2014R2421H 2014R2082S

1	H. B. 4599
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3	(By Delegate Diserio)
4	[Introduced February 17, 2014; referred to the
5	Committee on the Judiciary then Finance.]
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10	A BILL to amend and reenact $\$23-4-1c$ of the Code of West Virginia,
11	1931, as amended, relating to workers' compensation; payment
12	of temporary total disability benefits directly to claimant;
13	payment of medical benefits; payments of benefits during
14	protest; and right of commission, successor to the commission,
15	private carriers and self-insured employers to collect
16	payments improperly made.
17	Be it enacted by the Legislature of West Virginia:
18	That §23-4-1c of the Code of West Virginia, 1931, as amended,
19	be amended and reenacted to read as follows:
20	ARTICLE 4. DISABILITY AND DEATH BENEFITS.
21	§23-4-1c. Payment of temporary total disability benefits directly
22	to claimant; payment of medical benefits; payments of
23	benefits during protest; right of commission,

successor to the commission, private carriers and
 self-insured employers to collect payments improperly
 made.

4 (a) In any claim for benefits under this chapter, the 5 Insurance Commissioner private carrier or self-insured employer, 6 whichever is applicable, shall determine whether the claimant has 7 sustained a compensable injury within the meaning of section one of 8 this article and enter an order giving all parties immediate notice 9 of the decision.

10 (1)The Insurance Commissioner, private carrier or 11 self-insured employer, whichever is applicable, may enter an order 12 conditionally approving the claimant's application if it finds that 13 obtaining additional medical evidence or evaluations or other 14 evidence related to the issue of compensability would aid the 15 Insurance Commissioner, private carrier or self-insured employer, 16 whichever is applicable, in making a correct final decision. 17 Benefits shall be paid during the period of conditional approval; 18 however, if the final decision is one that rejects the claim, the 19 payments shall be considered an overpayment. The Insurance 20 Commissioner, private carrier or self-insured employer, whichever 21 is applicable, may only recover the amount of the overpayment as 22 provided for in subsection (h) of this section.

(2) In making a determination regarding the compensability of24 a newly filed claim or upon a filing for the reopening of a prior

1 claim pursuant to the provisions of section sixteen of this article 2 based upon an allegation of recurrence, reinjury, aggravation or 3 progression of the previous compensable injury or in the case of a 4 filing of a request for any other benefits under the provisions of 5 this chapter, the Insurance Commissioner, private carrier or 6 self-insured employer, whichever is applicable, shall consider the 7 date of the filing of the claim for benefits for a determination of 8 the following:

9 (A) Whether the claimant had a scheduled shutdown beginning 10 within one week of the date of the filing;

(B) Whether the claimant received notice within sixty days of the filing that his or her employment position was to be aliminated, including, but not limited to, the claimant's worksite, a layoff or the elimination of the claimant's employment position; (C) Whether the claimant is receiving unemployment compensation benefits at the time of the filing; or

17 Whether the claimant has received (D) unemployment 18 compensation benefits within sixty days of the filing. In the 19 event of an affirmative finding upon any of these four factors, the 20 finding shall be given probative weight in overall the 21 determination of the compensability of the claim or of the merits 22 of the reopening request.

(3) Any party may object to the order of the Insurance24 Commissioner, private carrier or self-insured employer, whichever

1 is applicable, and obtain an evidentiary hearing as provided in 2 section one, article five of this chapter: *Provided*, That if the 3 successor to the commissioner, other private carrier or 4 self-insured, whichever is applicable, fails to timely issue a 5 ruling upon any application or motion as provided by law, or if the 6 claimant files a timely protest to the ruling of a self-insured 7 employer, private carrier or other issuing entity, denying the 8 compensability of the claim, denying temporary total disability 9 benefits or denying medical authorization, the office of judges 10 shall provide a hearing on the protest on an expedited basis as 11 determined by rule of the office of judges.

(b) Where it appears from the employer's report, or from proper medical evidence, that a compensable injury will result in a disability which will last longer than three days as provided in section five of this article, the Insurance Commissioner, private carrier or self-insured employer, whichever is applicable, may rimmediately enter an order commencing the payment of temporary total disability benefits to the claimant in the amounts provided for in sections six and fourteen of this article, and the payment of the expenses provided for in subsection (a), section three of this article, relating to the injury, without waiting for the expiration of the thirty-day period during which objections may be filed to the findings as provided in section one, article five of this chapter. The Insurance Commissioner, private carrier or

1 self-insured employer, whichever is applicable, shall enter an 2 order commencing the payment of temporary total disability or 3 medical benefits within fifteen working days of receipt of either 4 the employee's or employer's report of injury, whichever is 5 received sooner, and also upon receipt of either a proper 6 physician's report or any r information necessary for а The Insurance Commissioner, private carrier or 7 determination. 8 self-insured employer, whichever is applicable, shall give to the 9 parties immediate notice of any order granting temporary total 10 disability or medical benefits. When an order granting temporary 11 total disability benefits is made, the claimant's return-to-work 12 potential shall be assessed. The Insurance Commissioner may 13 schedule medical and vocational evaluation of the claimant and 14 assign appropriate personnel to expedite the claimant's return to 15 work as soon as reasonably possible.

16 (C) Insurance Commissioner, private carrier The or 17 self-insured employer, whichever is applicable, may enter orders 18 granting temporary total disability benefits upon receipt of 19 medical evidence justifying the payment of the benefits. The 20 Insurance Commissioner, private carrier or self-insured employer, an order granting 21 whichever is applicable, may not enter 22 prospective temporary total disability benefits for a period of 23 more than ninety days: Provided, That when the Insurance 24 Commissioner, private carrier or self-insured employer, whichever

1 is applicable, determines that the claimant remains disabled beyond 2 the period specified in the prior order granting temporary total 3 disability benefits, the Insurance Commissioner, private carrier or 4 self-insured employer shall enter an order continuing the payment 5 of temporary total disability benefits for an additional period not 6 to exceed ninety days and shall give immediate notice to all 7 parties of the decision.

(d) Upon receipt of the first report of injury in a claim, the 8 9 Insurance Commissioner, private carrier or self-insured employer, 10 whichever is applicable, shall request from the employer or 11 employers any wage information necessary for determining the rate 12 of benefits to which the employee is entitled. If an employer does 13 not furnish this information within fifteen days from the date the 14 Insurance Commissioner, private carrier or self-insured employer, 15 whichever is applicable, received the first report of injury in the 16 case, the employee shall be paid the maximum temporary total 17 disability benefits at the rate the commission obtains from reports 18 made pursuant to subsection (b), section two, article two of this 19 chapter for lost time without penalty to the employee. If no wages 20 have been reported, the Insurance Commissioner, private carrier or 21 self-insured employer, whichever is applicable, shall make the 22 payments at the rate the Insurance Commissioner, private carrier or 23 self-insured employer, whichever is applicable, finds would be 24 justified by the usual rate of pay for the occupation of the

1 injured employee. the maximum temporary total disability benefits
2 for lost time without penalty to the employee. The rate of benefits
3 shall be adjusted both retroactively and prospectively upon receipt
4 of proper wage information. The Insurance Commissioner shall have
5 access to all wage information in the possession of any state
6 agency.

(e) Subject to the limitations set forth in section sixteen of this article, upon a finding of the Insurance Commissioner, private carrier or self-insured employer, whichever is applicable, that a claimant who has sustained a previous compensable injury which has lean closed by order, or by the claimant's return to work, suffers further temporary total disability or requires further medical or hospital treatment resulting from the compensable injury, payment of temporary total disability benefits to the claimant in the samount provided for in sections six and fourteen of this article shall immediately commence, and the expenses provided for in subsection (a), section three of this article, relating to the disability, without waiting for the expiration of the thirty-day period during which objections may be filed. Immediate notice to the parties of the decision shall be given.

(f) The Insurance Commissioner, private carrier or 22 self-insured employer shall deliver amounts due for temporary total 23 disability benefits directly to the claimant.

24 (g) Where the employer has elected to carry its own risk under

1 section nine, article two of this chapter, and upon the findings 2 aforesaid, the self-insured employer shall immediately pay the 3 amounts due the claimant for temporary total disability benefits. 4 A copy of the notice shall be sent to the claimant.

(h) In the event that an employer files a timely objection to 5 6 any order of the Insurance Commissioner, private carrier or 7 self-insured, whichever is applicable, with respect to 8 compensability, or any order denying an application for 9 modification with respect to temporary total disability benefits, 10 or with respect to those expenses outlined in subsection (a), 11 section three of this article, the division shall continue to pay 12 to the claimant such benefits and expenses during the period of 13 such disability. Where it is subsequently found by the Insurance 14 Commissioner, private carrier or self-insured, whichever is 15 applicable, that the claimant was not entitled to receive such 16 temporary total disability benefits or expenses, or any part 17 thereof, so paid, the Insurance Commissioner, private carrier or 18 self-insured, whichever is applicable, shall credit said employer's 19 account with the amount of the overpayment. When the employer has 20 protested the compensability or applied for modification of a 21 temporary total disability benefit award or expenses and the final 22 decision in that case determines that the claimant was not entitled 23 to the benefits or expenses, the amount of benefits or expenses is 24 considered overpaid. For all awards made or nonawarded partial

1 benefits paid the Insurance Commissioner, private carriers or 2 self-insured employer may recover the amount of overpaid benefits 3 or expenses by withholding, in whole or in part, future disability 4 benefits payable to the individual in the same or other claims and 5 credit the amount against the overpayment until it is repaid in 6 full.

7 (i) In the event that the Insurance Commissioner, private 8 carrier or self-insured employer, whichever is applicable, finds 9 that, based upon the employer's report of injury, the claim is not 10 compensable, the Insurance Commissioner, private carrier or 11 self-insured employer, whichever is applicable, shall provide a 12 copy of the employer's report to the claimant in addition to the 13 order denying the claim.

(j) If a claimant is receiving benefits paid through a wage replacement plan, salary continuation plan or other benefit plan provided by the employer to which the employee has not contributed, and that plan does not provide an offset for temporary total disability benefits to which the claimant is also entitled under this chapter as a result of the same injury or disease, the employer shall notify the Insurance Commissioner, private carrier or self-insured of the duplication of the benefits paid to the claimant. Upon receipt of the notice, the Insurance Commissioner, private carrier or self-insured employer, whichever is applicable, shall reduce the temporary total disability benefits provided under

1 this chapter by an amount sufficient to ensure that the claimant 2 does not receive monthly benefits in excess of the amount provided 3 by the employer's plan or the temporary total disability benefit, 4 whichever is greater: *Provided*, That this subsection does not 5 apply to benefits being paid under the terms and conditions of a 6 collective bargaining agreement.

NOTE: The purpose of this bill is to provide prompt benefits to the injured while off from work; require the insurance carrier to promptly provide the required wage information and indemnity benefits and provide a penalty for the failure to do so; require the initial compensability determination to be made by the West Virginia workers Compensation Commissioner's office; and eliminate any offset to employers for employee's who have a wage replacement plan.

Strike-throughs indicate language that would be stricken from the present law, and underscoring indicates new language that would be added.