1

3

AN ACT relating to workers' compensation.

2 Be it enacted by the General Assembly of the Commonwealth of Kentucky:

→Section 1. KRS 342.020 is amended to read as follows:

- 4 (1) In addition to all other compensation provided in this chapter, the employer shall
 5 pay for the cure and relief from the effects of an injury or occupational disease the
 6 medical, surgical, and hospital treatment, including nursing, medical, and surgical
 7 supplies and appliances, as may reasonably be required at the time of the injury and
 8 thereafter [during disability,]for the length of time set forth in this section, or as
 9 may be required for the cure and treatment of an occupational disease.
- 10 (2) In claims resulting in an award of permanent total disability or resulting from an
- *injury described in subsection (10) of this section,* the employer's obligation to pay
 the benefits specified in this section shall continue for so long as the employee is
 disabled regardless of the duration of the employee's income benefits.
- 14(3) In all permanent partial disability claims not involving an injury described in15subsection (10) of this section, the employer's obligation to pay the benefits
- specified in this section shall continue for seven hundred eighty (780) weeks from
 the date of injury or date of last exposure.
- 18 (4) Except in claims described in subsection (2) of this section, the employer's
 19 obligation to pay the benefits specified in this section shall terminate as of the
 20 date the employee reaches the age of seventy (70) or four (4) years after the
- 21 *employee's date of injury or date of last exposure, whichever last occurs.*
- In the absence of designation of a managed health care system by the employer, the
 employee may select medical providers to treat his injury or occupational disease.
 Even if the employer has designated a managed health care system, the injured
 employee may elect to continue treating with a physician who provided emergency
 medical care or treatment to the employee. The employer, insurer, or payment
 obligor acting on behalf of the employer, shall make all payments for services

17 RS HB 296/GA

1 rendered to an employee directly to the provider of the services within thirty (30) 2 days of receipt of a statement for services. The commissioner shall promulgate 3 administrative regulations establishing conditions under which the thirty (30) day 4 period for payment may be tolled. The provider of medical services shall submit the 5 statement for services within forty-five (45) days of the day treatment is initiated 6 and every forty-five (45) days thereafter, if appropriate, as long as medical services 7 are rendered. Except as provided in subsection (8) (4) of this section, in no event shall a medical fee exceed the limitations of an adopted medical fee schedule or 8 9 other limitations contained in KRS 342.035, whichever is lower. The commissioner 10 may promulgate administrative regulations establishing the form and content of a 11 statement for services and procedures by which disputes relative to the necessity, 12 effectiveness, frequency, and cost of services may be resolved.

13 (6)[(2)] Notwithstanding any provision of the Kentucky Revised Statutes to the
 14 contrary, medical services and treatment provided under this chapter shall not be
 15 subject to copayments or deductibles.

<u>(7)</u>[(3)] Employers may provide medical services through a managed health care
 system. The managed health care system shall file with the Department of Workers'
 Claims a plan for the rendition of health care services for work-related injuries and
 occupational diseases to be approved by the commissioner pursuant to
 administrative regulations promulgated by the commissioner.

- 21 (8)[(4)] All managed health care systems rendering medical services under this chapter
 22 shall include the following features in plans for workers' compensation medical
 23 care:
- (a) Copayments or deductibles shall not be required for medical services rendered
 in connection with a work-related injury or occupational disease;
- 26 (b) The employee shall be allowed choice of provider within the plan;
- 27 (c) The managed health care system shall provide an informal procedure for the

17 RS HB 296/GA

1		expeditious resolution of disputes concerning rendition of medical services;
2	(d)	The employee shall be allowed to obtain a second opinion, at the employer's
3		expense, from an outside physician if a managed health care system physician
4		recommends surgery;
5	(e)	The employee may obtain medical services from providers outside the
6		managed health care system, at the employer's expense, when treatment is
7		unavailable through the managed health care system;
8	(f)	The managed health care system shall establish procedures for utilization
9		review of medical services to assure that a course of treatment is reasonably
10		necessary; diagnostic procedures are not unnecessarily duplicated; the
11		frequency, scope, and duration of treatment is appropriate; pharmaceuticals
12		are not unnecessarily prescribed; and that ongoing and proposed treatment is
13		not experimental, cost ineffective, or harmful to the employee; and
14	(g)	Statements for services shall be audited regularly to assure that charges are not
15		duplicated and do not exceed those authorized in the applicable fee schedules.
16	(h)	A schedule of fees for all medical services to be provided under this chapter
17		which shall not be subject to the limitations on medical fees contained in this
18		chapter.
19	(i)	Restrictions on provider selection imposed by a managed health care system
20		authorized by this chapter shall not apply to emergency medical care.
21	<u>(9)</u> [(5)]	Except for emergency medical care, medical services rendered pursuant to this
22	chap	ter shall be under the supervision of a single treating physician or physicians'
23	grou	p having the authority to make referrals, as reasonably necessary, to appropriate
24	facil	ities and specialists. The employee may change his designated physician one (1)
25	time	and thereafter shall show reasonable cause in order to change physicians.
26	<u>(10)</u> [(6)]	When a compensable injury or occupational disease results in the amputation
27	of ar	n arm, leg, or foot, or the loss of hearing, or the enucleation of an eye or loss of

Page 3 of 31

17 RS HB 296/GA

1 2

3

4

teeth, the employer shall pay for, in addition to the other medical, surgical, and hospital treatment enumerated in subsection (1) and this subsection, a modern artificial member and, where required, proper braces as may reasonably be required at the time of the injury and thereafter during disability.

5 $(11)_{[(7)]}$ Upon motion of the employer, with sufficient notice to the employee for a 6 response to be filed, if it is shown to the satisfaction of the administrative law judge 7 by affidavits or testimony that, because of the physician selected by the employee to 8 treat the injury or disease, or because of the hospital selected by the employee in 9 which treatment is being rendered, that the employee is not receiving proper 10 medical treatment and the recovery is being substantially affected or delayed; or that 11 the funds for medical expenses are being spent without reasonable benefit to the 12 employee; or that because of the physician selected by the employee or because of 13 the type of medical treatment being received by the employee that the employer will 14 substantially be prejudiced in any compensation proceedings resulting from the 15 employee's injury or disease; then the administrative law judge may allow the 16 employer to select a physician to treat the employee and the hospital or hospitals in 17 which the employee is treated for the injury or disease. No action shall be brought against any employer subject to this chapter by any person to recover damages for 18 19 malpractice or improper treatment received by any employee from any physician, 20 hospital, or attendant thereof.

(12)[(8)] An employee who reports an injury alleged to be work-related or files an
 application for adjustment of a claim shall execute a waiver and consent of any
 physician-patient, psychiatrist-patient, or chiropractor-patient privilege with respect
 to any condition or complaint reasonably related to the condition for which the
 employee claims compensation. Notwithstanding any other provision in the
 Kentucky Revised Statutes, any physician, psychiatrist, chiropractor, podiatrist,
 hospital, or health care provider shall, within a reasonable time after written request

17 RS HB 296/GA

by the employee, employer, workers' compensation insurer, special fund, uninsured
employers' fund, or the administrative law judge, provide the requesting party with
any information or written material reasonably related to any injury or disease for
which the employee claims compensation.

5 (13)[(9)] When a provider of medical services or treatment, required by this chapter, 6 makes referrals for medical services or treatment by this chapter, to a provider or 7 entity in which the provider making the referral has an investment interest, the 8 referring provider shall disclose that investment interest to the employee, the 9 commissioner, and the employer's insurer or the party responsible for paying for the 10 medical services or treatment, within thirty (30) days from the date the referral was 11 made.

12 (14) (a) Except as provided in paragraph (b) of this subsection, the employer, 13 insurer, or payment obligor shall not be liable for urine drug screenings of 14 patients in excess of:

- 15 **1.** One (1) per year for a patient considered to be low risk;
- 16 <u>2.</u> Two (2) per year for a patient considered to be moderate risk; and
- 17 <u>3.</u> Four (4) per year for patients considered to be high risk;
- 18 based upon the screening performed by the medical provider and other
 19 pertinent factors.
- 20(b) The employer, insurer, or payment obligor may be liable for urine drug21screening at each office visit for patients that have exhibited aberrant
- 22 <u>behavior documented by multiple lost prescriptions, multiple requests for</u> 23 early refills of prescriptions, multiple providers prescribing or dispensing
- 24 opioids as evidenced by the electronic monitoring system established in KRS
- 25 <u>218A.020 or a similar system, unauthorized dosage escalation, or apparent</u>

26 <u>intoxication.</u>

27 (c) The commissioner shall promulgate administrative regulations related to

1 urine drug screenings as part of the practice parameters or treatment 2 guidelines required under Section 2 of this Act. 3 → Section 2. KRS 342.035 is amended to read as follows: 4 (1)Periodically, the commissioner shall promulgate administrative regulations to adopt 5 a schedule of fees for the purpose of ensuring that all fees, charges, and reimbursements under KRS 342.020 and this section shall be fair, current, and 6 7 reasonable and shall be limited to such charges as are fair, current, and reasonable 8 for similar treatment of injured persons in the same community for like services, 9 where treatment is paid for by general health insurers. In determining what fees are 10 reasonable, the commissioner may also consider the increased security of payment 11 afforded by this chapter. On or before November 1, 1994, and on July 1 every two 12 (2) years thereafter, the schedule of fees contained in administrative regulations 13 promulgated pursuant to this section shall be reviewed and updated, if appropriate. Within ten (10) days of April 4, 1994, the commissioner shall execute a contract 14 15 with an appropriately qualified consultant pursuant to which each of the following 16 elements within the workers' compensation system are evaluated; the methods of 17 health care delivery; quality assurance and utilization mechanisms; type, frequency, and intensity of services; risk management programs; and the schedule of fees 18 19 contained in administrative regulation. The consultant shall present 20 recommendations based on its review to the commissioner not later than sixty (60) 21 days following execution of the contract. The commissioner shall consider these 22 recommendations and, not later than thirty (30) days after their receipt, promulgate 23 a regulation which shall be effective on an emergency basis, to effect a twenty-five 24 percent (25%) reduction in the total medical costs within the program.

(2) No provider of medical services or treatment required by this chapter, its agent,
 servant, employee, assignee, employer, or independent contractor acting on behalf
 of any medical provider, shall knowingly collect, attempt to collect, coerce, or

Page 6 of 31

17 RS HB 296/GA

1 attempt to coerce, directly or indirectly, the payment of any charge, for services 2 covered by a workers' compensation insurance plan for the treatment of a work-3 related injury or occupational disease, in excess of that provided by a schedule of 4 fees, or cause the credit of any employee to be impaired by reason of the employee's 5 failure or refusal to pay the excess charge. In addition to the penalty imposed in 6 KRS 342.990 for violations of this subsection, any individual who sustains damages 7 by any act in violation of the provisions of this subsection shall have a civil cause of 8 action in Circuit Court to enjoin further violations and to recover the actual 9 damages sustained by the individual, together with the costs of the lawsuit, 10 including a reasonable attorney's fee.

11 (3) Where these requirements are furnished by a public hospital or other institution, 12 payment thereof shall be made to the proper authorities conducting it. No 13 compensation shall be payable for the death or disability of an employee if his or 14 her death is caused, or if and insofar as his disability is aggravated, caused, or 15 continued, by an unreasonable failure to submit to or follow any competent surgical 16 treatment or medical aid or advice.

17 The commissioner shall, by December 1, 1994, promulgate administrative (4) 18 regulations to adopt a schedule of fees for the purpose of regulating charges by 19 medical providers and other health care professionals for testimony presented and 20 medical reports furnished in the litigation of a claim by an injured employee against 21 the employer. The workers' compensation medical fee schedule for physicians, 803 22 KAR 25:089, having an effective date of February 9, 1995, shall remain in effect 23 until July 1, 1996, or until the effective date of any amendments promulgated by the 24 commissioner, whichever occurs first, it being determined that this administrative 25 regulation is within the statutory grant of authority, meets legislative intent, and is 26 not in conflict with the provisions of this chapter. The medical fee schedule and 27 amendments shall be fair, current, and reasonable and otherwise comply with this

1 section.

- 2 (5) (a) To ensure compliance with subsections (1) and (4) of this section, the
 3 commissioner shall promulgate administrative regulations by December 31,
 4 1994, which require each insurance carrier, self-insured group, and self5 insured employer to certify to the commissioner the program or plan it has
 6 adopted to ensure compliance.
- 7 In addition, the commissioner shall periodically have an independent audit (b) 8 conducted by a qualified independent person, firm, company, or other entity 9 hired by the commissioner, in accordance with the personal service contract 10 provisions contained in KRS 45A.690 to 45A.725, to ensure that the 11 requirements of subsection (1) of this section are being met. The independent 12 person, firm, company, or other entity selected by the commissioner to 13 conduct the audit shall protect the confidentiality of any information it 14 receives during the audit, shall divulge information received during the audit 15 only to the commissioner, and shall use the information for no other purpose 16 than the audit required by this paragraph.
- 17 The commissioner shall promulgate administrative regulations governing (c) medical provider utilization review activities conducted by an insurance 18 19 carrier, self-insured group, or self-insured employer pursuant to this chapter. 20 Utilization review required under administrative regulations may be waived 21 if the insurance carrier, self-insured group, or self-insured employer agrees 22 that the recommended medical treatment is medically necessary and appropriate or if the injured employee elects not to proceed with the 23 24 recommended medical treatment.
- (d) Periodically, or upon request, the commissioner shall report to the Interim
 Joint Committee on Labor and Industry of the Legislative Research
 Commission or to the corresponding standing committees of the General

2

1

Assembly, as appropriate, the degree of compliance or lack of compliance with the provisions of this section and make recommendations thereon.

3

4

(e) The cost of implementing and carrying out the requirements of this subsection shall be paid from funds collected pursuant to KRS 342.122.

5 (6) The commissioner may promulgate administrative regulations incorporating
6 managed care or other concepts intended to reduce costs or to speed the delivery or
7 payment of medical services to employees receiving medical and related benefits
8 under this chapter.

9 (7) For purposes of this chapter, any medical provider shall charge only its customary 10 fee for photocopying requested documents. However, in no event shall a 11 photocopying fee of a medical provider or photocopying service exceed fifty cents 12 (\$0.50) per page. In addition, there shall be no charge for reviewing any records of a 13 medical provider, during regular business hours, by any party who is authorized to 14 review the records and who requests a review pursuant to this chapter.

(8) (a) The commissioner shall develop or adopt practice parameters or *treatment* guidelines for clinical practice for use by medical providers under this chapter,
 including but not limited to chronic pain management treatment and opioid

18 use, and promulgate administrative regulations in order to implement the

19 developed or adopted practice parameters or treatment guidelines on or

19developed or adopted practice parameters or treatment guidelines on or20before December 31, 2018. The commissioner may adopt any parameters for21clinical practice as developed and updated by the federal Agency for Health22Care Policy Research, or the commissioner may adopt other parameters for23clinical practice which are developed by qualified bodies, as determined by24the commissioner, with periodic updating based on data collected during the25application of the parameters.

(b) <u>The commissioner shall develop or adopt a pharmaceutical formulary for</u> medications prescribed for the cure of and relief from the effects of a work

1			injury or occupational disease and promulgate administrative regulations to
2			implement the developed or adopted pharmaceutical formulary on or before
3			<u>December 31, 2018.</u>
4		<u>(c)</u>	Any provider of medical services under this chapter who has followed the
5			practice parameters or <i>treatment</i> guidelines or <i>formularies</i> developed or
6			adopted <i>and implemented</i> pursuant to this subsection shall be presumed to
7			have met the appropriate legal standard of care in medical malpractice cases
8			regardless of any unanticipated complication that may thereafter develop or be
9			discovered.
10	(9)	(a)	Notwithstanding any other provision of law to the contrary, the medical fee
11			schedule adopted under subsection (4) of this section shall require all worker's
12			compensation insurance carriers, worker's compensation self-insured groups,
13			and worker's compensation self-insured employers to provide coverage and
14			payment for surgical first assisting services to registered nurse first assistants
15			as defined in KRS 216B.015.
16		(b)	The provisions of this subsection apply only if reimbursement for an assisting
17			physician would be covered and a registered nurse first assistant who
18			performed the services is used as a substitute for the assisting physician. The
19			reimbursement shall be made directly to the registered nurse first assistant if
20			the claim is submitted by a registered nurse first assistant who is not an
21			employee of the hospital or the surgeon performing the services.
22		⇒Se	ection 3. KRS 342.040 is amended to read as follows:
23	(1)	Exce	ept as provided in KRS 342.020, no income benefits shall be payable for the
24		first	seven (7) days of disability unless disability continues for a period of more than
25		two	(2) weeks, in which case income benefits shall be allowed from the first day of
26		disał	bility. All income benefits shall be payable on the regular payday of the
27		emp	loyer, commencing with the first regular payday after seven (7) days after the

Page 10 of 31

17 RS HB 296/GA

1		injury or disability resulting from an occupational disease.[,] Interest shall not
2		accrue after the filing of an application for resolution of a claim unless there is a
3		delay in payment of benefits caused by the employer, insurance carrier, or
4		payment obligor. If an administrative law judge determines that there was a delay
5		caused by the employer, carrier, or payment obligor[with] interest at the rate of
6		six[twelve] percent (6%)[(12%)] per annum shall be paid to the injured worker.
7		[on each installment from the time it is due until paid, except that]If the
8		administrative law judge determines that a denial, delay, or termination in the
9		payment of income benefits was without reasonable foundation, the rate of interest
10		shall be <i>twelve</i> [eighteen] percent (12%)[(18%)] per annum. In no event shall
11		income benefits be instituted later than the fifteenth day after the employer has
12		knowledge of the disability or death. Income benefits shall be due and payable not
13		less often than semimonthly. If the employer's insurance carrier or other party
14		responsible for the payment of workers' compensation benefits should terminate or
15		fail to make payments when due, that party shall notify the commissioner of the
16		termination or failure to make payments and the commissioner shall, in writing,
17		advise the employee or known dependent of right to prosecute a claim under this
18		chapter.
19	(2)	If overdue temporary total disability income benefits are recovered in a proceeding

20 brought under this chapter by an attorney for an employee, or paid by the employer 21 after receipt of notice of the attorney's representation, a reasonable attorney's fee for 22 these services may be awarded. The award of attorney's fees shall be paid by the 23 employer if the administrative law judge determines that the denial or delay was 24 without reasonable foundation. No part of the fee for representing the employee in 25 connection with the recovery of overdue temporary total disability benefits withheld 26 without reasonable foundation shall be charged against or deducted from benefits 27 otherwise due the employee.

Page 11 of 31

1	(3)	All retraining incentive benefits awarded pursuant to KRS 342.732 shall be payable	
2		on the regular payday of the employer, commencing with the second regular payday	
3		after the award of the retraining incentive benefit by the administrative law judge	
4		becomes final. Retraining incentive benefits shall be due and payable not less often	
5		than semimonthly.	
6	(4)	Upon written request of the employee, all payments of compensation shall be	
7		mailed to the employee at his or her last known address.	
8		→ Section 4. KRS 342.125 is amended to read as follows:	
9	(1)	Upon motion by any party or upon an administrative law judge's own motion, an	
10		administrative law judge may reopen and review any award or order on any of the	
11		following grounds:	
12		(a) Fraud;	
13		(b) Newly-discovered evidence which could not have been discovered with the	
14		exercise of due diligence;	
15		(c) Mistake; and	
16		(d) Change of disability as shown by objective medical evidence of worsening or	
17		improvement of impairment due to a condition caused by the injury since the	
18		date of the award or order.	
19	(2)	No claim which has been previously dismissed or denied on the merits shall be	
20		reopened except upon the grounds set forth in this section.	
21	(3)	Except for reopening solely for determination of the compensability of medical	
22		expenses, fraud, or conforming the award as set forth in KRS 342.730(1)(c)2., or for	
23		reducing a permanent total disability award when an employee returns to work, or	
24		seeking temporary total disability benefits during the period of an award, no claim	
25		shall be reopened more than four (4) years following the date of the original award	
26		or <i>original</i> order granting or denying benefits, and no party may file a motion to	
27		reopen within one (1) year of any previous motion to reopen by the same party.	

Page 12 of 31

17 RS HB 296/GA

1Orders granting or denying benefits that are entered subsequent to an original2final award or order granting or denying benefits shall not be considered to be an3original order granting or denying benefits under this subsection and shall not4extend the time to reopen a claim beyond four (4) years following the date of the5original award or original order.

6 (4) Reopening and review under this section shall be had upon notice to the parties and 7 in the same manner as provided for an initial proceeding under this chapter. Upon 8 reopening, the administrative law judge may end, diminish, or increase 9 compensation previously awarded, within the maximum and minimum provided in 10 this chapter, or change or revoke a previous order. The administrative law judge 11 shall immediately send all parties a copy of the subsequent order or award. 12 Reopening shall not affect the previous order or award as to any sums already paid 13 thereunder, and any change in the amount of compensation shall be ordered only 14 from the date of filing the motion to reopen. No employer shall suspend benefits 15 during pendency of any reopening procedures except upon order of the 16 administrative law judge.

17 Upon the application of the affected employee, and a showing of progression (5) (a) of his previously-diagnosed occupational pneumoconiosis resulting from 18 19 exposure to coal dust and development of respiratory impairment due to that 20 pneumoconiosis and two (2) additional years of employment in the 21 Commonwealth wherein the employee was continuously exposed to the 22 hazards of the disease, the administrative law judge may review an award or 23 order for benefits attributable to coal-related pneumoconiosis under KRS 24 342.732. An application for review under this subsection shall be made within 25 one (1) year of the date the employee knew or reasonably should have known 26 that a progression of his disease and development or progression of respiratory 27 impairment have occurred. Review under this subsection shall include a 1

review of all evidence admitted in all prior proceedings.

(b) Benefits awarded as a result of a review under this subsection shall be reduced
by the amount of retraining incentive benefits or income benefits previously
awarded under KRS 342.732. The amount to be deducted shall be subtracted
from the total amount awarded, and the remaining amount shall be divided by
the number of weeks, for which the award was made, to arrive at the weekly
benefit amount which shall be apportioned in accordance with the provisions
of KRS 342.316.

9 (6) In a reopening or review proceeding where there has been additional permanent 10 partial disability awarded, the increase shall not extend the original period, unless 11 the combined prior disability and increased disability exceeds fifty percent (50%), 12 but less than one hundred percent (100%), in which event the awarded period shall 13 not exceed five hundred twenty (520) weeks, from commencement date of the 14 original disability previously awarded. The law in effect on the date of the original 15 injury controls the rights of the parties.

16 (7) Where an agreement has become an award by approval of the administrative law 17 judge, and a reopening and review of that award is initiated, no statement contained 18 in the agreement, whether as to jurisdiction, liability of the employer, nature and 19 extent of disability, or as to any other matter, shall be considered by the 20 administrative law judge as an admission against the interests of any party. The 21 parties may raise any issue upon reopening and review of this type of award which 22 could have been considered upon an original application for benefits.

(8) The time limitation prescribed in this section shall apply to all claims irrespective of
when they were incurred, or when the award was entered, or the settlement
approved. However, claims decided prior to December 12, 1996, may be reopened
within four (4) years of the award or order or within four (4) years of December 12,
1996, whichever is later, provided that the exceptions to reopening established in

1

subsections (1) and (3) of this section shall apply to these claims as well.

2 \rightarrow Section 5. KRS 342.185 is amended to read as follows:

3 (1)Except as provided in <u>subsections[subsection]</u> (2) <u>and (3)</u> of this section, no 4 proceeding under this chapter for compensation for an injury or death shall be maintained unless a notice of the accident shall have been given to the employer as 5 6 soon as practicable after the happening thereof and unless an application for 7 adjustment of claim for compensation with respect to the injury shall have been 8 made with the department within two (2) years after the date of the accident, or in 9 case of death, within two (2) years after the death, whether or not a claim has been 10 made by the employee himself or herself for compensation. The notice and the 11 claim may be given or made by any person claiming to be entitled to compensation 12 or by someone in his or her behalf. If payments of income benefits have been made, 13 the filing of an application for adjustment of claim with the department within the 14 period shall not be required, but shall become requisite within two (2) years 15 following the suspension of payments or within two (2) years of the date of the 16 accident, whichever is later.

17 (2) The right to compensation under this chapter resulting from work-related exposure
18 to the human immunodeficiency virus shall be barred unless notice of the injurious
19 exposure is given in accordance with subsection (1) of this section and unless an
20 application for adjustment of claim for compensation shall have been made with the
21 commissioner within five (5) years after the injurious exposure to the virus.

22 (3) The right to compensation under this chapter resulting from work-related 23 exposure to cumulative trauma injury shall be barred unless notice of the 24 cumulative trauma injury is given in accordance with subsection (1) of this 25 section and unless an application for adjustment of claim for compensation shall 26 have been made with the commissioner within five (5) years after the last 27 injurious exposure to the cumulative trauma.

17 RS HB 296/GA

1		→Section 6. KRS 342.320 is amended to read as follows:
2	(1)	All fees of attorneys and physicians, and all charges of hospitals under this chapter,
3		shall be subject to the approval of an administrative law judge pursuant to the
4		statutes and administrative regulations.
5	(2)	In an original claim, attorney's fees for services under this chapter on behalf of an
6		employee shall be subject to the following maximum limits:
7		(a) <i>For attorney-client employment contracts entered into and signed after July</i>
8		14, 2000, but before the effective date of this Act, twenty percent (20%) of
9		the first twenty-five thousand dollars (\$25,000) of the award, fifteen percent
10		(15%) of the next ten thousand dollars (\$10,000), and five percent (5%) of the
11		remainder of the award, not to exceed a maximum fee of twelve thousand
12		dollars (\$12,000). This fee shall be paid by the employee from the proceeds of
13		the award or settlement; and
14		(b) For attorney-client employment contracts entered into and signed on or
15		after the effective date of this Act, twenty percent (20%) of the first twenty-
16		five thousand dollars (\$25,000) of the award, fifteen percent (15%) of the
17		next ten thousand dollars (\$10,000), and five percent (5%) of the remainder
18		of the award, not to exceed a maximum fee of eighteen thousand dollars
19		(\$18,000). This fee shall be paid by the employee from the proceeds of the
20		award or settlement[Attorney-client employment contracts entered into and
21		signed after July 14, 2000, shall be subject to the conditions of paragraph (a)
22		of this subsection].
23	(3)	In approving an allowance of attorney's fees, the administrative law judge shall
24		consider the extent, complexity, and quality of services rendered, and in the case of
25		death, the Remarriage Tables of the Dutch Royal Insurance Institute. An attorney's
26		fee may be denied or reduced upon proof of solicitation by the attorney. However,
27		this provision shall not be construed to preclude advertising in conformity with

Page 16 of 31

1 standards prescribed by the Kentucky Supreme Court.

(4) No attorney's fee in any case involving benefits under this chapter shall be paid until
the fee is approved by the administrative law judge, and any contract for the
payment of attorney's fees otherwise than as provided in this section shall be void.
The motion for approval of an attorney's fee shall be submitted within thirty (30)
days following finality of the claim. Except when the attorney's fee is to be paid by
the employer or carrier, the attorney's fee shall be paid in one (1) of the following
ways:

9 (a) The employee may pay the attorney's fee out of his or her personal funds or
10 from the proceeds of a lump-sum settlement; or

11 (b) The administrative law judge, upon request of the employee, may order the 12 payment of the attorney's fee in a lump sum directly to the attorney of record 13 and deduct the attorney's fee from the weekly benefits payable to the employee 14 in equal installments over the duration of the award or until the attorney's fee 15 has been paid, commuting sufficient sums to pay the fee.

16 (5)At the commencement of the attorney-client relationship, the attorney shall explain 17 to the employee the methods by which this section provides for the payment of the 18 attorney's fee, and the employee shall select the method in which the attorney's fee 19 is to be paid. His or her selection and statement that he or she fully understands the 20 method to be used shall be submitted by his or her attorney, on a notarized form 21 signed by the employee, at the time the motion for approval of the attorney's fee is 22 submitted. The commissioner shall develop the format and content of the form to be 23 used pursuant to this section. The form to be used shall list on its face all options 24 permitted in this section for the payment of an attorney's fees and contain an 25 explanation in nontechnical language of each method.

26 (6) The General Assembly declares that by the enactment of KRS 342.316(3), it is the
 27 legislative intent to encourage settlement and prompt administrative handling of

17 RS HB 296/GA

those claims and thereby reduce expenses to claimants for compensation under the provisions of KRS 342.316, and the administrative law judge shall give due regard to this legislative intent in the handling of uncontested claims and the allowance of attorney's fees therein.

5 (7)In a claim that has been reopened pursuant to the provisions of this chapter, an 6 attorney's fee may be awarded by the administrative law judge subject to the limits 7 set forth in subsection (2) of this section. In awarding the attorney's fee, the 8 administrative law judge shall consider the factors set forth in subsection (3) of this 9 section. If no additional amount is recovered upon reopening, no attorney's fee shall 10 be awarded. No attorney's fee shall be allowed or approved exceeding the amounts 11 provided in subsection (2)(a) of this section applicable to any additional amount 12 recovered.

13 (8) Attorney's fees for representing employers in proceedings under this chapter 14 pursuant to contract with the employer shall be subject to approval of the 15 administrative law judge in the same manner as prescribed for attorney 16 representation of employees. Employer attorney's fees are subject to the limitation 17 of *eighteen*[twelve] thousand dollars (\$18,000)[(\$12,000)] maximum fees except that fees for representing employers shall not be dependent upon the result 18 19 achieved. Employer attorney's fees may be paid on a periodic basis while a claim is 20 adjudicated and the payments need not be approved until the claims resolution 21 process is completed. Fees for legal services in presenting a claim for 22 reimbursement from the Kentucky coal workers' pneumoconiosis fund shall not 23 exceed one thousand dollars (\$1,000). All such approved fees shall be paid by the 24 employer and in no event shall exceed the amount the employer agreed by contract 25 to pay.

→ Section 7. KRS 342.700 is amended to read as follows:

27 (1) Whenever an injury for which compensation is payable under this chapter has been

GA

17 RS HB 296/GA

1 sustained under circumstances creating in some other person than the employer a 2 legal liability to pay damages, the injured employee may either claim compensation 3 or proceed at law by civil action against the other person to recover damages, or 4 proceed both against the employer for compensation and the other person to recover 5 damages, but he shall not collect from both. If the injured employee elects to 6 proceed at law by civil action against the other person to recover damages, he shall 7 give due and timely notice to the employer and the special fund of the filing of the action. If compensation is awarded or paid under this chapter, the employer, his 8 9 insurance carrier, the special fund, the Kentucky coal workers' pneumoconiosis 10 fund, and the uninsured employer's fund, or any of them, having paid the 11 compensation or having become liable therefor, may recover in his or its own name 12 or that of the injured employee from the other person in whom legal liability for damages exists, not to exceed the indemnity and medical expenses paid and 13 14 payable to or on behalf of the injured employee, less a pro-rata share of the 15 employee's legal fees and expense. The notice of civil action shall conform in all 16 respects to the requirements of KRS 411.188(2).

17 A principal contractor, intermediate, or subcontractor shall be liable for (2)compensation to any employee injured while in the employ of any one (1) of his 18 19 intermediate or subcontractors and engaged upon the subject matter of the contract, 20 to the same extent as the immediate employer. Any principal, intermediate, or 21 subcontractor who pays the compensation may recover the amount paid from any 22 subordinate contractor through whom he has been rendered liable under this section. 23 Every claim to compensation under this subsection shall in the first instance be 24 presented to and instituted against the immediate employer, but the proceedings 25 shall not constitute a waiver of the employee's rights to recover compensation under 26 this chapter from the principal or intermediate contractor nor shall the claim be 27 barred by limitations, if the claim is filed against the principal or intermediate

Page 19 of 31

17 RS HB 296/GA

1 contractor within one (1) year after a final unappealed order has been rendered by an 2 administrative law judge determining that immediate employer has insufficient 3 security to pay the full and maximum benefits that could be determined to be due 4 him under this chapter. The collection of full compensation from one employer 5 shall bar recovery by the employee against any other. But he shall not collect from 6 all a total compensation in excess of the amount for which his immediate employer 7 is liable. This subsection shall apply only in cases where the injury occurred on, in, 8 or about the premises on which the principal contractor has undertaken to execute 9 work or which are under his control otherwise or management.

(3) It shall be considered to be contrary to public policy and unlawful for any owner or
employer to require another employer to waive its remedies granted by this section
as a condition of receiving a contract or purchase order. Furthermore, in selecting
between two (2) or more contractors or suppliers, consideration may not be given by
an owner or employer to whether one (1) contractor or supplier voluntarily waives
its remedies under this section or offers to accept lesser compensation than another
contractor or supplier for that waiver of remedies.

17 → Section 8. KRS 342.730 is amended to read as follows:

18 (1) Except as provided in KRS 342.732, income benefits for disability shall be paid to
19 the employee as follows:

20 For temporary or permanent total disability, sixty-six and two-thirds percent (a) 21 (66-2/3%) of the employee's average weekly wage but not more than one 22 hundred <u>ten</u> percent (110%) [(100%)] of the state average weekly wage and not less than twenty percent (20%) of the state average weekly wage as 23 24 determined in KRS 342.740 during that disability. Nonwork-related 25 impairment and conditions compensable under KRS 342.732 and hearing loss 26 covered in KRS 342.7305 shall not be considered in determining whether the 27 employee is totally disabled for purposes of this subsection.

Page 20 of 31

(b) For permanent partial disability, sixty-six and two-thirds percent (66-2/3%) of
the employee's average weekly wage but not more than <u>eighty-two and one-</u>
<u>half</u>[seventy five] percent (82.5%)[(75%)] of the state average weekly wage
as determined by KRS 342.740, multiplied by the permanent impairment
rating caused by the injury or occupational disease as determined by the
"Guides to the Evaluation of Permanent Impairment," times the factor set
forth in the table that follows:

8	AMA Impairment	Factor
9	0 to 5%	0.65
10	6 to 10%	0.85
11	11 to 15%	1.00
12	16 to 20%	1.00
13	21 to 25%	1.15
14	26 to 30%	1.35
15	31 to 35%	1.50
16	36% and above	1.70

Any temporary total disability period within the maximum period for permanent, partial disability benefits shall extend the maximum period but shall not make payable a weekly benefit exceeding that determined in subsection (1)(a) of this section. Notwithstanding any section of this chapter to the contrary, there shall be no minimum weekly income benefit for permanent partial disability and medical benefits shall be paid for the duration of the disability.

(c) 1. If, due to an injury, an employee does not retain the physical capacity to
return to the type of work that the employee performed at the time of
injury, the benefit for permanent partial disability shall be multiplied by
three (3) times the amount otherwise determined under paragraph (b) of

1

2

this subsection, but this provision shall not be construed so as to extend the duration of payments; or

- 3 2. If an employee returns to work at a weekly wage equal to or greater than 4 the average weekly wage at the time of injury, the weekly benefit for permanent partial disability shall be determined under paragraph (b) of 5 this subsection for each week during which that employment is 6 7 sustained. During any period of cessation of that employment, temporary or permanent, for any reason, with or without cause, payment of weekly 8 9 benefits for permanent partial disability during the period of cessation 10 shall be two (2) times the amount otherwise payable under paragraph (b) 11 of this subsection. This provision shall not be construed so as to extend 12 the duration of payments.
- 13 3. Recognizing that limited education and advancing age impact an 14 employee's post-injury earning capacity, an education and age factor, 15 when applicable, shall be added to the income benefit multiplier set 16 forth in paragraph (c)1. of this subsection. If at the time of injury, the 17 employee had less than eight (8) years of formal education, the multiplier shall be increased by four-tenths (0.4); if the employee had 18 19 less than twelve (12) years of education or a high school General 20 Educational Development diploma, the multiplier shall be increased by 21 two-tenths (0.2); if the employee was age sixty (60) or older, the 22 multiplier shall be increased by six-tenths (0.6); if the employee was age 23 fifty-five (55) or older, the multiplier shall be increased by four-tenths 24 (0.4); or if the employee was age fifty (50) or older, the multiplier shall 25 be increased by two-tenths (0.2).
- A. Notwithstanding the provisions of KRS 342.125, a claim may be
 reopened at any time during the period of permanent partial disability in

Page 22 of 31

1 2 order to conform the award payments with the requirements of subparagraph 2. of this paragraph.

3 For permanent partial disability, if an employee has a permanent disability (d) 4 rating of fifty percent (50%) or less as a result of a work-related injury, the compensable permanent partial disability period shall be four hundred twenty-5 6 five (425) weeks, and if the permanent disability rating is greater than fifty 7 percent (50%), the compensable permanent partial disability period shall be 8 five hundred twenty (520) weeks from the date the impairment or disability 9 exceeding fifty percent (50%) arises. Benefits payable for permanent partial 10 disability shall not exceed ninety-nine percent (99%) of sixty-six and twothirds percent (66-2/3%) of the employee's average weekly wage as 11 12 determined under KRS 342.740 and shall not exceed eighty-two and one-13 *half*[seventy five] percent (82.5%)[(75%)] of the state average weekly wage, 14 except for benefits payable pursuant to paragraph (c)1. of this subsection, 15 which shall not exceed one hundred *ten* percent (110%) [(100\%)] of the state 16 average weekly wage, nor shall benefits for permanent partial disability be 17 payable for a period exceeding five hundred twenty (520) weeks, 18 notwithstanding that multiplication of impairment times the factor set forth in 19 paragraph (b) of this subsection would yield a greater percentage of disability.

(e) For permanent partial disability, impairment for nonwork-related disabilities,
conditions previously compensated under this chapter, conditions covered by
KRS 342.732, and hearing loss covered in KRS 342.7305 shall not be
considered in determining the extent of disability or duration of benefits under
this chapter.

(2) The period of any income benefits payable under this section on account of any
 injury shall be reduced by the period of income benefits paid or payable under this
 chapter on account of a prior injury if income benefits in both cases are for

17 RS HB 296/GA

disability of the same member or function, or different parts of the same member or
 function, and the income benefits payable on account of the subsequent disability in
 whole or in part would duplicate the income benefits payable on account of the pre existing disability.

5 (3) Subject to the limitations contained in subsection (4) of this section, when an 6 employee, who has sustained disability compensable under this chapter, and who 7 has filed, or could have timely filed, a valid claim in his or her lifetime, dies from 8 causes other than the injury before the expiration of the compensable period 9 specified, portions of the income benefits specified and unpaid at the individual's 10 death, whether or not accrued or due at his or her death, shall be paid, under an 11 award made before or after the death, for the period specified in this section, to and 12 for the benefit of the persons within the classes at the time of death and in the 13 proportions and upon the conditions specified in this section and in the order 14 named:

15 (a) To the widow or widower, if there is no child under the age of eighteen (18) or 16 incapable of self-support, benefits at fifty percent (50%) of the rate specified 17 in the award; or

18 If there are both a widow or widower and such a child or children, to the (b) 19 widow or widower, forty-five percent (45%) of the benefits specified in the 20 award, or forty percent (40%) of those benefits if such a child or children are 21 not living with the widow or widower; and, in addition thereto, fifteen percent 22 (15%) of the benefits specified in the award to each child. Where there are 23 more than two (2) such children, the indemnity benefits payable on account of 24 two (2) children shall be divided among all the children, share and share alike; 25 or

(c) If there is no widow or widower but such a child or children, then to the child
or children, fifty percent (50%) of the benefits specified in the award to one

Page 24 of 31

GA

1 (1) child, and fifteen percent (15%) of those benefits to a second child, to be 2 shared equally. If there are more than two (2) such children, the indemnity 3 benefits payable on account of two (2) children shall be divided equally 4 among all the children; or

(d) If there is no survivor in the above classes, then the parent or parents wholly
or partly actually dependent for support upon the decedent, or to other wholly
or partly actually dependent relatives listed in paragraph (g) of subsection (1)
of KRS 342.750, or to both, in proportions that the commissioner provides by
administrative regulation.

- 10 (e) To the widow or widower upon remarriage, up to two (2) years, benefits as 11 specified in the award and proportioned under paragraphs (a) or (b) of this 12 subsection, if the proportioned benefits remain unpaid, to be paid in a lump 13 sum.
- 14 (4) All income benefits payable pursuant to this chapter shall terminate as of the date 15 upon which the employee qualifies for normal old-age Social Security retirement 16 benefits under the United States Social Security Act, 42 U.S.C. secs. 301 to 1397f, 17 or two (2) years after the employee's injury or last exposure, whichever last occurs. 18 In like manner all income benefits payable pursuant to this chapter to spouses and 19 dependents shall terminate when such spouses and dependents qualify for benefits 20 under the United States Social Security Act by reason of the fact that the worker 21 upon whose earnings entitlement is based would have qualified for normal old-age 22 Social Security retirement benefits.
- All income benefits pursuant to this chapter otherwise payable for temporary total
 and permanent total disability shall be offset by unemployment insurance benefits
 paid for unemployment during the period of temporary total or permanent total
 disability.
- 27

(6) All income benefits otherwise payable pursuant to this chapter shall be offset by

payments made under an exclusively employer-funded disability or sickness and accident plan which extends income benefits for the same disability covered by this chapter, except where the employer-funded plan contains an internal offset provision for workers' compensation benefits which is inconsistent with this provision.

- 6 (7) <u>Income benefits otherwise payable pursuant to this chapter for temporary total</u>
 7 <u>disability during the period the employee has returned to a light duty or other</u>
 8 <u>alternative job position shall be offset by an amount equal to the net amount of</u>
 9 <u>wages paid to the employee by his or her employer during the period of light-duty</u>
 10 work or work in an alternative job position.
- 11 (8) If an employee receiving a permanent total disability award returns to work, that
 12 employee shall notify the employer, payment obligor, insurance carrier, or special
 13 fund as applicable.

14 → Section 9. KRS 342.990 is amended to read as follows:

- 15 (1) The commissioner shall initiate enforcement of civil and criminal penalties imposedin this section.
- 17 (2) When the commissioner receives information that he or she deems sufficient to
 18 determine that a violation of this chapter has occurred, he or she shall seek civil
 19 penalties pursuant to subsections (3) to (7) of this section, criminal penalties
 20 pursuant to subsections (8) and (9) of this section, or both.
- (3) The commissioner shall initiate enforcement of a civil penalty by simultaneously
 citing the appropriate party for the offense and stating the civil penalty to be paid.
- (4) If, within fifteen (15) working days from the receipt of the citation, a cited party
 fails to notify the commissioner that he or she intends to contest the citation, then
 the citation shall be deemed final.
- 26 (5) If a cited party notifies the commissioner that he or she intends to challenge a27 citation issued under this section, the commissioner shall cause the matter to be

1		hear	d as soon as practicable by an administrative law judge and in accordance with
2		the p	provisions of KRS Chapter 13B. The burden of proof shall be upon the attorney
3		repre	esenting the commissioner to prove the offense stated in the citation by a
4		prep	onderance of the evidence. The parties shall stipulate to uncontested facts and
5		issue	es prior to the hearing before the administrative law judge. The administrative
6		law j	judge shall issue a ruling within sixty (60) days following the hearing.
7	(6)	A pa	rty may appeal the ruling of the administrative law judge to the Franklin Circuit
8		Cou	rt in conformity with KRS 13B.140.
9	(7)	The	following civil penalties shall be applicable for violations of particular
10		prov	isions of this chapter:
11		(a)	Any employer, insurer, or payment obligor subject to this chapter who fails to
12			make a report required by KRS 342.038 within fifteen (15) days from the date
13			it was due, shall be fined not less than one hundred dollars (\$100) nor more
14			than one thousand dollars (\$1,000) for each offense;
15		(b)	Any employer, insurer, or payment obligor acting on behalf of an employer
16			who fails to make timely payment of a statement for services under KRS
17			342.020(5)((1)) without having reasonable grounds to delay payment may be
18			fined not less than one hundred dollars (\$100) nor more than one thousand
19			dollars (\$1,000) for each offense;
20		(c)	Any person who violates KRS 342.020(13)[(9)], 342.035(2), 342.040,
21			342.340, 342.400, 342.420, or 342.630 shall be fined not less than one
22			hundred dollars (\$100) nor more than one thousand dollars (\$1,000) for each
23			offense. With respect to employers who fail to maintain workers'
24			compensation insurance coverage on their employees, each employee of the
25			employer and each day of violation shall constitute a separate offense. With
26			respect to KRS 342.040, any employer's insurance carrier or other party
27			responsible for the payment of workers' compensation benefits shall be fined

Page 27 of 31

1 for failure to notify the commissioner of a failure to make payments when due 2 if a report indicating the reason payment of income benefits did not 3 commence within twenty-one (21) days of the date the employer was notified 4 of an alleged work-related injury or disease is not filed with the commissioner 5 within twenty-one (21) days of the date the employer received notice, and if 6 the employee has not returned to work within that period of time. The date of 7 notice indicated in the report filed with the department pursuant to KRS 8 342.038(1), shall raise a rebuttable presumption of the date on which the 9 employer received notice;

- (d) Any person who violates any of the provisions of KRS 342.165(2), 342.335,
 342.395, 342.460, 342.465, or 342.470 shall be fined not less than two
 hundred dollars (\$200) nor more than two thousand dollars (\$2,000) for each
 offense. With respect to KRS 342.395, each required notice of rejection form
 executed by an employee or potential employee of an employer shall
 constitute a separate offense;
- (e) Any person who fails to comply with the data reporting provisions of
 administrative regulations promulgated by the commissioner pursuant to KRS
 342.039, or with utilization review and medical bill audit administrative
 regulations promulgated pursuant to KRS 342.035(5), shall be fined not less
 than one hundred dollars (\$100) nor more than one thousand dollars (\$1,000)
 for each violation;
- (f) Except as provided in paragraph (g) of this subsection, a person who violates
 any of the provisions of KRS 342.335(1) or (2) where the claim,
 compensation, benefit, or money referred to in KRS 342.335(1) or (2) is less
 than or equal to three hundred dollars (\$300) shall be fined per occurrence not
 more than one thousand dollars (\$1,000) per individual nor five thousand
 dollars (\$5,000) per corporation, or twice the amount of gain received as a

Page 28 of 31

1

result of the violation, whichever is greater;

- (g) Any person who violates any of the provisions of KRS 342.335(1) or (2)
 where the claim, compensation, benefit, or money referred to in KRS
 342.335(1) or (2) exceeds three hundred dollars (\$300) shall be fined per
 occurrence not more than five thousand dollars (\$5,000) per individual nor ten
 thousand dollars (\$10,000) per corporation, or twice the amount of gain
 received as a result of the violation, whichever is greater;
- 8 (h) Any person who violates the employee leasing provision of this chapter shall
 9 be fined not less than five hundred dollars (\$500) nor more than five thousand
 10 dollars (\$5,000) for each violation;
- (i) Any violation of the provisions of this chapter relating to self-insureds shall
 constitute grounds for decertification of such self-insured, a fine of not less
 than five hundred dollars (\$500) nor more than five thousand dollars (\$5,000)
 per occurrence, or both; and
- (j) Actions to collect the civil penalties imposed under this subsection shall be
 instituted in the Franklin District Court and the Franklin Circuit Court.
- 17 (8) The commissioner shall initiate enforcement of a criminal penalty by causing a
 18 complaint to be filed with the appropriate local prosecutor. If the prosecutor fails to
 19 act on the violation within twenty (20) days following the filing of the complaint,
 20 the commissioner shall certify the inaction by the local prosecutor to the Attorney
 21 General who shall initiate proceedings to prosecute the violation. The provisions of
 22 KRS 15.715 shall not apply to this section.
- (9) The following criminal penalties shall be applicable for violations of particular
 provisions of this chapter:
- (a) Any person who violates KRS 342.020(13)[(9)], 342.035(2), 342.040,
 342.400, 342.420, or 342.630, shall, for each offense, be fined not less than
 one hundred dollars (\$100) nor more than one thousand dollars (\$1,000), or

1

2

17 RS HB 296/GA

- imprisoned for not less than thirty (30) days nor more than one hundred eighty (180) days, or both;
- 3 (b) Any person who violates any of the provisions of KRS 342.165(2), 342.335,
 342.460, 342.465, or 342.470 shall, for each offense, be fined not less than
 two hundred dollars (\$200) nor more than two thousand dollars (\$2,000), or
 imprisoned for not less than thirty (30) days nor more than one hundred and
 eighty (180) days, or both;
- Any corporation, partnership, sole proprietorship, or other form of business 8 (c) 9 entity and any officer, general partner, agent, or representative of the 10 foregoing who knowingly utilizes or participates in any employee leasing 11 arrangement or mechanism as defined in KRS 342.615 for the purpose of 12 depriving one (1) or more insurers of premium otherwise properly payable or 13 for the purpose of depriving the Commonwealth of any tax or assessment due 14 and owing and based upon said premium shall upon conviction thereof be 15 subject to a fine of not less than five hundred dollars (\$500) nor more than 16 five thousand dollars (\$5,000), or imprisonment for not more than one 17 hundred eighty (180) days, or both, for each offense; and
- Notwithstanding any other provisions of this chapter to the contrary, when any 18 (d) 19 employer, insurance carrier, or individual self-insured fails to comply with 20 this chapter for which a penalty is provided in subparagraphs (7), (8), and (9)21 above, such person, if the person is an owner in the case of a sole 22 proprietorship, a partner in the case of a partnership, a principal in the case of 23 a limited liability company, or a corporate officer in the case of a corporation, 24 who knowingly authorized, ordered, or carried out the violation, failure, or 25 refusal shall be personally and individually liable, both jointly and severally, 26 for the penalties imposed in the above cited subparagraphs. Neither the 27 dissolution nor withdrawal of the corporation, partnership, or other entity from

1	the state, nor the cessation of holding status as a proprietor, partner, principal,
2	or officer shall discharge the foregoing liability of any person.
3	(10) Fines paid pursuant to KRS 342.267 and subsections (7) and (9) of this section shall
4	be paid into the self-insurance fund established in KRS 342.920.
5	(11) In addition to the penalties provided in this section, the commissioner and any
6	administrative law judge or court of jurisdiction may order restitution of a benefit
7	secured through conduct proscribed by this chapter.
8	Section 10. (1) Sections 1, 3, and 7 of this Act shall apply to any claim arising
9	from an injury or occupational disease or last exposure to the hazards of an occupational
10	disease or cumulative trauma occurring on or after the effective date of this Act.
11	(2) Sections 2, 4, 5 and subsection (7) of Section 8 of this Act are remedial and shall
12	apply to all claims irrespective of the date of injury or last exposure.