe sixty (60) weeks, of the second toe thirty (30) weeks, of the third toe twenty (20) weeks, of the fourth toe fifteen (15) weeks, of the fifth or little toe ten (10) weeks, for loss occurring on and after April 1, 1959, by separation of the foot below the knee joint, one hundred seventy-five (175) weeks and of the leg above the knee joint two hundred twenty-five (225) weeks. The loss of more than one (1) phalange of a thumb or toes shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the thumb or toe and compensation shall be paid for one-half (1/2) of the period for the loss of the entire thumb or toe. The loss of not more than one (1) phalange of a finger shall be considered as the loss of one-third (1/3) of the finger and compensation shall be paid for one-third (1/3) the period for the loss of the entire finger. The loss of more than one (1) phalange of the finger but not more than two (2) phalanges of the finger, shall be considered as the loss of one-half (1/2) of the finger and compensation shall be paid for



- one-half (1/2) of the period for the loss of the entire finger.
- (2) For the loss by separation of both hands or both feet or the total sight of both eyes, or any two (2) such losses in the same accident, five hundred (500) weeks.
- (3) For the permanent and complete loss of vision by enucleation or its reduction to one-tenth (1/10) of normal vision with glasses, one hundred seventy-five (175) weeks.
- (4) For the permanent and complete loss of hearing in one (1) ear, seventy-five (75) weeks, and in both ears, two hundred (200) weeks.
- (5) For the loss of one (1) testicle, fifty (50) weeks; for the loss of both testicles, one hundred fifty (150) weeks.
- (e) (b) With respect to injuries in the schedule set forth in subsection (h) (e) occurring on and after July 1, 1979, and before July 1, 1988, the employee shall receive, in addition to temporary total disability benefits not exceeding fifty-two (52) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages not to exceed one hundred twenty-five dollars (\$125) average weekly wages for the period stated for the injury.
- (f) (c) With respect to injuries in the schedule set forth in subsection (h) (e) occurring on and after July 1, 1988, and before July 1, 1989, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred sixty-six dollars (\$166) average weekly wages, for the period stated for the injury.
- (g) (d) With respect to injuries in the schedule set forth in subsection (h) (e) occurring on and after July 1, 1989, and before July 1, 1990, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred eighty-three dollars (\$183) average weekly wages, for the period stated for the injury.
- (h) (e) With respect to injuries in the following schedule occurring on and after July 1, 1990, and before July 1, 1991, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed two hundred dollars (\$200) average weekly wages, for the period stated for the injury.
 - (1) Loss of use: The total permanent loss of the use of an arm,



hand, thumb, finger, leg, foot, toe, or phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange, and compensation shall be paid for the same period as for the loss thereof by separation. (2) Partial loss of use: For the permanent partial loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange, compensation shall be paid for the proportionate loss of the use of

- such arm, hand, thumb, finger, leg, foot, toe, or phalange. (3) For injuries resulting in total permanent disability, five hundred (500) weeks.
- (4) For any permanent reduction of the sight of an eye less than a total loss as specified in subsection (d)(3), (a)(3), compensation shall be paid for a period proportionate to the degree of such permanent reduction without correction or glasses. However, when such permanent reduction without correction or glasses would result in one hundred percent (100%) loss of vision, but correction or glasses would result in restoration of vision, then in such event compensation shall be paid for fifty percent (50%) of such total loss of vision without glasses, plus an additional amount equal to the proportionate amount of such reduction with glasses, not to exceed an additional fifty percent (50%).
- (5) For any permanent reduction of the hearing of one (1) or both ears, less than the total loss as specified in subsection (d)(4), (a)(4), compensation shall be paid for a period proportional to the degree of such permanent reduction.
- (6) In all other cases of permanent partial impairment, compensation proportionate to the degree of such permanent partial impairment, in the discretion of the worker's compensation board, not exceeding five hundred (500) weeks.
- (7) In all cases of permanent disfigurement which may impair the future usefulness or opportunities of the employee, compensation, in the discretion of the worker's compensation board, not exceeding two hundred (200) weeks, except that no compensation shall be payable under this subdivision where compensation is payable elsewhere in this section.
- (i) (f) With respect to injuries in the following schedule occurring on and after July 1, 1991, the employee shall receive in addition to temporary total disability benefits, not exceeding one hundred twenty-five (125) weeks on account of the injury, compensation in an amount determined under the following schedule to be paid weekly at a rate of sixty-six and two-thirds percent (66 2/3%) of the employee's average weekly wages during the fifty-two (52) weeks immediately



preceding the week in which the injury occurred.

- (1) Amputation: For the loss by separation of the thumb, twelve (12) degrees of permanent impairment; of the index finger, eight (8) degrees of permanent impairment; of the second finger, seven (7) degrees of permanent impairment; of the third or ring finger, six (6) degrees of permanent impairment; of the fourth or little finger, four (4) degrees of permanent impairment; of the hand by separation below the elbow joint, forty (40) degrees of permanent impairment; of the arm above the elbow, fifty (50) degrees of permanent impairment; of the big toe, twelve (12) degrees of permanent impairment; of the second toe, six (6) degrees of permanent impairment; of the third toe, four (4) degrees of permanent impairment; of the fourth toe, three (3) degrees of permanent impairment; of the fifth or little toe, two (2) degrees of permanent impairment; by separation of the foot below the knee joint, thirty-five (35) degrees of permanent impairment; and of the leg above the knee joint, forty-five (45) degrees of permanent impairment.
- (2) Amputations: For the loss by separation of any of the body parts described in subdivision (1) on or after July 1, 1997, and for the loss by separation of any of the body parts described in subdivision (3), (5), or (7), on or after July 1, 1999, the dollar values per degree applying on the date of the injury as described in subsection (j) (g) shall be multiplied by two (2). However, the doubling provision of this subdivision does not apply to a loss of use that is not a loss by separation.
- (3) The loss of more than one (1) phalange of a thumb or toe shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the degrees of permanent impairment for the loss of the entire thumb or toe. The loss of not more than one (1) phalange of a finger shall be considered as the loss of one-third (1/3) of the finger and compensation shall be paid for one-third (1/3) of the degrees payable for the loss of the entire finger. The loss of more than one (1) phalange of the finger but not more than two (2) phalanges of the finger shall be considered as the loss of one-half (1/2) of the finger and compensation shall be paid for one-half (1/2) of the degrees payable for the loss of the entire finger.
- (4) For the loss by separation of both hands or both feet or the



- total sight of both eyes or any two (2) such losses in the same accident, one hundred (100) degrees of permanent impairment.
- (5) For the permanent and complete loss of vision by enucleation, thirty-five (35) degrees of permanent impairment.
- (6) For the permanent and complete loss of hearing in one (1) ear, fifteen (15) degrees of permanent impairment, and in both ears, forty (40) degrees of permanent impairment.
- (7) For the loss of one (1) testicle, ten (10) degrees of permanent impairment; for the loss of both testicles, thirty (30) degrees of permanent impairment.
- (8) Loss of use: The total permanent loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange, and compensation shall be paid in the same amount as for the loss by separation. However, the doubling provision of subdivision (2) does not apply to a loss of use that is not a loss by separation.
- (9) Partial loss of use: For the permanent partial loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange, compensation shall be paid for the proportionate loss of the use of the arm, hand, thumb, finger, leg, foot, toe, or phalange. (10) For injuries resulting in total permanent disability, the amount payable for impairment or five hundred (500) weeks of compensation, whichever is greater.
- (11) Visual impairments shall be based on the Functional Vision Score (FVS) assessing the visual acuity and visual field to evaluate any reduction in ability to perform vision-related Activities of Daily Living (ADL). Unless such loss is otherwise specified in subdivision (5), visual impairments shall be paid as a whole person rating.
- (12) For any permanent reduction of the hearing of one (1) or both ears, less than the total loss as specified in subsection $\frac{h}{5}$, (e)(5), compensation shall be paid in an amount proportionate to the degree of a permanent reduction.
- (13) In all other cases of permanent partial impairment, compensation proportionate to the degree of a permanent partial impairment, in the discretion of the worker's compensation board, not exceeding one hundred (100) degrees of permanent impairment.
- (14) In all cases of permanent disfigurement which may impair the future usefulness or opportunities of the employee, compensation, in the discretion of the worker's compensation



board, not exceeding forty (40) degrees of permanent impairment except that no compensation shall be payable under this subdivision where compensation is payable elsewhere in this section.

(j) (g) Compensation for permanent partial impairment shall be paid according to the degree of permanent impairment for the injury determined under subsection (i) (f) and the following:

(1) With respect to injuries occurring on and after July 1, 1991, and before July 1, 1992, for each degree of permanent impairment from one (1) to thirty-five (35), five hundred dollars (\$500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), nine hundred dollars (\$900) per degree; for each degree of permanent impairment above fifty (50), one thousand five hundred dollars (\$1,500) per degree.

(2) With respect to injuries occurring on and after July 1, 1992, and before July 1, 1993, for each degree of permanent impairment from one (1) to twenty (20), five hundred dollars (\$500) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), eight hundred dollars (\$800) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand three hundred dollars (\$1,300) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars (\$1,700) per degree.

(3) With respect to injuries occurring on and after July 1, 1993, and before July 1, 1997, for each degree of permanent impairment from one (1) to ten (10), five hundred dollars (\$500) per degree; for each degree of permanent impairment from eleven (11) to twenty (20), seven hundred dollars (\$700) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), one thousand dollars (\$1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars (\$1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars (\$1,700) per degree.

(4) With respect to injuries occurring on and after July 1, 1997, and before July 1, 1998, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars (\$750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars (\$1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars (\$1,400) per degree;



for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars (\$1,700) per degree.

- (5) With respect to injuries occurring on and after July 1, 1998, and before July 1, 1999, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars (\$750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars (\$1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars (\$1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars (\$1,700) per degree.
- (6) With respect to injuries occurring on and after July 1, 1999, and before July 1, 2000, for each degree of permanent impairment from one (1) to ten (10), nine hundred dollars (\$900) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand one hundred dollars (\$1,100) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand six hundred dollars (\$1,600) per degree; for each degree of permanent impairment above fifty (50), two thousand dollars (\$2,000) per degree.
- (7) With respect to injuries occurring on and after July 1, 2000, and before July 1, 2001, for each degree of permanent impairment from one (1) to ten (10), one thousand one hundred dollars (\$1,100) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand three hundred dollars (\$1,300) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand dollars (\$2,000) per degree; for each degree of permanent impairment above fifty (50), two thousand five hundred fifty dollars (\$2,500) per degree.
- (8) With respect to injuries occurring on and after July 1, 2001, and before July 1, 2007, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred dollars (\$1,300) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred dollars (\$1,500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred dollars (\$2,400) per degree; for each degree of permanent impairment above fifty (50), three thousand dollars (\$3,000) per degree.
- (9) With respect to injuries occurring on and after July 1, 2007, and before July 1, 2008, for each degree of permanent impairment



from one (1) to ten (10), one thousand three hundred forty dollars (\$1,340) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred forty-five dollars (\$1,545) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred seventy-five dollars (\$2,475) per degree; for each degree of permanent impairment above fifty (50), three thousand one hundred fifty dollars (\$3,150) per degree.

(10) With respect to injuries occurring on and after July 1, 2008, and before July 1, 2009, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred sixty-five dollars (\$1,365) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred seventy dollars (\$1,570) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand five hundred twenty-five dollars (\$2,525) per degree; for each degree of permanent impairment above fifty (50), three thousand two hundred dollars (\$3,200) per degree.

(11) With respect to injuries occurring on and after July 1, 2009, and before July 1, 2010, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred eighty dollars (\$1,380) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred eighty-five dollars (\$1,585) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand six hundred dollars (\$2,600) per degree; for each degree of permanent impairment above fifty (50), three thousand three hundred dollars (\$3,300) per degree.

(12) (1) With respect to injuries occurring on and after July 1, 2010, and before July 1, 2014, for each degree of permanent impairment from one (1) to ten (10), one thousand four hundred dollars (\$1,400) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand six hundred dollars (\$1,600) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand seven hundred dollars (\$2,700) per degree; for each degree of permanent impairment above fifty (50), three thousand five hundred dollars (\$3,500) per degree.

(13) (2) With respect to injuries occurring on and after July 1, 2014, and before July 1, 2015, for each degree of permanent impairment from one (1) to ten (10), one thousand five hundred seventeen dollars (\$1,517) per degree; for each degree of



permanent impairment from eleven (11) to thirty-five (35), one thousand seven hundred seventeen dollars (\$1,717) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand eight hundred sixty-two dollars (\$2,862) per degree; for each degree of permanent impairment above fifty (50), three thousand six hundred eighty-seven dollars (\$3,687) per degree.

(14) (3) With respect to injuries occurring on and after July 1, 2015, and before July 1, 2016, for each degree of permanent impairment from one (1) to ten (10), one thousand six hundred thirty-three dollars (\$1,633) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand eight hundred thirty-five dollars (\$1,835) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand twenty-four dollars (\$3,024) per degree; for each degree of permanent impairment above fifty (50), three thousand eight hundred seventy-three dollars (\$3,873) per degree. (15) (4) With respect to injuries occurring on and after July 1, 2016, and before July 1, 2023, for each degree of permanent impairment from one (1) to ten (10), one thousand seven hundred fifty dollars (\$1,750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand nine hundred fifty-two dollars (\$1,952) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand one hundred eighty-six dollars (\$3,186) per degree; for each degree of permanent impairment above fifty (50), four thousand sixty dollars (\$4,060) per degree.

- (5) With respect to injuries occurring on and after July 1, 2023, and before July 1, 2024, for each degree of permanent impairment from one (1) to ten (10), one thousand eight hundred three dollars (\$1,803) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand eleven dollars (\$2,011) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand two hundred eighty-two dollars (\$3,282) per degree; for each degree of permanent impairment above fifty (50), four thousand one hundred eighty-two dollars (\$4,182) per degree.
- (6) With respect to injuries occurring on and after July 1, 2024, and before July 1, 2025, for each degree of permanent impairment from one (1) to ten (10), one thousand eight hundred fifty-seven dollars (\$1,857) per degree; for each



- degree of permanent impairment from eleven (11) to thirty-five (35), two thousand seventy-one dollars (\$2,071) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand three hundred eighty dollars (\$3,380) per degree; for each degree of permanent impairment above fifty (50), four thousand three hundred seven dollars (\$4,307) per degree.
- (7) With respect to injuries occurring on and after July 1, 2025, and before July 1, 2026, for each degree of permanent impairment from one (1) to ten (10), one thousand nine hundred thirteen dollars (\$1,913) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand one hundred thirty-three dollars (\$2,133) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand four hundred eighty-one dollars (\$3,481) per degree; for each degree of permanent impairment above fifty (50), four thousand four hundred thirty-six dollars (\$4,436) per degree.
- (8) With respect to injuries occurring on and after July 1, 2026, for each degree of permanent impairment from one (1) to ten (10), one thousand nine hundred seventy dollars (\$1,970) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand one hundred ninety-seven dollars (\$2,197) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand five hundred eighty-five dollars (\$3,585) per degree; for each degree of permanent impairment above fifty (50), four thousand five hundred sixty-nine dollars (\$4,569) per degree.
- (k) (h) The average weekly wages used in the determination of compensation for permanent partial impairment under subsections (i) (f) and (j) (g) shall not exceed the following:
 - (1) With respect to injuries occurring on or after July 1, 1991, and before July 1, 1992, four hundred ninety-two dollars (\$492).
 - (2) With respect to injuries occurring on or after July 1, 1992, and before July 1, 1993, five hundred forty dollars (\$540).
 - (3) With respect to injuries occurring on or after July 1, 1993, and before July 1, 1994, five hundred ninety-one dollars (\$591).
 - (4) With respect to injuries occurring on or after July 1, 1994, and before July 1, 1997, six hundred forty-two dollars (\$642).
 - (5) With respect to injuries occurring on or after July 1, 1997, and before July 1, 1998, six hundred seventy-two dollars (\$672).



- (6) With respect to injuries occurring on or after July 1, 1998, and before July 1, 1999, seven hundred two dollars (\$702).
- (7) With respect to injuries occurring on or after July 1, 1999, and before July 1, 2000, seven hundred thirty-two dollars (\$732).
- (8) With respect to injuries occurring on or after July 1, 2000, and before July 1, 2001, seven hundred sixty-two dollars (\$762).
- (9) With respect to injuries occurring on or after July 1, 2001, and before July 1, 2002, eight hundred twenty-two dollars (\$822).
- (10) With respect to injuries occurring on or after July 1, 2002, and before July 1, 2006, eight hundred eighty-two dollars (\$882).
- (11) With respect to injuries occurring on or after July 1, 2006, and before July 1, 2007, nine hundred dollars (\$900).
- (12) With respect to injuries occurring on or after July 1, 2007, and before July 1, 2008, nine hundred thirty dollars (\$930).
- (13) With respect to injuries occurring on or after July 1, 2008, and before July 1, 2009, nine hundred fifty-four dollars (\$954).
- (14) (1) With respect to injuries occurring on or after July 1, 2009, and before July 1, 2014, nine hundred seventy-five dollars (\$975).
- (15) (2) With respect to injuries occurring on or after July 1, 2014, and before July 1, 2015, one thousand forty dollars (\$1,040).
- (16) (3) With respect to injuries occurring on or after July 1, 2015, and before July 1, 2016, one thousand one hundred five dollars (\$1,105).
- (17) (4) With respect to injuries occurring on or after July 1, 2016, and before July 1, 2023, one thousand one hundred seventy dollars (\$1,170).
- (5) With respect to injuries occurring on or after July 1, 2023, and before July 1, 2024, one thousand two hundred five dollars (\$1,205).
- (6) With respect to injuries occurring on or after July 1, 2024, and before July 1, 2025, one thousand two hundred forty-one dollars (\$1,241).
- (7) With respect to injuries occurring on or after July 1, 2025, and before July 1, 2026, one thousand two hundred seventy-eight dollars (\$1,278).
- (8) With respect to injuries occurring on or after July 1, 2026, one thousand three hundred sixteen dollars (\$1,316).

SECTION 4. IC 22-3-3-22, AS AMENDED BY P.L.275-2013, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2023]: Sec. 22. (a) In computing compensation for temporary



total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1985, and before July 1, 1986, the average weekly wages are considered to be:

- (1) not more than two hundred sixty-seven dollars (\$267); and
- (2) not less than seventy-five dollars (\$75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

- (b) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1986, and before July 1, 1988, the average weekly wages are considered to be:
 - (1) not more than two hundred eighty-five dollars (\$285); and
 - (2) not less than seventy-five dollars (\$75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

- (c) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1988, and before July 1, 1989, the average weekly wages are considered to be:
 - (1) not more than three hundred eighty-four dollars (\$384); and
 - (2) not less than seventy-five dollars (\$75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

- (d) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1989, and before July 1, 1990, the average weekly wages are considered to be:
 - (1) not more than four hundred eleven dollars (\$411); and
 - (2) not less than seventy-five dollars (\$75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

- (e) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1990, and before July 1, 1991, the average weekly wages are considered to be:
 - (1) not more than four hundred forty-one dollars (\$441); and
 - (2) not less than seventy-five dollars (\$75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(f) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect



to injuries occurring on and after July 1, 1991, and before July 1, 1992, the average weekly wages are considered to be:

- (1) not more than four hundred ninety-two dollars (\$492); and
- (2) not less than seventy-five dollars (\$75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

- (g) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1992, and before July 1, 1993, the average weekly wages are considered to be:
 - (1) not more than five hundred forty dollars (\$540); and
- (2) not less than seventy-five dollars (\$75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

- (h) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1993, and before July 1, 1994, the average weekly wages are considered to be:
 - (1) not more than five hundred ninety-one dollars (\$591); and
 - (2) not less than seventy-five dollars (\$75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

- (i) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1994, and before July 1, 1997, the average weekly wages are considered to be:
 - (1) not more than six hundred forty-two dollars (\$642); and
 - (2) not less than seventy-five dollars (\$75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

- (j) (a) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, the average weekly wages are considered to be:
 - (1) with respect to injuries occurring on and after July 1, 1997, and before July 1, 1998:
 - (A) not more than six hundred seventy-two dollars (\$672); and
 - (B) not less than seventy-five dollars (\$75);
 - (2) with respect to injuries occurring on and after July 1, 1998, and before July 1, 1999:
 - (A) not more than seven hundred two dollars (\$702); and
 - (B) not less than seventy-five dollars (\$75);
 - (3) with respect to injuries occurring on and after July 1, 1999,



- and before July 1, 2000:
 - (A) not more than seven hundred thirty-two dollars (\$732); and
 - (B) not less than seventy-five dollars (\$75);
- (4) with respect to injuries occurring on and after July 1, 2000, and before July 1, 2001:
 - (A) not more than seven hundred sixty-two dollars (\$762); and
 - (B) not less than seventy-five dollars (\$75);
- (5) with respect to injuries occurring on and after July 1, 2001, and before July 1, 2002:
 - (A) not more than eight hundred twenty-two dollars (\$822); and
 - (B) not less than seventy-five dollars (\$75);
- (6) with respect to injuries occurring on and after July 1, 2002, and before July 1, 2006:
 - (A) not more than eight hundred eighty-two dollars (\$882); and
 - (B) not less than seventy-five dollars (\$75);
- (7) with respect to injuries occurring on and after July 1, 2006, and before July 1, 2007:
 - (A) not more than nine hundred dollars (\$900); and
 - (B) not less than seventy-five dollars (\$75);
- (8) with respect to injuries occurring on and after July 1, 2007, and before July 1, 2008:
 - (A) not more than nine hundred thirty dollars (\$930); and
 - (B) not less than seventy-five dollars (\$75);
- (9) with respect to injuries occurring on and after July 1, 2008, and before July 1, 2009:
 - (A) not more than nine hundred fifty-four dollars (\$954); and
 - (B) not less than seventy-five dollars (\$75);
- (10) (1) with respect to injuries occurring on and after July 1, 2009, and before July 1, 2014:
 - (A) not more than nine hundred seventy-five dollars (\$975); and
 - (B) not less than seventy-five dollars (\$75);
- (11) (2) with respect to injuries occurring on and after July 1, 2014, and before July 1, 2015:
 - (A) not more than one thousand forty dollars (\$1,040); and
 - (B) not less than seventy-five dollars (\$75);
- (12) (3) with respect to injuries occurring on and after July 1, 2015, and before July 1, 2016:
 - (A) not more than one thousand one hundred five dollars



- (\$1,105); and
- (B) not less than seventy-five dollars (\$75); and
- (13) (4) with respect to injuries occurring on and after July 1, 2016, and before July 1, 2023:
 - (A) not more than one thousand one hundred seventy dollars (\$1,170); and
 - (B) not less than seventy-five dollars (\$75);
- (5) with respect to injuries occurring on and after July 1, 2023, and before July 1, 2024:
 - (A) not more than one thousand two hundred five dollars (\$1,205); and
 - (B) not less than seventy-five dollars (\$75);
- (6) with respect to injuries occurring on and after July 1, 2024, and before July 1, 2025:
 - (A) not more than one thousand two hundred forty-one dollars (\$1,241); and
 - (B) not less than seventy-five dollars (\$75);
- (7) with respect to injuries occurring on and after July 1, 2025, and before July 1, 2026:
 - (A) not more than one thousand two hundred seventy-eight dollars (\$1,278); and
 - (B) not less than seventy-five dollars (\$75); and
- (8) with respect to injuries occurring on and after July 1, 2026:
 - (A) not more than one thousand three hundred sixteen dollars (\$1,316); and
 - (B) not less than seventy-five dollars (\$75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

- (k) With respect to any injury occurring on and after July 1, 1985, and before July 1, 1986, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed eighty-nine thousand dollars (\$89,000) in any case.
- (l) With respect to any injury occurring on and after July 1, 1986, and before July 1, 1988, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed ninety-five thousand dollars (\$95,000) in any case.
- (m) With respect to any injury occurring on and after July 1, 1988, and before July 1, 1989, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions



of this law or any combination of provisions may not exceed one hundred twenty-eight thousand dollars (\$128,000) in any case.

- (n) With respect to any injury occurring on and after July 1, 1989, and before July 1, 1990, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred thirty-seven thousand dollars (\$137,000) in any case.
- (o) With respect to any injury occurring on and after July 1, 1990, and before July 1, 1991, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred forty-seven thousand dollars (\$147,000) in any case.
- (p) With respect to any injury occurring on and after July 1, 1991, and before July 1, 1992, the maximum compensation, exclusive of medical benefits, that may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred sixty-four thousand dollars (\$164,000) in any case.
- (q) With respect to any injury occurring on and after July 1, 1992, and before July 1, 1993, the maximum compensation, exclusive of medical benefits, that may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred eighty thousand dollars (\$180,000) in any case.
- (r) With respect to any injury occurring on and after July 1, 1993, and before July 1, 1994, the maximum compensation, exclusive of medical benefits, that may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred ninety-seven thousand dollars (\$197,000) in any case.
- (s) With respect to any injury occurring on and after July 1, 1994, and before July 1, 1997, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed two hundred fourteen thousand dollars (\$214,000) in any case.
- (t) (b) The maximum compensation, exclusive of medical benefits, that may be paid for an injury under any provision of this law or any combination of provisions may not exceed the following amounts in any case:
 - (1) With respect to an injury occurring on and after July 1, 1997, and before July 1, 1998, two hundred twenty-four thousand dollars (\$224,000).
 - (2) With respect to an injury occurring on and after July 1, 1998, and before July 1, 1999, two hundred thirty-four thousand dollars (\$234,000).



- (3) With respect to an injury occurring on and after July 1, 1999, and before July 1, 2000, two hundred forty-four thousand dollars (\$244,000).
- (4) With respect to an injury occurring on and after July 1, 2000, and before July 1, 2001, two hundred fifty-four thousand dollars (\$254,000).
- (5) With respect to an injury occurring on and after July 1, 2001, and before July 1, 2002, two hundred seventy-four thousand dollars (\$274,000).
- (6) With respect to an injury occurring on and after July 1, 2002, and before July 1, 2006, two hundred ninety-four thousand dollars (\$294,000).
- (7) With respect to an injury occurring on and after July 1, 2006, and before July 1, 2007, three hundred thousand dollars (\$300,000).
- (8) With respect to an injury occurring on and after July 1, 2007, and before July 1, 2008, three hundred ten thousand dollars (\$310,000).
- (9) With respect to an injury occurring on and after July 1, 2008, and before July 1, 2009, three hundred eighteen thousand dollars (\$318,000).
- (10) (1) With respect to an injury occurring on and after July 1, 2009, and before July 1, 2014, three hundred twenty-five thousand dollars (\$325,000).
- (11) (2) With respect to an injury occurring on and after July 1, 2014, and before July 1, 2015, three hundred forty-seven thousand dollars (\$347,000).
- (12) (3) With respect to an injury occurring on and after July 1, 2015, and before July 1, 2016, three hundred sixty-eight thousand dollars (\$368,000).
- (13) (4) With respect to an injury occurring on and after July 1, 2016, and before July 1, 2023, three hundred ninety thousand dollars (\$390,000).
- (5) With respect to an injury occurring on and after July 1, 2023, and before July 1, 2024, four hundred two thousand dollars (\$402,000).
- (6) With respect to an injury occurring on and after July 1, 2024, and before July 1, 2025, four hundred fourteen thousand dollars (\$414,000).
- (7) With respect to an injury occurring on and after July 1, 2025, and before July 1, 2026, four hundred twenty-six thousand dollars (\$426,000).



(8) With respect to an injury occurring on and after July 1, 2026, four hundred thirty-nine thousand dollars (\$439,000).

SECTION 5. IC 22-3-6-1, AS AMENDED BY P.L.147-2020, SECTION 17, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2023]: Sec. 1. In IC 22-3-2 through IC 22-3-6, unless the context otherwise requires:

(a) "Employer" includes the state and any political subdivision, any municipal corporation within the state, any individual or the legal representative of a deceased individual, firm, association, limited liability company, limited liability partnership, or corporation or the receiver or trustee of the same, using the services of another for pay. A corporation, limited liability company, or limited liability partnership that controls the activities of another corporation, limited liability company, or limited liability partnership, or a corporation and a limited liability company or a corporation and a limited liability partnership that are commonly owned entities, or the controlled corporation, limited liability company, limited liability partnership, or commonly owned entities, and a parent corporation and its subsidiaries shall each be considered joint employers of the corporation's, the controlled corporation's, the limited liability company's, the limited liability partnership's, the commonly owned entities', the parent's, or the subsidiaries' employees for purposes of IC 22-3-2-6 and IC 22-3-3-31. Both a lessor and a lessee of employees shall each be considered joint employers of the employees provided by the lessor to the lessee for purposes of IC 22-3-2-6 and IC 22-3-3-31. If the employer is insured, the term includes the employer's insurer so far as applicable. However, the inclusion of an employer's insurer within this definition does not allow an employer's insurer to avoid payment for services rendered to an employee with the approval of the employer. The term also includes an employer that provides on-the-job training under the federal School to Work Opportunities Act (20 U.S.C. 6101 et seg.) to the extent set forth in IC 22-3-2-2.5. The term does not include a nonprofit corporation that is recognized as tax exempt under Section 501(c)(3) of the Internal Revenue Code (as defined in IC 6-3-1-11(a)) to the extent the corporation enters into an independent contractor agreement with a person for the performance of youth coaching services on a part-time basis.

(b) "Employee" means every person, including a minor, in the service of another, under any contract of hire or apprenticeship, written or implied, except one whose employment is both casual and not in the usual course of the trade, business, occupation, or profession of the employer.

HEA 1153 — **Concur**



- (1) An executive officer elected or appointed and empowered in accordance with the charter and bylaws of a corporation, other than a municipal corporation or governmental subdivision or a charitable, religious, educational, or other nonprofit corporation, is an employee of the corporation under IC 22-3-2 through IC 22-3-6. An officer of a corporation who is an employee of the corporation under IC 22-3-2 through IC 22-3-6 may elect not to be an employee of the corporation under IC 22-3-2 through IC 22-3-6. An officer of a corporation who is also an owner of any interest in the corporation may elect not to be an employee of the corporation under IC 22-3-2 through IC 22-3-6. If an officer makes this election, the officer must serve written notice of the election on the corporation's insurance carrier and the board. An officer of a corporation may not be considered to be excluded as an employee under IC 22-3-2 through IC 22-3-6 until the notice is received by the insurance carrier and the board.
- (2) An executive officer of a municipal corporation or other governmental subdivision or of a charitable, religious, educational, or other nonprofit corporation may, notwithstanding any other provision of IC 22-3-2 through IC 22-3-6, be brought within the coverage of its insurance contract by the corporation by specifically including the executive officer in the contract of insurance. The election to bring the executive officer within the coverage shall continue for the period the contract of insurance is in effect, and during this period, the executive officers thus brought within the coverage of the insurance contract are employees of the corporation under IC 22-3-2 through IC 22-3-6.

 (3) Any reference to an employee who has been injured, when the employee is dead, also includes the employee's legal representatives, dependents, and other persons to whom compensation may be payable.
- (4) An owner of a sole proprietorship may elect to include the owner as an employee under IC 22-3-2 through IC 22-3-6 if the owner is actually engaged in the proprietorship business. If the owner makes this election, the owner must serve upon the owner's insurance carrier and upon the board written notice of the election. No owner of a sole proprietorship may be considered an employee under IC 22-3-2 through IC 22-3-6 until the notice has been received. If the owner of a sole proprietorship:
 - (A) is an independent contractor in the construction trades and does not make the election provided under this subdivision, the owner must obtain a certificate of exemption under



- IC 22-3-2-14.5; or
- (B) is an independent contractor and does not make the election provided under this subdivision, the owner may obtain a certificate of exemption under IC 22-3-2-14.5.
- (5) A partner in a partnership may elect to include the partner as an employee under IC 22-3-2 through IC 22-3-6 if the partner is actually engaged in the partnership business. If a partner makes this election, the partner must serve upon the partner's insurance carrier and upon the board written notice of the election. No partner may be considered an employee under IC 22-3-2 through IC 22-3-6 until the notice has been received. If a partner in a partnership:
 - (A) is an independent contractor in the construction trades and does not make the election provided under this subdivision, the partner must obtain a certificate of exemption under IC 22-3-2-14.5; or
 - (B) is an independent contractor and does not make the election provided under this subdivision, the partner may obtain a certificate of exemption under IC 22-3-2-14.5.
- (6) Real estate professionals are not employees under IC 22-3-2 through IC 22-3-6 if:
 - (A) they are licensed real estate agents:
 - (B) substantially all their remuneration is directly related to sales volume and not the number of hours worked; and
 - (C) they have written agreements with real estate brokers stating that they are not to be treated as employees for tax purposes.
- (7) A person is an independent contractor and not an employee under IC 22-3-2 through IC 22-3-6 if the person is an independent contractor under the guidelines of the United States Internal Revenue Service.
- (8) An owner-operator that provides a motor vehicle and the services of a driver under a written contract that is subject to IC 8-2.1-24-23, 45 IAC 16-1-13, or 49 CFR 376 to a motor carrier is not an employee of the motor carrier for purposes of IC 22-3-2 through IC 22-3-6. The owner-operator may elect to be covered and have the owner-operator's drivers covered under a worker's compensation insurance policy or authorized self-insurance that insures the motor carrier if the owner-operator pays the premiums as requested by the motor carrier. An election by an owner-operator under this subdivision does not terminate the independent contractor status of the owner-operator for any



purpose other than the purpose of this subdivision.

- (9) A member or manager in a limited liability company may elect to include the member or manager as an employee under IC 22-3-2 through IC 22-3-6 if the member or manager is actually engaged in the limited liability company business. If a member or manager makes this election, the member or manager must serve upon the member's or manager's insurance carrier and upon the board written notice of the election. A member or manager may not be considered an employee under IC 22-3-2 through IC 22-3-6 until the notice has been received.
- (10) An unpaid participant under the federal School to Work Opportunities Act (20 U.S.C. 6101 et seq.) is an employee to the extent set forth in IC 22-3-2-2.5.
- (11) A person who enters into an independent contractor agreement with a nonprofit corporation that is recognized as tax exempt under Section 501(c)(3) of the Internal Revenue Code (as defined in IC 6-3-1-11(a)) to perform youth coaching services on a part-time basis is not an employee for purposes of IC 22-3-2 through IC 22-3-6.
- (12) An individual who is not an employee of the state or a political subdivision is considered to be a temporary employee of the state for purposes of IC 22-3-2 through IC 22-3-6 while serving as a member of a mobile support unit on duty for training, an exercise, or a response, as set forth in IC 10-14-3-19(c)(2)(B). (13) A driver providing drive away operations is an independent contractor and not an employee when:
 - (A) the vehicle being driven is the commodity being delivered; and
 - (B) the driver has entered into an agreement with the party arranging for the transportation that specifies the driver is an independent contractor and not an employee.
- (c) "Minor" means an individual who has not reached seventeen (17) years of age.
 - (1) Unless otherwise provided in this subsection, a minor employee shall be considered as being of full age for all purposes of IC 22-3-2 through IC 22-3-6.
 - (2) If the employee is a minor who, at the time of the accident, is employed, required, suffered, or permitted to work in violation of IC 22-2-18-40 (before its expiration on June 30, 2021) and IC 22-2-18.1-23, the amount of compensation and death benefits, as provided in IC 22-3-2 through IC 22-3-6, shall be double the amount which would otherwise be recoverable. The insurance



carrier shall be liable on its policy for one-half (1/2) of the compensation or benefits that may be payable on account of the injury or death of the minor, and the employer shall be liable for the other one-half (1/2) of the compensation or benefits. If the employee is a minor who is not less than sixteen (16) years of age and who has not reached seventeen (17) years of age and who at the time of the accident is employed, suffered, or permitted to work at any occupation which is not prohibited by law, this subdivision does not apply.

- (3) A minor employee who, at the time of the accident, is a student performing services for an employer as part of an approved program under IC 20-37-2-7 shall be considered a full-time employee for the purpose of computing compensation for permanent impairment under IC 22-3-3-10. The average weekly wages for such a student shall be calculated as provided in subsection (d)(4).
- (4) The rights and remedies granted in this subsection to a minor under IC 22-3-2 through IC 22-3-6 on account of personal injury or death by accident shall exclude all rights and remedies of the minor, the minor's parents, or the minor's personal representatives, dependents, or next of kin at common law, statutory or otherwise, on account of the injury or death. This subsection does not apply to minors who have reached seventeen (17) years of age.
- (d) "Average weekly wages" means the earnings of the injured employee in the employment in which the employee was working at the time of the injury during the period of fifty-two (52) weeks immediately preceding the date of injury, divided by fifty-two (52), except as follows:
 - (1) If the injured employee lost seven (7) or more calendar days during this period, although not in the same week, then the earnings for the remainder of the fifty-two (52) weeks shall be divided by the number of weeks and parts thereof remaining after the time lost has been deducted.
 - (2) Where the employment prior to the injury extended over a period of less than fifty-two (52) weeks, the method of dividing the earnings during that period by the number of weeks and parts thereof during which the employee earned wages shall be followed, if results just and fair to both parties will be obtained. Where by reason of the shortness of the time during which the employee has been in the employment of the employee's employer or of the casual nature or terms of the employment it is



impracticable to compute the average weekly wages, as defined in this subsection, regard shall be had to the average weekly amount which during the fifty-two (52) weeks previous to the injury was being earned by a person in the same grade employed at the same work by the same employer or, if there is no person so employed, by a person in the same grade employed in the same class of employment in the same district.

- (3) Wherever allowances of any character made to an employee in lieu of wages are a specified part of the wage contract, they shall be deemed a part of the employee's earnings.
- (4) In computing the average weekly wages to be used in calculating an award for permanent impairment under IC 22-3-3-10 for a student employee in an approved training program under IC 20-37-2-7, the following formula shall be used. Calculate the product of:
 - (A) the student employee's hourly wage rate; multiplied by
 - (B) forty (40) hours.

The result obtained is the amount of the average weekly wages for the student employee.

- (e) "Injury" and "personal injury" mean only injury by accident arising out of and in the course of the employment and do not include a disease in any form except as it results from the injury.
- (f) "Billing review service" refers to a person or an entity that reviews a medical service provider's bills or statements for the purpose of determining pecuniary liability. The term includes an employer's worker's compensation insurance carrier if the insurance carrier performs such a review.
- (g) "Billing review standard" means the data used by a billing review service to determine pecuniary liability.
- (h) "Community" means a geographic service area based on ZIP code districts defined by the United States Postal Service according to the following groupings:
 - (1) The geographic service area served by ZIP codes with the first three (3) digits 463 and 464.
 - (2) The geographic service area served by ZIP codes with the first three (3) digits 465 and 466.
 - (3) The geographic service area served by ZIP codes with the first three (3) digits 467 and 468.
 - (4) The geographic service area served by ZIP codes with the first three (3) digits 469 and 479.
 - (5) The geographic service area served by ZIP codes with the first three (3) digits 460, 461 (except 46107), and 473.



- (6) The geographic service area served by the 46107 ZIP code and ZIP codes with the first three (3) digits 462.
- (7) The geographic service area served by ZIP codes with the first three (3) digits 470, 471, 472, 474, and 478.
- (8) The geographic service area served by ZIP codes with the first three (3) digits 475, 476, and 477.
- (i) "Medical service provider" refers to a person or an entity that provides services or products to an employee under IC 22-3-2 through IC 22-3-6. Except as otherwise provided in IC 22-3-2 through IC 22-3-6, the term includes a medical service facility.
- (j) "Medical service facility" means any of the following that provides a service or product under IC 22-3-2 through IC 22-3-6 and uses the CMS 1450 (UB-04) form or the CMS 1500 (HCFA-1500) form for Medicare reimbursement:
 - (1) An ambulatory outpatient surgical center (as defined in IC 16-18-2-14).
 - (1) (2) A hospital (as defined in IC 16-18-2-179).
 - (2) (3) A hospital based health facility (as defined in IC 16-18-2-180).
 - (3) (4) A medical center (as defined in IC 16-18-2-223.4).

The term does not include a professional corporation (as defined in IC 23-1.5-1-10) comprised of health care professionals (as defined in IC 23-1.5-1-8) formed to render professional services as set forth in IC 23-1.5-2-3(a)(4) or a health care professional (as defined in IC 23-1.5-1-8) who bills for a service or product provided under IC 22-3-2 through IC 22-3-6 as an individual or a member of a group practice or another medical service provider that uses the CMS 1500 form for Medicare reimbursement.

- (k) "Pecuniary liability" means the responsibility of an employer or the employer's insurance carrier for the payment of the charges for each specific service or product for human medical treatment provided under IC 22-3-2 through IC 22-3-6, as follows:
 - (1) This subdivision applies before July 1, 2014, to all medical service providers, and after June 30, 2014, to a medical service provider that is not a medical service facility. Payment of the charges in a defined community, equal to or less than the charges made by medical service providers at the eightieth percentile in the same community for like services or products.
 - (2) Payment of the charges in a reasonable amount, which is established by payment of one (1) of the following:
 - (A) The amount negotiated at any time between the medical service facility and any of the following, if an amount has been



negotiated:

- (i) The employer.
- (ii) The employer's insurance carrier.
- (iii) A billing review service on behalf of a person described in item (i) or (ii).
- (iv) A direct provider network that has contracted with a person described in item (i) or (ii).
- (B) Two hundred percent (200%) of the amount that would be paid to the medical service facility on the same date for the same service or product under the medical service facility's Medicare reimbursement rate, if, an amount has not been negotiated as after conducting the negotiations described in clause (A), an agreement has not been reached.
- (1) "Service or product" or "services and products" refers to medical, hospital, surgical, or nursing service, treatment, and supplies provided under IC 22-3-2 through IC 22-3-6.

SECTION 6. IC 22-3-7-9, AS AMENDED BY P.L.147-2020, SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2023]: Sec. 9. (a) As used in this chapter, "employer" includes the state and any political subdivision, any municipal corporation within the state, any individual or the legal representative of a deceased individual, firm, association, limited liability company, limited liability partnership, or corporation or the receiver or trustee of the same, using the services of another for pay. A corporation, limited liability company, or limited liability partnership that controls the activities of another corporation, limited liability company, or limited liability partnership, or a corporation and a limited liability company or a corporation and a limited liability partnership that are commonly owned entities, or the controlled corporation, limited liability company, limited liability partnership, or commonly owned entities, and a parent corporation and its subsidiaries shall each be considered joint employers of the corporation's, the controlled corporation's, the limited liability company's, the limited liability partnership's, the commonly owned entities', the parent's, or the subsidiaries' employees for purposes of sections 6 and 33 of this chapter. Both a lessor and a lessee of employees shall each be considered joint employers of the employees provided by the lessor to the lessee for purposes of sections 6 and 33 of this chapter. The term also includes an employer that provides on-the-job training under the federal School to Work Opportunities Act (20 U.S.C. 6101 et seq.) to the extent set forth under section 2.5 of this chapter. If the employer is insured, the term includes the employer's insurer so far as applicable. However, the inclusion of an employer's



insurer within this definition does not allow an employer's insurer to avoid payment for services rendered to an employee with the approval of the employer. The term does not include a nonprofit corporation that is recognized as tax exempt under Section 501(c)(3) of the Internal Revenue Code (as defined in IC 6-3-1-11(a)) to the extent the corporation enters into an independent contractor agreement with a person for the performance of youth coaching services on a part-time basis.

- (b) As used in this chapter, "employee" means every person, including a minor, in the service of another, under any contract of hire or apprenticeship written or implied, except one whose employment is both casual and not in the usual course of the trade, business, occupation, or profession of the employer. For purposes of this chapter the following apply:
 - (1) Any reference to an employee who has suffered disablement, when the employee is dead, also includes the employee's legal representative, dependents, and other persons to whom compensation may be payable.
 - (2) An owner of a sole proprietorship may elect to include the owner as an employee under this chapter if the owner is actually engaged in the proprietorship business. If the owner makes this election, the owner must serve upon the owner's insurance carrier and upon the board written notice of the election. No owner of a sole proprietorship may be considered an employee under this chapter unless the notice has been received. If the owner of a sole proprietorship:
 - (A) is an independent contractor in the construction trades and does not make the election provided under this subdivision, the owner must obtain a certificate of exemption under section 34.5 of this chapter; or
 - (B) is an independent contractor and does not make the election provided under this subdivision, the owner may obtain a certificate of exemption under section 34.5 of this chapter.
 - (3) A partner in a partnership may elect to include the partner as an employee under this chapter if the partner is actually engaged in the partnership business. If a partner makes this election, the partner must serve upon the partner's insurance carrier and upon the board written notice of the election. No partner may be considered an employee under this chapter until the notice has been received. If a partner in a partnership:
 - (A) is an independent contractor in the construction trades and does not make the election provided under this subdivision,



- the partner must obtain a certificate of exemption under section 34.5 of this chapter; or
- (B) is an independent contractor and does not make the election provided under this subdivision, the partner may obtain a certificate of exemption under section 34.5 of this chapter.
- (4) Real estate professionals are not employees under this chapter if:
 - (A) they are licensed real estate agents;
 - (B) substantially all their remuneration is directly related to sales volume and not the number of hours worked; and
 - (C) they have written agreements with real estate brokers stating that they are not to be treated as employees for tax purposes.
- (5) A person is an independent contractor in the construction trades and not an employee under this chapter if the person is an independent contractor under the guidelines of the United States Internal Revenue Service.
- (6) An owner-operator that provides a motor vehicle and the services of a driver under a written contract that is subject to IC 8-2.1-24-23, 45 IAC 16-1-13, or 49 CFR 376, to a motor carrier is not an employee of the motor carrier for purposes of this chapter. The owner-operator may elect to be covered and have the owner-operator's drivers covered under a worker's compensation insurance policy or authorized self-insurance that insures the motor carrier if the owner-operator pays the premiums as requested by the motor carrier. An election by an owner-operator under this subdivision does not terminate the independent contractor status of the owner-operator for any purpose other than the purpose of this subdivision.
- (7) An unpaid participant under the federal School to Work Opportunities Act (20 U.S.C. 6101 et seq.) is an employee to the extent set forth under section 2.5 of this chapter.
- (8) A person who enters into an independent contractor agreement with a nonprofit corporation that is recognized as tax exempt under Section 501(c)(3) of the Internal Revenue Code (as defined in IC 6-3-1-11(a)) to perform youth coaching services on a part-time basis is not an employee for purposes of this chapter.
- (9) An officer of a corporation who is an employee of the corporation under this chapter may elect not to be an employee of the corporation under this chapter. An officer of a corporation who is also an owner of any interest in the corporation may elect



not to be an employee of the corporation under this chapter. If an officer makes this election, the officer must serve written notice of the election on the corporation's insurance carrier and the board. An officer of a corporation may not be considered to be excluded as an employee under this chapter until the notice is received by the insurance carrier and the board.

- (10) An individual who is not an employee of the state or a political subdivision is considered to be a temporary employee of the state for purposes of this chapter while serving as a member of a mobile support unit on duty for training, an exercise, or a response, as set forth in IC 10-14-3-19(c)(2)(B).
- (c) As used in this chapter, "minor" means an individual who has not reached seventeen (17) years of age. A minor employee shall be considered as being of full age for all purposes of this chapter. However, if the employee is a minor who, at the time of the last exposure, is employed, required, suffered, or permitted to work in violation of the employment of minors laws of this state, the amount of compensation and death benefits, as provided in this chapter, shall be double the amount which would otherwise be recoverable. The insurance carrier shall be liable on its policy for one-half (1/2) of the compensation or benefits that may be payable on account of the disability or death of the minor, and the employer shall be wholly liable for the other one-half (1/2) of the compensation or benefits. If the employee is a minor who is not less than sixteen (16) years of age and who has not reached seventeen (17) years of age, and who at the time of the last exposure is employed, suffered, or permitted to work at any occupation which is not prohibited by law, the provisions of this subsection prescribing double the amount otherwise recoverable do not apply. The rights and remedies granted to a minor under this chapter on account of disease shall exclude all rights and remedies of the minor, the minor's parents, the minor's personal representatives, dependents, or next of kin at common law, statutory or otherwise, on account of any disease.
- (d) This chapter does not apply to casual laborers as defined in subsection (b), nor to farm or agricultural employees, nor to household employees, nor to railroad employees engaged in train service as engineers, firemen, conductors, brakemen, flagmen, baggagemen, or foremen in charge of yard engines and helpers assigned thereto, nor to their employers with respect to these employees. Also, this chapter does not apply to employees or their employers with respect to employments in which the laws of the United States provide for compensation or liability for injury to the health, disability, or death by



reason of diseases suffered by these employees.

- (e) As used in this chapter, "disablement" means the event of becoming disabled from earning full wages at the work in which the employee was engaged when last exposed to the hazards of the occupational disease by the employer from whom the employee claims compensation or equal wages in other suitable employment, and "disability" means the state of being so incapacitated.
- (f) For the purposes of this chapter, no compensation shall be payable for or on account of any occupational diseases unless disablement, as defined in subsection (e), occurs within two (2) years after the last day of the last exposure to the hazards of the disease except for the following:
 - (1) In all cases of occupational diseases caused by the inhalation of silica dust or coal dust, no compensation shall be payable unless disablement, as defined in subsection (e), occurs within three (3) years after the last day of the last exposure to the hazards of the disease.
 - (2) In all cases of occupational disease caused by the exposure to radiation, no compensation shall be payable unless disablement, as defined in subsection (e), occurs within two (2) years from the date on which the employee had knowledge of the nature of the employee's occupational disease or, by exercise of reasonable diligence, should have known of the existence of such disease and its causal relationship to the employee's employment.
 - (3) In all cases of occupational diseases caused by the inhalation of asbestos dust, no compensation shall be payable unless disablement, as defined in subsection (e), occurs within three (3) years after the last day of the last exposure to the hazards of the disease if the last day of the last exposure was before July 1, 1985. (4) In all cases of occupational disease caused by the inhalation of asbestos dust in which the last date of the last exposure occurs on or after July 1, 1985, and before July 1, 1988, no compensation shall be payable unless disablement, as defined in subsection (e), occurs within twenty (20) years after the last day of the last exposure.
 - (5) In all cases of occupational disease caused by the inhalation of asbestos dust in which the last date of the last exposure occurs on or after July 1, 1988, no compensation shall be payable unless disablement (as defined in subsection (e)) occurs within thirty-five (35) years after the last day of the last exposure.
- (g) For the purposes of this chapter, no compensation shall be payable for or on account of death resulting from any occupational



disease unless death occurs within two (2) years after the date of disablement. However, this subsection does not bar compensation for death:

- (1) where death occurs during the pendency of a claim filed by an employee within two (2) years after the date of disablement and which claim has not resulted in a decision or has resulted in a decision which is in process of review or appeal; or
- (2) where, by agreement filed or decision rendered, a compensable period of disability has been fixed and death occurs within two (2) years after the end of such fixed period, but in no event later than three hundred (300) weeks after the date of disablement.
- (h) As used in this chapter, "billing review service" refers to a person or an entity that reviews a medical service provider's bills or statements for the purpose of determining pecuniary liability. The term includes an employer's worker's compensation insurance carrier if the insurance carrier performs such a review.
- (i) As used in this chapter, "billing review standard" means the data used by a billing review service to determine pecuniary liability.
- (j) As used in this chapter, "community" means a geographic service area based on ZIP code districts defined by the United States Postal Service according to the following groupings:
 - (1) The geographic service area served by ZIP codes with the first three (3) digits 463 and 464.
 - (2) The geographic service area served by ZIP codes with the first three (3) digits 465 and 466.
 - (3) The geographic service area served by ZIP codes with the first three (3) digits 467 and 468.
 - (4) The geographic service area served by ZIP codes with the first three (3) digits 469 and 479.
 - (5) The geographic service area served by ZIP codes with the first three (3) digits 460, 461 (except 46107), and 473.
 - (6) The geographic service area served by the 46107 ZIP code and ZIP codes with the first three (3) digits 462.
 - (7) The geographic service area served by ZIP codes with the first three (3) digits 470, 471, 472, 474, and 478.
 - (8) The geographic service area served by ZIP codes with the first three (3) digits 475, 476, and 477.
- (k) As used in this chapter, "medical service provider" refers to a person or an entity that provides services or products to an employee under this chapter. Except as otherwise provided in this chapter, the term includes a medical service facility.



- (l) As used in this chapter, "medical service facility" means any of the following that provides a service or product under this chapter and uses the CMS 1450 (UB-04) form or the CMS 1500 (HCFA-1500) form for Medicare reimbursement:
 - (1) An ambulatory outpatient surgical center (as defined in IC 16-18-2-14).
 - (1) (2) A hospital (as defined in IC 16-18-2-179).
 - (2) (3) A hospital based health facility (as defined in IC 16-18-2-180).
 - (3) (4) A medical center (as defined in IC 16-18-2-223.4).

The term does not include a professional corporation (as defined in IC 23-1.5-1-10) comprised of health care professionals (as defined in IC 23-1.5-1-8) formed to render professional services as set forth in IC 23-1.5-2-3(a)(4) or a health care professional (as defined in IC 23-1.5-1-8) who bills for a service or product provided under this chapter as an individual or a member of a group practice or another medical service provider that uses the CMS 1500 form for Medicare reimbursement.

- (m) As used in this chapter, "pecuniary liability" means the responsibility of an employer or the employer's insurance carrier for the payment of the charges for each specific service or product for human medical treatment provided under this chapter as follows:
 - (1) This subdivision applies before July 1, 2014, to all medical service providers, and after June 30, 2014, to a medical service provider that is not a medical service facility. Payment of the charges in a defined community, equal to or less than the charges made by medical service providers at the eightieth percentile in the same community for like services or products.
 - (2) Payment of the charges in a reasonable amount, which is established by payment of one (1) of the following:
 - (A) The amount negotiated at any time between the medical service facility and any of the following, if an amount has been negotiated:
 - (i) The employer.
 - (ii) The employer's insurance carrier.
 - (iii) A billing review service on behalf of a person described in item (i) or (ii).
 - (iv) A direct provider network that has contracted with a person described in item (i) or (ii).
 - (B) Two hundred percent (200%) of the amount that would be paid to the medical service facility on the same date for the same service or product under the medical service facility's



Medicare reimbursement rate, if, an amount has not been negotiated as after conducting the negotiations described in clause (A), an agreement has not been reached.

(n) "Service or product" or "services and products" refers to medical, hospital, surgical, or nursing service, treatment, and supplies provided under this chapter.

SECTION 7. IC 22-3-7-16, AS AMENDED BY P.L.32-2021, SECTION 64. IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2023]: Sec. 16. (a) Compensation shall be allowed on account of disablement from occupational disease resulting in only temporary total disability to work or temporary partial disability to work beginning with the eighth day of such disability except for the medical benefits provided for in section 17 of this chapter. Compensation shall be allowed for the first seven (7) calendar days only as provided in this section. The first weekly installment of compensation for temporary disability is due fourteen (14) days after the disability begins. Not later than fourteen (14) days from the date that the first installment of compensation is due, the employer or the employer's insurance carrier shall file a report of payment of compensation with the worker's compensation board electronically and tender to the employee or to the employee's dependents, with all compensation due, a properly prepared compensation agreement in a form prescribed by the board. The presentation to the employee or to the employee's dependents of the check, draft, or electronic payment from the employer or the employer's insurance carrier for the proper amount, drawn upon a bank in which money is on deposit to pay the same on demand, shall be sufficient tender of the compensation.

(b) Whenever an employer or the employer's insurance carrier denies or is not able to determine liability to pay compensation or benefits, the employer or the employer's insurance carrier shall notify the worker's compensation board and the employee in writing on a form prescribed by the worker's compensation board not later than thirty (30) days after the employer's knowledge of the claimed disablement. If a determination of liability cannot be made within thirty (30) days, the worker's compensation board may approve an additional thirty (30) days upon a written request of the employer or the employer's insurance carrier that sets forth the reasons that the determination could not be made within thirty (30) days and states the facts or circumstances that are necessary to determine liability within the additional thirty (30) days. More than thirty (30) days of additional time may be approved by the worker's compensation board upon the filing of a petition by the employer or the employer's insurance carrier that sets forth:



- (1) the extraordinary circumstances that have precluded a determination of liability within the initial sixty (60) days;
- (2) the status of the investigation on the date the petition is filed;
- (3) the facts or circumstances that are necessary to make a determination; and
- (4) a timetable for the completion of the remaining investigation. An employer who fails to comply with this section is subject to a civil penalty under IC 22-3-4-15.
- (c) Once begun, temporary total disability benefits may not be terminated by the employer unless:
 - (1) the employee has returned to work;
 - (2) the employee has died;
 - (3) the employee has refused to undergo a medical examination under section 20 of this chapter;
 - (4) the employee has received five hundred (500) weeks of temporary total disability benefits or has been paid the maximum compensation allowable under section 19 of this chapter; or
 - (5) the employee is unable or unavailable to work for reasons unrelated to the compensable disease.

In each instance, the employer must provide written notice to the injured worker on a form approved by the board. In all other cases the employer must notify the employee in writing of the employer's intent to terminate the payment of temporary total disability benefits, and of the availability of employment, if any, on a form approved by the board. In all instances, the employer must file an electronic notice of the termination with the board.

(d) If the employee disagrees with the termination or proposed termination, the employee must give written notice of disagreement to the board and the employer within seven (7) days after receipt of the notice of intent to terminate benefits. If the board and employer do not receive a notice of disagreement under this section, the employee's temporary total disability benefits shall be terminated. Upon receipt of the notice of disagreement, the board shall immediately contact the parties, which may be by telephone or other means and attempt to resolve the disagreement. If the board is unable to resolve the disagreement within ten (10) days of receipt of the notice of disagreement, the board shall immediately arrange for an evaluation of the employee by an independent medical examiner. The independent medical examiner shall be selected by mutual agreement of the parties or, if the parties are unable to agree, appointed by the board under IC 22-3-4-11. If the independent medical examiner determines that the employee is no longer temporarily disabled or is still temporarily



disabled but can return to employment that the employer has made available to the employee, or if the employee fails or refuses to appear for examination by the independent medical examiner, temporary total disability benefits may be terminated. If either party disagrees with the opinion of the independent medical examiner, the party shall apply to the board for a hearing under section 27 of this chapter.

- (e) An employer is not required to continue the payment of temporary total disability benefits for more than fourteen (14) days after the employer's proposed termination date unless the independent medical examiner determines that the employee is temporarily disabled and unable to return to any employment that the employer has made available to the employee.
- (f) If it is determined that as a result of this section temporary total disability benefits were overpaid, the overpayment shall be deducted from any benefits due the employee under this section and, if there are no benefits due the employee or the benefits due the employee do not equal the amount of the overpayment, the employee shall be responsible for paying any overpayment which cannot be deducted from benefits due the employee.
- (g) For disablements occurring on and after July 1, 1976, from occupational disease resulting in temporary total disability for any work there shall be paid to the disabled employee during the temporary total disability weekly compensation equal to sixty-six and two-thirds percent (66 2/3%) of the employee's average weekly wages, as defined in section 19 of this chapter, for a period not to exceed five hundred (500) weeks. Compensation shall be allowed for the first seven (7) calendar days only if the disability continues for longer than twenty-one (21) days.
- (h) For disablements occurring on and after July 1, 1974, from occupational disease resulting in temporary partial disability for work there shall be paid to the disabled employee during such disability a weekly compensation equal to sixty-six and two-thirds percent (66 2/3%) of the difference between the employee's average weekly wages, as defined in section 19 of this chapter, and the weekly wages at which the employee is actually employed after the disablement, for a period not to exceed three hundred (300) weeks. Compensation shall be allowed for the first seven (7) calendar days only if the disability continues for longer than twenty-one (21) days. In case of partial disability after the period of temporary total disability, the latter period shall be included as a part of the maximum period allowed for partial disability.
 - (i) For disabilities occurring on and after July 1, 1979, and before



July 1, 1988, from occupational disease in the schedule set forth in subsection (1), the employee shall receive in addition to disability benefits, not exceeding fifty-two (52) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred twenty-five dollars (\$125) average weekly wages, for the period stated for the disabilities.

(j) For disabilities occurring on and after July 1, 1988, and before July 1, 1989, from occupational disease in the schedule set forth in subsection (l), the employee shall receive in addition to disability benefits, not exceeding seventy-eight (78) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred sixty-six dollars (\$166) average weekly wages, for the period stated for the disabilities.

(k) For disabilities occurring on and after July 1, 1989, and before July 1, 1990, from occupational disease in the schedule set forth in subsection (l), the employee shall receive in addition to disability benefits, not exceeding seventy-eight (78) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred eighty-three dollars (\$183) average weekly wages, for the period stated for the disabilities.

(1) For disabilities occurring on and after July 1, 1990, and before July 1, 1991, from occupational disease in the following schedule, the employee shall receive in addition to disability benefits, not exceeding seventy-eight (78) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed two hundred dollars (\$200) average weekly wages, for the period stated for the disabilities.

(1) Amputations: For the loss by separation, of the thumb, sixty (60) weeks; of the index finger, forty (40) weeks; of the second finger, thirty-five (35) weeks; of the third or ring finger, thirty (30) weeks; of the fourth or little finger, twenty (20) weeks; of the hand by separation below the elbow, two hundred (200) weeks; of the arm above the elbow joint, two hundred fifty (250) weeks; of the big toe, sixty (60) weeks; of the second toe, thirty (30) weeks; of the third toe, twenty (20) weeks; of the fourth toe, fifteen (15) weeks; of the fifth or little toe, ten (10) weeks; of the foot below the knee joint, one hundred fifty (150) weeks; and of the leg above the knee joint, two hundred (200) weeks. The loss of more than one (1) phalange of a thumb or toe shall be considered as the



loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the thumb or toe and compensation shall be paid for one-half (1/2) of the period for the loss of the entire thumb or toe. The loss of not more than two (2) phalanges of a finger shall be considered as the loss of one-half (1/2) the finger and compensation shall be paid for one-half (1/2) of the period for the loss of the entire finger.

- (2) Loss of Use: The total permanent loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange and the compensation shall be paid for the same period as for the loss thereof by separation.
- (3) Partial Loss of Use: For the permanent partial loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange, compensation shall be paid for the proportionate loss of the use of such arm, hand, thumb, finger, leg, foot, toe, or phalange.
- (4) For disablements for occupational disease resulting in total permanent disability, five hundred (500) weeks.
- (5) For the loss of both hands, or both feet, or the total sight of both eyes, or any two (2) of such losses resulting from the same disablement by occupational disease, five hundred (500) weeks. (6) For the permanent and complete loss of vision by enucleation of an eye, or its reduction to one-tenth (1/10) of normal vision with glasses, one hundred fifty (150) weeks, and for any other permanent reduction of the sight of an eye, compensation shall be paid for a period proportionate to the degree of such permanent reduction without correction or glasses. However, when such permanent reduction without correction or glasses would result in one hundred percent (100%) loss of vision, but correction or glasses would result in restoration of vision, then compensation shall be paid for fifty percent (50%) of such total loss of vision without glasses plus an additional amount equal to the proportionate amount of such reduction with glasses, not to exceed an additional fifty percent (50%).
- (7) For the permanent and complete loss of hearing, two hundred (200) weeks.
- (8) In all other cases of permanent partial impairment, eompensation proportionate to the degree of such permanent partial impairment, in the discretion of the worker's compensation



board, not exceeding five hundred (500) weeks.

(9) In all cases of permanent disfigurement, which may impair the future usefulness or opportunities of the employee, compensation in the discretion of the worker's compensation board, not exceeding two hundred (200) weeks, except that no compensation shall be payable under this paragraph where compensation shall be payable under subdivisions (1) through (8). Where compensation for temporary total disability has been paid, this amount of compensation shall be deducted from any compensation due for permanent disfigurement.

(m) (i) With respect to disablements in the following schedule occurring on and after July 1, 1991, the employee shall receive in addition to temporary total disability benefits, not exceeding one hundred twenty-five (125) weeks on account of the disablement, compensation in an amount determined under the following schedule to be paid weekly at a rate of sixty-six and two-thirds percent (66 2/3%) of the employee's average weekly wages during the fifty-two (52) weeks immediately preceding the week in which the disablement occurred:

- (1) Amputation: For the loss by separation of the thumb, twelve (12) degrees of permanent impairment; of the index finger, eight (8) degrees of permanent impairment; of the second finger, seven (7) degrees of permanent impairment; of the third or ring finger, six (6) degrees of permanent impairment; of the fourth or little finger, four (4) degrees of permanent impairment; of the hand by separation below the elbow joint, forty (40) degrees of permanent impairment; of the arm above the elbow, fifty (50) degrees of permanent impairment; of the big toe, twelve (12) degrees of permanent impairment; of the second toe, six (6) degrees of permanent impairment; of the third toe, four (4) degrees of permanent impairment; of the fourth toe, three (3) degrees of permanent impairment; of the fifth or little toe, two (2) degrees of permanent impairment; of separation of the foot below the knee joint, thirty-five (35) degrees of permanent impairment; and of the leg above the knee joint, forty-five (45) degrees of permanent impairment.
- (2) Amputations occurring on or after July 1, 1997: For the loss by separation of any of the body parts described in subdivision (1) on or after July 1, 1997, the dollar values per degree applying on the date of the injury as described in subsection (n) (j) shall be multiplied by two (2). However, the doubling provision of this subdivision does not apply to a loss of use that is not a loss by



separation.

- (3) The loss of more than one (1) phalange of a thumb or toe shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the degrees of permanent impairment for the loss of the entire thumb or toe. The loss of not more than one (1) phalange of a finger shall be considered as the loss of one-third (1/3) of the finger and compensation shall be paid for one-third (1/3) of the degrees payable for the loss of the entire finger. The loss of more than one (1) phalange of the finger but not more than two (2) phalanges of the finger shall be considered as the loss of one-half (1/2) of the finger and compensation shall be paid for one-half (1/2) of the degrees payable for the loss of the entire finger.
- (4) For the loss by separation of both hands or both feet or the total sight of both eyes or any two (2) such losses in the same accident, one hundred (100) degrees of permanent impairment.
- (5) For the permanent and complete loss of vision by enucleation or its reduction to one-tenth (1/10) of normal vision with glasses, thirty-five (35) degrees of permanent impairment.
- (6) For the permanent and complete loss of hearing in one (1) ear, fifteen (15) degrees of permanent impairment, and in both ears, forty (40) degrees of permanent impairment.
- (7) For the loss of one (1) testicle, ten (10) degrees of permanent impairment; for the loss of both testicles, thirty (30) degrees of permanent impairment.
- (8) Loss of use: The total permanent loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange, and compensation shall be paid in the same amount as for the loss by separation. However, the doubling provision of subdivision (2) does not apply to a loss of use that is not a loss by separation.
- (9) Partial loss of use: For the permanent partial loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange, compensation shall be paid for the proportionate loss of the use of the arm, hand, thumb, finger, leg, foot, toe, or phalange. (10) For disablements resulting in total permanent disability, the amount payable for impairment or five hundred (500) weeks of compensation, whichever is greater.



- (11) Visual impairments shall be based on the Functional Vision Score (FVS) assessing the visual acuity and visual field to evaluate any reduction in ability to perform vision-related Activities of Daily Living (ADL). Unless such loss is otherwise specified in subdivision (5), visual impairments shall be paid as a whole person rating.
- (12) For any permanent reduction of the hearing of one (1) or both ears, less than the total loss as specified in subdivision (6), compensation shall be paid in an amount proportionate to the degree of a permanent reduction.
- (13) In all other cases of permanent partial impairment, compensation proportionate to the degree of a permanent partial impairment, in the discretion of the worker's compensation board, not exceeding one hundred (100) degrees of permanent impairment.
- (14) In all cases of permanent disfigurement which may impair the future usefulness or opportunities of the employee, compensation, in the discretion of the worker's compensation board, not exceeding forty (40) degrees of permanent impairment except that no compensation shall be payable under this subdivision where compensation is payable elsewhere in this section.
- (n) (j) With respect to disablements occurring on and after July 1, 1991, compensation for permanent partial impairment shall be paid according to the degree of permanent impairment for the disablement determined under subsection (m) (i) and the following:
 - (1) With respect to disablements occurring on and after July 1, 1991, and before July 1, 1992, for each degree of permanent impairment from one (1) to thirty-five (35), five hundred dollars (\$500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), nine hundred dollars (\$900) per degree; for each degree of permanent impairment above fifty (50), one thousand five hundred dollars (\$1,500) per degree.
 - (2) With respect to disablements occurring on and after July 1, 1992, and before July 1, 1993, for each degree of permanent impairment from one (1) to twenty (20), five hundred dollars (\$500) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), eight hundred dollars (\$800) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand three hundred dollars (\$1,300) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars (\$1,700) per



degree.

- (3) With respect to disablements occurring on and after July 1, 1993, and before July 1, 1997, for each degree of permanent impairment from one (1) to ten (10), five hundred dollars (\$500) per degree; for each degree of permanent impairment from eleven (11) to twenty (20), seven hundred dollars (\$700) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), one thousand dollars (\$1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars (\$1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars (\$1,700) per degree.
- (4) With respect to disablements occurring on and after July 1, 1997, and before July 1, 1998, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars (\$750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars (\$1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars (\$1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars (\$1,700) per degree.
- (5) With respect to disablements occurring on and after July 1, 1998, and before July 1, 1999, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars (\$750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars (\$1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars (\$1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars (\$1,700) per degree.
- (6) With respect to disablements occurring on and after July 1, 1999, and before July 1, 2000, for each degree of permanent impairment from one (1) to ten (10), nine hundred dollars (\$900) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand one hundred dollars (\$1,100) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand six hundred dollars (\$1,600) per degree; for each degree of permanent impairment above fifty (50), two thousand dollars (\$2,000) per degree.
- (7) With respect to disablements occurring on and after July 1, 2000, and before July 1, 2001, for each degree of permanent impairment from one (1) to ten (10), one thousand one hundred



dollars (\$1,100) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand three hundred dollars (\$1,300) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand dollars (\$2,000) per degree; for each degree of permanent impairment above fifty (50), two thousand five hundred fifty dollars (\$2,500) per degree.

(8) With respect to disablements occurring on and after July 1, 2001, and before July 1, 2007, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred dollars (\$1,300) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred dollars (\$1,500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred dollars (\$2,400) per degree; for each degree of permanent impairment above fifty (50), three thousand dollars (\$3,000) per degree.

(9) With respect to disablements occurring on and after July 1, 2007, and before July 1, 2008, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred forty dollars (\$1,340) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred forty-five dollars (\$1,545) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred seventy-five dollars (\$2,475) per degree; for each degree of permanent impairment above fifty (50), three thousand one hundred fifty dollars (\$3,150) per degree.

(10) With respect to disablements occurring on and after July 1, 2008, and before July 1, 2009, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred sixty-five dollars (\$1,365) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred seventy dollars (\$1,570) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand five hundred twenty-five dollars (\$2,525) per degree; for each degree of permanent impairment above fifty (50), three thousand two hundred dollars (\$3,200) per degree.

(11) With respect to disablements occurring on and after July 1, 2009, and before July 1, 2010, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred eighty dollars (\$1,380) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five



hundred eighty-five dollars (\$1,585) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand six hundred dollars (\$2,600) per degree; for each degree of permanent impairment above fifty (50), three thousand three hundred dollars (\$3,300) per degree.

(12) (1) With respect to disablements occurring on and after July 1, 2010, and before July 1, 2014, for each degree of permanent impairment from one (1) to ten (10), one thousand four hundred dollars (\$1,400) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand six hundred dollars (\$1,600) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand seven hundred dollars (\$2,700) per degree; for each degree of permanent impairment above fifty (50), three thousand five hundred dollars (\$3,500) per degree.

(13) (2) With respect to disablements occurring on and after July 1, 2014, and before July 1, 2015, for each degree of permanent impairment from one (1) to ten (10), one thousand five hundred seventeen dollars (\$1,517) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand seven hundred seventeen dollars (\$1,717) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand eight hundred sixty-two dollars (\$2,862) per degree; for each degree of permanent impairment above fifty (50), three thousand six hundred eighty-seven dollars (\$3,687) per degree.

(14) (3) With respect to disablements occurring on and after July 1, 2015, and before July 1, 2016, for each degree of permanent impairment from one (1) to ten (10), one thousand six hundred thirty-three dollars (\$1,633) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand eight hundred thirty-five dollars (\$1,835) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand twenty-four dollars (\$3,024) per degree; for each degree of permanent impairment above fifty (50), three thousand eight hundred seventy-three dollars (\$3,873) per degree. (15) (4) With respect to disablements occurring on and after July 1, 2016, and before July 1, 2023, for each degree of permanent impairment from one (1) to ten (10), one thousand seven hundred fifty dollars (\$1,750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand nine hundred fifty-two dollars (\$1,952) per degree; for each degree of



permanent impairment from thirty-six (36) to fifty (50), three thousand one hundred eighty-six dollars (\$3,186) per degree; for each degree of permanent impairment above fifty (50), four thousand sixty dollars (\$4,060) per degree.

- (5) With respect to disablements occurring on and after July 1, 2023, and before July 1, 2024, for each degree of permanent impairment from one (1) to ten (10), one thousand eight hundred three dollars (\$1,803) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand eleven dollars (\$2,011) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand two hundred eighty-two dollars (\$3,282) per degree; for each degree of permanent impairment above fifty (50), four thousand one hundred eighty-two dollars (\$4,182) per degree.
- (6) With respect to disablements occurring on and after July 1, 2024, and before July 1, 2025, for each degree of permanent impairment from one (1) to ten (10), one thousand eight hundred fifty-seven dollars (\$1,857) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand seventy-one dollars (\$2,071) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand three hundred eighty dollars (\$3,380) per degree; for each degree of permanent impairment above fifty (50), four thousand three hundred seven dollars (\$4,307) per degree.
- (7) With respect to disablements occurring on and after July 1,2025, and before July 1,2026, for each degree of permanent impairment from one (1) to ten (10), one thousand nine hundred thirteen dollars (\$1,913) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand one hundred thirty-three dollars (\$2,133) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand four hundred eighty-one dollars (\$3,481) per degree; for each degree of permanent impairment above fifty (50), four thousand four hundred thirty-six dollars (\$4,436) per degree.
- (8) With respect to disablements occurring on and after July 1, 2026, for each degree of permanent impairment from one (1) to ten (10), one thousand nine hundred seventy dollars (\$1,970) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand



one hundred ninety-seven dollars (\$2,197) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand five hundred eighty-five dollars (\$3,585) per degree; for each degree of permanent impairment above fifty (50), four thousand five hundred sixty-nine dollars (\$4,569) per degree.

- (o) (k) The average weekly wages used in the determination of compensation for permanent partial impairment under subsections (m) (i) and (n) (j) shall not exceed the following:
 - (1) With respect to disablements occurring on or after July 1, 1991, and before July 1, 1992, four hundred ninety-two dollars (\$492).
 - (2) With respect to disablements occurring on or after July 1, 1992, and before July 1, 1993, five hundred forty dollars (\$540).
 - (3) With respect to disablements occurring on or after July 1, 1993, and before July 1, 1994, five hundred ninety-one dollars (\$591).
 - (4) With respect to disablements occurring on or after July 1, 1994, and before July 1, 1997, six hundred forty-two dollars (\$642).
 - (5) With respect to disablements occurring on or after July 1, 1997, and before July 1, 1998, six hundred seventy-two dollars (\$672).
 - (6) With respect to disablements occurring on or after July 1, 1998, and before July 1, 1999, seven hundred two dollars (\$702).
 - (7) With respect to disablements occurring on or after July 1, 1999, and before July 1, 2000, seven hundred thirty-two dollars (\$732).
 - (8) With respect to disablements occurring on or after July 1, 2000, and before July 1, 2001, seven hundred sixty-two dollars (\$762).
 - (9) With respect to disablements occurring on or after July 1, 2001, and before July 1, 2002, eight hundred twenty-two dollars (\$822).
 - (10) With respect to disablements occurring on or after July 1, 2002, and before July 1, 2006, eight hundred eighty-two dollars (\$882).
 - (11) With respect to disablements occurring on or after July 1, 2006, and before July 1, 2007, nine hundred dollars (\$900).
 - (12) With respect to disablements occurring on or after July 1, 2007, and before July 1, 2008, nine hundred thirty dollars (\$930).
 - (13) With respect to disablements occurring on or after July 1,



- 2008, and before July 1, 2009, nine hundred fifty-four dollars (\$954).
- (14) (1) With respect to disablements occurring on or after July 1, 2009, and before July 1, 2014, nine hundred seventy-five dollars (\$975).
- (15) (2) With respect to disablements occurring on or after July 1, 2014, and before July 1, 2015, one thousand forty dollars (\$1.040).
- (16) (3) With respect to disablements occurring on or after July 1, 2015, and before July 1, 2016, one thousand one hundred five dollars (\$1,105).
- (17) (4) With respect to disablements occurring on or after July 1, 2016, and before July 1, 2023, one thousand one hundred seventy dollars (\$1,170).
- (5) With respect to disablements occurring on or after July 1, 2023, and before July 1, 2024, one thousand two hundred five dollars (\$1,205).
- (6) With respect to disablements occurring on or after July 1, 2024, and before July 1, 2025, one thousand two hundred forty-one dollars (\$1,241).
- (7) With respect to disablements occurring on or after July 1, 2025, and before July 1, 2026, one thousand two hundred seventy-eight dollars (\$1,278).
- (8) With respect to disablements occurring on or after July 1, 2026, one thousand three hundred sixteen dollars (\$1,316).
- (p) (l) If any employee, only partially disabled, refuses employment suitable to the employee's capacity procured for the employee, the employee shall not be entitled to any compensation at any time during the continuance of such refusal unless, in the opinion of the worker's compensation board, such refusal was justifiable. The employee must be served with a notice setting forth the consequences of the refusal under this subsection. The notice must be in a form prescribed by the worker's compensation board.
- (q) (m) If an employee has sustained a permanent impairment or disability from an accidental injury other than an occupational disease in another employment than that in which the employee suffered a subsequent disability from an occupational disease, such as herein specified, the employee shall be entitled to compensation for the subsequent disability in the same amount as if the previous impairment or disability had not occurred. However, if the permanent impairment or disability resulting from an occupational disease for which compensation is claimed results only in the aggravation or increase of



a previously sustained permanent impairment from an occupational disease or physical condition regardless of the source or cause of such previously sustained impairment from an occupational disease or physical condition, the board shall determine the extent of the previously sustained permanent impairment from an occupational disease or physical condition as well as the extent of the aggravation or increase resulting from the subsequent permanent impairment or disability, and shall award compensation only for that part of said occupational disease or physical condition resulting from the subsequent permanent impairment. An amputation of any part of the body or loss of any or all of the vision of one (1) or both eyes caused by an occupational disease shall be considered as a permanent impairment or physical condition.

(r) (n) If an employee suffers a disablement from an occupational disease for which compensation is payable while the employee is still receiving or entitled to compensation for a previous injury by accident or disability by occupational disease in the same employment, the employee shall not at the same time be entitled to compensation for both, unless it be for a permanent injury, such as specified in subsection $\frac{m}{1}$, $\frac{m}{3}$, $\frac{m}{5}$, $\frac{m}{9}$,

(s) (o) If an employee receives a permanent disability from an occupational disease such as specified in subsection (m)(1), (m)(4), (i)(1), (i)(4), (m)(5), (m)(8), or (m)(9) (i)(5), (i)(8), or (i)(9) after having sustained another such permanent disability in the same employment the employee shall be entitled to compensation for both such disabilities, but the total compensation shall be paid by extending the period and not by increasing the amount of weekly compensation and, when such previous and subsequent permanent disabilities, in combination result in total permanent disability or permanent total impairment, compensation shall be payable for such permanent total disability or impairment, but payments made for the previous disability or impairment shall be deducted from the total payment of compensation due.

(t) (p) When an employee has been awarded or is entitled to an award of compensation for a definite period from an occupational disease wherein disablement occurs on and after April 1, 1963, and such employee dies from other causes than such occupational disease, payment of the unpaid balance of such compensation not exceeding three hundred fifty (350) weeks shall be paid to the employee's



dependents of the second and third class as defined in sections 11 through 14 of this chapter and compensation, not exceeding five hundred (500) weeks shall be made to the employee's dependents of the first class as defined in sections 11 through 14 of this chapter.

- (u) (q) Any payment made by the employer to the employee during the period of the employee's disability, or to the employee's dependents, which, by the terms of this chapter, was not due and payable when made, may, subject to the approval of the worker's compensation board, be deducted from the amount to be paid as compensation, but such deduction shall be made from the distal end of the period during which compensation must be paid, except in cases of temporary disability.
- (v) (r) When so provided in the compensation agreement or in the award of the worker's compensation board, compensation may be paid semimonthly, or monthly, instead of weekly.
- (w) (s) When the aggregate payments of compensation awarded by agreement or upon hearing to an employee or dependent under eighteen (18) years of age do not exceed one hundred dollars (\$100), the payment thereof may be made directly to such employee or dependent, except when the worker's compensation board shall order otherwise.
- (x) (t) Whenever the aggregate payments of compensation, due to any person under eighteen (18) years of age, exceed one hundred dollars (\$100), the payment thereof shall be made to a trustee, appointed by the circuit or superior court, or to a duly qualified guardian, or, upon the order of the worker's compensation board, to a parent or to such minor person. The payment of compensation, due to any person eighteen (18) years of age or over, may be made directly to such person.
- (y) (u) If an employee, or a dependent, is mentally incompetent, or a minor at the time when any right or privilege accrues to the employee under this chapter, the employee's guardian or trustee may, in the employee's behalf, claim and exercise such right and privilege.
- (z) (v) All compensation payments named and provided for in this section, shall mean and be defined to be for only such occupational diseases and disabilities therefrom as are proved by competent evidence, of which there are or have been objective conditions or symptoms proven, not within the physical or mental control of the employee.

SECTION 8. IC 22-3-7-17.2, AS AMENDED BY P.L.99-2014, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2023]: Sec. 17.2. (a) A billing review service shall adhere to the following requirements to determine the pecuniary liability of an employer or an employer's insurance carrier for a specific



service or product covered under this chapter provided before July 1, 2014, by all medical service providers, and after June 30, 2014, by a medical service provider that is not a medical service facility:

- (1) The formation of a billing review standard, and any subsequent analysis or revision of the standard, must use data that is based on the medical service provider billing charges as submitted to the employer and the employer's insurance carrier from the same community. This subdivision does not apply when a unique or specialized service or product does not have sufficient comparative data to allow for a reasonable comparison.
- (2) Data used to determine pecuniary liability must be compiled on or before June 30 and December 31 of each year.
- (3) Billing review standards must be revised for prospective future payments of medical service provider bills to provide for payment of the charges at a rate not more than the charges made by eighty percent (80%) of the medical service providers during the prior six (6) months within the same community. The data used to perform the analysis and revision of the billing review standards may not be more than two (2) years old and must be periodically updated by a representative inflationary or deflationary factor. Reimbursement for these charges may not exceed the actual charge invoiced by the medical service provider.
- (b) This subsection applies after June 30, 2014, to a medical service facility. The pecuniary liability of an employer or an employer's insurance carrier for a specific service or product covered under this chapter and provided by a medical service facility is equal to a reasonable amount, which is established by payment of one (1) of the following:
 - (1) The amount negotiated at any time between the medical service facility and any of the following:
 - (A) The employer.
 - (B) The employer's insurance carrier.
 - (C) A billing review service on behalf of a person described in clause (A) or (B).
 - (D) A direct provider network that has contracted with a person described in clause (A) or (B).
 - (2) Two hundred percent (200%) of the amount that would be paid to the medical service facility on the same date for the same service or product under the medical service facility's Medicare reimbursement rate, if, an amount has not been negotiated as after conducting the negotiations described in subdivision (1),



an agreement has not been reached.

- (c) A medical service provider may request an explanation from a billing review service if the medical service provider's bill has been reduced as a result of application of the eightieth percentile or of a Current Procedural Terminology (CPT) or Medicare coding change. The request must be made not later than sixty (60) days after receipt of the notice of the reduction. If a request is made, the billing review service must provide:
 - (1) the name of the billing review service used to make the reduction;
 - (2) the dollar amount of the reduction;
 - (3) the dollar amount of the medical service at the eightieth percentile; and
 - (4) in the case of a CPT or Medicare coding change, the basis upon which the change was made;

not later than thirty (30) days after the date of the request.

(d) If, after a hearing, the worker's compensation board finds that a billing review service used a billing review standard that did not comply with subsection (a)(1) through (a)(3), as applicable, in determining the pecuniary liability of an employer or an employer's insurance carrier for a medical service provider's charge for services or products covered under occupational disease compensation, the worker's compensation board may assess a civil penalty against the billing review service in an amount not less than one hundred dollars (\$100) and not more than one thousand dollars (\$1,000).

SECTION 9. IC 22-3-7-19, AS AMENDED BY P.L.275-2013, SECTION 17, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2023]: Sec. 19. (a) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1985, and before July 1, 1986, the average weekly wages are considered to be:

- (1) not more than two hundred sixty-seven dollars (\$267); and
- (2) not less than seventy-five dollars (\$75).
- (b) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1986, and before July 1, 1988, the average weekly wages are considered to be:
 - (1) not more than two hundred eighty-five dollars (\$285); and
 - (2) not less than seventy-five dollars (\$75).
- (c) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect



to occupational diseases occurring on and after July 1, 1988, and before July 1, 1989, the average weekly wages are considered to be:

- (1) not more than three hundred eighty-four dollars (\$384); and
- (2) not less than seventy-five dollars (\$75).
- (d) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1989, and before July 1, 1990, the average weekly wages are considered to be:
 - (1) not more than four hundred eleven dollars (\$411); and
 - (2) not less than seventy-five dollars (\$75).
- (e) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1990, and before July 1, 1991, the average weekly wages are considered to be:
 - (1) not more than four hundred forty-one dollars (\$441); and
 - (2) not less than seventy-five dollars (\$75).
- (f) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1991, and before July 1, 1992, the average weekly wages are considered to be:
 - (1) not more than four hundred ninety-two dollars (\$492); and
 - (2) not less than seventy-five dollars (\$75).
- (g) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1992, and before July 1, 1993, the average weekly wages are considered to be:
 - (1) not more than five hundred forty dollars (\$540); and
 - (2) not less than seventy-five dollars (\$75).
- (h) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1993, and before July 1, 1994, the average weekly wages are considered to be:
 - (1) not more than five hundred ninety-one dollars (\$591); and
 - (2) not less than seventy-five dollars (\$75).
- (i) In computing compensation for temporary total disability, temporary partial disability and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1994, and before July 1, 1997, the average weekly wages are considered to be:
 - (1) not more than six hundred forty-two dollars (\$642); and
 - (2) not less than seventy-five dollars (\$75).
- (j) (a) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, the average



weekly wages are considered to be:

- (1) with respect to occupational diseases occurring on and after July 1, 1997, and before July 1, 1998:
 - (A) not more than six hundred seventy-two dollars (\$672); and
 - (B) not less than seventy-five dollars (\$75);
- (2) with respect to occupational diseases occurring on and after July 1, 1998, and before July 1, 1999:
 - (A) not more than seven hundred two dollars (\$702); and
 - (B) not less than seventy-five dollars (\$75);
- (3) with respect to occupational diseases occurring on and after July 1, 1999, and before July 1, 2000:
 - (A) not more than seven hundred thirty-two dollars (\$732); and
 - (B) not less than seventy-five dollars (\$75);
- (4) with respect to occupational diseases occurring on and after July 1, 2000, and before July 1, 2001:
 - (A) not more than seven hundred sixty-two dollars (\$762); and
 - (B) not less than seventy-five dollars (\$75);
- (5) with respect to disablements occurring on and after July 1, 2001, and before July 1, 2002:
 - (A) not more than eight hundred twenty-two dollars (\$822); and
 - (B) not less than seventy-five dollars (\$75);
- (6) with respect to disablements occurring on and after July 1, 2002, and before July 1, 2006:
 - (A) not more than eight hundred eighty-two dollars (\$882); and
 - (B) not less than seventy-five dollars (\$75);
- (7) with respect to disablements occurring on and after July 1, 2006, and before July 1, 2007:
 - (A) not more than nine hundred dollars (\$900); and
 - (B) not less than seventy-five dollars (\$75);
- (8) with respect to disablements occurring on and after July 1, 2007, and before July 1, 2008:
 - (A) not more than nine hundred thirty dollars (\$930); and
 - (B) not less than seventy-five dollars (\$75);
- (9) with respect to disablements occurring on and after July 1, 2008, and before July 1, 2009:
 - (A) not more than nine hundred fifty-four dollars (\$954); and
 - (B) not less than seventy-five dollars (\$75);
- (10) (1) with respect to disablements occurring on and after July 1, 2009, and before July 1, 2014:



- (A) not more than nine hundred seventy-five dollars (\$975); and
- (B) not less than seventy-five dollars (\$75);
- (11) (2) with respect to disablements occurring on and after July 1, 2014, and before July 1, 2015:
 - (A) not more than one thousand forty dollars (\$1,040); and
 - (B) not less than seventy-five dollars (\$75);
- (12) (3) with respect to disablements occurring on and after July 1, 2015, and before July 1, 2016:
 - (A) not more than one thousand one hundred five dollars (\$1,105); and
 - (B) not less than seventy-five dollars (\$75); and
- (13) (4) with respect to disablements occurring on and after July 1, 2016, and before July 1, 2023:
 - (A) not more than one thousand one hundred seventy dollars (\$1,170); and
 - (B) not less than seventy-five dollars (\$75);
- (5) with respect to disablements occurring on and after July 1, 2023, and before July 1, 2024:
 - (A) not more than one thousand two hundred five dollars (\$1,205); and
 - (B) not less than seventy-five dollars (\$75);
- (6) with respect to disablements occurring on and after July 1, 2024, and before July 1, 2025:
 - (A) not more than one thousand two hundred forty-one dollars (\$1,241); and
 - (B) not less than seventy-five dollars (\$75);
- (7) with respect to disablements occurring on and after July 1, 2025, and before July 1, 2026:
 - (A) not more than one thousand two hundred seventy-eight dollars (\$1,278); and
 - (B) not less than seventy-five dollars (\$75); and
- (8) with respect to disablements occurring on and after July 1, 2026:
 - (A) not more than one thousand three hundred sixteen dollars (\$1,316); and
 - (B) not less than seventy-five dollars (\$75).
- (k) The maximum compensation with respect to disability or death occurring on and after July 1, 1985, and before July 1, 1986, which shall be paid for occupational disease and the results thereof under the provisions of this chapter or under any combination of its provisions may not exceed eighty-nine thousand dollars (\$89,000) in any ease.



- (1) The maximum compensation with respect to disability or death occurring on and after July 1, 1986, and before July 1, 1988, which shall be paid for occupational disease and the results thereof under the provisions of this chapter or under any combination of its provisions may not exceed ninety-five thousand dollars (\$95,000) in any case.
- (m) The maximum compensation with respect to disability or death occurring on and after July 1, 1988, and before July 1, 1989, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of its provisions may not exceed one hundred twenty-eight thousand dollars (\$128,000) in any case.
- (n) The maximum compensation with respect to disability or death occurring on and after July 1, 1989, and before July 1, 1990, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of its provisions may not exceed one hundred thirty-seven thousand dollars (\$137,000) in any case.
- (o) The maximum compensation with respect to disability or death occurring on and after July 1, 1990, and before July 1, 1991, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of its provisions may not exceed one hundred forty-seven thousand dollars (\$147,000) in any case.
- (p) The maximum compensation with respect to disability or death occurring on and after July 1, 1991, and before July 1, 1992, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of the provisions of this chapter may not exceed one hundred sixty-four thousand dollars (\$164,000) in any case.
- (q) The maximum compensation with respect to disability or death occurring on and after July 1, 1992, and before July 1, 1993, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of the provisions of this chapter may not exceed one hundred eighty thousand dollars (\$180,000) in any case.
- (r) The maximum compensation with respect to disability or death occurring on and after July 1, 1993, and before July 1, 1994, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of the provisions of this chapter may not exceed one hundred ninety-seven thousand dollars (\$197,000) in any case.
- (s) The maximum compensation with respect to disability or death occurring on and after July 1, 1994, and before July 1, 1997, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of the provisions of this chapter may not exceed two hundred fourteen thousand dollars (\$214,000) in any



case.

- (t) (b) The maximum compensation that shall be paid for occupational disease and the results of an occupational disease under this chapter or under any combination of the provisions of this chapter may not exceed the following amounts in any case:
 - (1) With respect to disability or death occurring on and after July 1, 1997, and before July 1, 1998, two hundred twenty-four thousand dollars (\$224,000).
 - (2) With respect to disability or death occurring on and after July 1, 1998, and before July 1, 1999, two hundred thirty-four thousand dollars (\$234,000).
 - (3) With respect to disability or death occurring on and after July 1, 1999, and before July 1, 2000, two hundred forty-four thousand dollars (\$244,000).
 - (4) With respect to disability or death occurring on and after July 1, 2000, and before July 1, 2001, two hundred fifty-four thousand dollars (\$254,000).
 - (5) With respect to disability or death occurring on and after July 1, 2001, and before July 1, 2002, two hundred seventy-four thousand dollars (\$274,000).
 - (6) With respect to disability or death occurring on and after July 1, 2002, and before July 1, 2006, two hundred ninety-four thousand dollars (\$294,000).
 - (7) With respect to disability or death occurring on and after July 1, 2006, and before July 1, 2007, three hundred thousand dollars (\$300,000).
 - (8) With respect to disability or death occurring on and after July 1, 2007, and before July 1, 2008, three hundred ten thousand dollars (\$310,000).
 - (9) With respect to disability or death occurring on and after July 1, 2008, and before July 1, 2009, three hundred eighteen thousand dollars (\$318,000).
 - (10) (1) With respect to disability or death occurring on and after July 1, 2009, and before July 1, 2014, three hundred twenty-five thousand dollars (\$325,000).
 - (11) (2) With respect to disability or death occurring on and after July 1, 2014, and before July 1, 2015, three hundred forty-seven thousand dollars (\$347,000).
 - (12) (3) With respect to disability or death occurring on and after July 1, 2015, and before July 1, 2016, three hundred sixty-eight thousand dollars (\$368,000).
 - (13) (4) With respect to disability or death occurring on and after



- July 1, 2016, and before July 1, 2023, three hundred ninety thousand dollars (\$390,000).
- (5) With respect to disability or death occurring on and after July 1, 2023, and before July 1, 2024, four hundred two thousand dollars (\$402,000).
- (6) With respect to disability or death occurring on and after July 1, 2024, and before July 1, 2025, four hundred fourteen thousand dollars (\$414,000).
- (7) With respect to disability or death occurring on and after July 1, 2025, and before July 1, 2026, four hundred twenty-six thousand dollars (\$426,000).
- (8) With respect to disability or death occurring on and after July 1, 2026, four hundred thirty-nine thousand dollars (\$439,000).
- (u) (c) For all disabilities occurring on and after July 1, 1985, "average weekly wages" means the earnings of the injured employee during the period of fifty-two (52) weeks immediately preceding the disability divided by fifty-two (52). If the employee lost seven (7) or more calendar days during the period, although not in the same week, then the earnings for the remainder of the fifty-two (52) weeks shall be divided by the number of weeks and parts of weeks remaining after the time lost has been deducted. If employment before the date of disability extended over a period of less than fifty-two (52) weeks, the method of dividing the earnings during that period by the number of weeks and parts of weeks during which the employee earned wages shall be followed if results just and fair to both parties will be obtained. If by reason of the shortness of the time during which the employee has been in the employment of the employer or of the casual nature or terms of the employment it is impracticable to compute the average weekly wages for the employee, the employee's average weekly wages shall be considered to be the average weekly amount that, during the fifty-two (52) weeks before the date of disability, was being earned by a person in the same grade employed at the same work by the same employer or, if there is no person so employed, by a person in the same grade employed in that same class of employment in the same district. Whenever allowances of any character are made to an employee instead of wages or a specified part of the wage contract, they shall be considered a part of the employee's earnings.
- (v) (d) The provisions of this article may not be construed to result in an award of benefits in which the number of weeks paid or to be paid for temporary total disability, temporary partial disability, or permanent total disability benefits combined exceeds five hundred (500) weeks.



This section shall not be construed to prevent a person from applying for an award under IC 22-3-3-13. However, in case of permanent total disability resulting from a disablement occurring on or after January 1, 1998, the minimum total benefit shall not be less than seventy-five thousand dollars (\$75,000).

SECTION 10. IC 22-3-7.2 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2023]:

Chapter 7.2. Payments of Claims

- Sec. 1. As used in this chapter, "clean claim" means a claim submitted by a medical service provider for payment under IC 22-3-2 through IC 22-3-7 that has no defect, impropriety, or particular circumstance requiring special treatment preventing payment.
- Sec. 2. As used in this chapter, "payor" means an employer or an employer's insurance carrier that is liable for a claim for a service or product under IC 22-3-2 through IC 22-3-7.
- Sec. 3. As used in this chapter, "medical service facility" means any of the following that provides a service or product under IC 22-3-2 through IC 22-3-7 and uses the CMS 1450 (UB-04) form or the CMS 1500 (HCFA-1500) form for Medicare reimbursement:
 - (1) An ambulatory outpatient surgical center (as defined in IC 16-18-2-14).
 - (2) A hospital (as defined in IC 16-18-2-179).
 - (3) A hospital based health facility (as defined in IC 16-18-2-180).
 - (4) A medical center (as defined in IC 16-18-2-223.4).
- Sec. 4. As used in this chapter, "medical service provider" means a person or an entity that provides services or products to an employee under IC 22-3-2 through IC 22-3-7. Except as otherwise provided in this chapter, the term includes a medical service facility.
- Sec. 5. (a) A payor shall pay or deny each clean claim in accordance with section 6 of this chapter.
- (b) A payor shall notify a medical service provider of any deficiencies in a submitted claim not more than:
 - (1) thirty (30) days after the date the claim is received by the payor, for a claim that is filed electronically; or
 - (2) forty-five (45) days after the date the claim is received by the payor, for a claim that is filed on paper;
- and describe any remedy necessary to establish a clean claim.
 - (c) Failure of a payor to notify a medical service provider as



required under subsection (b) establishes the submitted claim as a clean claim.

- Sec. 6. (a) A payor shall pay or deny each clean claim as follows:
 - (1) If the claim is filed electronically, not more than thirty (30) days after the date the claim is received by the payor.
 - (2) If the claim is filed on paper, not more than forty-five (45) days after the date the claim is received by the payor.
- (b) If:
 - (1) a payor fails to pay or deny a clean claim in the time required under subsection (a); and
- (2) the payor subsequently pays the claim; the payor shall pay the medical service provider that submitted the claim interest on the amount of the payor's pecuniary liability under IC 22-3-2 through IC 22-3-7 for the claim paid under this section.
 - (c) Interest paid under subsection (b):
 - (1) accrues beginning:
 - (A) thirty-one (31) days after the date the claim is received under subsection (a)(1); or
 - (B) forty-six (46) days after the date the claim is received under subsection (a)(2); and
 - (2) stops accruing on the date the claim is paid.
- (d) In paying interest under subsection (b), a payor shall use the same interest rate as provided in IC 12-15-21-3(7)(A).
- Sec. 7. A medical service provider shall submit only the following forms for payment by a payor:
 - (1) CMS 1450 (UB-04).
 - (2) CMS 1500 (HCFA-1500).
 - (3) American Dental Association (ADA) claim form.



Speaker of the House of Representatives	
President of the Senate	
President Pro Tempore	
Governor of the State of Indiana	
Date:	Time:

