1	SENATE FLOOR VERSION April 11, 2017
2	AS AMENDED
3	ENGROSSED HOUSE BILL NO. 1462 By: Echols of the House
4	and
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6	Sykes of the Senate
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8	[Workers' compensation - modifying various
9	provisions relating to workers' compensation - effective date]
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12	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
13	SECTION 1. AMENDATORY Section 1, Chapter 208, O.S.L.
14	2013 (85A O.S. Supp. 2016, Section 1), is amended to read as
15	follows:
16	Section 1. Sections 1 through $rac{106}{106}$ and $rac{150}{100}$ through $rac{168}{168}$ $rac{125}{125}$ of
17	this act <u>title</u> shall be known and may be cited as the
18	"Administrative Workers' Compensation Act". The provisions of the
19	Administrative Workers' Compensation Act shall be strictly
20	construed.
21	SECTION 2. AMENDATORY Section 2, Chapter 208, O.S.L.
22	2013 (85A O.S. Supp. 2016, Section 2), is amended to read as
23	follows:
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Section 2. As used in the Administrative Workers' Compensation
 Act:

3 1. "Actually dependent" means a surviving spouse, a child or 4 any other person who receives one-half (1/2) or more of his or her 5 support from the employee;

Carrier" means any stock company, mutual company, or
reciprocal or interinsurance exchange authorized to write or carry
on the business of workers' compensation insurance in this state.
Whenever required by the context, the term "carrier" shall be deemed
to include duly qualified self-insureds or self-insured groups;

3. "Case management" means the ongoing coordination, by a case 11 12 manager, of health care services provided to an injured or disabled worker, including but not limited to systematically monitoring the 13 treatment rendered and the medical progress of the injured or 14 disabled worker; ensuring that any treatment plan follows all 15 appropriate treatment protocols, utilization controls and practice 16 parameters; assessing whether alternative health care services are 17 appropriate and delivered in a cost-effective manner based upon 18 acceptable medical standards; and ensuring that the injured or 19 disabled worker is following the prescribed health care plan; 20

4. "Case manager" means a person who is a registered nurse with
a current, active unencumbered license from the Oklahoma Board of
Nursing, or possesses one or more of the following certifications
which indicate the individual has a minimum number of years of case

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1 management experience, has passed a national competency test and 2 regularly obtains continuing education hours to maintain 3 certification:

4	a.	Certified Disability Management Specialist (CDMS),
5	b.	Certified Case Manager (CCM),
6	c.	Certified Rehabilitation Registered Nurse (CRRN),
7	d.	Case Manager - Certified (CMC),
8	e.	Certified Occupational Health Nurse (COHN), or
9	f.	Certified Occupational Health Nurse Specialist (COHN-
10		S);

5. "Certified workplace medical plan" means an organization of 11 12 health care providers or any other entity, certified by the State Commissioner of Health, that is authorized to enter into a 13 contractual agreement with an employer, group self-insurance 14 association plan, an employer's workers' compensation insurance 15 carrier, third-party administrator or an insured to provide medical 16 care under the Administrative Workers' Compensation Act. Certified 17 plans shall only include plans which provide medical services and 18 payment for services on a fee-for-service basis to medical 19 providers; 20

6. "Child" means a natural or adopted son or daughter of the employee under eighteen (18) years of age; or a natural or adopted son or daughter of an employee eighteen (18) years of age or over who is physically or mentally incapable of self-support; or any

natural or adopted son or daughter of an employee eighteen (18) 1 years of age or over who is actually dependent; or any natural or 2 adopted son or daughter of an employee between eighteen (18) and 3 twenty-three (23) years of age who is enrolled as a full-time 4 student in any accredited educational institution. The term "child" 5 includes a posthumous child, a child legally adopted or one for whom 6 adoption proceedings are pending at the time of death, an actually 7 dependent stepchild or an actually dependent acknowledged child born 8 out of wedlock; 9

10 7. "Claimant" means a person who claims benefits for an injury 11 or occupational disease pursuant to the provisions of the 12 Administrative Workers' Compensation Act;

13	8. "Commission" means the Workers' Compensation Commission;
14	9. <u>8.</u> a. "Compensable injury" means damage or harm to the
15	physical structure of the body, or prosthetic
16	appliances, including eyeglasses, contact lenses, or
17	hearing aids, caused solely as the result of either an
18	accident, cumulative trauma or occupational disease
19	arising out of the course and scope of employment. An
20	"accident" means an event involving factors external
21	to the employee that:
22	(1) was unintended, unanticipated, unforeseen,
23	unplanned and unexpected,

1	(2)	occurred at a specifically identifiable time and
2		place,
3	-(3) -	occurred by chance or from unknown causes, and
4	.(4)-	was independent of sickness, mental incapacity,
5		bodily infirmity or any other cause.
6	b. "Cor	mpensable injury" does not include:
7	(1)	injury to any active participant in assaults or
8		combats which, although they may occur in the
9		workplace, are the result of non-employment-
10		related hostility or animus of one, both, or all
11		of the combatants and which assault or combat
12		amounts to a deviation from customary duties;
13		provided, however, injuries caused by horseplay
14		shall not be considered to be compensable
15		injuries, except for innocent victims,
16	(2)	injury incurred while engaging in or performing
17		or as the result of engaging in or performing any
18		recreational or social activities for the
19		employee's personal pleasure,
20	(3)	injury which was inflicted on the employee at a
21		time when employment services were not being
22		performed or before the employee was hired or
23		after the employment relationship was terminated,
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(4) injury where the accident was caused by the use 1 of alcohol, illegal drugs, or prescription drugs 2 used in contravention of physician's orders. If, 3 within twenty-four (24) hours of being injured or 4 reporting an injury, an employee tests positive 5 for intoxication, an illegal controlled 6 substance, or a legal controlled substance used 7 in contravention to a treating physician's 8 orders, or refuses to undergo the drug and 9 alcohol testing, there shall be a rebuttable 10 presumption that the injury was caused by the use 11 12 of alcohol, illegal drugs, or prescription drugs used in contravention of physician's orders. 13 This presumption may only be overcome if the 14 employee proves by objective, clear and 15 convincing evidence that his or her state of 16 intoxication had no causal relationship to the 17 injury, 18 any strain, degeneration, damage or harm to, or (5) 19 disease or condition of, the eye or 20

musculoskeletal structure or other body part resulting from the natural results of aging, osteoarthritis, arthritis, or degenerative process including, but not limited to,

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1	degenerative joint disease, degenerative disc
2	disease, degenerative
3	spondylosis/spondylolisthesis and spinal
4	stenosis, or
5	(6) any <u>injury that is related to a</u> preexisting
6	condition except when <u>if</u> the treating physician
7	clearly confirms determines by objective findings
8	that the injury is an identifiable and
9	significant aggravation incurred of the
10	preexisting condition that:
11	(a) occurred in the course and scope of
12	employment <u>,</u>
13	(b) is not just a recurrence of symptoms
14	inherent in the etiology of the preexisting
15	condition, and
16	(c) is substantially caused by the work-related
17	accident.
18	c. The definition of "compensable injury" shall not be
19	construed to limit or abrogate the right to recover
20	for mental injuries as described in Section 13 of this
21	act <u>title</u> , heart or lung injury or illness as
22	described in Section 14 of this act <u>title</u> , or
23	occupational diseases as described in Section 65 of
24	this act <u>title</u> .

- d. A compensable injury shall be established by medical
 evidence supported by objective findings as defined in
 paragraph 30 26 of this section.
 - e. The injured employee shall prove by a preponderance of the evidence that he or she has suffered a compensable injury.
- f. Benefits shall not be payable for a condition which 7 results from a non-work-related independent 8 intervening cause following a compensable injury which 9 causes or prolongs disability, aggravation, or 10 requires treatment. A non-work-related independent 11 12 intervening cause does not require negligence or recklessness on the part of a claimant an employee. 13 An employee who suffers a compensable injury shall be 14 g. entitled to receive compensation as prescribed in this 15 act title. Notwithstanding other provisions of law, 16 if it is determined that a compensable injury did not 17 occur, the employee shall not be entitled to 18 compensation under this act title; 19

20 10. 9. "Compensation" means the money allowance payable to the 21 employee or to his or her dependents and includes the medical 22 services and supplies provided for in Section 50 of this act title 23 and funeral expenses;

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1 11. "Consequential injury" means injury or harm to a part of 2 the body that is a direct result of the injury or medical treatment 3 to the part of the body originally injured in the claim. The 4 Commission shall not make a finding of a consequential injury unless 5 it is established by objective medical evidence that medical 6 treatment for such part of the body is required;

7 12. 10. "Continuing medical maintenance" means medical 8 treatment that is reasonable and necessary to maintain claimant's an 9 employee's condition resulting from the compensable injury or 10 illness after reaching maximum medical improvement. Continuing 11 medical maintenance shall not include diagnostic tests, surgery, 12 injections, counseling, physical therapy, or pain management devices 13 or equipment;

13. 11. "Course and scope of employment" means an activity of 14 any kind or character for which the employee was hired and that 15 relates to and derives from the work, business, trade or profession 16 of an employer, and is performed by an employee in the furtherance 17 of the affairs or business of an employer. The term includes 18 activities conducted on the premises of an employer or at other 19 locations designated by an employer and travel by an employee in 20 furtherance of the affairs of an employer that is specifically 21 directed by the employer. This term does not include: 22

an employee's transportation to and from his or her

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place of employment,

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travel by an employee in furtherance of the affairs of 1 b. an employer if the travel is also in furtherance of 2 personal or private affairs of the employee, 3 any injury occurring in a parking lot or other common с. 4 area adjacent to an employer's place of business 5 before the employee clocks in or otherwise begins work 6 for the employer or after the employee clocks out or 7 otherwise stops work for the employer, or 8 d. any injury occurring while an employee is on a work 9 break, unless the injury occurs while the employee is 10 on a work break inside the employer's facility and the 11 work break is authorized by the employee's supervisor; 12 14. 12. "Cumulative trauma" means an injury to an employee that 13 is caused by the combined effect of repetitive physical activities 14 extending over a period of time in the course and scope of 15 employment. Cumulative trauma shall not mean fatigue, soreness or 16 general aches and pain that may have been caused, aggravated, 17 exacerbated or accelerated by the employee's course and scope of 18 employment. Cumulative trauma shall have resulted directly and 19 independently of all other causes and the employee shall have 20 completed at least one hundred eighty (180) days of continuous 21 active employment with the employer; 22 15. 13. "Death" means only death resulting from compensable 23

24 injury as defined in paragraph $\frac{9}{8}$ of this section;

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1 16. <u>14.</u> "Disability" means <u>incapacity because of</u>, <u>based on</u>
2 <u>objective findings</u>, <u>impairment of a portion of the total</u>
3 <u>physiological capabilities of the human body caused by a</u> compensable
4 injury to earn, in the same or any other employment, substantially
5 the same amount of wages the employee was receiving at the time of
6 the compensable injury;

7 17. <u>15.</u> "Drive-away operations <u>owner-operator</u>" includes every 8 person engaged in the business of transporting and delivering new or 9 used vehicles by driving, either singly or by towbar, saddle-mount 10 or full-mount method, or any combination thereof, with or without 11 towing a privately owned vehicle;

- 12 18. 16.
- "Employee" means any person, including a minor, in the a. 13 service of an employer under any contract of hire or 14 apprenticeship, written or oral, expressed or implied, 15 but excluding one whose employment is casual and not 16 in the course of the trade, business, profession, or 17 occupation of his or her employer and excluding one 18 who is required to perform work for a municipality or 19 county or the state or federal government on having 2.0 been convicted of a criminal offense or while 21 incarcerated. "Employee" shall also include a member 22 of the Oklahoma National Guard while in the 23 performance of duties only while in response to state 24

orders and any authorized voluntary or uncompensated worker, rendering services as a firefighter, peace officer or emergency management worker. Travel by a policeman, fireman, or a member of a first aid or rescue squad, in responding to and returning from an emergency, shall be deemed to be in the course of employment.

b. The term "employee" shall not include:

- (1)any person for whom an employer is liable under 9 any Act of Congress for providing compensation to 10 employees for injuries, disease or death arising 11 out of and in the course of employment including, 12 but not limited to, the Federal Employees' 13 Compensation Act, the Federal Employers' 14 Liability Act, the Longshore and Harbor Workers' 1.5 Compensation Act and the Jones Act, to the extent 16 his or her employees are subject to such acts, 17 (2) any person who is employed in agriculture or 18 horticulture by an employer who had a gross 19 annual payroll in the preceding calendar year of 20 less than One Hundred Thousand Dollars 21 (\$100,000.00) wages for agricultural or 22 horticultural workers, or any person who is 23
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employed in agriculture or horticulture who is 1 not engaged in operation of motorized machines, 2 any person who is a licensed real estate sales (3) 3 associate or broker, paid on a commission basis, 4 (4) any person who is providing services in a medical 5 care or social services program, or who is a 6 participant in a work or training program, 7 administered by the Department of Human Services, 8 unless the Department is required by federal law 9 or regulations to provide workers' compensation 10 for such person. This division shall not be 11 construed to include nursing homes, 12 any person employed by an employer with five or 13 (5) fewer total employees, all of whom who are either 14 related within the second degree by blood or 1.5 marriage to the employer or are dependents living 16 in the household of the employer, if the employer 17 is a natural person or a general or limited 18 partnership, or an incorporator of a corporation 19 if the corporation is the employer, or a member 20 or manager of a limited liability company if the 21 limited liability company is the employer, 22 any person employed by an employer which is a (6) 23 youth sports league which qualifies for exemption 24

from federal income taxation pursuant to federal law,

- sole proprietors, members of a partnership, (7) 3 individuals who are party to a franchise 4 agreement as set out by the Federal Trade 5 Commission franchise disclosure rule, 16 CFR 6 436.1 through 436.11, members of a limited 7 liability company who own at least ten percent 8 (10%) of the capital of the limited liability 9 company or any stockholder-employees of a 10 corporation who own ten percent (10%) or more 11 stock in the corporation, unless they elect to be 12 covered by a policy of insurance covering 13 benefits under the Administrative Workers' 14 Compensation Act, 1.5 16
 - (8) any person providing or performing voluntary service who receives no wages for the services other than meals, drug or alcohol rehabilitative therapy, transportation, lodging or reimbursement for incidental expenses except for volunteers specifically provided for in subparagraph a of this paragraph,

(9) a person, commonly referred to as an owneroperator, who owns or leases a truck-tractor or

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truck for hire, if the owner-operator actually operates the truck-tractor or truck and if the person contracting with the owner-operator is not the lessor of the truck-tractor or truck. Provided, however, an owner-operator shall not be precluded from workers' compensation coverage under the Administrative Workers' Compensation Act if the owner-operator elects to participate as a sole proprietor,

(10)a person referred to as a drive-away owner-10 operator who privately owns and utilizes a tow 11 vehicle in drive-away operations and operates 12 independently for hire, if the drive-away owner-13 operator actually utilizes the tow vehicle and if 14 the person contracting with the drive-away owner-15 operator is not the lessor of the tow vehicle. 16 Provided, however, a drive-away owner-operator 17 shall not be precluded from workers' compensation 18 coverage under the Administrative Workers' 19 Compensation Act if the drive-away owner-operator 20 elects to participate as a sole proprietor, and 21 (11)any person who is employed as a domestic servant 22 or as a casual worker in and about a private home 23 or household, which private home or household had 24

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a gross annual payroll in the preceding calendar year of less than Fifty Thousand Dollars (\$50,000.00) for such workers;

19. 17. "Employer" means a person, partnership, association, 4 limited liability company, corporation, and the legal 5 representatives of a deceased employer, or the receiver or trustee 6 of a person, partnership, association, corporation, or limited 7 liability company, departments, instrumentalities and institutions 8 of this state and divisions thereof, counties and divisions thereof, 9 public trusts, boards of education and incorporated cities or towns 10 and divisions thereof, employing a person included within the term 11 12 "employee" as defined in this section. Employer may also mean the employer's workers' compensation insurance carrier, if applicable. 13 Except as provided otherwise, this act the Administrative Workers' 14 Compensation Act applies to all public and private entities and 15 institutions. Employer shall not include a qualified employer with 16 an employee benefit plan as provided under the Oklahoma Employee 17 Injury Benefit Act in Sections 107 through 120 of this act; 18 20. 18. "Employment" includes work or labor in a trade, 19 business, occupation or activity carried on by an employer or any 20

22 firefighter, peace officer or emergency management worker;

authorized voluntary or uncompensated worker rendering services as a

23 21. "Evidence-based" means expert-based, literature-supported 24 and outcomes validated by well-designed randomized trials when such

1 information is available and which uses the best available evidence
2 to support medical decision making;

3 22. "Gainful employment" means the capacity to perform
4 employment for wages for a period of time that is not part-time,
5 occasional or sporadic;

6 23. 19. "Impairment" means a loss of, or loss of the formation 7 of, a body part, organ or system;

20. "Impaired self-insurer" means a private self-insurer or 8 group self-insurance association that fails to pay its workers' 9 compensation obligations, or is financially unable to do so and is 10 the subject of any proceeding under the Federal Bankruptcy Reform 11 Act of 1978, and any subsequent amendments or is the subject of any 12 proceeding in which a receiver, custodian, liquidator, 13 rehabilitator, trustee or similar officer has been appointed by a 14 court of competent jurisdiction to act in lieu of or on behalf of 15 the self-insurer; 16

17 24. "Incapacity" means inadequate strength or ability to 18 perform a work-related task;

19 25. 21. "Insurance Commissioner" means the Insurance 20 Commissioner of the State of Oklahoma;

21 26. 22. "Insurance Department" means the Insurance Department
22 of the State of Oklahoma;

23 27. "Major cause" means more than fifty percent (50%) of the 24 resulting injury, disease or illness. A finding of major cause

shall be established by a preponderance of the evidence. A finding that the workplace was not a major cause of the injury, disease or illness shall not adversely affect the exclusive remedy provisions of this act and shall not create a separate cause of action outside this act;

28. 23. "Maximum medical improvement" means that no further
material improvement would reasonably be expected from medical
treatment or the passage of time;

9 29. 24. "Medical services" means those services specified in 10 Section 50 of this act title;

- 11 30. 25. "Misconduct" shall include the following:
- a. unexplained absenteeism or tardiness,
- b. willful or wanton indifference to or neglect of the
 duties required,
- 15 c. willful or wanton breach of any duty required by the 16 employer,
- d. the mismanagement of a position of employment by
 action or inaction,
- e. actions or omissions that place in jeopardy the health, life, or property of self or others,
- 21 f. dishonesty,
- g. wrongdoing,
- 23 h. violation of a law, or
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1	i.	a vi	olati	on of a policy or rule adopted to ensure
2		orde	rly w	work or the safety of self or others;
3	31. <u>26.</u>			
4	a.	(1)	"Ob	ojective findings" are those <u>means</u> findings
5			bas	ed on objective medical evidence which cannot
6			com	ne under the voluntary control of the patient.
7		(2)	(a)	When determining permanent disability, a
8				physician, any other medical provider, an
9				administrative law judge, the Commission or
10				the courts shall not consider complaints of
11				pain.
12			(b)	For the purpose of making permanent
13				disability ratings to the spine , physicians
14				shall use criteria established by the most
15				current edition <u>Sixth Edition</u> of the
16				American Medical Association "Guides to the
17				Evaluation of Permanent Impairment".
18		(3)	(a)	Objective evidence necessary to prove
19				permanent disability in occupational hearing
20				loss cases may be established by medically
21				recognized and accepted clinical diagnostic
22				methodologies, including, but not limited
23				to, audiological tests that measure air and
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bone conduction thresholds and speech 1 discrimination ability. 2 Any difference in the baseline hearing (b) 3 levels shall be confirmed by subsequent 4 testing; provided, however, such test shall 5 be given within four (4) weeks of the 6 initial baseline hearing level test but not 7 before five (5) days after being adjusted 8 for presbycusis. 9 b. Medical opinions addressing compensability and 10 permanent disability shall be stated within a 11 12 reasonable degree of medical certainty; 32. 27. "Official Disability Guidelines" or "ODG" means the 13 current edition Sixth Edition of the Official Disability Guidelines 14 and the ODG Treatment in Workers' Comp Compensation as published by 15 the Work Loss Data Institute; 16 33. 28. "Occupational disease" means a disease arising out of 17 and in the course and scope of employment that causes damage or harm 18 to the physical structure of the body. The term includes a disease 19 or infection that naturally results from the work-related disease. 20 The term does not include an ordinary disease of life to which the 21 general public is exposed outside of employment unless that disease 22 is an incident to a compensable injury or work-related disease; 23

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29. "Permanent disability" means the extent, expressed as a 1 percentage, of the permanent loss of a portion of the total 2 physiological capabilities of the human body as established by 3 competent medical evidence and caused by a compensable injury based 4 on the current edition Sixth Edition of the American Medical 5 Association guides "Guides to the evaluation Evaluation of 6 impairment Permanent Impairment", if the impairment is contained 7 therein; 8

9 34. "Permanent partial disability" means a permanent disability 10 or loss of use after maximum medical improvement has been reached 11 which prevents the injured employee, who has been released to return 12 to work by the treating physician, from returning to his or her pre-13 injury or equivalent job. All evaluations of permanent partial 14 disability must be supported by objective findings;

35. "Permanent total disability" means, based on objective 15 findings, incapacity, based upon accidental injury or occupational 16 disease, to earn wages in any employment for which the employee may 17 become physically suited and reasonably fitted by education, 18 training, experience or vocational rehabilitation provided under 19 this act. Loss of both hands, both feet, both legs, or both eyes, 20 or any two thereof, shall constitute permanent total disability; 21 36. 30. "Preexisting condition" means any illness, injury, 22 disease, or other physical or mental condition, whether or not work-23

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related, for which medical advice, diagnosis, care or treatment was
 recommended or received preceding the date of injury;

3 37. "Pre-injury or equivalent job" means the job that the 4 claimant was working for the employer at the time the injury 5 occurred or any other employment offered by the claimant's employer 6 that pays at least one hundred percent (100%) of the employee's 7 average weekly wage;

38. 31. "Private self-insurer" means a private employer that 8 has been authorized to self-insure its workers' compensation 9 obligations pursuant to this act title, but does not include group 10 self-insurance associations authorized by this act title, or any 11 12 public employer that self-insures pursuant to this act title; 39. 32. "Prosthetic" means an artificial device used to replace 13 a part or joint of the body that is lost or injured in an accident 14 or illness covered by this act title; 15

16 40. "Scheduled member" or "member" means hands, fingers, arms, 17 legs, feet, toes, and eyes. In addition, for purposes of the 18 Multiple Injury Trust Fund only, "scheduled member" means hearing 19 impairment;

20 41. "Scientifically based" involves the application of rigorous, systematic, and objective procedures to obtain reliable and valid knowledge relevant to medical testing, diagnoses and treatment; is adequate to justify the general conclusions drawn; and has been accepted by a peer-review journal or approved by a panel of

1 independent experts through a comparably rigorous, objective, and
2 scientific review;

42. <u>33.</u> "State average weekly wage" means the state average
weekly wage determined by the Oklahoma Employment Security
Commission in the preceding calendar year. If such determination is
not available, the Commission shall determine the wage annually
after reasonable investigation;

8 43. 34. "Subcontractor" means a person, firm, corporation or 9 other legal entity hired by the general or prime contractor to 10 perform a specific task for the completion of a work-related 11 activity;

12 44. "Surgery" does not include an injection, or the forcing of 13 fluids beneath the skin, for treatment or diagnosis;

14 45. 35. "Surviving spouse" means the employee's spouse by 15 reason of a legal marriage recognized by the State of Oklahoma or 16 under the requirements of a common law marriage in this state, as 17 determined by the Workers' Compensation Commission;

18 46. "Temporary partial disability" means an injured employee
19 who is temporarily unable to perform his or her job, but may perform
20 alternative work offered by the employer;

21 47. "Time of accident" or "date of accident" means the time or 22 date of the occurrence of the accidental incident from which 23 compensable injury, disability, or death results; and

48. <u>36.</u> "Total loss of use" means a one-hundred-percent
 permanent partial disability rating to the specific body part; and

3 <u>37.</u> "Wages" means money compensation received for employment at 4 the time of the accident, including the reasonable value of board, 5 rent, housing, lodging, or similar advantage received from the 6 employer and includes the amount of tips required to be reported by 7 the employer under Section 6053 of the Internal Revenue Code and the 8 regulations promulgated pursuant thereto or the amount of actual 9 tips reported, whichever amount is greater.

10 SECTION 3. AMENDATORY Section 3, Chapter 208, O.S.L.
11 2013 (85A O.S. Supp. 2016, Section 3), is amended to read as
12 follows:

Section 3. A. Every employer and every employee, unless otherwise specifically provided in this act title, shall be subject and bound to the provisions of the Administrative Workers' Compensation Act. However, nothing in this act title shall be construed to conflict with any valid Act of Congress governing the liability of employers for injuries received by their employees.

B. This act <u>title</u> shall apply only to claims for injuries and death based on accidents which occur on or after the effective date of this act February 1, 2014.

C. The Workers' Compensation Code in effect before the
 effective date of this act February 1, 2014, shall govern all rights

in respect to claims for injuries and death based on accidents 1 occurring before the effective date of this act February 1, 2014. 2 D. If an employee files a workers' compensation claim or 3 receives benefits in another jurisdiction, the employee is not 4 eligible to receive benefits under this title for the same injury. 5 SECTION 4. Section 4, Chapter 208, O.S.L. AMENDATORY 6 2013 (85A O.S. Supp. 2016, Section 4), is amended to read as 7 follows: 8

9 Section 4. A. If any part of this act <u>title</u> be decided by the 10 courts to be unconstitutional or invalid, the same shall not affect 11 the validity of this act <u>title</u> as a whole, or any part thereof other 12 than the part so decided to be unconstitutional or invalid.

B. If the adjudication of unconstitutionality has the effect of invalidating any payment of compensation under this act <u>title</u>, the amount of any compensation paid under this <u>act title</u> on account of the injury shall be deducted from the amount of damages awarded in the action in respect to the injury.

18 SECTION 5. AMENDATORY Section 5, Chapter 208, O.S.L.
19 2013 (85A O.S. Supp. 2016, Section 5), is amended to read as
20 follows:

21 Section 5. A. The rights and remedies granted to an employee 22 subject to the provisions of the Administrative Workers' 23 Compensation Act shall be exclusive of all other rights and remedies 24 of the employee, his <u>or her</u> legal representative, dependents, next

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of kin, or anyone else claiming rights to recovery on behalf of the 1 employee against the employer, or any principal, officer, director, 2 employee, stockholder, partner, or prime contractor of the employer 3 on account of injury, illness, or death. Negligent acts of a co-4 employee may not be imputed to the employer. No role, capacity, or 5 persona of any employer, principal, officer, director, employee, or 6 stockholder other than that existing in the role of employer of the 7 employee shall be relevant for consideration for purposes of this 8 act title, and the remedies and rights provided by this act title 9 shall be exclusive regardless of the multiple roles, capacities, or 10 personas the employer may be deemed to have. For the purpose of 11 12 extending the immunity of this section, any operator or owner of an oil or gas well or other operation for exploring for, drilling for, 13 or producing oil or gas shall be deemed to be an intermediate or 14 principal employer for services performed at a drill site or 15 location with respect to injured or deceased workers whose immediate 16 employer was hired by such operator or owner at the time of the 17 injury or death. 18

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B. Exclusive remedy shall not apply if:

An employer fails to secure the payment of compensation due
 to the employee as required by this act <u>title</u>. An injured employee,
 or his or her legal representative in case death results from the
 injury, may, at his or her option, elect to claim compensation under

1 this act or to maintain a legal action in court for damages on 2 account of the injury or death; or

2. The injury was caused by an intentional tort committed by 3 the employer. An intentional tort shall exist only when the 4 employee is injured as a result of willful, deliberate, specific 5 intent of the employer to cause such injury. Allegations or proof 6 that the employer had knowledge that the injury was substantially 7 certain to result from the employer's conduct shall not constitute 8 an intentional tort. The employee shall plead facts that show it is 9 at least as likely as it is not that the employer acted with the 10 purpose of injuring the employee. The issue of whether an act is an 11 intentional tort shall be a question of law. 12

C. The immunity from civil liability described in subsection A of this section shall apply regardless of whether the injured employee is denied compensation or deemed ineligible to receive compensation under this act title.

D. If an employer has failed to secure the payment of compensation for his or her injured employee as provided for in this act <u>title</u>, an injured employee, or his or her legal representative if death results from the injury, may maintain an action in the district court for damages on account of such injury.

E. The immunity created by the provisions of this section shall not extend to action against another employer, or its employees, on the same job as the injured or deceased worker where such other

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1 employer does not stand in the position of an intermediate or 2 principal employer to the immediate employer of the injured or 3 deceased worker.

The immunity created by the provisions of this section shall F. 4 not extend to action against another employer, or its employees, on 5 the same job as the injured or deceased worker even though such 6 other employer may be considered as standing in the position of a 7 special master of a loaned servant where such special master neither 8 is the immediate employer of the injured or deceased worker nor 9 stands in the position of an intermediate or principal employer to 10 the immediate employer of the injured or deceased worker. 11

G. This section shall not be construed to abrogate the loaned servant doctrine in any respect other than that described in subsection F of this section. Nothing in this act <u>title</u> shall be construed to relieve the employer from any other penalty provided for in this act <u>title</u> for failure to secure the payment of compensation under this act <u>title</u>.

H. For the purpose of extending the immunity of this section, any architect, professional engineer, or land surveyor shall be deemed an intermediate or principal employer for services performed at or on the site of a construction project, but this immunity shall not extend to the negligent preparation of design plans and specifications.

I. If the employer has failed to secure the payment of workers' compensation <u>insurance or become an approved self-insured</u> as provided in this act <u>title</u> or in the case of an intentional tort, the injured employee or his or her legal representative may maintain an action either before the Commission or in the district court, but not both.

SECTION 6. AMENDATORY Section 6, Chapter 208, O.S.L.
2013, as amended by Section 1, Chapter 390, O.S.L. 2015 (85A O.S.
Supp. 2016, Section 6), is amended to read as follows:

10 Section 6.

A. 1. a. Any person or entity who makes any material false 11 12 statement or representation, who willfully and knowingly omits or conceals any material information, 13 or who employs any device, scheme, or artifice, or who 14 aids and abets any person for the purpose of: 15 obtaining any benefit or payment, (1)16 increasing any claim for benefit or payment, or (2)17 obtaining workers' compensation coverage under (3) 18 this act title, 19 shall be quilty of a felony punishable pursuant to 20 Section 1663 of Title 21 of the Oklahoma Statutes. 21 b. A material false statement or representation includes, 22 but is not limited to, attempting to obtain treatment 23

or compensation for body parts that were not injured in the course and scope of employment.

c. Fifty percent (50%) of any criminal fine imposed and
 collected under this section shall be paid and
 allocated in accordance with applicable law to the
 Workers' Compensation Fund administered by the
 Workers' Compensation Commission.

8 2. Any person or entity with whom any person identified in 9 division (1) of subparagraph a of paragraph 1 of this subsection has 10 conspired to achieve the proscribed ends shall, by reason of such 11 conspiracy, be guilty as a principal of a felony.

B. A copy of division (1) of subparagraph a of paragraph 1 of subsection A of this section shall be included on all forms prescribed by the Commission for the use of injured employees claiming benefits and for the use of employers in responding to employees' claims under this act title.

C. Where If the Commission or the Attorney General finds that a violation of division (1) of subparagraph a of paragraph 1 of subsection A of this section has been committed, or that any other criminal violations in furtherance of the provisions of this act title were committed, the chair of the Commission or the Attorney General shall refer the matter for appropriate action to the prosecuting attorney having criminal jurisdiction over the matter.

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D. 1. a. There shall be established within the Office of the 1 Attorney General a Workers' Compensation Fraud 2 Investigation Unit, funded by the Commission. The 3 Attorney General shall appoint a Director of the 4 Workers' Compensation Fraud Investigation Unit, who 5 may also serve as the director of any other designated 6 insurance fraud investigation division within the 7 Attorney General's office. 8

- b. (1) The Unit shall investigate workers' compensation
 fraud, any additional criminal violations that
 may be related to workers' compensation fraud,
 and any other insurance fraud matters as may be
 assigned at the discretion of the Attorney
 General.
- The Attorney General shall designate the (2)15 personnel assigned to the Unit, who, on meeting 16 the qualifications established by the Oklahoma 17 Council on Law Enforcement Education and 18 Training, shall have the powers of specialized 19 law enforcement officers of the State of Oklahoma 20 for the purpose of conducting investigations 21 under this subparagraph. Personnel hired as 22 specialized law enforcement officers shall have a 23 minimum of three (3) years of certified law 24

enforcement experience or its equivalent in national or military law enforcement experience as approved by the Oklahoma Council on Law Enforcement Education and Training. 2. The Attorney General and his or her deputies and assistants and the Director of the Workers' Compensation Fraud Investigation

7 Unit and his or her deputies and assistants shall be vested with the 8 power of enforcing the requirements of this section.

3. It shall be the duty of the Unit to assist the Attorney 9 General in the performance of his or her duties. The Unit shall 10 determine the identity of employees in this state who have violated 11 division (1) of subparagraph a of paragraph 1 of subsection A of 12 this section and report the violation to the Office of the Attorney 13 General and the Commission. The Attorney General shall report the 14 violation to the prosecuting attorney having jurisdiction over the 15 matter. 16

4. a. In the course of any investigation being conducted by
the Unit, the Attorney General and his or her deputies
and assistants and the Director and his or her
deputies and assistants shall have the power of
subpoena and may:
(1) subpoena witnesses,

(2) administer oaths or affirmations and examine any individual under oath, and

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1		(3) require and compel the production of records,
2		books, papers, contracts, and other documents.
3	b.	The issuance of subpoenas for witnesses shall be
4		served in the same manner as if issued by a district
5		court.
6	С.	(1) Upon application by the commissioner <u>Commission</u>
7		or the Director of the Unit, the district court
8		located in the county where a subpoena was served
9		may issue an order compelling an individual to
10		comply with the subpoena to testify.
11		(2) Any failure to obey the order of the court may be
12		punished as contempt.
13	d.	If any person has refused in connection with an
14		investigation by the Director to be examined under
15		oath concerning his or her affairs, then the Director
16		is authorized to conduct and enforce by all
17		appropriate and available means any examination under
18		oath in any state or territory of the United States in
19		which any officer, director, or manager may then
20		presently be to the full extent permitted by the laws
21		of the state or territory.
22	e.	In addition to the punishments described in paragraph
23		1 of subsection A of this section, any person
24		providing false testimony under oath or affirmation in

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this state as to any matter material to any 1 investigation or hearing conducted under this 2 subparagraph, or any workers' compensation hearing, 3 shall upon conviction be quilty of perjury. 4 5. Fees and mileage of the officers serving the subpoenas and 5 of the witnesses in answer to subpoenas shall be as provided by law. 6 6. Every carrier or employer who has reason to suspect a. 7 that a violation of division (1) of subparagraph a of 8 paragraph 1 of subsection A of this section has 9 occurred shall be required to report all pertinent 10 matters to the unit. 11 12 b. No carrier or employer who makes a report for a suspected violation of division (1) of subparagraph a 13 of paragraph 1 of subsection A of this section by an 14 employee shall be liable to the employee unless the 15 carrier or employer knowingly and intentionally 16 included false information in the report. 17 Any carrier or employer who willfully and с. (1)18 knowingly fails to report a violation under 19 division (1) of subparagraph a of paragraph 1 of 20 subsection A of this section shall be guilty of a 21 misdemeanor and on conviction shall be punished 22 by a fine not to exceed One Thousand Dollars 23 (\$1,000.00). 24

(2) Fifty percent (50%) of any criminal fine imposed 1 and collected under this subparagraph shall be 2 paid and allocated in accordance with applicable 3 law to the fund administered by the Commission. 4 d. Any employee may report suspected violations of 5 division (1) of subparagraph a of paragraph 1 of 6 subsection A of this section. No employee who makes a 7 report shall be liable to the employee whose suspected 8 violations have been reported. 9

E. 1. For the purpose of imposing criminal sanctions or a fine for violation of the duties of this act <u>title</u>, the prosecuting attorney shall have the right and discretion to proceed against any person or organization responsible for such violations, both corporate and individual liability being intended by this act <u>title</u>.

2. The prosecuting attorney of the district to whom a suspected 15 violation of subsection A of this section, or any other criminal 16 violations that may be related thereto, have been referred shall, 17 for the purpose of assisting him or her in such prosecutions, have 18 the authority to appoint as special deputy prosecuting attorneys 19 licensed attorneys-at-law in the employment of the Unit or any other 20 designated insurance fraud investigation division within the 21 Attorney General's office. Such special deputy prosecuting 22 attorneys shall, for the purpose of the prosecutions to which they 23

are assigned, be responsible to and report to the prosecuting attorney.

F. Notwithstanding any other provision of law, investigatory files as maintained by the Attorney General's office and by the Unit shall be deemed confidential and privileged. The files may be made open to the public once the investigation is closed by the Director of the Workers' Compensation Fraud Investigation Unit with the consent of the Attorney General.

G. The Attorney General, with the cooperation and assistance of
the Commission, is authorized to establish rules as may be necessary
to carry out the provisions of this section.

H. Nothing in this section shall be deemed to create a civilcause of action.

I. The Commission shall include a statement on all forms for notices and instructions to employees, employers, carriers and third-party administrators that any person who commits workers' compensation fraud, upon conviction, shall be guilty of a felony punishable by imprisonment, a fine or both.

J. If an injured employee is charged with workers' compensation fraud, any pending workers' compensation proceeding, including benefits, shall be stayed after the preliminary hearing is concluded and the claimant employee is bound over and shall remain stayed until the final disposition of the criminal case. All notice requirements shall continue during the stay.

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K. If the Attorney General's Office is in compliance with the 1 discovery provisions of Section 258 of Title 22 of the Oklahoma 2 Statutes, medical records created for the purpose of treatment and 3 medical opinions obtained during the investigation shall be 4 admissible at the preliminary hearing without the appearance of the 5 medical professional creating such records or opinions. However, 6 when material evidence dispositive to the issues of whether there 7 was probable cause the crime was committed and whether the defendant 8 committed the crime, was not included in a report or opinion 9 admitted at preliminary hearing, but might be presented at a 10 pretrial hearing by a medical professional who created such report 11 12 or opinion, the judge may, upon the motion of either party, order the appearance of the medical professional creating such report or 13 opinion. Questions of fact regarding the conduct of the defendant 14 that conflict with the findings of the medical professional 15 evaluating the defendant shall not constitute material evidence. Ιn 16 the event of such motion, notice shall be given to the Attorney 17 General's Workers' Compensation Fraud and Investigation and 18 Prosecution Unit. A hearing shall be held and, if the motion is 19 granted, the evidence shall not be presented fewer than five (5) 20 days later. 21

L. Any person or entity who, in good faith and exercising due care, reports suspected workers' compensation fraud or insurance fraud, or who allows access to medical records or other information

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pertaining to suspected workers' compensation or insurance fraud, by 1 persons authorized to investigate a report concerning the workers' 2 compensation and insurance fraud, shall have immunity from any civil 3 or criminal liability for such report or access. Any such person or 4 entity shall have the same immunity with respect to participation in 5 any judicial proceeding resulting from such reports. For purposes 6 of any civil or criminal proceeding, there shall be a presumption of 7 good faith of any person making a report, providing medical records 8 or providing information pertaining to a workers' compensation or 9 insurance fraud investigation by the Attorney General, and 10 participating in a judicial proceeding resulting from a subpoena or 11 12 a report.

13 SECTION 7. AMENDATORY Section 7, Chapter 208, O.S.L.
14 2013 (85A O.S. Supp. 2016, Section 7), is amended to read as
15 follows:

Section 7. A. An employer may not discriminate or retaliate against an employee when the employee has in good faith:

18 1. Filed a claim under this act title;

19 2. Retained a lawyer for representation regarding a claim under 20 this act title;

3. Instituted or caused to be instituted any proceeding under the provisions of this act title; or

4. Testified or is about to testify in any proceeding under the
 provisions of this act title.

B. The Commission shall have exclusive jurisdiction to hear and
 decide claims based on subsection A of this section.

C. If the Commission a district court of this state determines 3 that the defendant an employer violated subsection A a provision of 4 this section, the Commission may award the employee back pay up to a 5 maximum of One Hundred Thousand Dollars (\$100,000.00), such employer 6 shall be liable for reasonable compensatory damages suffered by an 7 employee as a result of the violation. The employee shall have the 8 burden of proof to show such violation by a preponderance of the 9 evidence. Interim earnings or amounts earnable with reasonable 10 diligence by the person discriminated against shall reduce the back 11 12 pay compensatory damages otherwise allowable. Exemplary or punitive damage awards made pursuant to this section shall not exceed One 13 Hundred Thousand Dollars (\$100,000.00). 14

15 D. C. The prevailing party shall be entitled to recover costs
 16 and a reasonable attorney fee.

E. D. No employer may discharge an employee during a period of temporary total disability for the sole reason of being absent from work or for the purpose of avoiding payment of temporary total disability benefits to the injured employee.

F. E. Notwithstanding any other provision of this section, an employer shall not be required to rehire or retain an employee who, after temporary total disability has been exhausted, is determined

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by a physician to be physically unable to perform his or her
 assigned duties, or whose position is no longer available.

G. F. This section shall not be construed as establishing an
exception to the employment_at_will doctrine.

5 H. <u>G.</u> The remedies provided for in this section shall be 6 exclusive with respect to any claim arising out of the conduct 7 described in subsection A of this section.

8 SECTION 8. AMENDATORY Section 8, Chapter 208, O.S.L. 9 2013 (85A O.S. Supp. 2016, Section 8), is amended to read as 10 follows:

Section 8. A. No agreement by an employee to waive his or her right to compensation shall be valid. No contract, regulation, or device shall operate to relieve the employer or carrier, in whole or in part, from any liability created by this act <u>title</u>, except as specifically provided in this act title.

B. Any officer of a corporation, sole proprietor, partner of a partnership, member of a limited liability company, member of a professional association, or self-employed employer who is not a subcontractor and who owns and operates his or her own business may, by agreement or contract, exclude himself or herself from coverage or waive his or her right to coverage or compensation under this act title.

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1 SECTION 9. AMENDATORY Section 9, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 9), is amended to read as
3 follows:

Section 9. No agreement by an employee to pay any portion of 4 the premium paid by his or her employer to a carrier or a benefit 5 fund or department maintained by the employer for the purpose of 6 providing compensation or medical services and supplies as required 7 by this act title shall be valid. Any employer who makes a 8 deduction for such purposes from the pay of any employee entitled to 9 the benefits of this act title shall be guilty of a misdemeanor. 10 SECTION 10. AMENDATORY Section 13, Chapter 208, O.S.L. 11 12 2013 (85A O.S. Supp. 2016, Section 13), is amended to read as follows: 13

Section 13. A. 1. A mental injury or illness is not a compensable injury unless caused by a physical injury to the employee, and shall not be considered an injury arising out of and in the course and scope of employment or compensable unless demonstrated by a preponderance of the evidence; provided, however, that this physical injury limitation shall not apply to any victim of a crime of violence.

2. No mental injury or illness under this section shall be
 compensable unless it is also diagnosed by a licensed psychiatrist
 or psychologist and unless the diagnosis of the condition meets the

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criteria established in the most current issue of the Diagnostic and
 Statistical Manual of Mental Disorders.

B. 1. Notwithstanding any other provision of this act <u>title</u>, where <u>if</u> a claim is for mental injury or illness, the employee shall be limited to twenty-six (26) weeks of disability benefits unless it is shown by clear and convincing evidence that benefits should continue for a set period of time, not to exceed a total of fiftytwo (52) weeks.

9 2. a. In cases where death results directly from the mental
10 injury or illness within a period of one (1) year,
11 compensation shall be paid the dependents as provided
12 in other death cases under this act <u>title</u>.

b. Death directly or indirectly related to the mental
injury or illness occurring one (1) year or more from
the incident resulting in the mental injury or illness
shall not be a compensable injury.

SECTION 11. AMENDATORY Section 14, Chapter 208, O.S.L. 2013 (85A O.S. Supp. 2016, Section 14), is amended to read as follows:

Section 14. A. A cardiovascular, coronary, pulmonary,
respiratory, or cerebrovascular accident or myocardial infarction
causing injury, illness, or death is a compensable injury only if,
in relation to other factors contributing to the physical harm, the
course and scope of employment was the major cause.

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1	B. 1. An injury or disease included in subsection A of this
2	section shall not be deemed to be a compensable injury unless it is
3	shown that the exertion of the work necessary to precipitate the
4	disability or death was extraordinary and unusual in comparison to
5	the employee's usual work in the course of the employee's regular
6	employment, or that some unusual and unpredicted incident occurred
7	which is found to have been the major cause of the physical harm.
8	2. Physical or mental stress shall not be considered in
9	determining whether the employee or claimant has met his or her
10	burden of proof:
11	1. It occurred at a definite time and place;
12	2. It was caused by a specific event occurring in the course
13	and scope of employment;
14	3. The preponderance of the evidence indicates that the
15	employee's work rather than the natural progression of a preexisting
16	condition was the main contributing factor; and
17	4. It was not triggered by physical or mental stress.
18	SECTION 12. AMENDATORY Section 16, Chapter 208, O.S.L.
19	2013 (85A O.S. Supp. 2016, Section 16), is amended to read as
20	follows:
21	Section 16. A. The Official Disability Guidelines - Treatment
22	in Workers Compensation (ODC), published by the Work Loss Data
23	Institute, is to be recognized as the primary shall be the mandatory
24	standard of reference, at the time of treatment, in determining the

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frequency and extent of services presumed to be medically necessary 1 and appropriate for compensable injuries under this act, or in 2 resolving such matters in the event a dispute arises. The medical 3 treatment quidelines are not requirements, nor are they mandates or 4 standards; they provide advice by identifying the care most likely 5 to benefit injured workers. The guidelines shall be evidence-based, 6 scientifically valid, outcome-focused, and designed to reduce 7 excessive or inappropriate medical care while safeguarding necessary 8 medical care. 9

Physicians providing care to an employee shall prescribe for Β. 10 the employee any necessary prescription drugs and over-the-counter 11 12 alternatives to prescription medicine as clinically appropriate and as recommended under the Official Disability Guidelines. 13 Prescriptions and nonprescription drugs that are not preferred, 14 exceed or are not addressed by ODG the Official Disability 15 Guidelines require preauthorization and the preauthorization request 16 shall include the prescribing doctor's drug regimen plan of care and 17 the anticipated dosage or range of dosages. 18

19 SECTION 13. AMENDATORY Section 17, Chapter 208, O.S.L.
20 2013 (85A O.S. Supp. 2016, Section 17), is amended to read as
21 follows:

22 Section 17. A. There is hereby created a Physician Advisory 23 Committee comprised of nine (9) members to be appointed as follows:

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1 1. The Governor shall appoint three members, one of whom shall 2 be licensed in this state as a doctor of medicine and surgery, one 3 of whom shall be engaged in the practice of family medicine in a 4 rural community of the state, and one of whom shall be an 5 osteopathic physician;

2. The President Pro Tempore of the Senate shall appoint three members, one of whom shall be licensed in this state as a doctor of medicine and orthopedic surgery, one of whom shall be licensed in this state either as a doctor of medicine or a doctor of osteopathy and a neurosurgeon, and one of whom shall be licensed in this state as a podiatric physician; and

3. The Speaker of the House of Representatives shall appoint three members, one of whom shall be licensed in this state as an osteopathic physician, one of whom shall be licensed in this state either as a doctor of medicine or a doctor of osteopathy and shall be engaged in the practice of occupational medicine, and one of whom shall be licensed in this state as a chiropractic physician.

Any member serving on the effective date of this section shall serve the remainder of his or her term. Thereafter, each position will be filled by the appointing official for a term of three (3) years. Members shall be subject to reappointment, with any new appointee to serve out the remainder of the unexpired term of the Committee member so replaced.

24 B. The Committee shall:

1. Assist and advise the Workers' Compensation Commission 1 regarding utilization review as it relates to the medical practice 2 and treatment of work-related injuries. Such utilization review 3 shall include a review of reasonable and necessary medical 4 treatment; abusive practices; needless treatments, testing, or 5 procedures; or a pattern of billing in excess of or in violation of 6 the Schedule of Medical Fees. The Physician Advisory Committee 7 shall review and make findings and recommendations to the Commission 8 with respect to charges of inappropriate or unnecessary treatment or 9 procedures, abusive practices, or excessive billing disclosed 10 through utilization review; 11

12 2. Assist the Commission in reviewing medical practices of 13 health care providers, including evaluations of permanent disability 14 provided by health care providers. The Committee shall review and 15 make findings and recommendations to the Commission with respect to 16 charges of abusive practices by health care providers providing 17 medical services or evaluations of permanent partial disability 18 through the workers' compensation system;

After public hearing, review and make recommendations for
 acceptable deviations from the <u>Sixth Edition of the</u> American Medical
 Association's "Guides to the Evaluation of Permanent Impairment";

4. After public hearing, adopt Physician Advisory Committee
Guidelines (PACG) and protocols for only medical treatment not

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addressed by the latest edition of the Official Disability
 Guidelines;

5. After public hearing, adopt Physician Advisory Committee
Guidelines for the prescription and dispensing of any controlled
substance included in Schedule II of the Uniform Controlled
Dangerous Substances Act if not addressed by the current edition of
the Official Disability Guidelines;

6. Review utilization on cases or of providers when requested by any employer, injured employee or insurer. The Committee may issue a public or private censure to any provider for utilization which is excessive or inadequate, or recommend the Commission order treatment within the treatment guidelines;

7. Provide general recommendations to the Commission on theissues of injury causation and apportionment;

8. Conduct educational seminars for the Commission, employers,
 employees, and other interested parties;

9. Assist the Commission in accessing medical information from
 scientific literature; and

Report its progress annually to the Governor, the President
 Pro Tempore of the Senate, and the Speaker of the House of
 Representatives.

C. The Commission shall recognize the latest edition of the
 Official Disability Guidelines as the primary standard of reference,
 at the time of treatment, in determining the frequency and extent of

services presumed to be medically necessary and appropriate for compensable injuries under this act title, or in resolving such matters in the event a dispute arises.

D. Members of the Physician Advisory Committee shall receive no compensation for serving on the Committee but shall be reimbursed by the Commission for their necessary travel expenses incurred in the performance of their duties in accordance with the State Travel Reimbursement Act.

9 E. Meetings of the Physician Advisory Committee shall be called 10 by the Commission but held at least quarterly. The presence of a 11 majority of the members shall constitute a quorum. No action shall 12 be taken by the Physician Advisory Committee without the affirmative 13 vote of at least a majority of the members.

F. The Commission shall provide office supplies and personnel of the Commission to assist the Committee in the performance of its duties.

G. Upon written request, the Insurance Commissioner, CompSource Oklahoma, and every approved self-insured employer in Oklahoma shall provide the Committee with data necessary to the performance of its duties.

H. Any health care provider acting in good faith and within the scope of the provider's duties as a member of the Physician Advisory Committee shall be immune from civil liability for making any report or other information available to the judges of the Commission or to

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the Commission or for assisting in the origination, investigation,
 or preparation of the report or other information so provided.

3 SECTION 14. AMENDATORY Section 18, Chapter 208, O.S.L.
4 2013 (85A O.S. Supp. 2016, Section 18), is amended to read as
5 follows:

Section 18. A. No hospital, physician, or other health care 6 provider shall bill or attempt to collect any fee or any portion of 7 a fee for services rendered to an employee due to a work-related 8 injury or report to any credit-reporting agency any failure of the 9 employee to make the payment, when a claim for compensation has been 10 filed under this act title and the hospital, physician, or health 11 12 care provider has received actual notice given in writing by the employee or the employee's representative. Actual notice shall be 13 deemed received by the hospital, physician, or health care provider 14 five (5) days after mailing by certified mail or sending by 15 facsimile, electronic mail or other electronic means with 16 confirmation of receipt by the employee or his or her representative 17 to the hospital, physician, or health care provider. 18 The notice shall include: Β. 19 1. The name of the employer; 2.0 2. The name of the insurer, if known; 21 The name of the employee receiving the services; 3. 22 The general nature of the injury, if known; and 4. 23 Where a claim has been filed, the claim number, if known. 5. 24

C. When an injury or bill is found to be noncompensable under 1 this act, the hospital, physician, or other health care provider 2 shall be entitled to pursue the employee for any unpaid portion of 3 the fee or other charges for authorized services provided to the 4 employee. Any applicable statute of limitations for an action for 5 the fees or other charges shall be tolled from the time notice is 6 given to the hospital, physician, or other health care provider 7 until a determination of noncompensability in regard to the injury 8 which is the basis of the services is made, or if there is an 9 appeal, until a final determination of noncompensability is rendered 10 and all appeal deadlines have passed. 11

D. This section shall not avoid void, modify, or amend any other section or subsection of this act title.

E. An order by the Commission under this section shall stay allproceedings for collection.

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 SECTION 15.
 AMENDATORY
 Section 19, Chapter 208, O.S.L.

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 2013, as amended by Section 4, H.J.R. No. 1096, p. 1745, O.S.L. 2014

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 (85A O.S. Supp. 2016, Section 19), is amended to read as follows:

Section 19. A. There is hereby created the <u>The</u> Oklahoma Workers' Compensation Commission, <u>is</u> an executive agency of the State of Oklahoma, which shall have <u>has</u> the exclusive responsibility and duty to carry out the provisions of this act <u>title</u>, except as otherwise provided.

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The Commission shall consist of three (3) full-time 1 В. commissioners, each two of whom must have been involved in the 2 workers' compensation field for at least three (3) years, appointed 3 by the Governor: one of whom is chosen from a slate of three 4 selected by the Speaker of the House of Representatives, with all 5 three confirmed by the Senate. The term of each appointee shall be 6 six (6) years to administer the provisions of this act title. The 7 Governor may request a subsequent slate of nominees from the Speaker 8 of the House of Representatives if a suitable nominee is not found. 9 Any or all of the commissioners may be reappointed for additional 10 six-year terms upon reconfirmation by the Senate. However, the 11 12 initial commissioners shall serve staggered terms of two (2), four (4), and six (6) years, respectively, as determined by the Governor. 13 If the Legislature is not in session at the time of appointment, the 14 appointment shall be subject to confirmation by the Senate upon 15 convening of the next regular session of the Legislature. 16 Membership on the Commission shall be a full-time position and no 17 commissioner shall have any other employment, unless authorized or 18 excused by law. Each commissioner shall receive a salary equal to 19 that paid to a district judge of this state; provided however, the 20 commissioners shall not receive any increase in salary as a result 21 of the provisions of Section 1 of this resolution House Joint 22 Resolution No. 1096 of the 2nd Session of the 54th Oklahoma 23

24 Legislature.

C. The Commission shall have the authority to adopt reasonable 1 rules within its respective areas of responsibility including the 2 rules of procedure for administrative hearings, after notice and 3 public hearing, for effecting the purposes of this act title, in 4 accordance with the Oklahoma Administrative Procedures Act. All 5 rules, upon adoption, shall be published and be made available to 6 the public and, if not inconsistent with the law, shall be binding 7 in the administration of this act title. 8

9 D. The principal office of the Commission shall be situated in 10 the City of Oklahoma City in quarters assigned by the Office of 11 Management and Enterprise Services. The Commission shall maintain 12 and keep open, during reasonable business hours, the office in 13 Oklahoma City, for the transaction of business, at which office its 14 official records and papers shall be kept. The Commission or any 15 commissioner may hold hearings in any city of this state.

E. The Governor shall appoint one of the commissioners to be chair of the Commission. In addition to other duties, the chair of the Commission shall have the following powers and duties:

To organize, direct and develop the administrative work of
 the administrative law judges, including but not limited to
 docketing, clerical, technical and financial work and establishment
 of hours of operation;

23 2. To employ administrative staff for the Commission, within
24 budgetary limitation; and

3. Such other duties and responsibilities authorized by law or
 as the Commission may prescribe.

F. All appeals or disputes arising from actions of the 3 Commission shall be governed by provisions of this act title and the 4 Commission shall not be subject to the provisions of the Oklahoma 5 Administrative Procedures Act, except as provided in this act title. 6 G. When any commissioner of the Commission is disqualified for 7 any reason to hear and participate in the determination of any 8 matter pending before the Commission, the Governor shall appoint a 9 qualified person to hear and participate in the decision on the 10 particular matter. The special commissioner so appointed shall have 11 12 all authority and responsibility with respect to the particular matter before the Commission as if the person were a regular 13 commissioner of the Commission but shall have no authority or 14 responsibility with respect to any other matter before the 15 Commission. A person appointed as a special commissioner of the 16 Commission under the provisions of this subsection shall be entitled 17 to receive a per diem equal to the annual salary of the 18 commissioners prorated for the number of days he or she serves in 19 the capacity of a special commissioner of the Commission. 20 Furthermore, when a vacancy on the Commission occurs or is certain 21 to occur, the position shall be filled pursuant to the provisions of 22 this section The power of the Commission to decide issues of fact 23 does not include the power to determine the constitutionality of 24

provisions of this title or the constitutionality of application of 1 the provisions of this title. 2

SECTION 16. AMENDATORY Section 20, Chapter 208, O.S.L. 3 2013 (85A O.S. Supp. 2016, Section 20), is amended to read as 4 follows: 5

Section 20. A. In addition to its other duties and powers, the 6 Workers' Compensation Commission is given and granted full power and 7 authority: 8

1. To appoint administrative law judges to hear all claims for 9 compensation, including claims based on injuries which occurred 10 outside this state for which compensation is payable under this act 11 12 title. An administrative law judge shall have been licensed to practice law in this state for a period of not less than three (3) 13 years and shall have not less than three (3) years of workers' 14 compensation experience prior to appointment;

2. To remand any case to an administrative law judge for the 16

purpose of taking additional evidence; 17

To assess penalties; 3. 18

15

To prescribe rules governing the representation of 4. 19 employees, employers, and carriers in respect to claims before the 20 Commission; 21

To make available all records in connection with all cases 5. 22 of personal injury to the Oklahoma Department of Labor. The 23 Commissioner of Labor may propose rules for the prevention of 24

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injuries and transmit the rules to the Commission. The Commission may recommend proposed rules for prevention of injuries to the Commissioner of Labor; and

6. To have and exercise all other powers and duties conferred
or imposed by this act title.

B. 1. In addition to the other powers and duties granted to
the Commission in this section and otherwise provided by law, the
Commission is authorized to establish and impose reasonable
administrative fees to recover the cost of preparation of various
informative materials distributed by the Commission.

2. The administrative fees shall be established by regulation
 of the Commission.

3. Funds derived from administrative fees shall be deposited
into the Workers' Compensation Fund to be used to defray expenses
incurred in preparation and distribution of materials.

16 SECTION 17. AMENDATORY Section 21, Chapter 208, O.S.L.
17 2013 (85A O.S. Supp. 2016, Section 21), is amended to read as
18 follows:

Section 21. A. Commissioners shall be considered officers and shall take the oath prescribed by the Oklahoma Constitution and the laws of this state.

B. 1. A majority of the Workers' Compensation Commission shall constitute a quorum for the transaction of business, and vacancies shall not impair the right of the remaining commissioners to

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exercise all the powers of the full Commission, so long as a
 majority remains.

2. Any investigation, inquiry, or hearing which the Commission is authorized to hold or undertake may be held or undertaken by or before any one commissioner of the Commission, or appointee acting for him or her, under authorization of the Commission.

C. The Commission shall have a seal for authentication of its judgments, awards, and proceedings, on which shall be inscribed the words: "Workers' Compensation Commission, State of Oklahoma".

D. Except with respect to the Commission's authority to hear appeals of decisions from administrative law judges <u>other than as</u> <u>provided pursuant to subsection B of Section 78 of this title</u>, any reference in this act <u>title</u> to the Commission's ability to hear and decide the rights of interested parties under this act <u>title</u> shall not prevent it from delegating that responsibility to an administrative law judge.

SECTION 18. AMENDATORY Section 22, Chapter 208, O.S.L. 2013 (85A O.S. Supp. 2016, Section 22), is amended to read as follows:

20 Section 22. A. 1. For the purpose of administering the 21 provisions of this act <u>title</u>, the Workers' Compensation Commission 22 is authorized:

a. to make rules necessary for the administration and
 operation of the Commission,

- b. to appoint and fix the compensation of temporary
 technical assistants, medical and legal advisers,
 clerical assistants and other officers and employees,
 and
- c. to make such expenditures, including those for
 personal service, rent, books, periodicals, office
 equipment, and supplies, and for printing and binding
 as may be necessary.
- 9 2. a. Before the adoption, prescription, amendment,
 10 modification, or repeal of any rule, regulation, or
 11 form, the Commission shall give at least thirty (30)
 12 days' notice of its intended action.
- b. The notice shall include a statement of the terms or substance of the intended action or description of the subjects and issues involved, and the time, place, and manner in which interested persons may present their views thereon.
- 18 c. The notice shall be mailed to any person specified by 19 law or who shall have requested advance notice of 20 rule-making proceedings.

21 3. The Commission shall afford all interested persons a 22 reasonable opportunity to submit written data, views, or arguments, 23 and, if the Commission in its discretion shall so direct, oral

24 testimony or argument.

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4. Each rule, regulation, or form adopted by the Commission 1 shall be effective twenty (20) days after adoption unless a later 2 date is specified by law or in the rule itself. 3 5. All expenditures of the Commission in the administration of 4 this act shall be allowed and paid from the Workers' Compensation 5 Fund on the presentation of itemized vouchers approved by the The 6 Commission shall comply with the provisions of the Administrative 7 Procedures Act applicable to the filing and publication requirements 8 for rules. 9 1. The Commission may appoint as many persons as may be в. 10 necessary to be administrative law judges and in addition may 11 12 appoint such examiners, investigators, medical examiners, clerks, and other employees as it deems necessary to effectuate the 13 provisions of this act title. 14 2. Employees appointed under this subsection shall receive an 15 annual salary to be fixed by the Commission. 16 C. Additionally, the Commission shall have the following powers 17 and duties: 18 To hear and approve compromise settlements; 1. 19 To review and approve own-risk applications and group self-2. 20 insurance association applications; 21 3. To monitor own-risk, self-insurer and group self-insurance 22 programs, in accordance with the rules of the Commission; 23 24

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4. To contract with an appropriate state governmental entity, 1 insurance carrier or approved service organization to process, 2 investigate and pay valid claims against an impaired self-insurer 3 which fails, due to insolvency or otherwise, to pay its workers' 4 compensation obligations, charges for which shall be paid from the 5 proceeds of security posted with the Commission as provided in 6 Section 38 of this act; 7 5. To establish a toll-free telephone number in order to 8 provide information and answer questions about the Commission; 9 6. 5. To hear and determine claims concerning disputed medical 10 bills; 11 12 7. 6. To promulgate necessary rules for administering this act title and develop uniform forms and procedures for use by 13 administrative law judges. Such rules shall be reviewable by the 14 Legislature; 15 8. 7. To invest funds on behalf of the Multiple Injury Trust 16 Fund; 17 9. 8. To appoint a Commission Mediator to conduct informal 18 sessions to attempt to resolve assigned disputes; and 19 10. 9. Such other duties and responsibilities authorized by 20 law. 21 D. It shall be the duty of an administrative law judge, under 22 the rules adopted by the Commission, to hear and determine claims 23 for compensation and to conduct hearings and investigations and to 24

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1 make such judgments, decisions, and determinations as may be 2 required by any rule or judgment of the Commission.

3 SECTION 19. AMENDATORY Section 24, Chapter 208, O.S.L.
4 2013 (85A O.S. Supp. 2016, Section 24), is amended to read as
5 follows:

6 Section 24. On or before the first day of the regular session 7 of the Legislature, the <u>Workers' Compensation</u> Commission shall 8 submit to the Governor and the Legislature a report of the 9 administration of this act <u>title</u> for the preceding biennial period, 10 together with such recommendations as the Commission may deem 11 advisable.

12 SECTION 20. AMENDATORY Section 25, Chapter 208, O.S.L.
13 2013 (85A O.S. Supp. 2016, Section 25), is amended to read as
14 follows:

Section 25. The Workers' Compensation Commission shall publish 15 annually, on an aggregate basis, information pertaining to the 16 distribution of workers' compensation insurance premiums, losses, 17 expenses, and net income to be compiled from reports required to be 18 filed with the Insurance Commissioner or any similar information 19 required to be filed by the Insurance Commissioner regarding 20 workers' compensation insurance. The Commission shall also publish 21 in the annual report information regarding aggregate workers' 22 compensation benefit distribution to claimants employees, medical 23 providers, and attorneys, if available. 24

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1 SECTION 21. AMENDATORY Section 27, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 27), is amended to read as
3 follows:

Section 27. A. The Workers' Compensation Commission shall be 4 vested with jurisdiction over all claims filed pursuant to the 5 Administrative Workers' Compensation Act. All claims so filed shall 6 be heard by the administrative law judge sitting without a jury. 7 The Commission shall have full power and authority to determine all 8 questions in relation to claims for compensation under the 9 provisions of the Administrative Workers' Compensation Act. The 10 Commission, upon application of either party, shall order a hearing. 11 12 Upon a hearing, either party may present evidence and be represented by counsel. Except as provided in this act title, the decision of 13 the administrative law judge shall be final as to all questions of 14 fact and law. The decision of the administrative law judge shall be 15 issued within thirty (30) days following the submission of the case 16 by the parties. The power and jurisdiction of the Commission over 17 each case shall be continuing and it may, from time to time, make 18 such modifications or changes with respect to former findings or 19 orders relating thereto if, in its opinion, it may be justified. 20

B. In addition to the duties set forth in this section, the administrative law judges shall have the following duties and powers:

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To hear and determine claims for compensation, to conduct
 hearings and investigations, and to make such judgments, decisions,
 and determinations as may be required by any rule or judgment of the
 Commission;

5 2. To hear and determine challenges to an agreement to
6 arbitrate under the Workers' Compensation Arbitration Act;

3. To assume duties within the Workers' Compensation Court of
8 Existing Claims as assigned by the Commission; and

9 4. To have and exercise all other powers and duties conferred 10 or imposed by the Commission or this act <u>title</u>.

11 SECTION 22. AMENDATORY Section 29, Chapter 208, O.S.L.
12 2013 (85A O.S. Supp. 2016, Section 29), is amended to read as
13 follows:

Section 29. A. Each carrier writing compensation insurance in this state shall pay to the <u>Workers' Compensation</u> Commission at the time of securing <u>or renewing</u> a license to transact business in this state <u>an annual fee of</u> One Thousand Dollars (\$1,000.00) for the privilege of qualifying with the Commission for the writing of compensation insurance.

B. Each self-insurer shall pay to the Commission <u>an annual fee</u> <u>of</u> One Thousand Dollars (\$1,000.00) at the time it is approved to self-insure the obligations under this act <u>title</u>.

C. The Commission may assess third-party administrators an annual fee of One Thousand Dollars (\$1,000.00).

D. Fees required pursuant to this section shall be deposited into the Workers' Compensation Fund.

3 SECTION 23. AMENDATORY Section 30, Chapter 208, O.S.L.
4 2013 (85A O.S. Supp. 2016, Section 30), is amended to read as
5 follows:

6 Section 30. A. For the purposes of Sections 31 through 35 of 7 this act <u>title</u>, the term "physically impaired person" means a person 8 who, as a result of accident, disease, birth, military action, or 9 any other cause, has suffered:

10 1. The loss of the sight of one eye;

11 2. The loss by amputation of the whole or a part of a member of 12 the body;

3. The loss of use or partial loss of use of a member such as is obvious and apparent from observation or examination by a person who is not skilled in the medical profession; or

4. Any previous adjudications of disability adjudged and 16 determined by the Workers' Compensation Court or the Workers' 17 Compensation Commission or any disability resulting from separately 18 adjudicated injuries and adjudicated occupational diseases even 19 though arising at the same time. Provided, that any adjudication of 20 preexisting disability to a part of the body shall not be combinable 21 for purposes of the Multiple Injury Trust Fund unless that part of 22 the body was deemed to have been injured in the claim being 23 adjudicated. 24

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B. This section shall apply to all adjudications of Multiple
Injury Trust Fund claims heard by the Commission on or after the
effective date of this act February 1, 2014.

SECTION 24. AMENDATORY Section 31, Chapter 208, O.S.L.
2013, as amended by Section 3, Chapter 344, O.S.L. 2015 (85A O.S.
Supp. 2016, Section 31), is amended to read as follows:

7 Section 31. A. The Multiple Injury Trust Fund shall be derived
8 from the following additional sources:

1. As soon as practicable after January 1 of each year, the 9 commissioners of the Workers' Compensation Commission shall 10 establish an assessment rate applicable to each mutual or 11 12 interinsurance association, stock company, CompSource Oklahoma, or other insurance carrier writing workers' compensation insurance in 13 this state, each employer carrying its own risk, and each group 14 self-insurance association, for amounts for purposes of computing 15 the assessment authorized by this section necessary to pay the 16 annual obligations of the Multiple Injury Trust Fund determined on 17 or before December 31 of each year by the MITF Director, provided 18 for in subsection P of this section, to be outstanding for the next 19 calendar year, and to pay the allocations provided for in subsection 20 I of this section. The rate shall be equal for all parties required 21 to pay the assessment. If CompSource begins operating as a mutual 22 insurance company, the Board of Directors for CompSource Mutual 23 Insurance Company shall have the power to disapprove the rate 24

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established by the MITF Director until the Multiple Injury Trust 1 Fund repays in full the amount due on any loan from CompSource 2 Mutual Insurance Company or its predecessor CompSource Oklahoma. Ιf 3 the MITF Director and CompSource have not agreed on the assessment 4 rate within thirty (30) days, the Commission shall set an assessment 5 rate sufficient to cover all foreseeable obligations of the Multiple 6 Injury Trust Fund, including interest and principal owed by the Fund 7 on any loan. The rate in effect on the effective date of this act 8 February 1, 2014, shall remain effective through June 30, 2014; 9

2. The Oklahoma Tax Commission shall assess and collect from any uninsured employer a temporary assessment at the rate of five percent (5%) of the total compensation for permanent total disability awards, permanent partial disability awards, and death benefits paid out during each quarter of the calendar year by the employers;

3. The assessments shall be paid to the Tax Commission. 16 Insurance carriers, self-insurers, group self-insurance associations 17 and CompSource Oklahoma shall pay the assessment in four equal 18 installments not later than the fifteenth day of the month following 19 the close of each quarter of the calendar year of the assessment. 20 Assessments shall be determined based upon gross direct written 21 premiums, normal premiums or actual paid losses of the paying party, 22 as applicable, during the calendar guarter for which the assessment 23 is due. Uninsured employers shall pay the assessment not later than 24

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the fifteenth day of the month following the close of each quarter of the calendar year of the assessment. For purposes of this section, "uninsured employer" means an employer required by law to carry workers' compensation insurance but who has failed or neglected to do so.

The assessment authorized in this section shall be a. 6 determined using a rate equal to the proportion that 7 the sum of the outstanding obligations of the Multiple 8 Injury Trust Fund as determined pursuant to paragraph 9 1 of this subsection and the allocations provided for 10 in subsection I of this section bear to the combined 11 12 gross direct written premiums of all such insurers; all actual paid losses of all individual self-13 insureds; and the normal premium of all group self-14 insurance associations, for the year period from 15 January 1 to December 31 preceding the assessment. 16 b. For purposes of this subsection: 17 "actual paid losses" means all medical and (1)18

indemnity payments, including temporary disability, permanent disability, and death benefits, and excluding loss adjustment expenses and reserves, and

(2) "normal premium" means a standard premium less
 any discounts;

4. By April 15 of each year, the Insurance Commissioner, the 1 MITF Director and each individual and group self-insured shall 2 provide the Commission with such information as the Commission may 3 determine is necessary to effectuate the purposes of this section; 4 5. Each mutual or interinsurance association, stock company, 5 CompSource Oklahoma, or other insurance carrier writing workers' 6 compensation insurance in this state, and each employer carrying its 7 own risk, including each group self-insurance association, shall be 8 notified by the Commission in writing of the rate for the assessment 9 on or before May 1 of each year in which a rate is determined. The 10 rate determined by the Commission shall be in effect for four 11 12 calendar quarters beginning July 1 following determination by the Commission; and 13 6. No mutual or interinsurance association, stock 14 a.

company, CompSource Oklahoma, or other insurance
carrier writing workers' compensation insurance in
this state may be assessed in any year an amount
greater than six percent (6%) of the gross direct
written premiums of that insurer.

b. No employer carrying its own risk may be assessed in
 any year an amount greater than six percent (6%) of
 the total actual paid losses of that individual self insured.

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- c. No group self-insurance association may be assessed in
 any year an amount greater than six percent (6%) of
 the normal premium of that group self-insurance
 association.
- 5d. If the maximum assessment does not provide in any one6year an amount sufficient to make all necessary7payments for obligations of the Multiple Injury Trust8Fund and for the allocations provided for in9subsection I of this section, the unpaid portion shall10be paid as soon thereafter as funds become available.

B. The Multiple Injury Trust Fund is hereby authorized to receive and expend monies appropriated by the Legislature.

C. It shall be the duty of the Tax Commission to collect the payments provided for in this act. The Tax Commission is hereby authorized to bring an action for the recovery of any delinquent or unpaid payments required in this section.

Any mutual or interinsurance association, stock company, or D. 17 other insurance company, which is subject to regulation by the 18 Insurance Commissioner, or CompSource Oklahoma, failing to make 19 payments required in this act title promptly and correctly, and 20 failing to report payment of the same to the Insurance Commission 21 Commissioner within ten (10) days of payment shall be subject to 22 administrative penalties as allowed by law, including but not 23 limited to a fine in the amount of Five Hundred Dollars (\$500.00) or 24

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an amount equal to one percent (1%) of the unpaid amount, whichever
 is greater, to be paid to the Insurance Commissioner.

Any employer carrying its own risk, or group self-insurance Ε. 3 association failing to make payments required in this act title 4 promptly and correctly, and failing to report payment of the same to 5 the Workers' Compensation Commission within ten (10) days of payment 6 shall be subject to administrative penalties as allowed by law, 7 including but not limited to a fine in the amount of Five Hundred 8 Dollars (\$500.00) or an amount equal to one percent (1%) of the 9 unpaid amount, whichever is greater, to be paid to the Commission. 10

F. 1. On or before the first day of April of each year, the 11 12 State Treasurer shall advise the Workers' Compensation Commission, the MITF Director and the Tax Commission of the amount of money held 13 as of March 1 of that year by the State Treasurer to the credit of 14 the Multiple Injury Trust Fund. On or before the first day of 15 November of each year, the State Treasurer shall advise the 16 Commission, the MITF Director and the Tax Commission of the amount 17 of money held as of October 1 of that year by the State Treasurer to 18 the credit of the Multiple Injury Trust Fund. 19

20 2. Until such time as the Multiple Injury Trust Fund fully
21 satisfies any loan obligation payable to CompSource Mutual Insurance
22 Company or its predecessor CompSource Oklahoma, the State Treasurer
23 shall:

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advise the Chief Executive Officer of CompSource on or 1 a. before the first day of April of the money held as of 2 March 1 of that year by the State Treasurer to the 3 credit of the Multiple Injury Trust Fund, and 4 b. advise the Chief Executive Officer of CompSource on or 5 before the first day of November of the money held as 6 of October 1 of that year by the State Treasurer to 7 the credit of the Multiple Injury Trust Fund. 8

G. Eighty percent (80%) of all sums held by the State Treasurer 9 to the credit of the Multiple Injury Trust Fund may by order of the 10 MITF Director be invested in or loaned on the pledge of any of the 11 12 securities in which a state bank may invest the monies deposited therein by the State Treasurer; or may be deposited in state or 13 national banks or trust companies upon insured time deposit bearing 14 interest at a rate no less than currently being paid upon insured 15 savings accounts in the institutions. As used in this section, 16 "insured" means insurance as provided by an agency of the federal 17 government. All such securities or evidence of indebtedness shall 18 be placed in the hands of the State Treasurer, who shall be the 19 custodian thereof, who shall collect the principal and interest when 20 due, and pay the same into the Multiple Injury Trust Fund. The 21 State Treasurer shall pay by vouchers drawn on the Multiple Injury 22 Trust Fund for the making of such investments, when signed by the 23 MITF Director, upon delivery of such securities or evidence of 24

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indebtedness to the State Treasurer. The MITF Director may sell any
 of such securities, the proceeds thereof to be paid over to the
 State Treasurer for the Multiple Injury Trust Fund.

H. The refund provisions of Sections 227 through 229 of Title
68 of the Oklahoma Statutes shall be applicable to any payments made
to the Multiple Injury Trust Fund. Refunds shall be paid from and
out of the Multiple Injury Trust Fund.

8 I. The Tax Commission shall pay, monthly, to the State 9 Treasurer to the credit of the Multiple Injury Trust Fund all monies 10 collected pursuant to the provisions of this section. The State 11 Treasurer shall pay out of the Multiple Injury Trust Fund only upon 12 the order and direction of the Workers' Compensation Commission 13 acting under the provisions hereof.

J. The Commission shall promulgate rules as the Commission deems necessary to effectuate the provisions of this section.

K. The Insurance Commissioner shall promulgate rules relating
 to insurers as defined in Title 36 of the Oklahoma Statutes, as the
 Insurance Commissioner deems necessary to effectuate the provisions
 of this section.

L. The MITF Director shall have authority to fulfill all
 payment obligations of the Multiple Injury Trust Fund.

M. The Multiple Injury Trust Fund may enter into an agreement with any reinsurer licensed to sell reinsurance by the Insurance Commissioner pursuant to a competitive process administered by the

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Director of Central Purchasing in the Office of Management and
 Enterprise Services.

N. Any dividend, rebate, or other distribution, payable by CompSource Oklahoma or any other workers' compensation insurance carrier, to a state agency policyholder shall be paid to the State Treasurer, and shall be credited as follows:

In the event of failure of the Multiple Injury Trust Fund to
 meet all lawful obligations, the monies shall be credited to the
 Multiple Injury Trust Fund and shall be used by the Multiple Injury
 Trust Fund to meet all lawful obligations of the Multiple Injury
 Trust Fund; and

Otherwise, all future dividends made by CompSource Oklahoma
 or any workers' compensation insurance carrier, on behalf of state
 agencies, shall be deposited to the credit of the General Revenue
 Fund of the State Treasury.

The Workers' Compensation Commission shall be charged with Ο. 16 the administration and protection of the Multiple Injury Trust Fund. 17 The person serving as the Administrator of the Multiple Ρ. 18 Injury Trust Fund on the date of passage and approval of this act 19 May 5, 2013, shall serve as the initial MITF Director, provided such 20 person is serving as the Administrator of the Multiple Injury Trust 21 Fund on the effective date of this act February 1, 2014. The MITF 22 Director shall be appointed by and serve at the pleasure of the 23 Governor. 24

Q. Any party interested shall have a right to bring a proceeding in the Supreme Court to review an award of the Commission affecting such Multiple Injury Trust Fund, in the same manner as is provided by law with reference to other awards by the Commission.

R. The State Treasurer shall allocate to the Commission out of
the Multiple Injury Trust Fund sufficient funds for administration
expenses thereof in amounts to be fixed and approved by the
Administrator for the Multiple Injury Trust Fund, unless rejected by
the Commission.

10 SECTION 25. AMENDATORY Section 32, Chapter 208, O.S.L.
11 2013 (85A O.S. Supp. 2016, Section 32), is amended to read as
12 follows:

Section 32. A. For actions in which the subsequent injury 13 occurred on or after November 1, 2005, if such combined disabilities 14 constitute permanent total disability, as defined provided for in 15 subsection D of Section $\frac{2}{45}$ of this $\frac{1}{2}$ title, the employee shall 16 receive full compensation as provided by law for the disability 17 resulting directly and specifically from the subsequent injury. In 18 addition, the employee shall receive compensation for permanent 19 total disability if the combination of injuries renders the employee 20 permanently and totally disabled. The employer shall be liable only 21 for the degree of percent of disability which would have resulted 22 from the subsequent injury if there had been no preexisting 23 impairment disability. The compensation rate for permanent total 24

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disability awards from the Multiple Injury Trust Fund shall be the compensation rate for permanent partial disability paid by the employer in the last combinable compensable injury.

B. Permanent total disability awards from the Multiple Injury
Trust Fund shall be payable in periodic installments for a period of
fifteen (15) years or until the employee reaches sixty-five (65)
years of age, whichever period is longer.

8 C. Permanent total disability awards from the Multiple Injury 9 Trust Fund shall accrue from the file date of the order of the 10 Workers' Compensation Commission finding the <u>claimant employee</u> to be 11 permanently and totally disabled.

D. Awards under this section shall abate upon the death, from any cause, of the employee.

E. Reopening any prior claim other than the last claim against the employer shall not give a claimant <u>an employee</u> the right to additional Multiple Injury Trust Fund benefits.

F. The Multiple Injury Trust Fund shall have authority to compromise a claim for less than the indicated amount of permanent total disability. An order entered after the effective date of this act February 1, 2014, may be paid in periodic installments beginning on the date of the award, or may be commuted to a lump-sum payment or payments, by agreement of the claimant employee and the Multiple Injury Trust Fund.

G. An attorney for a claimant <u>an employee</u> against the Multiple Injury Trust Fund shall be entitled to a fee equal to twenty percent (20%) of permanent disability benefits awarded. For awards entered after the effective date of this act <u>February 1, 2014</u>, the attorney fee shall be paid in periodic installments by the attorney receiving every fifth check. All benefits awarded to the attorney shall be vested.

8 H. In the event <u>a claimant an employee</u> receiving benefits for 9 permanent and total disability from the Multiple Injury Trust Fund 10 dies as a result of his or her injury before the award has been 11 fully paid, payments shall continue to the surviving spouse for five 12 (5) years or upon remarriage, whichever occurs first. In no event 13 shall payments to the surviving spouse extend beyond the period of 14 benefits awarded to the claimant employee.

15 SECTION 26. AMENDATORY Section 33, Chapter 208, O.S.L. 16 2013 (85A O.S. Supp. 2016, Section 33), is amended to read as 17 follows:

Section 33. A. The right to claim compensation for benefits from the Multiple Injury Trust Fund shall be forever barred unless a Notice of Claim, on a form prescribed by the Workers' Compensation Commission, shall be filed with the Commission within two (2) years of the date of the last order for permanent partial disability from the latest claim against the employer.

B. When a claim for benefits from the Multiple Injury Trust Fund is filed, unless claimant <u>the employee</u> shall in good faith request a hearing and final determination thereon within three (3) years of the filing thereof, the same shall be barred.

5 C. An attorney who represents a respondent or insurance carrier 6 in a claim against the last employer shall not represent the 7 employee in a subsequent claim against the Multiple Injury Trust 8 Fund.

9 SECTION 27. AMENDATORY Section 35, Chapter 208, O.S.L. 10 2013 (85A O.S. Supp. 2016, Section 35), is amended to read as 11 follows:

Section 35. A. 1. Every employer shall secure compensation as provided under this act <u>title</u> to its employees for compensable injuries without regard to fault.

2. There shall be no liability for compensation under this act where <u>title if</u> the injury or death was substantially occasioned by the willful intention of the injured employee to bring about such compensable injury or death.

B. The primary obligation to pay compensation is on the employer, and the procurement of a policy of insurance by an employer to cover the obligation in respect to this act <u>title</u> shall not relieve the employer of the obligation.

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- 24

1 SECTION 28. NEW LAW A new section of law to be codified 2 in the Oklahoma Statutes as Section 36.1 of Title 85A, unless there 3 is created a duplication in numbering, reads as follows:

A. Any person who is not required to be covered under a
workers' compensation insurance policy or other plan for the payment
of workers' compensation may execute an Affidavit of Exempt Status
under the Administrative Workers' Compensation Act. The affidavit
shall be a form prescribed by the Workers' Compensation Commission
and will be available on the Commission's website.

B. Execution of the affidavit shall establish a rebuttable presumption that the executor is not an employee for purposes of the Administrative Workers' Compensation Act and therefore shall not be eligible to seek workers' compensation benefits against any contractor.

C. The execution of an affidavit shall not affect the rights or
 coverage of any employee of the individual executing the affidavit.

D. The lack of an executed affidavit under this section shall not prejudice any defense by an employer to a claim for workers' compensation benefits.

E. 1. Knowingly providing false information on a notarized
Affidavit of Exempt Status under the Administrative Workers'
Compensation Act shall constitute a misdemeanor punishable by a fine
not to exceed One Thousand Dollars (\$1,000.00).

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2. Affidavits shall conspicuously state on the front thereof in
 at least ten-point, boldface print that it is a crime to falsify
 information on the form.

3. The Commission shall immediately notify the Workers'
Compensation Fraud Unit in the Office of the Attorney General of any
violations or suspected violations of this section. The Commission
shall cooperate with the Fraud Unit in any investigation involving
affidavits executed pursuant to this section.

F. The Commission may assess a fee not to exceed Fifty Dollars
(\$50.00) for an Affidavit of Exempt Status application. Fees
collected pursuant to this section shall be deposited in the State
Treasury to the credit of the Workers' Compensation Commission
Revolving Fund.

G. If an employer relies in good faith on proof of a valid workers' compensation insurance policy issued to a contractor of any tier or on proof of an Affidavit of Exempt Status under this section, the employer shall not be liable for injuries of any employees of the contractor.

19 SECTION 29. AMENDATORY Section 38, Chapter 208, O.S.L.
20 2013 (85A O.S. Supp. 2016, Section 38), is amended to read as
21 follows:

22 Section 38. A. An employer shall secure compensation to 23 employees under this act title in one of the following ways:

1. By insuring and keeping insured the payment of compensation 1 with any stock corporation, mutual association, or other concerns 2 authorized to transact the business of workers' compensation 3 insurance in this state. When an insurer issues a policy to provide 4 workers' compensation benefits under the provisions of this act 5 title, it shall file a notice with the Workers' Compensation 6 Commission containing the name, address, and principal occupation of 7 the employer, the number, effective date, and expiration date of the 8 policy, and such other information as may be required by the 9 Commission. The notice shall be filed by the insurer within thirty 10 (30) days after the effective date of the policy. Any insurer who 11 12 does not file the notice required by this paragraph shall be subject to a fine by the Commission of not more than One Thousand Dollars 13 (\$1,000.00); 14

2. By obtaining and keeping in force guaranty insurance with 15 any company authorized to do guaranty business in this state. Each 16 company that issues workers' compensation guaranty insurance shall 17 file a copy of the contract with the Commission within thirty (30) 18 days after the effective date of the contract. Any company that 19 does not file a copy of the contract as required by this paragraph 20 shall be subject to a fine by the Commission of not more than One 21 Thousand Dollars (\$1,000.00); 22

3. By furnishing satisfactory proof to the Commission of the
employer's financial ability to pay the compensation. The

1	Commission,	under rules adopted by the Insurance Department
2	<u>Commission</u> ,	shall require any employer that has:
3	a.	less than one hundred employees or less than One
4		Million Dollars (\$1,000,000.00) in net assets to:
5		(1) deposit with the Commission securities, an
6		irrevocable letter of credit or a surety bond
7		payable to the state, in an amount determined by
8		the Commission which shall be at least an average
9		of the yearly claims for the last three (3)
10		years, or
11		(2) provide proof of excess coverage with such terms
12		and conditions as is commensurate with their
13		ability to pay the benefits required by the
14		provisions of this act <u>title</u> , and
15	b.	one hundred or more employees and One Million Dollars
16		(\$1,000,000.00) or more in net assets to:
17		(1) secure a surety bond payable to the state, or an
18		irrevocable letter of credit, in an amount
19		determined by the Commission which shall be at
20		least an average of the yearly claims for the
21		last three (3) years, or
22		(2) provide proof of excess coverage with terms and
23		conditions that are commensurate with their
24		

1 2 ability to pay the benefits required by the provisions of this act title;

4. By forming a group self-insurance association consisting of 3 two or more employers which shall have a common interest and which 4 shall have entered into an agreement to pool their liabilities under 5 the Administrative Workers' Compensation Act. Such agreement shall 6 be subject to rules of the Commission. Any employer, upon 7 application to become a member of a group self-insurance 8 association, shall file with the Commission a notice, in such form 9 as prescribed by the Commission, acknowledging that the employer 10 accepts joint and several liability. Upon approval by the 11 12 Commission of such application for membership, said member shall be a qualified self-insured employer; or 13

14 5. By any other security as may be approved by the Commission15 and the Insurance Department.

The Commission may waive the requirements of this section in Β. 16 an amount which is commensurate with the ability of the employer to 17 pay the benefits required by the provisions of this act title. 18 Irrevocable letters of credit required by this subsection shall 19 contain such terms as may be prescribed by the Commission and shall 20 be issued for the benefit of the state by a financial institution 21 whose deposits are insured by the Federal Deposit Insurance 22 Corporation. 23

C. An employer who does not fulfill the requirements of this section is not relieved of the obligation to pay compensation under this act <u>title</u>. The security required under this section, including any interest, shall be maintained by the Commission as provided in this <u>act title</u> until each claim for benefits is paid, settled, or lapses under this <u>act title</u>, and costs of administration of such claims are paid.

8 D. Failure on the part of any employer to secure the payment of 9 compensation provided in this act shall have the effect of enabling 10 the Commission to assert the rights of an injured employee against 11 the employer.

E. Any employer that knowingly provides false information to the Commission for purposes of securing or maintaining a selfinsurance permit shall be guilty of a felony and subject to a maximum fine of Ten Thousand Dollars (\$10,000.00).

16 SECTION 30. AMENDATORY Section 39, Chapter 208, O.S.L.
17 2013 (85A O.S. Supp. 2016, Section 39), is amended to read as
18 follows:

Section 39. A. In order that the liability for compensation may be effectively administered, the employer's carrier may discharge the obligations and duties of the employer under this act <u>title</u> if the employer is not a self-insurer.

B. For the purpose of an employer's carrier discharging theobligation and duties of the employer:

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An employer's knowledge of an injury shall constitute the
 carrier's knowledge of the injury;

2. The <u>Workers' Compensation</u> Commission shall have jurisdiction over the carrier to the same extent it has over the employer under this act title; and

6 3. Any determinations by the Commission shall be binding on the 7 carrier to the same extent as they are on the employer.

8 SECTION 31. AMENDATORY Section 40, Chapter 208, O.S.L. 9 2013 (85A O.S. Supp. 2016, Section 40), is amended to read as 10 follows:

Section 40. A. 1. Any employer who fails to secure compensation required under this act <u>title</u>, upon conviction, shall be guilty of a misdemeanor and subject to a fine of up to Ten Thousand Dollars (\$10,000.00) to be deposited in the Workers' Compensation Fund.

This subsection shall not affect any other liability of the
 employer under this act title.

Whenever the Workers' Compensation Commission has reason Β. 1. 18 to believe that any employer required to secure the payment of 19 compensation under this act title has failed to do so, the 20 Commission shall serve on the employer a proposed judgment declaring 21 the employer to be in violation of this act title and containing the 22 amount, if any, of the civil penalty to be assessed against the 23 employer under paragraph 5 of this subsection. 24

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- 2 a. An employer may contest a proposed judgment of the Commission issued under paragraph 1 of this subsection by filing with the Commission, within twenty (20) days of receipt of the proposed judgment, a written request for a hearing.
- b. The request for a hearing does not need to be in any
 particular form but shall specify the grounds on which
 the person contests the proposed judgment, the
 proposed assessment, or both.
- c. If a written request for hearing is not filed with the Commission within the time specified in subparagraph a of this paragraph, the proposed judgment, the proposed penalty, or both, shall be a final judgment of the Commission and shall not be subject to further review by any court, except if the employer shows good cause why it did not timely contest the judgment or penalty.
- d. A proposed judgment by the Commission under this
 section shall be prima facie correct, and the burden
 is on the employer to prove that the proposed judgment
 is incorrect.
- 3. a. If the employer alleges that a carrier has contracted
 to provide it workers' compensation insurance coverage
 for the period in question, the employer shall include
- 24

the allegation in its request for hearing and shall name the carrier.

The Commission shall promptly notify the carrier of b. 3 the employer's allegation and of the date of hearing. 4 с. The carrier shall promptly, and no later than five (5) 5 days before the hearing, respond in writing to the 6 employer's allegation by providing evidence of 7 coverage for the period in question or by 8 affirmatively denying the employer's allegation. 9

Hearings under this section shall be procedurally conducted
 as provided in Sections 69 through 78 of this act <u>title</u>.

5. The Commission may assess a fine against an employer who fails to secure the payment of compensation in an amount up to One Thousand Dollars (\$1,000.00) per day of violation payable to the Workers' Compensation Fund.

6. If an employer fails to secure the payment of compensation 16 or pay any civil penalty assessed against the employer after a 17 judgment issued under this section has become final by operation of 18 law or on appeal, the Commission may petition the Oklahoma County 19 District Court or the district court of the county where the 20 employer's principal place of business is located for an order 21 enjoining the employer from engaging in further employment until 22 such time as the employer secures the payment of compensation or 23 makes full payment of all civil penalties. 24

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1 SECTION 32. AMENDATORY Section 41, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 41), is amended to read as
3 follows:

Section 41. A. Every employer who has secured compensation 4 under the provisions of this act the Administrative Workers' 5 Compensation Act shall keep posted in a conspicuous place in and 6 about the employer's place of business typewritten or printed 7 notices in accordance with a form prescribed by the Workers' 8 Compensation Commission. The notices shall state that the employer 9 has secured the payment of compensation in accordance with the 10 provisions of this act title. 11

B. The notices shall contain the name and address of the carrier, if any, with whom the employer has secured payment of compensation and the date of the expiration of the policy.

15 SECTION 33. AMENDATORY Section 42, Chapter 208, O.S.L. 16 2013 (85A O.S. Supp. 2016, Section 42), is amended to read as 17 follows:

Section 42. A. Contents. Every policy or contract of insurance issued by a carrier to an employer to secure the payment of compensation under this act the Administrative Workers'

21 Compensation Act shall contain:

a. Provisions that identify the insured employer and
 either identify each covered employee or describe
 covered employees by class or type of labor performed

and the estimated number of employees of each such class or type.

b. No single policy of workers' compensation insurance
may be issued to any group of employers who are
unaffiliated with one another in terms of ownership,
control, or right to participate in the profits of the
affiliated enterprises;

8 2. Provisions that insolvency or bankruptcy of the employer or
9 discharge therein shall not relieve the carrier from payment of
10 compensation for compensable injuries sustained by an employee
11 during the term of the policy or contract;

12 3. a. The agreement of the carrier that it shall promptly pay to the person entitled to compensation every 13 installment of compensation that may be awarded or 14 agreed on and that this obligation shall not be 15 affected by any default of the employer or by any 16 default in the giving of any notice required by the 17 policy or otherwise. 18

b. The agreement shall be construed to be a direct
obligation by the carrier to the person entitled to
compensation, enforceable in that person's name; and
4. Such other provisions as the Insurance Department allows or
requires carriers to include in workers' compensation policies.

B. Cancellation.

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1. An employer may cancel coverage with a carrier by giving the 1 carrier at least thirty (30) days' notice, unless a shorter period 2 is permitted under subparagraph b of this paragraph. 3 Cancellation of coverage is effective at 12:01 a.m. a. 4 thirty (30) days after the date the cancellation 5 notice is received by the carrier, unless a later date 6 is specified in the notice to the carrier. 7 An employer may cancel coverage effective less b. (1)8 than thirty (30) days after written notice is 9 received by the carrier where if the employer 10 obtains other coverage or becomes a self-insurer. 11 (2) A cancellation under this subsection is effective 12 immediately on the effective date of the other 13 coverage or on authorization as a self-insurer. 14 A notice of cancellation from the carrier shall state 2. 15 a. the hour and date that cancellation is effective. 16 b. A carrier shall not cancel coverage issued to an 17 employer under this act the Administrative Workers' 18 Compensation Act before the date specified for 19 expiration in the policy or contract or until at least 20 thirty (30) days have elapsed after a notice of 21 cancellation has been mailed to the Workers' 22 Compensation Commission and to the employer, or until 23 ten (10) days have elapsed after the notice has been 24

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mailed to the employer and to the Commission if the 1 cancellation is for nonpayment of premium. 2 If the employer procures other insurance within the с. 3 notice period, the effective date of the new policy 4 shall be the cancellation date of the old policy. 5 3. Cancellation of coverage by an employer or a carrier shall 6 in no way limit liability that was incurred under the policy or 7 contract before the effective date of cancellation. 8 C. Coverage. 9 1. No policy or contract of insurance shall be issued against 10 liability under this act the Administrative Workers' Compensation 11 12 Act unless the policy or contract covers the entire liability of the employer. Split coverage whereby some employees of an employer are 13 insured by one carrier and other employees are insured by another 14 carrier, or a plan of self-insurance, is expressly prohibited except 15 for a policy issued covering the liability of an employer or of 16 multiple employers as to specific jobs, ventures, contracts, or 17 undertakings, but only if the policy meets with the reasonable 18 satisfaction and approval of the Insurance Commissioner that the 19 policy is in the best interest of the employers and the employees 20 concerned and does not unduly or improperly affect the continuity of 21 workers' compensation coverage by seriously and negatively affecting 22 other carriers and agents with outstanding policies issued to any of 23 the employers in issue. 24

2. The terms of the policy or contract shall govern any 1 questions of liability between the employer and the carrier. 2 Under such rules as may be adopted by the Insurance D. 3 Commissioner, and notwithstanding other provisions of this act 4 title, he or she may certify five or more employers as an insurance 5 group which shall be considered an employer for the purposes of this 6 act title. 7 SECTION 34. AMENDATORY Section 43, Chapter 208, O.S.L. 8 2013 (85A O.S. Supp. 2016, Section 43), is amended to read as 9 follows: 10 Section 43. A. Liability Unaffected. 11 12 1. a. The making of a claim for acceptance of compensation benefits from or the making of a claim for 13 compensation against any an employer or carrier 14 insurer for the injury or death of an employee shall 15 not affect the right of the employee_{au} or his or her 16 dependents, to make a claim or maintain an action in 17 court against sue any third other party for the such 18 injury or death. 19 The employer or and the employer's insurance carrier b. 20 shall be entitled to reasonable notice and opportunity 21 to join in the action. 22 If the employer or employer's carrier join in the 23 c. action against a third party for injury or death, they 24

1	shall be entitled to a <u>have an automatic</u> first lien on
2	two-thirds (2/3) of the net proceeds the amount
3	recovered in the action that remain after the payment
4	of the reasonable costs of collection, for the payment
5	to them of the amount paid and to be paid by them as
6	compensation to <u>by</u> the injured employee or his or her
7	dependents. or legal representative from a third
8	party, which shall be applied as follows:
9	1. Reasonable costs of collection as approved and allowed by
10	the court in which such action is pending, or by the Workers'
11	Compensation Commission in case of settlement without suit, shall be
12	deducted;
13	2. The commencement of an action by an employee or his or her
14	dependents against a third party for damages by reason of an injury
15	to which this act is applicable, or the adjustment of any claim,
10	to which this act is applicable, of the adjustment of any claim,
16	shall not affect the rights of the injured employee or his or her
16	shall not affect the rights of the injured employee or his or her
16 17	shall not affect the rights of the injured employee or his or her dependents to recover compensation, but any amount recovered by the
16 17 18	shall not affect the rights of the injured employee or his or her dependents to recover compensation, but any amount recovered by the injured employee or his or her dependents from a third party shall
16 17 18 19	shall not affect the rights of the injured employee or his or her dependents to recover compensation, but any amount recovered by the injured employee or his or her dependents from a third party shall be applied as follows:
16 17 18 19 20	shall not affect the rights of the injured employee or his or her dependents to recover compensation, but any amount recovered by the injured employee or his or her dependents from a third party shall be applied as follows: a. reasonable fees and costs of collection shall be
16 17 18 19 20 21	shall not affect the rights of the injured employee or his or her dependents to recover compensation, but any amount recovered by the injured employee or his or her dependents from a third party shall be applied as follows: a. reasonable fees and costs of collection shall be deducted,

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recovery or the amount of the workers' compensation lien, whichever is less $_{ au}$; and

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c. the remainder of the recovery

<u>3. Any excess</u> shall go <u>belong</u> to the injured employee or his or
her dependents.

6 B. Subrogation.

An employer or carrier liable for compensation under this 1. 7 act title for the injury or death of an employee shall have the 8 right to maintain an action in tort against any third party 9 responsible for the injury or death. However, the employer or the 10 carrier shall notify the claimant employee in writing that the 11 12 claimant employee has the right to hire a private attorney to pursue any benefits to which the claimant employee is entitled in addition 13 to the subrogation interest against any third party responsible for 14 the injury or death. 15

2. After reasonable notice and opportunity to be represented in the action has been given to the injured employee, the liability of the third party to the compensation beneficiary shall be determined in the action, as well as the third party's liability to the employer and carrier.

3. If the employer recovers against the third party, by suit or otherwise, the injured employee shall be entitled to any amount recovered in excess of the amount that the employer and carrier have

1 paid or are liable for in compensation, after deducting reasonable 2 costs of collection.

4. An employer or carrier who is liable for compensation under this act <u>title</u> on account of injury or death of an employee shall be entitled to maintain a third-party action against the employer's uninsured motorist coverage or underinsured motorist coverage.

SECTION 35. AMENDATORY Section 44, Chapter 208, O.S.L.
2013 (85A O.S. Supp. 2016, Section 44), is amended to read as
follows:

Section 44. A. Any benefits payable to an injured employee 10 under this act title shall be reduced in an amount equal to, dollar-11 12 for-dollar, the amount of benefits the injured employee has previously received for the same medical services or period of 13 disability, whether those benefits were paid under a group health 14 care service plan, a group disability policy, a group loss of income 15 policy, a group accident, health, or accident and health policy, a 16 self-insured employee health or welfare benefit plan, or a group 17 hospital or medical service contract; provided, however, such 18 reduction does not apply to any benefit received from a group policy 19 for disability if the injured employee has paid for the policy. 20

B. The <u>claimant employee</u> shall be required to disclose in a manner to be determined by the <u>Workers' Compensation</u> Commission the identity, address, or phone number of any person or entity which has

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1 paid benefits described in this section in connection with any claim 2 under this act title.

3 SECTION 36. AMENDATORY Section 45, Chapter 208, O.S.L.
4 2013, as amended by Section 2, Chapter 390, O.S.L. 2015 (85A O.S.
5 Supp. 2016, Section 45), is amended to read as follows:

6 Section 45. A. Temporary Total Disability.

If the injured employee is temporarily unable to perform his 1. 7 or her job or any alternative work offered by the employer because 8 of a disability, he or she shall be entitled to receive compensation 9 equal to seventy percent (70%) of the injured employee's average 10 weekly wage per week, but not to exceed seventy percent (70%) of the 11 12 state average weekly wage, for one hundred four (104) weeks. Provided, there shall be no payment for the first three (3) days of 13 the initial period of temporary total disability. If an 14 administrative law judge finds that a consequential subsequent 15 injury has occurred as a direct result of the injury or medical 16 treatment to the part of the body originally injured and that 17 additional time is needed to reach maximum medical improvement, 18 temporary total disability may continue for a period of not more 19 than an additional fifty-two (52) weeks. Such finding shall be 20 based upon a showing of medical necessity by clear and convincing 21 evidence. 22

2.3 When the injured employee is released from active medical
 treatment by the treating physician for all body parts found by the

Commission to be injured, or in the event that the employee, without 1 a valid excuse, misses three consecutive medical treatment 2 appointments, fails to comply with medical orders of the treating 3 physician, or otherwise abandons medical care, the employer shall be 4 entitled to terminate temporary total disability by notifying the 5 employee, or if represented, his or her counsel. If, however, an 6 objection to the termination of temporary total disability is filed 7 by the employee within ten (10) days of termination, the Commission 8 shall set the matter within twenty (20) days for a determination if 9 temporary total disability compensation shall be reinstated. The 10 temporary total disability shall remain terminated unless the 11 employee proves the existence of a valid excuse for his or her 12 failure to comply with medical orders of the treating physician or 13 his or her abandonment of medical care. The administrative law 14 judge may appoint an independent medical examiner to determine if 15 further medical treatment is reasonable and necessary. The 16 independent medical examiner shall not provide treatment to the 17 injured worker employee, unless agreed upon by the parties. 18

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B. Temporary Partial Disability.

If the injured employee is temporarily unable to perform his
 or her job <u>because of a disability</u>, but may perform alternative work
 offered by the employer, he or she shall be entitled to receive
 compensation equal to the greater of seventy percent (70%) of the
 difference between the injured employee's average weekly wage before

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the injury and his or her weekly wage for performing alternative 1 work after the injury, but only if his or her weekly wage for 2 performing the alternative work is less than the temporary total 3 disability rate. However, the injured employee's actual earnings 4 plus temporary partial disability shall not exceed the temporary 5 total disability rate. 6

2. Compensation under this subsection may not exceed fifty-two 7 (52) weeks. 8

3. If the employee refuses to perform the alternative work 9 offered by the employee employer, he or she shall not be entitled to 10 benefits under subsection A of this section or under this section. 11

12 C. Permanent Partial Disability.

If the injured employee has a permanent disability after 1. 13 reaching maximum medical improvement, he or she shall be entitled to 14 receive compensation equal to seventy percent (70%) of the 15 employee's average weekly wage per week, not to exceed Three Hundred 16 Fifty Dollars (\$350.00) per week, for three and one-half (3 1/2) 17 weeks for each percentage point of impairment but not to exceed the 18 earlier of three hundred fifty (350) weeks or the date of the 19 injured employee's death.

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2. A permanent partial disability award or combination of 21 awards granted an injured worker may not exceed a permanent partial 22 disability rating of one hundred percent (100%) to any body part or 23 to the body as a whole. The determination of permanent partial 24

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disability shall be the responsibility of the Commission through its 1 administrative law judges. Any claim by an employee for 2 compensation for permanent partial disability must be supported by 3 competent medical testimony of a medical doctor, osteopathic 4 physician, or chiropractor, and shall be supported by objective 5 medical findings, as defined in this act Section 2 of this title. 6 The opinion of the physician shall include employee's percentage of 7 permanent partial disability and whether or not the disability is 8 job-related and caused by the accidental injury or occupational 9 disease. A physician's opinion of the nature and extent of 10 permanent partial disability to parts of the body other than 11 12 scheduled members must be based solely on criteria established by the current edition of the American Medical Association's "Guides to 13 the Evaluation of Permanent Impairment". A copy of any written 14 evaluation shall be sent to both parties within seven (7) days of 15 issuance. Medical opinions addressing compensability and permanent 16 disability must be stated within a reasonable degree of medical 17 certainty. Any party may submit the report of an evaluating 18 physician. 19

20 2. 3. Permanent partial disability shall not be allowed to a
21 part of the body for which no medical treatment has been received.
22 A determination of permanent partial disability made by the
23 Commission or administrative law judge which is not supported by
24 objective medical findings provided by a treating physician who is a

1 medical doctor, doctor of osteopathy, chiropractor or a qualified 2 independent medical examiner shall be considered an abuse of 3 discretion.

3. The examining physician shall not deviate from the Guides 4 except as may be specifically provided for in the Guides. 5 4. In cases of permanent partial disability, the compensation 6 shall be seventy percent (70%) of the employee's average weekly 7 wage, not to exceed Three Hundred Twenty-three Dollars (\$323.00) per 8 week, for a term not to exceed a total of three hundred fifty (350) 9 weeks for the body as a whole. 10 5. Except pursuant to settlement agreements entered into by the 11 12 employer and employee, payment of a permanent partial disability award shall be deferred and held in reserve by the employer or 13 insurance company if the employee has reached maximum medical 14 improvement and has been released to return to work by his or her 1.5 treating physician, and then returns to his pre-injury or equivalent 16 job for a term of weeks determined by dividing the total dollar 17 value of the award by seventy percent (70%) of the employee's 18 average weekly wage. 19 The amount of the permanent partial disability award 20 a. shall be reduced by seventy percent (70%) of the 21 employee's average weekly wage for each week he works 22 in his pre-injury or equivalent job. 23

1	b.	If, for any reason other than misconduct as defined in
2		Section 2 of this act, the employer terminates the
3		employee or the position offered is not the pre-injury
4		or equivalent job, the remaining permanent partial
5		disability award shall be paid in a lump sum. If the
6		employee is discharged for misconduct, the employer
7		shall have the burden to prove that the employee
8		engaged in misconduct.
9	c.	If the employee refuses an offer to return to his pre-
10		injury or equivalent job, the permanent partial
11		disability award shall continue to be deferred and
12		shall be reduced by seventy percent (70%) of the
13		employee's average weekly wage for each week he
14		refuses to return to his pre-injury or equivalent job.
15	d.	Attorney fees for permanent partial disability awards,
16		as approved by the Commission, shall be calculated
17		based upon the total permanent partial disability
18		award and paid in full at the time of the deferral.
19	e.	Assessments pursuant to Sections 31, 98, 112 and 165
20		of this act shall be calculated based upon the amount
21		of the permanent partial disability award and shall be
22		paid at the time of the deferral.
23		

<u>4. If an employee is eligible to receive permanent total</u>
 <u>disability benefits, he or she shall not also receive permanent</u>
 partial disability benefits.

5. An employee may elect to commute the remainder of the 4 permanent partial disability award, including an award under Section 5 46 of this title, to which the employee is entitled if the employee 6 has returned to work for at least six (6) months, earning at least 7 seventy percent (70%) of the employee's average weekly wage at the 8 time of the injury. An employee who elects to commute the permanent 9 partial disability award is not entitled to additional benefits for 10 the injury. 11

12 6. Previous Disability: The fact that an employee has suffered previous disability or received compensation therefor shall not 13 preclude the employee from compensation for a later accidental 14 personal injury or occupational disease. In the event there exists 15 a previous permanent partial disability, including a previous non-16 work-related injury or condition which produced permanent partial 17 disability and the same is appravated or accelerated by an 18 accidental personal injury or occupational disease, compensation for 19 permanent partial disability shall be only for such amount as was 20 caused by such accidental personal injury or occupational disease 21 and no additional compensation shall be allowed for the preexisting 22 disability or impairment. Any such reduction shall not apply to 23

temporary total disability, nor shall it apply to compensation for
 medical treatment.

3	a.	If workers' compensation benefits have previously been
4		awarded through settlement or judicial or
5		administrative determination in Oklahoma, the
6		percentage basis of the prior settlement or award
7		shall conclusively establish the amount of permanent
8		partial disability determined to be preexisting. If
9		workers' compensation benefits have not previously
10		been awarded through settlement or judicial or
11		administrative determination in Oklahoma, the amount
12		of preexisting permanent partial disability shall be
13		established by competent evidence.
14	b.	In all cases, the applicable reduction shall be
15		calculated as follows:
16		(1) if the preexisting impairment <u>disability</u> is the
17		result of injury sustained while working for the
18		employer against whom workers' compensation
19		benefits are currently being sought, any award of
20		compensation shall be reduced by the current
21		dollar value attributable under the
22		Administrative Workers' Compensation Act to the
23		percentage of permanent partial disability
24		determined to be preexisting. The current dollar

value shall be calculated by multiplying the 1 percentage of preexisting permanent partial 2 disability by the compensation rate in effect on 3 the date of the accident or injury against which 4 the reduction will be applied, and 5 in all other cases, the employer against whom (2) 6 benefits are currently being sought shall be 7 entitled to a credit for the percentage of 8 preexisting permanent partial disability. 9 7. No payments on any permanent partial disability order shall 10 begin until payments on any preexisting permanent partial disability 11 orders have been completed. 12 8. The whole body shall represent a maximum of three hundred 13 fifty (350) weeks. 14 9. The permanent partial disability rate of compensation for 15 amputation or permanent total loss of use of a scheduled member 16 specified in Section 46 of this act shall be seventy percent (70%) 17 of the employee's average weekly wage, not to exceed Three Hundred 18 Twenty-three Dollars (\$323.00), multiplied by the number of weeks 19 set forth for the member in Section 46 of this act, regardless of 20 whether the injured employee is able to return to his or her pre-21 injury or equivalent job. 22 10. An injured employee who is eligible for permanent partial 23

disability under this subsection shall be entitled to receive

vocational rehabilitation services provided by a technology center
or public secondary school offering vocational-technical education
courses, or a member institution of The Oklahoma State System of
Higher Education, which shall include retraining and job placement
to restore the employee to gainful employment. Vocational
rehabilitation services or training shall not extend for a period of
more than fifty-two (52) weeks.

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D. Permanent Total Disability.

1. In case of total disability adjudged to be permanent, If the 9 injured employee is incapable of earning wages in any employment for 10 which the employee may become physically suited and reasonably 11 fitted by education, training, experience or vocational 12 rehabilitation provided under this title because of a disability, he 13 or she shall be entitled to receive compensation equal to seventy 14 percent (70%) of the employee's average weekly wages, but not in 15 excess of the state's average weekly wage, shall be paid to the 16 employee during the continuance per week for the duration of the 17 disability until such time as the employee reaches the age of 18 maximum Social Security retirement benefits or for a period of 19 fifteen (15) years, whichever is longer. In the event the claimant 20 employee dies of causes unrelated to the injury or illness, benefits 21 shall cease on the date of death. Provided, however, any person 22 entitled to revive the action shall receive a one-time lump-sum 23 payment equal to twenty-six (26) weeks of weekly benefits for 24

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permanent total disability awarded the claimant. If more than one 1 person is entitled to revive the claim, the lump-sum payment shall 2 be evenly divided between or among such persons. In the event the 3 Commission awards both permanent partial disability and permanent 4 total disability benefits, the permanent total disability award 5 shall not be due until the permanent partial disability award is 6 paid in full. If otherwise qualified according to the provisions of 7 this act title, permanent total disability benefits may be awarded 8 to an employee who has exhausted the maximum period of temporary 9 total disability even though the employee has not reached maximum 10 medical improvement. 11

2. The Commission shall annually review the status of any 12 employee receiving benefits for permanent total disability against 13 the last employer. The Commission shall require the employee to 14 annually file an affidavit under penalty of perjury stating that he 15 or she is not and has not been gainfully employed and is not capable 16 of gainful employment. Failure to file such affidavit shall result 17 in suspension of benefits; provided, however, reinstatement of 18 benefits may occur after proper hearing before the Commission. 19 E. 1. The Workers' Compensation Commission shall hire or 20 contract for a Vocational Rehabilitation Director to oversee the 21 vocational rehabilitation program of the Commission. 22 2. The Vocational Rehabilitation Director shall help injured 23 workers return to the work force. If the injured employee is unable 24

1	to return to his or her pre-injury or equivalent position due to
2	permanent restrictions as determined by the treating physician, upon
3	the request of either party, the Vocational Rehabilitation Director
4	shall determine if it is appropriate for a claimant to receive
5	vocational rehabilitation training or services, and will oversee
6	such training. If appropriate, the Vocational Rehabilitation
7	Director shall issue administrative orders, including, but not
8	limited to, an order for a vocational rehabilitation evaluation for
9	any injured employee unable to work for at least ninety (90) days.
10	In addition, the Vocational Rehabilitation Director may assign
11	injured workers to vocational rehabilitation counselors for
12	coordination of recommended services. The cost of the services
13	shall be paid by the employer. All administrative orders are
13 14	shall be paid by the employer. All administrative orders are subject to appeal to the full Commission.
14	subject to appeal to the full Commission.
14 15	subject to appeal to the full Commission. 3. There shall be a presumption in favor of ordering vocational
14 15 16	<pre>subject to appeal to the full Commission. 3. There shall be a presumption in favor of ordering vocational rehabilitation services or training for an eligible injured employee</pre>
14 15 16 17	<pre>subject to appeal to the full Commission. 3. There shall be a presumption in favor of ordering vocational rehabilitation services or training for an eligible injured employee under the following circumstances:</pre>
14 15 16 17 18	<pre>subject to appeal to the full Commission. 3. There shall be a presumption in favor of ordering vocational rehabilitation services or training for an eligible injured employee under the following circumstances: a. if the employee's occupation is truck driver or</pre>
14 15 16 17 18 19	<pre>subject to appeal to the full Commission. 3. There shall be a presumption in favor of ordering vocational rehabilitation services or training for an eligible injured employee under the following circumstances: a. if the employee's occupation is truck driver or laborer and the medical condition is traumatic brain</pre>
14 15 16 17 18 19 20	<pre>subject to appeal to the full Commission. 3. There shall be a presumption in favor of ordering vocational rehabilitation services or training for an eligible injured employee under the following circumstances: a. if the employee's occupation is truck driver or laborer and the medical condition is traumatic brain injury, stroke or uncontrolled vertigo,</pre>
14 15 16 17 18 19 20 21	<pre>subject to appeal to the full Commission. 3. There shall be a presumption in favor of ordering vocational rehabilitation services or training for an eligible injured employee under the following circumstances: a. if the employee's occupation is truck driver or laborer and the medical condition is traumatic brain injury, stroke or uncontrolled vertigo, b. if the employee's occupation is truck driver or</pre>

1	c.	if the employee's occupation is manual laborer and the
2		medical condition is bilateral wrist fusions,
3	d.	if the employee's occupation is assembly-line worker
4		and the medical condition is radial head fracture with
5		surgical excision,
6	e.	if the employee's occupation is heavy laborer and the
7		medical condition is myocardial infarction with
8		congestive heart failure,
9	f.	if the employee's occupation is heavy manual laborer
10		and the medical condition is multilevel neck or back
11		fusions greater than two levels,
12	g.	if the employee's occupation is laborer performing
13		overhead work and the medical condition is massive
14		rotator cuff tears, with or without surgery,
15	h.	if the employee's occupation is heavy laborer and the
16		medical condition is recurrent inguinal hernia
17		following unsuccessful surgical repair,
18	i.	if the employee's occupation is heavy manual laborer
19		and the medical condition is total knee replacement or
20		total hip replacement,
21	j.	if the employee's occupation is roofer and the medical
22		condition is calcaneal fracture, medically or
23		surgically treated,
24		

1	k.	if the employee's occupation is laborer of any kind
2		and the medical condition is total shoulder
3		replacement,
4	1.	if the employee's occupation is laborer and the
5		medical condition is amputation of a hand, arm, leg,
6		or foot,
7	m.	if the employee's occupation is laborer and the
8		medical condition is tibial plateau fracture, pilon
9		fracture,
10	n.	if the employee's occupation is laborer and the
11		medical condition is ankle fusion or knee fusion,
12	0.	if the employee's occupation is driver or heavy
13		equipment operator and the medical condition is
14		unilateral industrial blindness, or
15	p.	if the employee's occupation is laborer and the
16		medical condition is 3-, 4-, or 5-level positive
17		discogram of the cervical spine or lumbar spine,
18		medically treated.
19	4. Upon-	the request of either party, or by order of an
20	administrativ	e law judge, the Vocational Rehabilitation Director
21	shall assist	the Workers' Compensation Commission in determining if
22	l it is appropr	iate for a claimant to receive vocational
23	rehabilitatio	n training or services. If appropriate, the
24	administrativ	e law judge shall refer the employee to a qualified

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1	expert for evaluation of the practicability of, need for and kind of
2	rehabilitation services or training necessary and appropriate in
3	order to restore the employee to gainful employment. The cost of
4	the evaluation shall be paid by the employer. Following the
5	evaluation, if the employee refuses the services or training ordered
6	by the administrative law judge, or fails to complete in good faith
7	the vocational rehabilitation training ordered by the administrative
8	law judge, then the cost of the evaluation and services or training
9	rendered may, in the discretion of the administrative law judge, be
10	deducted from any award of benefits to the employee which remains
11	unpaid by the employer. Upon receipt of such report, and after
12	affording all parties an opportunity to be heard, the administrative
13	law judge shall order that any rehabilitation services or training,
14	recommended in the report, or such other rehabilitation services or
15	training as the administrative law judge may deem necessary,
16	provided the employee elects to receive such services, shall be
17	provided at the expense of the employer. Except as otherwise
18	provided in this subsection, refusal to accept rehabilitation
19	services by the employee shall in no way diminish any benefits
20	allowable to an employee.
21	5. The administrative law judge may order vocational
22	rehabilitation before the injured employee reaches maximum medical
23	improvement, if the treating physician believes that it is likely
24	that the employee's injury will prevent the employee from returning

1	to his or her former employment. In granting early benefits for
2	vocational rehabilitation, the Commission shall consider temporary
3	restrictions and the likelihood that such rehabilitation will return
4	the employee to gainful employment earlier than if such benefits are
5	granted after the permanent partial disability hearing in the claim.
6	6. Vocational rehabilitation services or training shall not
7	extend for a period of more than fifty-two (52) weeks. A request
8	for vocational rehabilitation services or training shall be filed
9	with the Commission by an interested party not later than sixty (60)
10	days from the date of receiving permanent restrictions that prevent
11	the injured employee from returning to his or her pre-injury or
12	equivalent position.
13	7. If rehabilitation requires residence at or near the facility
14	or institution which is away from the employee's customary
15	residence, reasonable cost of the employee's board, lodging, travel,
16	tuition, books and necessary equipment in training shall be paid for
17	by the insurer in addition to weekly compensation benefits to which
18	the employee is otherwise entitled under the Administrative Workers'
19	Compensation Act.
20	8. During the period when an employee is actively and in good
21	faith being evaluated or participating in a retraining or job
22	placement program for purposes of evaluating permanent total
23	disability status, the employee shall be entitled to receive
24	benefits at the same rate as the employee's temporary total

1	disability benefits for an additional fifty-two (52) weeks. All
2	tuition related to vocational rehabilitation services shall be paid
3	by the employer or the employer's insurer on a periodic basis
4	directly to the facility providing the vocational rehabilitation
5	services or training to the employee. The employer or employer's
6	insurer may deduct the amount paid for tuition from compensation
7	awarded to the employee.
8	E. Vocational Rehabilitation.
9	1. If the injured employee has a permanent disability after
10	reaching maximum medical improvement and, as a result, is unable to
11	return to his or her pre-injury job or another job that pays at
12	least eighty percent (80%) of the injured employee's pre-injury
13	wages, the injured employee shall be entitled to vocational
14	rehabilitation services provided by a technology center or public
15	secondary school offering vocational-technical education courses or
16	a member institution of The Oklahoma State System of Higher
17	Education, which shall include retraining and job placement to
18	restore the employee to full-time employment. Vocational
19	rehabilitation services or training shall not extend for a period of
20	more than fifty-two (52) weeks.
21	2. An administrative law judge may order vocational
22	rehabilitation before the injured employee reaches maximum medical
23	improvement if the treating physician believes that it is likely
24	that the employee will ultimately be eligible.

<u>3. If vocational rehabilitation requires residence at or near</u>
 <u>the facility or institution which is away from the employee's</u>
 <u>customary residence, reasonable cost of the employee's board,</u>
 <u>lodging, travel, tuition, books and necessary equipment in training</u>
 <u>shall be paid for by the employer in addition to weekly compensation</u>
 <u>benefits to which the employee is otherwise entitled.</u>
 F. Disfigurement.

8 1. If an injured employee incurs serious and permanent
9 disfigurement to any part of the body, the Commission may award
10 compensation to the injured employee in an amount not to exceed
11 Fifty Thousand Dollars (\$50,000.00).

No award for disfigurement shall be entered until twelve
 (12) months after the injury.

3. An injured employee shall not be entitled to compensation
under this subsection if he or she receives an award for permanent
partial disability to the same part of the body.

17 G. Benefits for a single-event injury shall be determined by
18 the law in effect at the time of injury. Benefits for a cumulative
19 trauma injury or occupational disease or illness shall be determined
20 by the law in effect at the time the employee knew or reasonably
21 should have known that the injury, occupational disease or illness
22 was related to work activity. Benefits for death shall be
23 determined by the law in effect at the time of death.

1 SECTION 37. AMENDATORY Section 46, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 46), is amended to read as
3 follows:

Section 46. A. An In lieu of compensation provided pursuant to 4 paragraph 1 of subsection C of Section 45 of this title, an injured 5 employee who is entitled to receive permanent partial disability 6 compensation under Section 45 of this act suffers amputation or 7 permanent total loss of use of a scheduled member shall receive 8 compensation for each part of the body in accordance with equal to 9 seventy percent (70%) of the employee's average weekly wage, not to 10 exceed Three Hundred Fifty Dollars (\$350.00) multiplied by the 11 12 number of weeks for the scheduled loss member set forth below. as follows: 13

Arm amputated at the elbow, or between the elbow and
 shoulder, two hundred seventy-five (275) weeks;

16 2. Arm amputated between the elbow and wrist, two hundred 17 twenty (220) weeks;

Leg amputated at the knee, or between the knee and the hip,
 two hundred seventy-five (275) weeks;

4. Leg amputated between the knee and the ankle, two hundred
twenty (220) weeks;

5. Hand amputated, two hundred twenty (220) weeks;

23 6. Thumb amputated, sixty-six (66) weeks;

7. First finger amputated, thirty-nine (39) weeks;

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1	8. Second finger amputated, thirty-three (33) weeks;
2	9. Third finger amputated, twenty-two (22) weeks;
3	10. Fourth finger amputated, seventeen (17) weeks;
4	11. Foot amputated, two hundred twenty (220) weeks;
5	12. Great toe amputated, thirty-three (33) weeks;
6	13. Toe other than great toe amputated, eleven (11) weeks;
7	14. Eye enucleated, in which there was useful vision, two
8	hundred seventy-five (275) weeks;
9	15. Loss of hearing of one ear, one hundred ten (110) weeks;
10	16. Loss of hearing of both ears, three hundred thirty (330)
11	weeks; and
12	17. Loss of one testicle, fifty-three (53) weeks; loss of both
13	testicles, one hundred fifty-eight (158) weeks.
14	B. The permanent partial disability rate of compensation for
15	amputation or permanent total loss of use of a scheduled member
16	specified in this section shall be seventy percent (70%) of the
17	employee's average weekly wage, not to exceed Three Hundred Twenty-
18	three Dollars (\$323.00), multiplied by the number of weeks as set
19	forth in this section, regardless of whether or not the injured
20	employee is able to return to his or her pre-injury job.
21	C. Other cases: In cases in which the Commission finds an
22	injury to a part of the body not specifically covered by the
23	foregoing provisions of this section, the employee may be entitled
24	to compensation for permanent partial disability. The compensation

ordered paid shall be seventy percent (70%) of the employee's
 average weekly wage, not to exceed Three Hundred Twenty-three
 Dollars (\$323.00) for the number of weeks which the partial
 disability of the employee bears to three hundred fifty (350) weeks.
 D. 1. Compensation for amputation of the first phalange of a
 digit shall be one-half (1/2) of the compensation for the amputation
 of the entire digit.

2. Compensation for amputation of more than one phalange of a
digit shall be the same as for amputation of the entire digit.

E. C. 1. Compensation for the permanent loss of eighty percent (80%) or more of the vision of an eye shall be the same as for the loss of an eye.

13 2. In all cases of permanent loss of vision, the use of
 14 corrective lenses may be taken into consideration in evaluating the
 15 extent of loss of vision.

F. D. Compensation for amputation or loss of use of two or more digits or one or more phalanges of two or more digits of a hand or a foot may be proportioned to the total loss of use of the hand or the foot occasioned thereby but shall not exceed the compensation for total loss of a hand or a foot.

21 G. Compensation for permanent total loss of use of a member 22 shall be the same as for amputation of the member.

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H. The sum of all permanent partial disability awards,
 excluding awards against the Multiple Injury Trust Fund, shall not
 exceed three hundred fifty (350) weeks.

SECTION 38. AMENDATORY Section 48, Chapter 208, O.S.L.
2013 (85A O.S. Supp. 2016, Section 48), is amended to read as
follows:

Section 48. When an injury or death is sustained by a minor employed in violation of federal or state statutes relating to minimum ages for employment of minors, disability or death benefits provided for by this act <u>title</u> shall be doubled; provided, however, such penalty shall not apply when the minor misrepresents his or her age, in writing, to the employer.

13 SECTION 39. AMENDATORY Section 49, Chapter 208, O.S.L.
14 2013 (85A O.S. Supp. 2016, Section 49), is amended to read as
15 follows:

Section 49. Notwithstanding any other provision of this act 16 title, no compensation for temporary total disability shall be 17 payable to an injured employee for any week for which the injured 18 employee receives unemployment insurance benefits under the laws of 19 this state or the unemployment insurance law of any other state. Ιf 20 a claim for temporary total disability is controverted and later 21 determined to be compensable, temporary total disability shall be 22 payable to an injured employee for any week for which the injured 23 employee receives unemployment benefits but only to the extent that 24

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the temporary total disability otherwise payable exceeds the
 unemployment benefits.

3 SECTION 40. AMENDATORY Section 50, Chapter 208, O.S.L.
4 2013 (85A O.S. Supp. 2016, Section 50), is amended to read as
5 follows:

6 Section 50. A. The employer shall promptly provide an injured 7 employee with medical, surgical, hospital, optometric, podiatric, 8 and nursing services, along any with <u>any</u> medicine, crutches, 9 ambulatory devices, artificial limbs, eyeglasses, contact lenses, 10 hearing aids, and other apparatus as may be reasonably necessary in 11 connection with the injury received by the employee. The employer 12 shall have the right to choose the treating physician.

B. If the employer fails or neglects to provide medical treatment within five (5) days after actual knowledge is received of an injury, the injured employee may select a physician to provide medical treatment at the expense of the employer; provided, however, that the injured employee, or another in the employee's behalf, may obtain emergency treatment at the expense of the employer where such emergency treatment is not provided by the employer.

C. Diagnostic tests shall not be repeated sooner than six (6)
 months from the date of the test unless agreed to by the parties or
 ordered by the <u>Workers' Compensation</u> Commission for good cause
 shown.

D. Unless recommended by the treating doctor at the time 1 claimant employee reaches maximum medical improvement or by an 2 independent medical examiner, continuing medical maintenance shall 3 not be awarded by the Commission. The employer or insurance carrier 4 shall not be responsible for continuing medical maintenance or pain 5 management treatment that is outside the parameters established by 6 the Physician Advisory Committee or ODG the Official Disability 7 Guidelines. The employer or insurance carrier shall not be 8 responsible for continuing medical maintenance or pain management 9 treatment not previously ordered by the Commission or approved in 10 advance by the employer or insurance carrier. 11

E. An employee claiming or entitled to benefits under this act <u>title</u>, shall, if ordered by the Commission or requested by the employer or insurance carrier, submit himself or herself for medical examination. If an employee refuses to submit himself or herself to examination, his or her right to prosecute any proceeding under this act section shall be suspended, and no compensation shall be payable for the period of such refusal.

F. For compensable injuries resulting in the use of a medical device, ongoing service for the medical device shall be provided in situations including, but not limited to, medical device battery replacement, ongoing medication refills related to the medical device, medical device repair, or medical device replacement.

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G. The employer shall reimburse the employee for the actual 1 mileage in excess of twenty (20) miles round-trip to and from the 2 employee's home to the location of a medical service provider for 3 all reasonable and necessary treatment, for an evaluation of an 4 independent medical examiner and for any evaluation made at the 5 request of the employer or insurance carrier. The rate of 6 reimbursement for such travel expense shall be the official 7 reimbursement rate as established by the State Travel Reimbursement 8 Act. In no event shall the reimbursement of travel for medical 9 treatment or evaluation exceed six hundred (600) miles round-trip. 10 н. Fee Schedule. 11

The Commission shall conduct a review of the Fee Schedule 12 1. every two (2) years. The Fee Schedule shall establish the maximum 13 rates that medical providers shall be reimbursed for medical care 14 provided to injured employees, including, but not limited to, 15 charges by physicians, dentists, counselors, hospitals, ambulatory 16 and outpatient facilities, clinical laboratory services, diagnostic 17 testing services, and ambulance services, and charges for durable 18 medical equipment, prosthetics, orthotics, and supplies. The most 19 current Fee Schedule established by the Administrator of the 20 Workers' Compensation Court prior to the effective date of this 21 section shall remain in effect, unless or until the Legislature 22 approves the Commission's proposed Fee Schedule. 23

2. Reimbursement for medical care shall be prescribed and 1 limited by the Fee Schedule as adopted by the Commission, after 2 notice and public hearing, and after approval by the Legislature by 3 joint resolution. The director of the Employees Group Insurance 4 Division of the Office of Management and Enterprise Services shall 5 provide the Commission such information as may be relevant for the 6 development of the Fee Schedule. The Commission shall develop the 7 Fee Schedule in a manner in which quality of medical care is assured 8 and maintained for injured employees. The Commission shall give due 9 consideration to additional requirements for physicians treating an 10 injured worker employee under this act title, including, but not 11 12 limited to, communication with claims representatives, case managers, attorneys, and representatives of employers, and the 13 additional time required to complete forms for the Commission, 14 insurance carriers, and employers. 15

In making adjustments to the Fee Schedule, the Commission 3. 16 shall use, as a benchmark, the reimbursement rate for each Current 17 Procedural Terminology (CPT) code provided for in the fee schedule 18 published by the Centers for Medicare and Medicaid Services of the 19 U.S. Department of Health and Human Services for use in Oklahoma 20 (Medicare Fee Schedule) on the effective date of this section, 21 workers' compensation fee schedules employed by neighboring states, 22 the latest edition of "Relative Values for Physicians" (RVP), usual, 23 customary and reasonable medical payments to workers' compensation 24

health care providers in the same trade area for comparable treatment of a person with similar injuries, and all other data the Commission deems relevant. For services not valued by CMS, the Commission shall establish values based on the usual, customary and reasonable medical payments to health care providers in the same trade area for comparable treatment of a person with similar injuries.

- No reimbursement shall be allowed for any magnetic 8 a. resonance imaging (MRI) unless the MRI is provided by 9 an entity that meets Medicare requirements for the 10 payment of MRI services or is accredited by the 11 12 American College of Radiology, the Intersocietal Accreditation Commission or the Joint Commission on 13 Accreditation of Healthcare Organizations. For all 14 other radiology procedures, the reimbursement rate 15 shall be the lesser of the reimbursement rate allowed 16 by the 2010 Oklahoma Fee Schedule and two hundred 17 seven percent (207%) of the Medicare Fee Schedule. 18 b. For reimbursement of medical services for Evaluation 19 and Management of injured employees as defined in the 20 Fee Schedule adopted by the Commission, the 21 reimbursement rate shall not be less than one hundred 22 fifty percent (150%) of the Medicare Fee Schedule. 23
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Any entity providing durable medical equipment, 1 с. prosthetics, orthotics or supplies shall be accredited 2 by a CMS-approved accreditation organization. If a 3 physician provides durable medical equipment, 4 prosthetics, orthotics, prescription drugs, or 5 supplies to a patient ancillary to the patient's 6 visit, reimbursement shall be no more than ten percent 7 (10%) above cost. 8

9 d. The Commission shall develop a reasonable stop-loss 10 provision of the Fee Schedule to provide for adequate 11 reimbursement for treatment for major burns, severe 12 head and neurological injuries, multiple system 13 injuries, and other catastrophic injuries requiring 14 extended periods of intensive care.

4. The right to recover charges for every type of medical care
for injuries arising out of and in the course of covered employment
as defined in this act <u>title</u> shall lie solely with the Commission.
When a medical care provider has brought a claim to the Commission
to obtain payment for services, a party who prevails in full on the
claim shall be entitled to reasonable attorney fees.

5. Nothing in this section shall prevent an employer, insurance carrier, group self-insurance association, or certified workplace medical plan from contracting with a provider of medical care for a

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reimbursement rate that is greater than or less than limits
 established by the Fee Schedule.

6. A treating physician may not charge more than Four Hundred Dollars (\$400.00) per hour for preparation for or testimony at a deposition or appearance before the Commission in connection with a claim covered by the Administrative Workers' Compensation Act.

7 7. The Commission's review of medical and treatment charges 8 pursuant to this section shall be conducted pursuant to the Fee 9 Schedule in existence at the time the medical care or treatment was 10 provided. The judgment approving the medical and treatment charges 11 pursuant to this section shall be enforceable by the Commission in 12 the same manner as provided in this act <u>title</u> for the enforcement of 13 other compensation payments.

8. Charges for prescription drugs dispensed by a pharmacy shall 14 be limited to ninety percent (90%) of the average wholesale price of 15 the prescription, plus a dispensing fee of Five Dollars (\$5.00) per 16 prescription. "Average wholesale price" means the amount determined 17 from the latest publication designated by the Commission. 18 Physicians shall prescribe and pharmacies shall dispense generic 19 equivalent drugs when available. If the National Drug Code, or 20 "NDC", for the drug product dispensed is for a repackaged drug, then 21 the maximum reimbursement shall be the lesser of the original 22 labeler's NDC and the lowest-cost therapeutic equivalent drug 23 product. Compounded medications shall be billed by the compounding 24

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pharmacy at the ingredient level, with each ingredient identified using the applicable NDC of the drug product, and the corresponding quantity. Ingredients with no NDC area are not separately reimbursable. Payment shall be based on a sum of the allowable fee for each ingredient plus a dispensing fee of Five Dollars (\$5.00) per prescription.

When medical care includes prescription drugs dispensed by a 9. 7 physician or other medical care provider and the NDC for the drug 8 product dispensed is for a repackaged drug, then the maximum 9 reimbursement shall be the lesser of the original labeler's NDC and 10 the lowest-cost therapeutic equivalent drug product. Payment shall 11 12 be based upon a sum of the allowable fee for each ingredient plus a dispensing fee of Five Dollars (\$5.00) per prescription. Compounded 13 medications shall be billed by the compounding pharmacy. 14

Implantables are paid in addition to procedural 15 10. reimbursement paid for medical or surgical services. A 16 manufacturer's invoice for the actual cost to a physician, hospital 17 or other entity of an implantable device shall be adjusted by the 18 physician, hospital or other entity to reflect, at the time 19 implanted, all applicable discounts, rebates, considerations and 20 product replacement programs and shall be provided to the payer by 21 the physician or hospital as a condition of payment for the 22 implantable device. If the physician, or an entity in which the 23 physician has a financial interest other than an ownership interest 24

of less than five percent (5%) in a publically traded company, 1 provides implantable devices, this relationship shall be disclosed 2 to patient, employer, insurance company, third-party commission, 3 certified workplace medical plan, case managers, and attorneys 4 representing claimant the employee and defendant. If the physician, 5 or an entity in which the physician has a financial interest other 6 than an ownership interest of less than five percent (5%) in a 7 publically traded company, buys and resells implantable devices to a 8 hospital or another physician, the markup shall be limited to ten 9 percent (10%) above cost. 10

11. Payment for medical care as required by this act title 11 12 shall be due within forty-five (45) days of the receipt by the employer or insurance carrier of a complete and accurate invoice, 13 unless the employer or insurance carrier has a good-faith reason to 14 request additional information about such invoice. Thereafter, the 15 Commission may assess a penalty up to twenty-five percent (25%) for 16 any amount due under the Fee Schedule that remains unpaid on the 17 finding by the Commission that no good-faith reason existed for the 18 delay in payment. If the Commission finds a pattern of an employer 19 or insurance carrier willfully and knowingly delaying payments for 20 medical care, the Commission may assess a civil penalty of not more 21 than Five Thousand Dollars (\$5,000.00) per occurrence. 22

12. If an employee fails to appear for a scheduled appointment
with a physician, the employer or insurance company shall pay to the

physician a reasonable charge, to be determined by the Commission, for the missed appointment. In the absence of a good-faith reason for missing the appointment, the Commission shall order the employee to reimburse the employer or insurance company for the charge.

13. Physicians providing treatment under this act title shall 5 disclose under penalty of perjury to the Commission, on a form 6 prescribed by the Commission, any ownership or interest in any 7 health care facility, business, or diagnostic center that is not the 8 physician's primary place of business. The disclosure shall include 9 any employee leasing arrangement between the physician and any 10 health care facility that is not the physician's primary place of 11 12 business. A physician's failure to disclose as required by this section shall be grounds for the Commission to disqualify the 13 physician from providing treatment under this act title. 14

I. Formulary. The Commission by rule shall adopt a closed 15 formulary. Rules adopted by the Commission shall allow an appeals 16 process for claims in which a treating doctor determines and 17 documents that a drug not included in the formulary is necessary to 18 treat an injured employee's compensable injury. The Commission by 19 rule shall require the use of generic pharmaceutical medications and 20 clinically appropriate over-the-counter alternatives to prescription 21 medications unless otherwise specified by the prescribing doctor, in 22 accordance with applicable state law. 23

1 SECTION 41. AMENDATORY Section 52, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 52), is amended to read as
3 follows:

4 Section 52. The employer shall not be liable for any of the 5 payments for medical services and supplies under this act <u>title</u> if 6 the <u>Workers' Compensation</u> Commission determines that there was not a 7 compensable injury.

8 SECTION 42. AMENDATORY Section 53, Chapter 208, O.S.L. 9 2013 (85A O.S. Supp. 2016, Section 53), is amended to read as 10 follows:

Section 53. A. An injured employee claiming to be entitled to benefits under this act <u>title</u> shall submit to physical examination and treatment by another qualified physician, designated or approved by the <u>Workers' Compensation</u> Commission, as the Commission may require from time to time if reasonable and necessary.

B. In cases where the Commission directs examination or treatment, proceedings shall be suspended, and no compensation shall be payable for any period during which the employee refuses to submit to examination and treatment or otherwise obstructs the examination or treatment.

C. Failure of the employee to obey a judgment of the Commission for an examination or treatment for a period of one (1) month from the date of the judgment shall bar the right of the claimant <u>employee</u> to further compensation in respect to the injury.

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1 SECTION 43. AMENDATORY Section 54, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 54), is amended to read as
3 follows:

Section 54. Except in cases of hernia, which are specifically 4 covered by Section 61 of this act, where If an injured employee 5 unreasonably refuses to submit to a surgical operation which has 6 been advised by at least two qualified physicians and where if the 7 recommended operation does not involve unreasonable risk of life or 8 additional serious physical impairment disability, the Workers' 9 Compensation Commission shall take the refusal into consideration 10 when determining compensation for permanent partial or permanent 11 12 total disability.

13 SECTION 44. AMENDATORY Section 55, Chapter 208, O.S.L.
14 2013 (85A O.S. Supp. 2016, Section 55), is amended to read as
15 follows:

Section 55. A. If an employer or carrier believes that a 16 charge for medical services or supplies under this act title is 17 unreasonable, it may submit the charge to the Workers' Compensation 18 Commission for review. If the Commission determines that the charge 19 is unreasonable, it may amend the charges to reflect the Fee 20 Schedule established under Section 50 of this act title, if 21 applicable, or in accordance with reasonable market rates for the 22 services or supplies provided. 23

B. The provisions of this section relating to charges shall not apply if a written contract exists between the employer and the person who renders the medical service or supplies.

SECTION 45. AMENDATORY Section 56, Chapter 208, O.S.L.
2013 (85A O.S. Supp. 2016, Section 56), is amended to read as
follows:

Section 56. A. If the employer has previously contracted with a certified workplace medical plan, the employer shall select for the injured employee a treating physician from the physicians listed within the network of the certified workplace medical plan. The employee may apply for a change of physician by utilizing the dispute resolution process set out in the certified workplace medical plan on file with the State Department of Health.

If the employer is not covered by a certified workplace Β. 14 medical plan, the employer shall select the treating physician 15 regardless of the number of body parts being treated. The Workers' 16 Compensation Commission on application of the employee shall order 17 one change of treating physician. Upon the Commission's granting of 18 the application, the employer shall provide a list of three 19 physicians from whom the employee may select the replacement. The 20 employer may identify physicians within the same practice, facility 21 or hospital as the treating physician. The only requirement for the 22 list of three physicians is that they be licensed and accredited to 23 perform the necessary treatment. 24

1 SECTION 46. AMENDATORY Section 57, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 57), is amended to read as
3 follows:

Section 57. A. If an injured employee misses two three or more
scheduled appointments for treatment, he or she shall no longer be
eligible to receive benefits under this act title, unless his or her
absence was:

Caused by extraordinary circumstances beyond the employee's
 control as determined by the Workers' Compensation Commission; or

The employee gave the employer at least two (2) hours prior
 notice of the absence and had a valid excuse.

B. Inability to get transportation to or from the appointment shall not be considered extraordinary circumstances nor a valid excuse for the absence.

15 SECTION 47. AMENDATORY Section 59, Chapter 208, O.S.L. 16 2013 (85A O.S. Supp. 2016, Section 59), is amended to read as 17 follows:

Section 59. A. 1. Compensation under this act <u>title</u> based on the employee's average weekly wage shall be computed by dividing the employee's gross earnings by the number of full weeks of employment with the employer, up to a maximum of fifty-two (52) weeks.

22 2. If the injured employee was working on a piece basis, the 23 average weekly wage shall be determined by dividing the earnings of 24 the employee by the number of hours required to earn the wages

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during the period not to exceed fifty-two (52) weeks preceding the week in which the accident occurred and by multiplying this hourly wage by the number of hours in a full-time workweek in the employment.

B. Overtime earnings are to be added to the regular weekly
wages and shall be computed by dividing the overtime earnings by the
number of weeks worked by the employee in the same employment under
the contract of hire in force at the time of the accident, not to
exceed a period of fifty-two (52) weeks preceding the accident.

C. If, because of exceptional circumstances, the average weekly wage cannot be fairly and justly determined by the above formulas, the <u>Workers' Compensation</u> Commission may determine the average weekly wage by a method that is just and fair to all parties concerned.

D. The benefit level for members of the National Guard and any authorized voluntary or uncompensated worker rendering services as a firefighter, peace officer or civil defense worker shall be determined by using the wages of the employee in his or her regular occupation.

20 SECTION 48. AMENDATORY Section 62, Chapter 208, O.S.L. 21 2013 (85A O.S. Supp. 2016, Section 62), is amended to read as 22 follows:

23 Section 62. A. Notwithstanding the provisions of Section 45 of 24 this act title, if an employee suffers a nonsurgical soft tissue

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injury, temporary total disability compensation shall not exceed 1 eight (8) twelve (12) weeks, regardless of the number of parts of 2 the body to which there is a nonsurgical soft tissue injury. An 3 employee who is treated with an epidural steroid injection or 4 injections shall be entitled to an extension of an additional eight 5 (8) weeks total, regardless of the number of epidural steroid 6 injections received. An employee who has been recommended by a 7 treating physician for surgery for a soft tissue injury may petition 8 the Workers' Compensation Commission for one extension of temporary 9 total disability compensation and the Commission may order an 10 extension, not to exceed sixteen (16) additional weeks. If the 11 12 surgery is not performed within thirty (30) days of the approval of the surgery by the employer, its insurance carrier, or an order of 13 the Commission authorizing the surgery, and the delay is caused by 14 the employee acting in bad faith, the benefits for the extension 15 period shall be terminated and the employee shall reimburse the 16 employer any temporary total disability compensation he or she 17 received beyond eight (8) weeks. An epidural steroid injection, or 18 any procedure of the same or similar physical invasiveness, shall 19 not be considered surgery. 20

B. For purposes of this section, "surgery" does not include an injection, or the forcing of fluids beneath the skin, for treatment or diagnosis.

C. For purposes of this section, "soft tissue injury" means 1 damage to one or more of the tissues that surround bones and joints. 2 Soft tissue injury includes, but is not limited to, sprains, 3 strains, contusions, tendonitis and muscle tears. Cumulative trauma 4 is to be considered a soft tissue injury. Soft tissue injury does 5 not include any of the following: 6 Injury to or disease of the spine, spinal discs, spinal 1. 7 nerves or spinal cord, where corrective surgery is performed; 8 2. Brain or closed-head injury as evidenced by: 9 sensory or motor disturbances, a. 10 b. communication disturbances, 11

c. complex integrated disturbances of cerebral function,

d. episodic neurological disorders, or

e. other brain and closed-head injury conditions at least
 as severe in nature as any condition provided in
 subparagraphs a through d of this paragraph; or

3. Any joint replacement.

18 SECTION 49. AMENDATORY Section 64, Chapter 208, O.S.L.
19 2013 (85A O.S. Supp. 2016, Section 64), is amended to read as
20 follows:

21 Section 64. A. Any person or entity may make written 22 application to the State Commissioner of Health to have a workplace 23 medical plan certified that provides management of quality treatment 24 to injured employees for injuries and diseases compensable under

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this act title. Each application for certification shall be 1 accompanied by a fee of One Thousand Five Hundred Dollars 2 (\$1,500.00). A workplace medical plan may be certified to provide 3 services to a limited geographic area. A certificate is valid for a 4 five-year period, unless revoked or suspended. Application for 5 certification shall be made in the form and manner and shall set 6 forth information regarding the proposed program for providing 7 services as the State Commissioner of Health may prescribe. 8 The information shall include, but not be limited to: 9

A list of the names of all medical providers who shall
 provide services under the plan, together with appropriate evidence
 of compliance with any licensing or certification requirements for
 those providers to practice in this state; and

A description of the places and manner of providing services
 under the plan.

B. The State Commissioner of Health shall not certify a plan unless he or she finds that the plan:

Proposes to provide quality services for all medical
 services which:

a. may be required by this act <u>title</u> in a manner that is
timely, effective and convenient for the employee, and
b. utilize medical treatment guidelines and protocols
consistent with those established by the Official
Disability Guidelines;

2. Is reasonably geographically convenient to residents of the
 area for which it seeks certification;

3. Provides appropriate financial incentives to reduce service
4 costs and utilization without sacrificing the quality of service;
5 4. Provides adequate methods of peer review, utilization review
6 and dispute resolution to prevent inappropriate, excessive or
7 medically unnecessary treatment, and excludes participation in the
8 plan by those providers who violate these treatment standards;

9 5. Provides aggressive case management for injured employees
10 and a program for early return to work;

6. Provides a timely and accurate method of reporting to the
 State Commissioner of Health necessary information regarding medical
 service costs and utilization to enable the State Commissioner of
 Health to determine the effectiveness of the plan;

7. Authorizes necessary emergency medical treatment for an injury provided by a provider of medical, surgical, and hospital services who is not a part of the plan; and

B. Does not discriminate against or exclude from participation
 in the plan any category of providers of medical, surgical, or
 hospital services and includes an adequate number of each category
 of providers of medical, surgical, and hospital services to give
 participants access to all categories of providers and does not
 discriminate against ethnic minority providers of medical services.

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C. The State Commissioner of Health may accept findings, licenses or certifications of other state agencies as satisfactory evidence of compliance with a particular requirement of this section.

D. Except for self-insured employers, if any insurer does not 5 contract with or provide access to a certified workplace medical 6 plan, an insured, after sixty (60) days' written notice to its 7 insurance carrier, shall be authorized to contract independently 8 with a plan of his or her choice for a period of one (1) year, to 9 provide medical care under this act title. The insured shall be 10 authorized to contract, after sixty (60) days' written notice to its 11 12 insurance carrier, for additional one-year periods if the insurer has not contracted with or provided access to a certified workplace 13 medical plan. 14

E. If an employer is not experience-rated when it participates in a certified workplace medical plan, its workers' compensation insurer shall grant a ten-percent premium reduction.

F. The State Commissioner of Health shall refuse to certify or shall revoke or suspend the certification of a plan if the State Commissioner of Health finds that the program for providing medical or health care services fails to meet the requirements of this section, or service under the plan is not being provided in accordance with the terms of the plan.

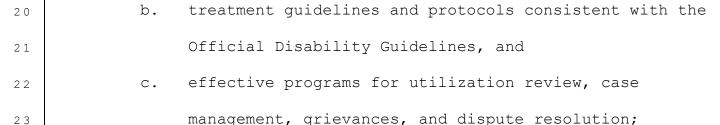
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G. The State Commissioner of Health shall implement a site 1 visit protocol for employees of the State Department of Health to 2 perform an inspection of a certified workplace medical plan to 3 ensure that medical services to an employee and the medical 4 management of the employee's needs are adequately met in a timely 5 manner and that the certified workplace medical plan is complying 6 with all other applicable provisions of this act and the State 7 Department of Health. This protocol shall include, but not be 8 limited to: 9

A site visit shall be made to each certified workplace
 medical plan not less often than once every year, but not later than
 thirty (30) days following the anniversary date of issuance of the
 initial or latest renewal certificate;

A site visit shall determine whether or not a certified
 workplace medical plan is operating in accordance with its latest
 application to the State Department of Health;

173. Compliant operations shall include, but not be limited to:18a. timely and effective medical services available with19reasonable geographic convenience,



4. Performance of a site visit shall include:

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inspection of organizational documentation, 1 a. b. inspection of systems documentation and processes, 2 random or systematic sampling of closed and open case с. 3 management cases, 4 d. workplace medical plan employee and management 5 interviews, as appropriate; 6 An initial site visit may occur with an interval of less 5. 7 than twelve (12) months to a recently certified plan, or a site 8 visit may occur more often than once in every twelve (12) months if 9 the State Commissioner of Health has reason to suspect that a plan 10 is not operating in accordance with its certification; 11 12 6. If a deficient practice is identified during a site visit, the State Department of Health shall require a certified workplace 13 medical plan to submit a timely and acceptable written plan of 14 correction, and then may perform a follow-up visit or visits to 15 ensure that the deficient practice has been eliminated; 16 7. If a deficient practice is not remedied by a certified 17 workplace medical plan on a timely basis, the State Commissioner of 18 Health shall revoke or suspend the certification of the plan; 19 8. In addition to the certification fee required pursuant to 20 subsection A of this section, certified workplace medical plans 21 shall pay the State Department of Health: 22 One Thousand Five Hundred Dollars (\$1,500.00) for an a. 23 initial annual site visit, and 24

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b. One Thousand Dollars (\$1,000.00) for each follow-up
visit, but only if less than two site visits occur in
a twelve-month period; and

9. In addition to the site visit fee required pursuant to 4 paragraph 8 of this subsection, employees of the State Department of 5 Health may charge to the certified workplace medical plan reasonable 6 travel and travel-related expenses for the site visit such as 7 overnight lodging and meals. A certified workplace medical plan 8 shall reimburse travel expenses to the State Department of Health at 9 rates equal to the amounts then currently allowed under the State 10 Travel Reimbursement Act. 11

I. The State Board of Health shall adopt such rules as may be necessary to implement the provisions of this section. Such rules shall authorize any person to petition the State Commissioner of Health for decertification of a certified workplace medical plan for a material violation of any rules promulgated pursuant to this section.

SECTION 50. AMENDATORY Section 65, Chapter 208, O.S.L. 2013, as amended by Section 3, Chapter 390, O.S.L. 2015 (85A O.S. Supp. 2016, Section 65), is amended to read as follows:

Section 65. A. If an employee suffers from an occupational disease as defined in this section and is disabled or dies as a result of the disease, the employee, or, in case of death, his or her dependents, shall be entitled to compensation as if the

disability or death were caused by injury arising out of work activities within the scope of employment, except as otherwise provided in this section.

B. No compensation shall be payable for an occupational disease
if the employee, at the time of entering into the employment of the
employer by whom the compensation would otherwise be payable,
falsely represented himself or herself in writing as not having
previously been disabled, laid off, or compensated in damages or
otherwise, because of the disease.

C. 1. If an occupational disease is aggravated by any other 10 disease or infirmity, not itself compensable, or if disability or 11 12 death from any other cause, not itself compensable, is aggravated, prolonged, accelerated, or in any way contributed to by an 13 occupational disease, the compensation payable shall be reduced and 14 limited to the proportion only of the compensation that would be 15 payable if of the occupational disease were the major cause of the 16 disability or death as the occupational disease, as a causative 17 factor, bears to all the causes of the disability or death that is 18 compensable. 19

2. The reduction in compensation is to be effected by reducing 2. The number of weekly or monthly payments or the amounts of the 2. payments, as under the circumstances of the particular case may be 2. for the best interest of the claimant employee.

D. 1. "Occupational disease", as used in this act, unless the 1 context otherwise requires, means any disease that results in 2 disability or death and arises out of and in the course of the 3 occupation or employment of the employee or naturally follows or 4 unavoidably results from an injury as that term is defined in this 5 act. A causal connection between the occupation or employment and 6 the occupational disease shall be established by a preponderance of 7 the evidence. 8

9 2. No compensation shall be payable for any contagious or
 10 infectious disease unless contracted in the course and scope of
 11 employment.

No compensation shall be payable for any ordinary disease of
 life to which the general public is exposed.

E. 1. When compensation is payable for an occupational disease, the employer in whose employment the employee was last injuriously exposed to the hazards of the disease and the carrier, if any, on the risk when the employee was last injuriously exposed under the employer shall be liable.

19 2. The amount of the compensation shall be based on the average 20 weekly wage of the employee when last injuriously exposed under the 21 employer, and the notice of injury and claim for compensation shall 22 be given and made to that employer.

F. 1. An employer shall not be liable for any compensation for an occupational disease unless:

- a. the disease is due to the nature of an employment in
 which the hazards of the disease actually exist and is
 actually incurred in the course and scope of his or
 her employment. This includes any disease due to or
 attributable to exposure to or contact with any
 radioactive material by an employee in the course and
 scope of his or her employment,
- b. disablement or death results within three (3) years in
 case of silicosis or asbestosis, or one (1) year in
 case of any other occupational disease, except a
 diseased condition caused by exposure to X-rays,
 radioactive substances, or ionizing radiation, after
 the last injurious exposure to the disease in the
 employment, or
- c. in case of death, death follows continuous disability
 from the disease, commencing within the period, for
 which compensation has been paid or awarded or timely
 claim made as provided in subparagraph b of this
 paragraph and results within seven (7) years after the
 last exposure.

2. However, in case of a diseased condition caused by exposure 2. to X-rays, radioactive substances, or ionizing radiation only, the 2. limitations expressed do not apply.

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1 SECTION 51. AMENDATORY Section 66, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 66), is amended to read as
3 follows:

4 Section 66. A. As used in this act <u>title</u>, unless the context 5 otherwise requires:

I. "Asbestosis" means the characteristic fibrotic condition of
the lungs caused by the inhalation of asbestos dust; and

8 2. "Silicosis" means the characteristic fibrotic condition of
9 the lungs caused by the inhalation of silica dust.

в. In the absence of conclusive evidence in favor of the claim, 10 disability or death from silicosis or asbestosis shall be presumed 11 12 not to be due to the nature of any occupation within the provision of this section unless during the ten (10) years immediately 13 preceding the date of disablement the employee has been exposed to 14 the inhalation of silica dust or asbestos dust over a period of not 15 less than five (5) years, two (2) years of which shall have been in 16 this state, under a contract of employment performed in this state. 17 However, if the employee has been employed by the same employer 18 during the entire five-year period, his or her right to compensation 19 against the employer shall not be affected by the fact that he or 20 she had been employed during any part of the period outside of this 21 state. 22

C. Except as otherwise provided in this section, compensation
 for disability from uncomplicated silicosis or asbestosis shall be

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1 payable in accordance with the provisions of Sections 45 and 48 of 2 this act title.

D. 1. In case of disability or death from silicosis or asbestosis complicated with tuberculosis of the lungs, compensation shall be payable as for uncomplicated silicosis or asbestosis, provided that the silicosis or asbestosis was an essential factor in the causing of disability or death.

2. In case of disability or death from silicosis or asbestosis 8 complicated with any other disease, or from any other disease 9 complicated with silicosis or asbestosis, the compensation shall be 10 reduced as provided in subsection C of Section 65 of this act title. 11 12 Е. 1. When an employee, though not actually disabled, is found by the Workers' Compensation Commission to be affected by silicosis 13 or asbestosis to such a degree as to make it unduly hazardous for 14 him or her to continue in an employment involving exposure to the 15 hazards of the disease, the Commission may order that he or she be 16 removed from his or her employment. In such a case, or in case he 17 or she has already been discharged from the employment and is 18 unemployed, he or she shall be entitled to compensation until he or 19 she can obtain steady employment in some other suitable occupation 20 in which there are no hazards of the disease. 21

2. When in any case the forced change of employment shall, in the opinion of the Commission, require that the employee be given special training in order to qualify him or her for another

occupation, the employer liable for compensation shall pay for the vocational rehabilitation and training provided for in this act title.

4 SECTION 52. AMENDATORY Section 68, Chapter 208, O.S.L. 5 2013 (85A O.S. Supp. 2016, Section 68), is amended to read as 6 follows:

Section 68. A. Unless an <u>An</u> employee gives oral or written
<u>must give</u> notice to the employer within thirty (30) fifteen (15)
days of the:

10 <u>1. The</u> date an the injury occurs, the; or

11 <u>2. If the injury is an occupational disease or cumulative</u> 12 <u>trauma, the date the employee knew or should have known that the</u> 13 injury may be related to the employment.

B. If the employee does not give timely notice of an injury,
there shall be a rebuttable presumption shall be that the injury was
not work-related. Such is not a compensable injury; provided,
however, the presumption must may be overcome by a preponderance of
the evidence.

B. Unless an employee gives oral or written notice to the employer within thirty (30) days of the employee's separation from employment, there shall be a rebuttable presumption that an occupational disease or cumulative trauma injury did not arise out of and in the course of employment. Such presumption must be overcome by a preponderance of the evidence.

1	SECTION 53. AMENDATORY Section 69, Chapter 208, O.S.L.
2	2013 (85A O.S. Supp. 2016, Section 69), is amended to read as
3	follows:
4	Section 69. A. Time for Filing.
5	1. A claim for benefits under this act, other than an
6	occupational disease, the Administrative Workers' Compensation Act
7	shall be barred unless it is filed with the <u>Workers' Compensation</u>
8	Commission within:
9	<u>a.</u> one (1) year from the date of the injury <u>,</u>
10	b. two (2) years from the date of injury for an
11	occupational disease or cumulative trauma, and
12	<u>c.</u> two (2) years from the date of death. If during the
13	one-year period following the filing of the claim the
14	employee receives no weekly benefit compensation and
15	receives no medical treatment resulting from the
16	alleged injury, the claim shall be barred thereafter.
17	For purposes of this section, the date of the injury
18	shall be defined as the date an injury is caused by an
19	accident as set forth in paragraph 9 of Section 2 of
20	this act.
21	2. a. A claim for compensation for disability on account of
22	injury which is either an occupational disease or
23	occupational infection shall be barred unless filed
24	with the Commission within two (2) years from the date

1	of the last injurious exposure to the hazards of the
2	disease or infection.
3	b. A claim for compensation for disability on account of
4	silicosis or asbestosis shall be filed with the
5	Commission within one (1) year after the time of
6	disablement, and the disablement shall occur within
7	three (3) years from the date of the last injurious
8	exposure to the hazard of silicosis or asbestosis.
9	c. A claim for compensation for disability on account of
10	a disease condition caused by exposure to X-rays,
11	radioactive substances, or ionizing radiation only
12	shall be filed with the Commission within two (2)
13	years from the date the condition is made known to an
14	employee following examination and diagnosis by a
15	medical doctor.
16	3. A claim for compensation on account of death shall be barred
17	unless filed with the Commission within two (2) years of the date of
18	such a death.
19	4. If within six (6) months after the filing of a claim for
20	compensation no bona fide request for a hearing has been made with
21	respect to the claim, the claim may, on motion and after hearing, be
22	dismissed with prejudice For the purposes of this section, the date
23	of injury for an occupational disease or cumulative trauma shall be
24	

1 the date that the employee knew or should have known that the injury 2 may be related to the employment.

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B. Time for Filing Additional Compensation.

In cases in which any compensation, including disability or
 medical, has been paid on account of injury, a claim for additional
 compensation shall be barred unless filed with the Commission within
 one (1) year from the date of the last payment of disability

8 compensation or two (2) years from the date of the injury, whichever

9 is greater If a claim for benefits under this title has been timely

10 filed with the Commission, any claim for additional benefits must be

11 filed within three (3) months after the date that the last benefit

12 was received, except as otherwise prescribed by the treating

13 physician at the time of the last appointment the employee has with

14 the treating physician.

The statute of limitations provided in this subsection shall 2. 15 not apply to claims for the replacement of medicine, crutches, 16 ambulatory devices, artificial limbs, eyeglasses, contact lenses, 17 hearing aids, and other apparatus permanently or indefinitely 18 required as the result of a compensable injury, when the employer or 19 carrier previously furnished such medical supplies, but replacement 20 of such items shall not constitute payment of compensation so as to 21 toll the statute of limitations. 22

23 C. A claim for additional compensation shall specifically state 24 that it is a claim for additional compensation. Documents which do not specifically request additional benefits shall not be considered a claim for additional compensation.

D. If within six (6) months after the filing of a claim for
additional compensation no bona fide request for a hearing has been
made with respect to the claim, the claim shall be dismissed without
prejudice to the refiling of the claim within the limitation period
specified in subsection B of this section.

E. Failure to File. Failure to file a claim within the period prescribed in subsection A or B of this section shall not be a bar to the right to benefits hereunder unless objection to the failure is made at the first hearing on the claim in which all parties in interest have been given a reasonable notice and opportunity to be heard by the Commission.

14 F. Persons under Disability.

15 1. Notwithstanding any statute of limitation provided for in this act, when it is established that failure to file a claim by an injured employee or his or her dependents was induced by fraud, the claim may be filed within one (1) year from the time of the

19 discovery of the fraud.

20 2. Subsections A and B of this section shall not apply to a 21 mental mentally incompetent person or a minor so long as the person 22 has no guardian or similar legal representative. The limitations 23 prescribed in subsections A and B of this section shall apply to the 24 mental mentally incompetent person or minor from the date of the

appointment of a guardian or similar legal representative for that person, and when no guardian or similar representative has been appointed, to a minor on reaching the age of majority.

G. A latent injury or condition shall not delay or toll the
limitation periods specified in this section. This subsection shall
not apply to the limitation period for occupational diseases
specified in paragraph 2 of subsection A of this section.

8 SECTION 54. AMENDATORY Section 70, Chapter 208, O.S.L. 9 2013 (85A O.S. Supp. 2016, Section 70), is amended to read as 10 follows:

Section 70. The <u>Workers' Compensation</u> Commission is authorized and directed to promulgate rules to establish and implement a preliminary conference procedure designed to accomplish the following objectives:

15 1. To provide the <u>claimant employee</u> an opportunity to confer 16 with a legal advisor on the staff of the Commission to be advised of 17 his or her rights under this <u>act title</u> and to ensure that the rights 18 are protected. The conference shall be held in the county where the 19 accident occurred, if the accident occurred in this state, unless 20 otherwise agreed to by the parties, or otherwise directed by the 21 Commission;

2. To provide an opportunity for, but not compel, a binding
 settlement of some or all the issues present at the time;

3. To facilitate the resolution of issues without the expense
 of litigation or attorney fees for either party; and

4. To authorize the legal advisor to approve compromise settlements entered into while attending or as a result of the preliminary conference and those joint petition settlements entered into under Section 87 of this act <u>title</u>. Provided, however, the same legal advisors shall not both advise the <u>claimant employee</u> and approve the joint petition.

9 SECTION 55. AMENDATORY Section 71, Chapter 208, O.S.L. 10 2013 (85A O.S. Supp. 2016, Section 71), is amended to read as 11 follows:

Section 71. A. Notice. Within ten (10) days after a <u>an</u> <u>Employee's Notice of Claim for Compensation or other</u> claim for <u>compensation benefits</u> has been filed, the <u>Workers' Compensation</u> Commission shall notify the employer and any other interested person of the filing of the claim.

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B. Investigation - Hearing.

18 1. The Commission shall assign the claim to an administrative 19 law judge who shall hold a hearing on application of any interested 20 party, or on its own motion prehearing conference within seven (7) 21 days after the filing of the Employee's Notice of Claim for 22 Compensation or other claim for benefits. At the prehearing 23 conference, the issue or issues shall be set for trial at a date no 24 later than sixty (60) days after the prehearing conference.

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1	2. An application for a hearing shall clearly set forth the
2	specific issues of fact or law in controversy and the contentions of
3	the party applying for the hearing.
4	3. If any party is not represented by a lawyer, the
5	administrative law judge shall define the issues to be heard.
6	4. If a hearing on the claim is ordered, the administrative law
7	judge shall give the claimant and other interested parties ten (10)
8	days' notice of the hearing served personally on the claimant and
9	other parties, or by registered mail. The hearing shall be held in
10	Tulsa or Oklahoma County, as determined by the Commission.
11	5. The award, together with the statement of the findings of
12	fact and other matters pertinent to the issues, shall be filed with
13	the record of the proceedings, and a copy of the award shall
14	immediately be sent to the parties in or to counsels of record, if
15	any.
16	C. Hearings and trials shall not be continued, absent
17	extraordinary circumstances as determined by the Commission.
18	D. Evidence and Construction.
19	1. a. At the hearing the claimant <u>employee</u> and the employer
20	may each present evidence relating to the claim.
21	Evidence may be presented by any person authorized in
22	writing for such purpose. The evidence may include
23	verified medical reports which shall be accorded such
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weight as may be warranted when considering all evidence in the case.

b. Any determination of the existence or extent of physical impairment <u>disability</u> shall be supported by objective and measurable physical or mental findings.

2. When deciding any issue, administrative law judges and the
Commission shall determine, on the basis of the record as a whole,
whether the party having the burden of proof on the issue has
established it by a preponderance of the evidence.

Administrative law judges, the Commission, and any reviewing
 courts shall strictly construe the provisions of this act title.

4. In determining whether a party has met the burden of proof
on an issue, administrative law judges and the Commission shall
weigh the evidence impartially and without giving the benefit of the
doubt to any party.

D. Judgment. E. The judgment denying the claim or making the award shall be filed in the office of the Commission, and a copy shall be sent by registered mail, facsimile, electronic mail or by other electronic means with confirmation of receipt to the claimant employee and to the employer or to their attorneys.

E. F. No compensation for disability of an injured employee shall be payable for any period beyond his or her death; provided, however, an award of compensation for disability may be made after

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the death of the injured employee for the period of disability
 preceding death.

G. Conduct of Hearing or Inquiry. 3 1. In making an investigation or inquiry or conducting a 4 hearing, the administrative law judges and the Commission shall not 5 be bound by technical or statutory rules of evidence or by technical 6 or formal rules of procedure, except as provided by this title. The 7 administrative law judges and the Commission may make such 8 investigation or inquiry, or conduct the hearing, in a manner as 9 shall best ascertain the rights of the parties. 10 2. Declarations of a deceased employee concerning the injury 11 12 may be received in evidence and may, if corroborated by other evidence, be sufficient to establish the injury. 13 3. When deciding any issue, administrative law judges and the 14 Commission shall determine, on the basis of the record as a whole, 15 whether the party having the burden of proof on the issue has 16 established the proof by a preponderance of evidence. 17 4. Administrative law judges are required to make specific, on-18 the-record findings of ultimate facts responsive to the issues 19 shaped by the evidence as well as conclusions of law on which 20 judgment is to be rested. 21 H. Hearings to be Public - Records. 22 Hearings before the Commission shall be open to the 23 1. a. public and shall be stenographically reported. The 24

1	Commission is authorized to contract for the reporting
2	of the hearings.
3	b. The Commission shall, by rule, provide for the
4	preparation of a record of all hearings and other
5	proceedings before it.
6	2. The Commission shall not be required to stenographically
7	report or prepare a record of joint petition hearings. The
8	administrative law judge or legal advisor shall record the hearing
9	at no cost to the parties.
10	I. Introduction of Evidence.
11	1. All oral evidence or documentary evidence shall be presented
12	to the designated representative of the Commission at the initial
13	hearing on a controverted claim. The oral evidence shall be
14	stenographically reported. Each party shall present all evidence at
15	the initial hearing. Further hearings for the purpose of
16	introducing additional evidence shall be granted only at the
17	discretion of the hearing officer or Commission. A request for a
18	hearing for the introduction of additional evidence shall show the
19	substance of the evidence desired to be presented.
20	2. a. Any party proposing to introduce medical reports or
21	testimony of physicians at the hearing of a
22	controverted claim shall, as a condition precedent to
23	the right to do so, furnish to the opposing party and
24	to the Commission copies of the written reports of the

1		physicians of their findings and opinions at least
2		seven (7) days before the date of the hearing. If no
3		written reports are available to a party, the party
4		shall notify in writing the opposing party and the
5		Commission of the name and address of the physicians
6		proposed to be used as witnesses and the substance of
7		their testimony at least seven (7) days before the
8		hearing.
9	b.	If the opposing party desires to cross-examine the
10		physician, he or she should notify the party who
11		submits a medical report to him or her as soon as
12		practicable, in order that he or she may make every
13		effort to have the physician present for the hearing.
14	<u>3.</u> A par	ty failing to observe the requirements of this
15	subsection ma	y not be allowed to introduce medical reports or
16	testimony of	physicians at a hearing, except in the discretion of
17	the hearing o	fficer or the Commission.
18	4. The t	ime periods may be waived by the consent of the
19	parties.	
20	J. Exper	t testimony shall not be allowed unless it satisfies
21	the requireme	nts of Federal Rule of Evidence 702 with annotations
22	and amendment	<u>s.</u>
23		
24		

1 SECTION 56. AMENDATORY Section 77, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 77), is amended to read as
3 follows:

Section 77. If the Workers' Compensation Commission is a party 4 to or is otherwise interested in a court proceeding under this act 5 title, it may employ attorneys to appear on its behalf. If 6 requested by the Commission, it shall be the duty of the Attorney 7 General or the prosecuting district attorneys of the different 8 districts to represent the Commission without extra compensation. 9 SECTION 57. AMENDATORY Section 78, Chapter 208, O.S.L. 10 2013 (85A O.S. Supp. 2016, Section 78), is amended to read as 11 12 follows:

Section 78. A. Any party feeling aggrieved by the judgment, 13 decision, or award made by the administrative law judge may, within 14 ten (10) days of issuance, appeal to the Workers' Compensation 15 Commission. After hearing arguments, the Commission may reverse or 16 modify the decision only if it determines that the decision was 17 against the clear weight of the evidence or contrary to law. All 18 such proceedings of the Commission shall be recorded by a court 19 reporter, if requested by any party. Any judgment of the Commission 20 which reverses a decision of the administrative law judge shall 21 contain specific findings relating to the reversal. 22

B. The chair of the Commission shall have the authority to appoint an administrative law judge to the en banc panel when any

Commissioner of the Commission is disqualified for any reason, to
fill a vacancy, or in the absence of a Commissioner; provided, the
appointed administrative law judge shall not have presided over any
of the previous hearings on the claim.

<u>C.</u> The appellant shall pay a filing fee of One Hundred Seventyfive Dollars (\$175.00) to the Commission at the time of filing his or her appeal. The fee shall be deposited in the Workers' Compensation Fund.

C. D. The judgment, decision or award of the Commission shall 9 be final and conclusive on all questions within its jurisdiction 10 between the parties unless an action is commenced in the Supreme 11 12 Court of this state to review the judgment, decision or award within twenty (20) days of being sent to the parties. Any judgment, 13 decision or award made by an administrative law judge shall be 14 stayed until all appeal rights have been waived or exhausted. 15 The Supreme Court may modify, reverse, remand for rehearing, or set 16 aside the judgment or award only if it was: 17

18 1. In violation of constitutional provisions;

19 2. In excess of the statutory authority or jurisdiction of the 20 Commission;

- 3. Made on unlawful procedure;
- Affected by other error of law;

23 5. Clearly erroneous in view of the reliable, material,
 24 probative and substantial competent evidence;

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6. Arbitrary or capricious;

7. Procured by fraud; or

8. Missing findings of fact on issues essential to the4 decision.

This action shall be commenced by filing with the Clerk of the 5 Supreme Court a certified copy of the judgment, decision or award of 6 the Commission attached to the petition by the complaint which shall 7 specify why the judgment, decision or award is erroneous or illegal. 8 The proceedings shall be heard in a summary manner and shall have 9 precedence over all other civil cases in the Supreme Court, except 10 preferred Corporation Commission appeals. The Supreme Court shall 11 12 require the appealing party to file within forty-five (45) days from the date of the filing of an appeal or a judgment appealed from, a 13 transcript of the record of the proceedings before the Commission, 14 or such later time as may be granted by the Supreme Court on 15 application and for good cause shown. The action shall be subject 16 to the law and practice applicable to other civil actions cognizable 17 in the Supreme Court. 18

D. E. A fee of One Hundred Dollars (\$100.00) per appeal to the Supreme Court shall be paid to the Commission and deposited in the Workers' Compensation Fund as costs for preparing, assembling, indexing and transmitting the record for appellate review. This fee shall be paid by the party taking the appeal. If more than one party to the action files an appeal from the same judgment, decision

or award, the fee shall be paid by the party whose petition in error
 commences the principal appeal.

3 SECTION 58. AMENDATORY Section 82, Chapter 208, O.S.L.
4 2013 (85A O.S. Supp. 2016, Section 82), is amended to read as
5 follows:

6 Section 82.

- A. 1. a. Fees for legal services rendered in a claim shall not
 be valid unless approved by the <u>Workers' Compensation</u>
 Commission.
- b. An attorney representing an injured employee may only 10 recover attorney fees up to ten percent (10%) of any 11 12 temporary total disability or temporary partial disability compensation and twenty percent (20%) 13 fifteen percent (15%) of any permanent partial 14 disability, permanent total disability, or death 15 compensation awarded to an injured employee by the 16 Commission from a controverted claim. If the employer 17 makes a written offer to settle permanent partial 18 disability, permanent total disability, or death 19 compensation and that offer is rejected, the 20 employee's attorney may not recover attorney fees in 21 excess of thirty percent (30%) of the difference 22 between the amount of any award and the settlement 23 offer. 24

1		(1)	Attorney fees may not be collected for recovery
2			on noncontroverted claims.
3		(2)	Attorney fees shall not be awarded on medical
4			benefits or services.
5		(3)	The fee for legal services rendered by an
6			attorney representing an employee in connection
7			with a change of physician requested by the
8			injured employee, controverted by the employer,
9			and awarded by the Commission, shall be Two
10			Hundred Dollars (\$200.00).
11		(4)	Attorney fees may include not more than ten
12			percent (10%) of the value, or reasonable
13			estimate thereof, of vocational rehabilitation
14			services.
15	с.	А "с	ontroverted claim" means that there has been a
16		cont	ested hearing before the Commission over whether
17		ther	e has been a compensable injury or whether the
18		empl	oyee is entitled to <u>a claim for which the employer</u>
19		has	denied compensability or denied the payment of
20		temp	orary total disability, temporary partial
21		disa	bility, permanent partial disability, permanent
22		tota	l disability, or death compensation. A request
23		for	a change in physician shall not trigger a
			roverted claim for purposes of recovering any
24		cont	roverted claim for purposes of recovering any

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attorney fees except the fees under division 3 of subparagraph b of this paragraph. A controverted claim shall not exist if the employee or his or her representative has withheld pertinent information in his or her possession related to the claim from the employer or has violated the provisions of Section 6 of this act title.

8 2. Any person who or entity that brings a controverted claim 9 against the State Treasurer, as a custodian of the Multiple Injury 10 Trust Fund, shall provide notice of the claim to the Commission. 11 Thereafter, the Commission shall direct fees for legal services be 12 paid from the Fund, in addition to any compensation award. The fees 13 shall be authorized only on the difference between the amount of 14 compensation controverted and the amount awarded from the Fund.

3. In any case where attorney fees are allowed by the
Commission, the limitations expressed in subparagraph b of paragraph
1 of this subsection shall apply.

Medical providers may voluntarily contract with the attorney
 for the employee to recover disputed charges, and the provider may
 charge a reasonable fee for the cost of collection.

B. An attorney representing an employee under this act <u>title</u> may not recover fees for services except as expressly provided in this section.

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1 SECTION 59. AMENDATORY Section 85, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 85), is amended to read as
3 follows:

Section 85. Clean claims for services rendered under this act <u>title</u> are payable within thirty (30) days after receipt by the employer unless disputed as to compensability or amount. "Clean claim" means a claim that has no defect or impropriety, including a lack of any required substantiating documentation, or particular circumstance requiring special treatment that impedes prompt payment.

11 SECTION 60. AMENDATORY Section 86, Chapter 208, O.S.L.
12 2013 (85A O.S. Supp. 2016, Section 86), is amended to read as
13 follows:

1. Each employer desiring to controvert an Section 86. A. 14 employee's right to compensation shall file with the Workers' 15 Compensation Commission on or before the fifteenth day following 16 notice of the alleged injury or death a statement on a form 17 prescribed by the Commission that the right to compensation is 18 controverted and the grounds for the controversion, the names of the 19 claimant employee, employer, and carrier, if any, and the date and 20 place of the alleged injury or death. 21

22 2. Failure to file the statement of controversion shall not
 23 preclude the employer's ability to controvert the claim or cause it

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1 to waive any defenses. The employer can make additional defenses 2 not included in the initial notice at any time.

If an employer is unable to obtain sufficient medical в. 3 information as to the alleged injury or death within fifteen (15) 4 days following receipt of notice, although the employer has acted in 5 good faith and with all due diligence, the employer may apply in 6 writing for an extension of time for making payment of the first 7 installment or controverting the claim. This written application is 8 to be postmarked within the fifteen-day period. The Commission may, 9 in its discretion, grant the extension and fix the additional time 10 to be allowed. Filing of application for an extension shall not be 11 deemed to be a controversion of the claim. 12

C. The provisions in subsection B of this section shall not apply in cases where the physician is an employee of, on retainer with, or has a written contract to provide medical services for the employer.

17 SECTION 61. AMENDATORY Section 87, Chapter 208, O.S.L.
18 2013 (85A O.S. Supp. 2016, Section 87), is amended to read as
19 follows:

20 Section 87. <u>A.</u> If the employer or carrier and the injured 21 employee desire to settle the claim, they shall file a joint 22 petition for settlement with the <u>Workers' Compensation</u> Commission. 23 After the joint petition has been filed, the Commission shall order

that all claims between the parties have been settled. No appeal
 shall lie from a judgment or award denying a joint petition.

B. The Commission shall not approve a joint petition or other settlement that provides for the payment of benefits in a lump sum except as otherwise provided in this title.

6 SECTION 62. AMENDATORY Section 89, Chapter 208, O.S.L. 7 2013 (85A O.S. Supp. 2016, Section 89), is amended to read as 8 follows:

Section 89. If the employer has made advance payments for 9 compensation, the employer shall be entitled to be reimbursed out of 10 any unpaid installment or installments of compensation due. If the 11 12 injured employee receives full wages during disability, he or she shall not be entitled to compensation during the period. Any wages 13 paid by the employer, over the statutory temporary disability 14 maximum, shall be deducted from the permanent partial disability 15 award. Such deduction shall be made after any such applicable 16 attorney fee and any such assessment made pursuant to Sections 45 17 and 46 of this act title have been paid. 18

19 SECTION 63. AMENDATORY Section 91, Chapter 208, O.S.L.
20 2013 (85A O.S. Supp. 2016, Section 91), is amended to read as
21 follows:

Section 91. Compensation shall bear interest pursuant to Section 727.1 of Title 12 of the Oklahoma Statutes from the day an award is made by either an administrative law judge or the full

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Workers' Compensation Commission on all accrued and unpaid
 compensation.

3 SECTION 64. AMENDATORY Section 94, Chapter 208, O.S.L.
4 2013 (85A O.S. Supp. 2016, Section 94), is amended to read as
5 follows:

Section 94. An employee who is incarcerated shall not be
eligible to receive medical or disability benefits under this act
title.

9 SECTION 65. AMENDATORY Section 95, Chapter 208, O.S.L.
10 2013 (85A O.S. Supp. 2016, Section 95), is amended to read as
11 follows:

12 Section 95. A. On approval by the Insurance Commissioner, and following the adoption of such rules as the Insurance Commissioner 13 deems necessary, each insurer issuing a policy under this act title 14 shall offer, as a part of the policy or as an optional endorsement 15 to the policy, deductibles optional to the policyholder for benefits 16 payable under this act title. Deductible amounts offered shall be 17 fully disclosed to the prospective policyholder in writing. The 18 policyholder exercising the deductible option shall choose only one 19 deductible amount. 20

B. Optional deductibles shall be offered in each policy
insuring liability for workers' compensation that is issued,
delivered, issued for delivery, or renewed under this act title on
or after approval by the Insurance Commissioner, unless an insured

1 employer and insurer agree to renegotiate a workers' compensation
2 policy in effect on that date so as to include a provision allowing
3 for a deductible.

C. If the policyholder exercises the option and chooses a 4 deductible, the insured employer shall be liable for the amount of 5 the deductible for benefits paid for each compensable claim of work 6 injury suffered by an employee. The insurer shall pay all or part 7 of the deductible amount, whichever is applicable to a compensable 8 claim, to the person or medical provider entitled to the benefits 9 conferred by this act title and seek reimbursement from the insured 10 employer for the applicable deductible amount. The payment or 11 12 nonpayment of deductible amounts by the insured employer to the insurer shall be treated under the policy insuring the liability for 13 workers' compensation in the same manner as payment or nonpayment of 14 premiums. 15

D. If the Insurance Commissioner determines it to be feasible, 16 and under such rules as he or she may adopt, premium reduction for 17 deductibles may be determined before the application of any 18 experience modification, premium surcharge, or premium discounts, 19 and, to the extent that an employer's experience rating or safety 20 record is based on benefits paid, money paid by the insured employer 21 under a deductible as provided in this section may not be included 22 as benefits paid so as to harm the experience rating of the 23 employer. 24

E. This section shall not apply to employers who are approved to self-insure against liability for workers' compensation or group self-insurance funds for workers' compensation.

SECTION 66. AMENDATORY Section 98, Chapter 208, O.S.L.
2013, as amended by Section 4, Chapter 169, O.S.L. 2014 (85A O.S.
Supp. 2016, Section 98), is amended to read as follows:

Section 98. The Self-insurance Guaranty Fund shall be derived
8 from the following sources:

9 1. Any unexpended funds, including interest thereon, held by
10 the State Treasurer in the Workers' Compensation Self-insurance
11 Guaranty Fund transferred to the Self-insurance Guaranty Fund as
12 provided in Section 124 of this title;

2. Until In the event that the Self-insurance Guaranty Fund 13 contains Two Million Dollars (\$2,000,000.00) or in the event the 14 amount in the fund falls below One Million Dollars (\$1,000,000.00) 15 Eight Hundred Thousand Dollars (\$800,000.00) or less, an assessment 16 levied by the Workers' Compensation Commission against each private 17 self-insurer and group self-insurance association based on an 18 assessment rate to be determined by the commissioners, not exceeding 19 one percent (1%) two percent (2%) of actual paid losses of the self-20 insurer during the preceding calendar year, payable to the Tax 21 Commission for deposit to the fund. The assessment against private 22 self-insurers shall be determined using a rate equal to the 23 proportion that the deficiency in the fund attributable to private 24

self-insurers bears to the actual paid losses of all private self-1 insurers for the year period of January 1 through December 31 2 preceding the assessment. The assessment against group self-3 insurance associations shall be determined using a rate equal to the 4 proportion that the deficiency in excess of the surplus of the Group 5 Self-Insurance Association Guaranty Fund at the date of the transfer 6 attributable to group self-insurance associations bears to the 7 actual paid losses of all group self-insurance associations 8 cumulatively for any calendar year preceding the assessment. Each 9 self-insurer shall provide the Workers' Compensation Commission with 10 such information as the Commission may determine is necessary to 11 12 effectuate the purposes of this paragraph. For purposes of this paragraph, "actual paid losses" means all medical and indemnity 13 payments, including temporary disability, permanent disability, and 14 death benefits, and excluding loss adjustment expenses and reserves. 15 The assessment shall be paid within thirty (30) a. 16 calendar days after the date the commissioners notify 17 the self-insurer of the assessment. 18 A private employer or group self-insurance association b. 19 which ceases to be a self-insurer shall remain liable 20 for any and all assessments of the self-insurer as 21 provided in this paragraph based on actual paid losses 22 for the calendar year period preceding the assessment. 23

Failure of a self-insurer to pay, or timely pay, an 1 с. assessment required by this paragraph, or to report 2 payment of the same to the Commission within ten (10) 3 days of payment, shall be grounds for revocation by 4 the Commission of the self-insurer's permit to self-5 insure in this state, after notice and hearing. A 6 former self-insurer failing to make payments required 7 by this paragraph promptly and correctly, or failing 8 to report payment of the same to the Commission within 9 ten (10) days of payment, shall be subject to 10 administrative penalties as allowed by law, including 11 12 but not limited to, a fine in the amount of Five Hundred Dollars (\$500.00) or an amount equal to one 13 percent (1%) of the unpaid amount, whichever is 14 greater, to be paid and deposited to the credit of the 15 Workers' Compensation Fund created in Section 28 of 16 this title. It shall be the duty of the Tax 17 Commission to collect the assessment provided for in 18 this paragraph. The Tax Commission is authorized to 19 bring an action for recovery of any delinquent or 20 unpaid assessments, and may enforce payment of the 21 assessment by proceeding in accordance with Section 79 22 of this title. 23

d. An impaired self-insurer shall be exempt from 1 assessments beginning on the date of the Commission's 2 designation until the Commission determines the self-3 insurer is no longer impaired. 4 e. The Tax Commission shall determine the fund balance as 5 of March 1 and September 1 of each year, and when 6 otherwise requested by the Workers' Compensation 7 Commission, and shall advise the Workers' Compensation 8 Commission in writing within thirty (30) days of each 9 such determination; and 10 3. Any excess funds, including interest thereon, transferred to 11 12 the Self-insurance Guaranty Fund, as provided in subsection D of Section 99 of this title; and 13 4. Any interest accruing on monies paid into the fund. 14 Section 99, Chapter 208, O.S.L. SECTION 67. AMENDATORY 15 2013, as amended by Section 5, Chapter 169, O.S.L. 2014 (85A O.S. 16 Supp. 2016, Section 99), is amended to read as follows: 17 Section 99. On determination by the Workers' Compensation 18 Commission that a self-insurer has become an impaired self-insurer, 19 the Commission shall secure release of the security required by 20 Section 38 of this title and, advise the Self-insurance Guaranty 21 Fund Board of the impairment and transfer the proceeds of the 22 security to the Self-insurance Guaranty Fund Board to be maintained 23 in a segregated interest-bearing division special agency account for 24

1	administering workers' compensation obligations of the impaired
2	self-insurer. The Self-insurance Guaranty Fund Board shall be the
3	fiduciary of the account. Claims administration, including
4	processing, investigating and paying valid claims against an
5	impaired self-insurer under the Administrative Workers' Compensation
6	Act, may include payment by the surety that issued the surety bond
7	or be under a contract between the Commission and an insurance
8	carrier, appropriate state governmental entity or an approved
9	service organization, as approved by the Commission.
10	B. Proceeds from the released security, including interest
11	thereon, shall be used by the Board to administer the workers'
12	compensation obligations of the impaired self-insurer. Claims
13	administration includes, but is not limited to, processing,
14	investigating and paying claims, actuarial studies, attorney fees
15	incurred for filing a proof of claim in the bankruptcy of the
16	impaired self-insurer, and a pro rata portion of the staff expenses
17	of the Self-insurance Guaranty Fund Board.
18	C. Any unexpended funds, including interest thereon, held by
19	the State Treasurer in an interest-bearing account on the effective
20	date of this act from which an impaired self-insurer's workers'
21	compensation obligations are paid, shall be transferred to the
22	Board. Such funds shall be expended by the Board only for the
23	purpose of administering the workers' compensation obligations of
24	

the impaired self-insurer and as otherwise authorized in subsection
D of this section.

3	D. Except as otherwise provided by law or by agreement of the
4	parties, excess proceeds from the security remaining after each
5	claim for benefits of an impaired self-insurer has been paid,
6	settled or lapsed under the Administrative Workers' Compensation Act
7	and costs of administration of such claims have been paid, as
8	determined by the Self-insurance Guaranty Fund Board, shall be
9	transferred to the Self-insurance Guaranty Fund by the Board.
10	SECTION 68. AMENDATORY Section 101, Chapter 208, O.S.L.
11	2013 (85A O.S. Supp. 2016, Section 101), is amended to read as
12	follows:
13	Section 101. A. On or before the first day of July each year,
14	the <u>Workers' Compensation</u> Commission shall prepare, make public and
15	submit a report for the prior calendar year to the Governor, the
16	President Pro Tempore of the Senate, the Speaker of the House of
17	Representatives, and each member of the Legislature, containing a
18	statement of the number of awards made and the causes of the
19	accidents leading to the injuries for which the awards were made,
20	total work load data of the administrative law judges, including a
21	detailed report of the work load and judgments written by each

23 together with any other matter which the Commission deems proper to 24 report.

judge, a detailed statement of the expenses of the Commission,

B. After public hearing and consultation with representatives of employers, insurance carriers, and employees, the Commission shall implement, with the assistance of the Insurance Commissioner, by July 1, 2014, an electronic data interchange (EDI) system that provides relevant data concerning the Oklahoma workers' compensation system and the delivery of benefits to injured workers employees.

C. To assist the Commission in developing and implementing the 7 EDI system, there is hereby created the Oklahoma Workers' 8 Compensation Electronic Data Interchange Advisory Committee. Within 9 thirty (30) days of the effective date of this act after February 1, 10 2014, the Governor shall appoint five persons to serve as members of 11 12 the advisory committee, one of whom shall be selected by the Governor as chair. The chair shall provide adequate notice of 13 meetings of the advisory committee and public hearings as required 14 by law. 15

16 SECTION 69. AMENDATORY Section 102, Chapter 208, O.S.L.
17 2013 (85A O.S. Supp. 2016, Section 102), is amended to read as
18 follows:

Section 102. A. The Workers' Compensation Commission shall adopt rules permitting two or more employers, not otherwise subject to the provisions of Section 150 <u>107</u> of this act <u>title</u>, to pool together liabilities under this act <u>title</u> for the purpose of qualifying as a group self-insurer and each such employer shall be classified as a self-insurer.

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B. The Commission shall approve the distribution of all
undistributed policyholders' surplus of a Workers' Compensation
Self-Insurance Program if the Program complies with the following
criteria:

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1. Has been in business for at least five (5) years;

2. Has its financial statements audited by a public accounting
firm which audits at least one corporate client which has assets in
excess of One Billion Dollars (\$1,000,000,000.00) and on which the
accounting firm has issued an unqualified opinion as to the fair
presentation of the financial position of the Program showing
adequate solvency and reserves; and

3. Is in compliance with the provisions of this act <u>title</u> and
all other regulations as required by the Commission.

C. A group self-insurer created pursuant to this section either prior to or after the effective date of this act <u>February 1, 2014,</u> shall not be subject to the provisions of the Oklahoma Securities Act.

18 SECTION 70. AMENDATORY Section 103, Chapter 208, O.S.L.
19 2013 (85A O.S. Supp. 2016, Section 103), is amended to read as
20 follows:

Section 103. The Workers' Compensation Commission shall adopt rules permitting two or more group self-insurance associations to pool their liabilities under this act <u>title</u> for the purpose of

1 providing such group self-insurance associations specific and 2 aggregate excess insurance.

3 SECTION 71. AMENDATORY Section 104, Chapter 208, O.S.L.
4 2013 (85A O.S. Supp. 2016, Section 104), is amended to read as
5 follows:

6 Section 104. No member or personnel of the Workers' 7 Compensation Commission, the Self-insurance Guaranty Fund Board, or 8 administrative law judge shall be liable in a civil proceeding for 9 any act performed in good faith in the performance of that person's 10 powers or duties under this act title.

11 SECTION 72. AMENDATORY Section 105, Chapter 208, O.S.L.
12 2013 (85A O.S. Supp. 2016, Section 105), is amended to read as
13 follows:

Section 105. A. No employee of the Workers' Compensation Commission shall be competent to testify on any matter concerning any information the employee has received through the performance of the employee's duties under the provisions of this act title.

B. The commissioners and employees of the Commission shall not solicit employment for any attorney or physician nor shall they recommend or refer any claimant <u>employee</u> or employer to an attorney or physician. If any employee of the Commission makes such a solicitation, recommendation or reference, that person, upon conviction, shall be guilty of a misdemeanor punishable, for each offense, by a fine of not more than One Thousand Dollars (\$1,000.00)

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or by imprisonment in the county jail not to exceed one (1) year, or
by both such fine and imprisonment. The Commission shall
immediately terminate the employment of any employee who is guilty
of such solicitation, recommendation or reference. A commissioner
guilty of such solicitation, recommendation or reference shall be
subject to removal from office.

C. No administrative law judge shall engage in any ex parte
communication with any party to an action pending before the
Commission or with any witness or medical provider regarding the
merits of a specific matter pending before the judge for resolution.
Any violation of this provision shall subject the judge to
disqualification from the action or matter upon presentation of an
application for disqualification.

14 SECTION 73. AMENDATORY Section 150, Chapter 208, O.S.L.
15 2013 (85A O.S. Supp. 2016, Section 107), is amended to read as
16 follows:

Section 107. A. 1. All public entities of this state, their agencies and instrumentalities, authorities, and public trusts of which they are beneficiaries shall provide workers' compensation to their employees and elected officials engaged in either governmental or proprietary functions in accordance with this section. Compensation or indemnification for compensation shall be paid out

23 of the funds of the public entities.

2. Except as otherwise provided, the state and all its 1 institutions of higher education, departments, instrumentalities, 2 institutions, and public trusts of which it or they are 3 beneficiaries shall insure against liability for workers' 4 compensation with CompSource Oklahoma and shall not be permitted to 5 insure with any other insurance carrier unless: 6 CompSource Oklahoma refuses to accept the risk when a. 7 the application for insurance is made, 8 b. specifically authorized by law, 9 the state entity can obtain workers' compensation с. 10 insurance coverage at the same cost or at a lower cost 11 12 from another insurance carrier licensed in this state, 13 or d. CompSource Oklahoma begins operating as a mutual 14 insurance company. 15 The state, all state institutions of higher education 3. a. 16 except comprehensive universities, and all state 17 departments, instrumentalities, institutions, and 18 public trusts of which the state is a beneficiary, may 19 self-insure. Self-insurance administration may only 20 be obtained through CompSource Oklahoma, unless 21 CompSource Oklahoma begins operating as a mutual 22 insurance company. 23

- b. If CompSource Oklahoma begins operating as a mutual insurance company:
- (1) the state, all state institutions of higher
 education except comprehensive universities, and
 all state departments, instrumentalities,
 institutions, and public trusts so electing to
 self-insure shall pay premiums set by CompSource
 Oklahoma which shall collect premiums, pay claims
 and provide for excess insurance, and
- 10 (2) all dividends or profits accumulating from a
 11 self-insurance program shall be refunded to the
 12 participants on a formula devised by CompSource
 13 Oklahoma.

B. All counties, cities and towns, their instrumentalities and public trusts of which they are beneficiaries shall insure against their liability for workers' compensation with CompSource Oklahoma or, through any combination of the following, may:

Insure with an insurance carrier licensed in this state;
 Self-insure and make any appropriation of funds to cover
 their risk;

3. Secure reinsurance or excess insurance over and above a
self-insurance retention in any manner authorized by subsections B
and C of Section 167 of Title 51 of the Oklahoma Statutes; or

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4. Secure compensation for their employees in the manner
 provided in The Governmental Tort Claims Act, subsection C of
 Section 167 of Title 51 of the Oklahoma Statutes.

C. Boards of education, their instrumentalities and public
trusts of which they are beneficiaries shall insure against their
liability for workers' compensation through any combination of the
following:

1. Insure with an insurance carrier licensed in Oklahoma;

9 2. Self-insure and make any appropriation of funds to cover
10 their risk; or

3. Secure reinsurance or excess insurance over and above a
 self-insurance retention in any manner authorized by subsection B of
 Section 168 of Title 51 of the Oklahoma Statutes.

D. Comprehensive universities shall insure against their liability for workers' compensation with CompSource Oklahoma or, if it can be demonstrated to the Board of Regents of the comprehensive university prior to the inception date of a workers' compensation policy that the policy will result in a lower cost than one with CompSource Oklahoma or if CompSource Oklahoma begins operating as a mutual insurance company, through any combination of the following:

Insure with an insurance carrier licensed in Oklahoma; or
 Self-insurance, making any appropriation of funds to cover
 their risk.

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In addition to any other provision of this section, city, 1 Ε. county, city-county, and public trust hospitals may insure with 2 other insurance carriers licensed in this state if it can be 3 demonstrated to the governing body of the hospital prior to the 4 inception date of a workers' compensation policy each year that the 5 policy will result in a lower cost than one with CompSource Oklahoma 6 or if CompSource Oklahoma begins operating as a mutual insurance 7 8 company.

9 F. For purposes of this act <u>title</u>, all contracts of employment 10 for state, county, municipal, and state-funded educational entities 11 and public trusts will be considered to have been entered into in 12 this state regardless of where the work is performed.

G. When a person is employed by the state, a municipality, a 13 county, or by any political subdivision thereof, and, while off-duty 14 from the employment, is employed by a private employer, the private 15 employer alone shall be liable for compensation under this act title 16 for any injury or death of the person arising out of and in the 17 course of employment which occurs during the hours of actual 18 employment by the private employer. The provisions of this 19 subsection shall not relieve the state, a municipality or a county, 20 or any political subdivision thereof, from providing disability 21 benefits to which a person may be entitled pursuant to a pension or 22 retirement plan. The provisions of this subsection shall not 23 preclude an employee or group of employees so employed from 24

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providing separate compensation coverage for off-duty employment by
a private employer.

3 SECTION 74. AMENDATORY Section 151, Chapter 208, O.S.L.
4 2013 (85A O.S. Supp. 2016, Section 108), is amended to read as
5 follows:

Section 108. Any claimant employee may, upon the payment of the 6 Workers' Compensation Commission's filing fee, dismiss any claim 7 brought by the claimant employee at any time before final submission 8 of the case to the Commission for decision. Such dismissal shall be 9 without prejudice unless the words "with prejudice" are included in 10 the order. If any claim that is filed within the statutory time 11 12 permitted by Section 18 of this act title is dismissed without prejudice, a new claim may be filed within one (1) year after the 13 entry of the order dismissing the first claim even if the statutory 14 time for filing has expired. 1.5

16 SECTION 75. AMENDATORY Section 152, Chapter 208, O.S.L.
17 2013 (85A O.S. Supp. 2016, Section 109), is amended to read as
18 follows:

Section 109. A. The Workers' Compensation Commission shall establish a workers' compensation counselor or ombudsman program to assist injured workers <u>employees</u>, employers and persons claiming death benefits in obtaining benefits under this act <u>title</u>. A special effort shall be made to equip counselors or ombudsmen with

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1 sufficient resources to assist injured workers <u>employees</u> through the 2 system without the necessity of retaining legal representation.

B. Workers' compensation counselors or ombudsmen shall provide information to injured workers <u>employees</u>; investigate complaints; communicate with employers, insurance carriers, self-insurers, and health care providers; provide informational seminars and workshops on workers' compensation for medical providers, insurance adjustors, and employee and employer groups; and develop informational materials for employees, employers and medical providers.

C. The Upon request, the Commission shall mail a notice to the 10 injured worker within ten (10) days of the filing of an Employer's 11 12 First Notice of Injury. The notice shall advise the injured worker of information to the injured employee about the availability of the 13 services of the Commission's counselor or ombudsman program and of 14 the availability of mediation and other forms of alternative dispute 15 resolution to assist the injured worker employee. The Commission 16 shall provide additional information as the Commission may determine 17 necessary. 18

D. The Commission shall develop a program that provides for annual training for own-risk employers and claims representatives handling workers' compensation claims in Oklahoma. The training shall include information about the alternative dispute resolution program, including counselor and ombudsman programs, mediation, and other services provided by the Commission.

1 SECTION 76. AMENDATORY Section 153, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 110), is amended to read as
3 follows:

4 Section 110. A. The Workers' Compensation Commission shall 5 develop an alternative dispute resolution program which affords an 6 injured employee the opportunity to obtain benefits by request or 7 informal procedure. The program shall include an increased emphasis 8 on making mediation and other alternative dispute resolution 9 programs affordable and convenient to an injured employee not 10 represented by counsel.

B. Participation in an alternative dispute resolution program is not a prerequisite to the commencement of a claim for benefits under this act <u>title</u>. A request for alternative dispute resolution or a consent to participate in such program does not invoke the jurisdiction of the Commission.

C. Mediation shall be voluntary, informal, and nonbinding in any claim arising pursuant to the provisions of this act <u>title</u>, except for claims against the Multiple Injury Trust Fund and medical treatment issues subject to a certified workplace medical plan. Provided, however, the parties may waive mediation and proceed directly to an administrative hearing.

D. A Commission mediator, appointed by the Commission, shall conduct an informal mediation between the parties in regard to claims for a closed period of lost time where the employee has

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returned to work, for medical benefits only, for reimbursement of travel expenses and medical treatment, in cases in which the employee is not represented by an attorney, or there is no record of insurance coverage. Such mediation shall be conducted by the Commission mediator within thirty (30) days of the filing of a request for any such benefit.

Upon the filing of a request for an administrative hearing Ε. 7 on issues not specifically listed in subsection D of this section, 8 the Commission shall set the case for prehearing before the assigned 9 judge within fifteen (15) days. At the prehearing, the 10 administrative law judge shall accept a waiver of mediation by the 11 12 parties or appoint a mediator and issue an order reflecting such appointment. The mediator shall contact the parties and schedule a 13 mediation session within thirty (30) days of such order, unless 14 otherwise agreed to by the parties. 15

F. Mediation is confidential and no part of the proceeding shall be considered a matter of public record. Recommendations of the mediator are not binding unless the parties enter into a settlement agreement. If an agreement is not reached, the results and statements made during the mediation are not admissible in any following proceeding.

G. The Commission shall be responsible for certifying those persons who are eligible and qualified to serve as mediators. An individual may be certified as a mediator if the applicant meets the

qualifications as required by the Commission. A certified mediator may be an attorney or nonattorney who has worked in the area of Oklahoma workers' compensation benefits for at least five (5) years. Mediators serving as Commission-certified mediators on the effective date of this section shall serve the remainder of their respective five-year certification periods and may reapply for successive certification periods.

Each certified mediator shall remain on the list for five 8 н. (5) years, unless removed. Mediators shall be required to complete 9 at least six (6) hours of continuing education per two-year period 10 in the areas of mediation and workers' compensation. Proof of 11 12 compliance with this requirement shall be submitted to the Commission. This continuing education requirement shall be in 13 addition to any other such general requirement which may be required 14 by the Oklahoma State Bar Association. Cost of continuing education 15 is to be borne by the applicant. 16

I. Mediators shall be compensated at the rate or fee as determined by the mediator; provided, however, the rate or fee shall not exceed a maximum rate to be established by the Commission by rule. The cost of mediation shall be paid by the respondent or its insurance carrier. A mediator must schedule mediations for a minimum two-hour block of time, and may not schedule more than one mediation to take place at a time.

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J. At the time of a mediation, the claimant employee shall be 1 in attendance unless all parties agree, and all parties shall be 2 represented during the entire mediation session by a person with 3 full settlement authority to settle any issue of the claim. If a 4 party does not have full settlement authority, or does not 5 participate in good faith in the mediation process, the mediator 6 shall report to the assigned administrative law judge of the 7 Commission who may for good cause shown assess costs, attorney fees, 8 and sanctions. 9

Κ. To encourage early resolution of claims, an injured employee 10 may participate in mediation without counsel. Upon compromise 11 12 settlement of the claim, the parties may submit the settlement agreement to any administrative law judge for final approval. 13 AMENDATORY SECTION 77. Section 154, Chapter 208, O.S.L. 14 2013 (85A O.S. Supp. 2016, Section 111), is amended to read as 15 follows: 16

Section 111. A. Any claim for any benefit under this act shall 17 be commenced with the If any employee is denied any rights under 18 this title, he or she may challenge the denial by filing of an 19 Employee's First Notice of Claim for Compensation by the employee 20 with the Workers' Compensation Commission. The claim shall contain 21 a The Employee's First Notice of Claim for Compensation shall be on 22 a form prescribed by the Commission and shall require the following 23 information: 24

<u>1. A description of the alleged injury, including the affected</u>
 2 body parts;

<u>2. A description of the employee's claim for benefits,</u>
 <u>including the rights alleged to have been denied by the employer;</u>
 <u>3. The section of this title which is the basis for the</u>
 employee's claim; and

4. A statement that all matters stated therein are true and 7 accurate and shall be signed by the claimant employee and the 8 claimant's employee's agent, if any. Any person who signs this 9 statement or causes another to sign this statement knowing the 10 statement to be false shall be guilty of perjury. An individual who 11 12 signs on behalf of a claimant an employee may be presumed to have the authorization of the claimant employee and to be acting at the 13 claimant's employee's direction. 14

15 <u>If the Employee's First Notice of Claim for Compensation does not</u> 16 <u>contain the required information, it shall be rejected by the</u> 17 <u>Commission.</u>

B. If an employer controverts any issue related to the Employee's First Notice of Claim for Compensation, the employer shall file a Notice of Contested Issues on a form prescribed by the Commission. All answers and defenses to claims or other documents filed on behalf of a respondent or the respondent's insurer in a workers' compensation case shall contain a statement that all matters stated therein are true and accurate and shall be signed by

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the respondent, the insurer, or their respective agents, if any.
Any person who signs such a statement or causes another to sign such
a statement, knowing the statement to be false, shall be guilty of
perjury. An individual who signs on behalf of a respondent, its
insurer, or its agent may be presumed to have the authorization of
the respondent, its insurer or agent and to be acting at their
direction.

C. Any party shall have the right to request a prehearing 8 conference or administrative hearing before the Commission on any 9 issue. The Commission shall, within seven (7) days of the receipt 10 of such notification, set the matter for prehearing conference or 11 12 administrative hearing at the earliest available time. In the event the compensability of a claim is contested, the respondent shall 13 complete discovery and secure a medical evaluation of the claimant 14 within sixty (60) days of the filing of a request for benefits. 15 SECTION 78. Section 155, Chapter 208, O.S.L. AMENDATORY 16 2013 (85A O.S. Supp. 2016, Section 112), is amended to read as 17 follows: 18

Section 112. A. The Workers' Compensation Commission shall create, maintain and review a list of licensed physicians who shall serve as independent medical examiners from a list of licensed physicians who have completed such course study as the Commission may require. An independent medical examiner must agree to examine an employee within forty-five (45) days of appointment. The

Commission shall, to the best of its ability, include the most 1 experienced and competent physicians in the specific fields of 2 expertise utilized most often in the treatment of injured employees. 3 The period of qualification shall be two (2) years. Physicians may 4 be qualified for successive two-year periods. Physicians serving as 5 independent medical examiners on the effective date of this act 6 February 1, 2014, shall serve the remainder of their respective two-7 year qualification periods and may reapply for successive 8 qualification periods. The Commission may remove an independent 9 medical examiner from the list for cause. 10

Β. An administrative law judge may appoint an independent 11 12 medical examiner to assist in determining any issue before the Commission. In the event surgery is recommended by a treating 13 physician, upon request of the employer, an independent medical 14 examiner shall be appointed to determine the reasonableness and 15 necessity of the recommended surgery. Such independent medical 16 examiner shall be qualified to perform the type of surgery 17 recommended. 18

C. An independent medical examiner shall be selected from the list of independent medical examiners within ten (10) days when the employer or the employee petitions the Commission for the selection of an independent medical examiner. The independent medical examiner shall be certified by a recognized specialty board in the area or areas appropriate to the condition under review.

D. The Commission shall, to the best of its ability, maintain a geographic balance of independent medical examiners.

E. Counsel for the employee and employer are responsible for transmittal of the employee's medical records to the independent medical examiner within ten (10) days of appointment.

F. After a physical examination and review of medical records and other appropriate information, including depositions and surveillance video, the independent medical examiner shall submit a verified written report to the Commission and to the parties. In the event the independent medical examiner determines that more medical treatment is necessary, the employer shall designate a treating physician to provide the indicated treatment.

G. Any independent medical examiner selected pursuant to the provisions of this section shall be reimbursed for the medical examination, reports and fees in a reasonable and customary amount set by the Commission, and these costs shall be borne by the employer.

H. The Commission shall create a review process to oversee on a
 continuing basis the quality of performance and the timeliness of
 the submission of medical findings by independent medical examiners.

I. If the Commission does not follow the opinion of the independent medical examiner on any issue, the administrative law judge or member of the Board of Review shall set out its reasons for deviating from the opinion of the independent medical examiner. The

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opinion of the independent medical examiner shall be followed unless
 there is clear and convincing evidence to the contrary.

J. Upon receipt of an independent medical examiner's report, any party shall have the right to object to the introduction of the report into evidence. The objection must be made by giving written notification to all parties and to the Commission within ten (10) days after receipt of the report. The employer shall be responsible for the reasonable charges of the physician for such testimony, preparation time, and the expense of the deposition.

10 SECTION 79. AMENDATORY Section 156, Chapter 208, O.S.L.
11 2013 (85A O.S. Supp. 2016, Section 113), is amended to read as
12 follows:

Section 113. For cases not covered by a certified workplace 13 medical plan, and where the employer, insurance company, or own-risk 14 employer do not provide case management, case management may be 15 granted by the Workers' Compensation Commission on the request of 16 any party, or when the Commission determines that case management is 17 appropriate. The administrative law judge shall appoint a case 18 manager from a list of qualified case managers developed, maintained 19 and periodically reviewed by the Commission. The period of 20 qualification shall be two (2) years. Case managers may be 21 qualified for successive two-year periods. Case managers serving as 22 qualified case managers on the effective date of this act February 23 1, 2014, shall serve the remainder of their respective two-year 24

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qualification periods and may reapply for successive qualification periods. The reasonable and customary charges of a medical case manager appointed by the Commission shall be borne by the employer or insurance carrier. One change of case manager per party shall be made upon application of any party.

6 SECTION 80. AMENDATORY Section 157, Chapter 208, O.S.L. 7 2013 (85A O.S. Supp. 2016, Section 114), is amended to read as 8 follows:

Section 114. When a compensable injury results in the loss of 9 one or more eyes, teeth, or members of the body, or the replacement 10 of a joint, the employer shall furnish such prosthetic devices as 11 12 may be necessary as determined by the Workers' Compensation Commission in the treatment and rehabilitation of the injured worker 13 employee for the lifetime of the worker employee. When a worker an 14 employee sustains a compensable injury, arising out of and in the 15 course of his or her employment, which results in damage to a 16 prosthetic device with which such worker is equipped, the employer 17 shall repair or replace such device. Provided, that a subsequent 18 injury to the part of the body for which a prosthetic device is 19 provided shall terminate the obligation of the employer to provide 20 such prosthetic device. 21

SECTION 81. AMENDATORY Section 158, Chapter 208, O.S.L. 23 (85A O.S. Supp. 2016, Section 115), is amended to read as 24 follows:

Section 115. A. If the employee and employer shall reach an 1 agreement for the full, final and complete settlement of any issue 2 of a claim pursuant to this act the Administrative Workers' 3 Compensation Act, a form designated as "Joint Petition" shall be 4 signed by both the employer and employee, or representatives 5 thereof, and shall be approved by the Workers' Compensation 6 Commission or an administrative law judge, and filed with the 7 Commission. In cases in which the employee is not represented by 8 legal counsel, the Commission or an administrative law judge shall 9 have jurisdiction to approve a full, final and complete settlement 10 of any issue upon the filing of an Employer's First Notice of Injury 11 Claim for Compensation. There shall be no requirement for the 12 filing of an Employee's First Notice of Claim for Compensation to 13 effect such settlement in cases in which the employee is not 14 represented by legal counsel. 15

B. In the event all issues of a claim are not fully, finally and completely settled by a Joint Petition, the issues not settled by the parties and subject to the Commission's continuing jurisdiction must be noted by appendix to the Joint Petition or on a form created for such purpose by the Commission. The appendix must be signed by the parties and approved by the Commission as set forth herein.

C. In the absence of fraud, a Joint Petition shall be deemed
 binding upon the parties thereto and a final adjudication of all

rights pursuant to this act <u>title</u> or the workers' compensation law
in effect at the time of the injury or final order of the Workers'
Compensation Court. An official record shall be made by an official
Commission reporter of the testimony taken to effect the Joint
Petition.

D. A good-faith effort shall be made on the part of any 6 insurance carrier, CompSource Oklahoma, or group self-insured plan 7 to notify an insured employer of the possibility of and terms of any 8 settlement of a workers' compensation case pursuant to this section. 9 Written comments or objections to settlements shall be filed with 10 the Commission and periodically shared with the management of the 11 12 applicable insurer. A written notice shall be made to all policyholders of their right to a good-faith effort by their insurer 13 to notify them of any proposed settlement, if the policyholder so 14 chooses. 1.5

16 SECTION 82. AMENDATORY Section 161, Chapter 208, O.S.L.
17 2013 (85A O.S. Supp. 2016, Section 118), is amended to read as
18 follows:

Section 118. A. A fee of One Hundred Forty Dollars (\$140.00)
per case, including any Joint Petition authorized by this act title,
shall be collected by the Workers' Compensation Commission and
assessed as costs to be paid by the party against whom any award
becomes final, to be deposited as follows:

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One Hundred Five Dollars (\$105.00) to the credit of the
 Workers' Compensation <u>Commission Revolving</u> Fund created by <u>Section</u>
 28.1 of this act title;

2. Ten Dollars (\$10.00) to the credit of the Attorney General's
Workers' Compensation Fraud Unit Revolving Fund created by Section
19.2 of Title 74 of the Oklahoma Statutes; and

7 3. Twenty-five Dollars (\$25.00) to the credit of the Workers' 8 Compensation <u>Commission Revolving</u> Fund for purposes of implementing 9 the provisions of this act <u>title</u>, including strengthening and 10 providing additional funding for the Attorney General's Workers' 11 Compensation Fraud Unit, providing counseling services pursuant to 12 the workers' compensation counselor or ombudsman program and safety 13 in the workplace.

A fee of One Hundred Thirty Dollars (\$130.00) per action to в. 14 reopen any case pursuant to Section 32 of this act title shall be 15 collected by the Commission and assessed as costs to be paid by the 16 party that reopens the case. The fee collected pursuant to this 17 subsection shall be deposited to the credit of the Workers' 18 Compensation Commission Revolving Fund for purposes of implementing 19 the provisions of this act title, including strengthening and 20 providing additional funding for the Attorney General's Workers' 21 Compensation Fraud Unit, providing counseling services pursuant to 22 the workers' compensation counselor or ombudsman program and safety 23 in the workplace. 24

1 SECTION 83. AMENDATORY Section 164, Chapter 208, O.S.L.
2 2013 (85A O.S. Supp. 2016, Section 121), is amended to read as
3 follows:

Section 121. A. There is hereby created an Advisory Council on
 Workers' Compensation.

B. The voting membership of the Advisory Council shall consist
of nine (9) members. Any member serving on the effective date of
this section February 1, 2014, shall serve the remainder of his or
her term. The chair of the Workers' Compensation Commission shall
be an ex officio nonvoting member.

The Governor shall appoint three members representing
 employers in this state, one of whom shall be from a list of
 nominees provided by the predominant statewide broad-based business
 organization.

15 2. The Speaker of the House of Representatives shall appoint
16 three members representing employees in this state, one of whom
17 shall be from a list of nominees provided by the most representative
18 labor organization in the state.

3. The President Pro Tempore of the Senate shall appoint three members, two who are attorneys representing the legal profession in this state, one of whom shall be an attorney who practices primarily in the area of defense of workers' compensation claims, and one of whom shall be an attorney who primarily represents claimants

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<u>employees</u>, and a medical doctor or doctor of osteopathy actively
 engaged in the treatment of injured workers employees.

C. The term of office for appointees shall be as follows: I. The term of office for three positions, one each appointed by the Governor, the President Pro Tempore of the Senate and the Speaker of the House of Representatives shall expire on January 1, 2015;

8 2. The term of office for three positions, one each appointed 9 by the Governor, the President Pro Tempore of the Senate and the 10 Speaker of the House of Representatives shall expire on January 1, 11 2016; and

The term of office for three positions, one each appointed
 by the Governor, the President Pro Tempore of the Senate and the
 Speaker of the House of Representatives shall expire on January 1,
 2017.

D. Thereafter, successors in office shall be appointed for a three-year term. Members shall be eligible to succeed themselves in office.

E. Any person appointed to fill a vacancy shall be appointedfor the unexpired portion of the term.

F. The chair and the vice-chair of the Advisory Council shall be appointed by the Governor.

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G. Members shall receive their traveling and other necessary 1 expenses incurred in the performance of their duties as provided in 2 the State Travel Reimbursement Act. 3

Meetings of the Advisory Council shall be quarterly or as Η. 4 called by the chair or upon petition by a majority of the voting 5 The presence of five voting members constitutes a quorum. members. 6 No action shall be taken by the Advisory Council without the 7 affirmative vote of at least five members. 8

I. The Commission shall provide office supplies and personnel 9 of the Commission to carry out any of the duties that have been 10 entrusted to the Advisory Council. 11

The Advisory Council shall analyze and review the workers' 12 J. compensation system, the reports of the Commission, and trends in 13 the field of workers' compensation. The Advisory Council may 14 recommend improvements and proper responses to developing trends. 15 The Advisory Council shall report its findings annually to the 16 Governor, the Chief Justice of the Supreme Court, the President Pro 17 Tempore of the Senate, and the Speaker of the House of 18 Representatives.

In addition to other duties required by this section, the Κ. 20 Advisory Council shall consult with the Court regarding oversight of 21 independent medical examiners as provided in Section 45 of this act 22 title. 23

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L. The Advisory Council shall review the Oklahoma Treatment Guidelines as provided in the <u>Administrative</u> Workers' Compensation Code <u>Act</u>, and report the findings of such review to the Commission as provided in this <u>act</u> <u>section</u>.

5 SECTION 84. AMENDATORY Section 165, Chapter 208, O.S.L. 6 2013, as amended by Section 4, Chapter 344, O.S.L. 2015 (85A O.S. 7 Supp. 2016, Section 122), is amended to read as follows:

8 Section 122. A. The Workers' Compensation Commission Revolving 9 Fund established by Section 2 <u>28.1</u> of this act <u>title</u> shall be used 10 for the costs of administering this act <u>title</u> and for other purposes 11 as authorized by law.

B. For the purpose of providing funds for the Workers'
Compensation Commission Revolving Fund, for the Workers'
Compensation Administrative Fund created in Section 5 401.1 of this
act title, for the Multiple Injury Trust Fund created in Section 28
of this title, and to fund other provisions within this title, the
following tax rates shall apply:

Each mutual or interinsurance association, stock company,
 CompSource Oklahoma or other insurance carrier writing workers'
 compensation insurance in this state shall pay to the Oklahoma Tax
 Commission an assessment at a rate of one percent (1%) of all gross
 direct premiums written during each quarter of the calendar year for
 workers' compensation insurance on risks located in this state after
 deducting from such gross direct premiums, return premiums,

unabsorbed portions of any deposit premiums, policy dividends, 1 safety refunds, savings and other similar returns paid or credited 2 to policyholders. Such payments to the Tax Commission shall be made 3 not later than the fifteenth day of the month following the close of 4 each quarter of the calendar year in which such gross direct premium 5 is collected or collectible. Contributions made by insurance 6 carriers and CompSource Oklahoma, under the provisions of this 7 section, shall be considered for the purpose of computing workers' 8 compensation rates; and 9

2. When an employer is authorized to become a self-insurer, the 10 Workers' Compensation Commission shall so notify the Tax Commission, 11 12 giving the effective date of such authorization. The Tax Commission shall then assess and collect from the employers carrying their own 13 risk an assessment at the rate of two percent (2%) of the total 14 compensation for permanent total disability awards, permanent 15 partial disability awards and death benefits paid out during each 16 quarter of the calendar year by the employers. Such assessment 17 shall be payable by the employers and collected by the Tax 18 Commission according to the provisions of this section regarding 19 payment and collection of the assessment created in paragraph 1 of 20 this subsection. 21

C. It shall be the duty of the Tax Commission to collect the payments provided for in this title. The Tax Commission is hereby authorized to bring an action for the recovery of any delinquent or

unpaid payments required in this section. The Tax Commission may also enforce payments by proceeding in accordance with the provisions of Section 98 of this title.

D. The Tax Commission shall pay monthly to the State Treasurer to the credit of the Multiple Injury Trust Fund all monies collected under the provisions of this section less the annual amounts which shall be apportioned by the Oklahoma Tax Commission as follows:

Five Million Dollars (\$5,000,000.00) shall be payable in
equal monthly installments to the credit of the Workers'
Compensation Commission Revolving Fund established in Section 2 28.1
of this act title for the fiscal year ending June 30, 2016, and
Three Million Dollars (\$3,000,000.00) for the fiscal year ending
June 30, 2017, and for all subsequent years to be used to implement
the provisions of this title; and

2. Four Million Dollars (\$4,000,000.00) shall be payable in 15 equal monthly installments to the credit of the Workers' 16 Compensation Administrative Fund established in Section $\frac{5}{401.1}$ of 17 this act title for the fiscal year ending June 30, 2016, Three 18 Million Five Hundred Thousand Dollars (\$3,500,000.00) for the fiscal 19 year ending June 30, 2017, Three Million Five Hundred Thousand 20 Dollars (\$3,500,000.00) for the fiscal year ending June 30, 2018, 21 Three Million Dollars (\$3,000,000.00) for the fiscal year ending 22 June 30, 2019, and Two Million Five Hundred Thousand Dollars 23 (\$2,500,000.00) for the fiscal year ending June 30, 2020. Monies 24

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deposited in the Workers' Compensation Administrative Fund shall be used by the Workers' Compensation Court of Existing Claims to implement provisions provided for in this title.

E. The refund provisions of Sections 227 through 229 of Title 68 of the Oklahoma Statutes shall be applicable to any payments made pursuant to this section.

SECTION 85. AMENDATORY Section 166, Chapter 208, O.S.L.
2013 (85A O.S. Supp. 2016, Section 123), is amended to read as
follows:

Section 123. Any form, claim, answer or report to be filed by any person with the Workers' Compensation Commission pursuant to this act <u>title</u> shall contain or be verified by a written declaration that such form, claim, answer or report is true and made under the penalty of perjury.

SECTION 86. AMENDATORY Section 168, Chapter 208, O.S.L. 2013 (85A O.S. Supp. 2016, Section 125), is amended to read as follows:

Section 125. The time within which an act is to be done, as provided for in this act <u>title</u>, shall be computed by excluding the first day and including the last day. If the last day is a legal holiday as defined by Section 82.1 of Title 25 of the Oklahoma Statutes, it shall be excluded.

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 SECTION 87.
 REPEALER
 Sections 36, 60, 61, 63, 67, 72,

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 80, 159 and 160, Chapter 208, O.S.L. 2013 (85A O.S. Supp. 2016,

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Sections 36, 60, 61, 63, 67, 72, 80, 116 and 117), are hereby
 1
    repealed.
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        SECTION 88. This act shall become effective in accordance with
 3
    the provisions of Section 58 of Article V of the Oklahoma
 4
    Constitution.
 5
    COMMITTEE REPORT BY: COMMITTEE ON JUDICIARY
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    April 11, 2017 - DO PASS AS AMENDED
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