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WEST VIRGINIA LEGISLATURE

FIRST REGULAR SESSION. 1993

ENROLLED

HOUSE BILL No. 2802



ENROLLED H. B. 2802

(By Delegates Staton, Rowe, Huffman, Faircloth, L. White and Ashley)

[Passed April 8, 1993; in effect from passage.]

AN ACT to repeal section eighteen, article one, chapter twenty-three of the code of West Virginia, one thousand nine hundred thirty-one, as amended; to repeal section one-j, article five, chapter twenty-three of said code; to amend chapter twenty-one-a of said code by adding thereto a new article, designated article three; to amend and reenact section eight, article three, chapter twentytwo-a of said code: to amend and reenact sections one. four, eleven, thirteen and sixteen, article one, chapter twenty-three of said code: to amend and reenact sections one-c, four, five, five-a, five-b, fifteen and seventeen, article two of said chapter; to further amend said article by adding thereto three new sections, designated sections one-d, five-c and five-d; to further amend said chapter by adding thereto a new article, designated article two-b; to amend and reenact sections one-e, three, three-a, three-c, six, eight-c, sixteen and nineteen, article four of said chapter; to further amend said article by adding thereto five new sections, designated sections one-f, twenty-two, twenty-three, twenty-four and twenty-five: to amend and reenact sections one. oneb, one-h and six, article five of said chapter, all relating to workers' compensation generally; creation of compensation programs performance council; purpose; appointment of members; membership; terms; chair; qualifications; selection by governor; compensation and traveling expenses: insurance: meetings: quorum: powers and duties; special rule making authority; prohibition of surface mining without a permit; permit requirements; successor in interest; duration of permits; proof of insurance: termination of permits: permit fees: commissioner of the bureau of employment programs; compensation programs performance council; official seal; legal services: rules: office hours: records: confidentiality: exceptions: depositions: investigations: rules of procedure and evidence; persons authorized to appear in proceedings: withholding of psychiatric and psychological reports and providing summaries thereof; omission to subscribe to workers' compensation fund or perform duty required by commissioner; false testimony or certification; criminal penalties; extraterritorial coverage; approval and change of agreements; primary contractor liability; definitions; applications and exceptions: certificates of good standing: reimbursement and indemnification: termination of contracts: effective date: collections efforts: classification of industries: accounts: rate of premiums; prior notice of rate changes; exceptions; application; payment of premiums; payroll report; premiums; deposits; delinquency; default; reinstatement; payment of benefits; notice to employees; criminal provisions; penalties; collection of premiums from defaulting employers; interest and penalties; civil remedies: creation and enforcement of lien against employer and purchaser; duty of secretary of state to register liens; distraint powers; insolvency proceedings; secretary of state to withhold certificates of dissolution; injunctive relief; bond; attorney fees and costs; legislative purpose; application for settlement; reinstatement; amount of settlement: when settlement void: notification of rights; statute of limitations; effective date for new payments; previous payments due not affected; uncollectible receivables; write-offs; liabilities of successor employer; waiver of payment by commissioner; assignment of predecessor employer's premium rate to successor; employer right to hearing; content of petition; appeal: occupational safety and health activities: voluntary compliance: consultative services: mandatory programs: safety committees: requirements: rules: exceptions; premium rate credits; qualified loss manage-

ment program; loss management firms; penalties; rules; temporary total disability benefits not to be paid for periods of penitentiary or jail confinement; denial of workers' compensation benefits for injuries or disease incurred while incarcerated; certain psychiatric injuries and diseases not compensable; schedule of maximum disbursements for medical, surgical, dental and hospital treatment; legislative approval; guidelines; preferred provider agreements; charges in excess of scheduled amounts not to be made; required disclosure of financial interest in sale or rental of medically related mechanical appliances or devices; promulgation of rules to enforce requirements; consequences of failure to disclose; contract by employer with hospital, physician, etc., prohibited: criminal penalties for violation: payments to certain providers prohibited: medical cost and care programs; payments; interlocutory orders; wrongfully seeking payment for services or supplies; criminal penalties; restitution; suspension or termination of providers of health care; classification of and criteria for disability benefits; occupational pneumoconiosis board; reports and distribution thereof; presumption; findings required of board; objection to findings; procedure thereon; limitations on refilings; consolidation of claims; commissioner's jurisdiction over case continuous; modification of finding or order; time limitation on awards; reimbursement of claimant for expenses; reopening cases involving permanent total disability; promulgation of rules; wrongfully seeking compensation; criminal penalties; restitution; termination of compensation; permanent disability evaluations; limitations; notice; permanent total disability benefits; reduction of disability benefits; social security benefits; applications; release of information; credit or reduction of benefits; application of section; severability; permanent total disability awards; retirement age; limitations on eligibility and the introduction of evidence: effects of other types of awards; procedures; requests for awards; jurisdiction; permanent total disability benefits; reduction of disability benefits for wages earned by claimant; notice by commissioner of decision; procedures on claims: objections and hearing: mediation: refusal to

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reopen claim; notice; objection; hearings on objections to commissioner's decisions by office of administrative law judges; and providing for the application of claims and cases of self-insured employers.

Be it enacted by the Legislature of West Virginia:

That section eighteen, article one, chapter twenty-three of the code of West Virginia, one thousand nine hundred thirtyone, as amended, be repealed; that section one-j, article five of said chapter be repealed; that chapter twenty-one-a of said code be amended by adding thereto a new article, designated article three: that section eight, article three, chapter twentytwo-a of said code be amended and reenacted; that sections one, four, eleven, thirteen and sixteen, article one, chapter twenty-three of said code be amended and reenacted; that sections one-c. four, five, five-a, five-b, fifteen and seventeen, article two of said chapter be amended and reenacted; that said article be further amended by adding thereto three new sections, designated sections one-d, five-c and five-d; that said chapter be amended by adding thereto a new article, designated article two-b; that sections one-e, three, three-a, three-c, six, eight-c, sixteen and nineteen, article four of said chapter be amended and reenacted: that said article be further amended by adding thereto five new sections, designated section one-f, twenty-two, twenty-three, twenty-four and twenty-five; that sections one, one-b, one-h and six, article five of said chapter be amended and reenacted, all to read as follows:

CHAPTER 21A. UNEMPLOYMENT COMPENSATION.

ARTICLE 3. COMPENSATION PROGRAMS PERFORMANCE COUNCIL.

§21A-3-1. Creation of compensation programs performance council; purpose.

1 There is hereby created within the bureau of employ-2 ment programs a "compensation programs performance 3 council". The purpose of said council shall be to ensure 4 the effective, efficient and financially stable operation of 5 the unemployment compensation system and the 6 workers' compensation system of the state of West 7 Virginia.

§21A-3-2. Appointment of members.

1 The members of the council shall be appointed by the

2 governor by and with the advice and consent of the 3 Senate.

§21A-3-3. Membership; terms; chair.

1 The compensation programs performance council 2 shall consist of nine members: Four representing the 3 interests of employees; four representing the interests of 4 employers; and the commissioner of the bureau of 5 employment programs.

6 The term of each member except the commissioner 7 shall be for six years. The term of the commissioner 8 shall continue for that period in which he or she holds 9 that office.

10 The terms of all the initially appointed members of 11 the council shall begin on the first day of July, one 12 thousand nine hundred ninety-three.

13 Of the persons initially appointed, four members, 14 including two members of each of the two representative 15 groups, shall be designated to serve for terms of two 16 years each, two members, including one member of each 17 of the two representative groups, shall be designated to 18 serve for terms of four years each, and two members. 19 including one member of each of the two representative 20 groups shall be designated to serve for terms of six years 21 each. As these appointments expire, subsequent appoint-22 ments shall be for six-year terms. 23 The commissioner shall serve as chair of the council

and shall be entitled to vote on all matters. The council shall elect from its members a vice-chair.

§21A-3-4. Qualifications; selection by governor.

1 Members of the council shall be selected with special 2 reference to their ability and fitness to effectuate the 3 purposes of this chapter and chapter twenty-three of this 4 code.

5 In appointing members of this council to represent the 6 interests of employees, the governor shall select

7 members as follows:

8 One member shall be appointed from a list of at least 9 three names submitted to the governor by the united 10 mine workers of America;

11 Two members shall be appointed from a list of at least 12 six names submitted to the governor by the West 13 Virginia labor federation, with one representing 14 construction trades and one representing industrial 15 workers; and

16 One member selected by the governor to represent the 17 general interests of employees covered under the 18 provisions of this chapter and chapter twenty-three of 19 this code.

In appointing members of this council to represent the
interests of employers, the governor shall select
members as follows:

One member shall be appointed from a list of at least
three names submitted to the governor by the West
Virginia coal industry;

One member shall be appointed from a list of at least
three names submitted to the governor by the West
Virginia manufacturers association;

29 One member shall be appointed from a list of at least 30 three names submitted to the governor by the West 31 Virginia chamber of commerce; and

32 One member selected by the governor to represent the 33 general interests of employers covered under the 34 provisions of this chapter and chapter twenty-three of 35 this code.

The governor shall ensure that employer representation includes a representative of small businesses employing fifty or less employees on a regular basis.

§21A-3-5. Compensation and traveling expenses; insurance.

- 1 Members of the council shall receive reasonable 2 compensation for each day actually served in attendance
- at meetings of the council and such traveling expenses
- 3 at meetings of the council and such traveling expenses

4 as are incurred in the performance of his or her duties.

5 Payment for traveling expenses shall be made consistent6 with state law.

7 Each member of this council shall be provided
8 appropriate liability insurance, without additional
9 premium, by the state board of risk and insurance
10 management established pursuant to article twelve,
11 chapter twenty-nine of this code.

§21A-3-6. Meetings; quorum.

1 The council shall hold meetings at any time at the call 2 of the commissioner. The commissioner shall call a 3 meeting whenever three of the other members of the . 4 council request the commissioner to do so. The exact 5 date and time of each meeting shall be determined by 6 the commissioner.

A majority of the members of the council shall
constitute a quorum for the conduct of council business
and, except as stated in subdivision (m) of section seven
of this article, all issues shall be resolved by a majority
vote of the total membership.

§21A-3-7. Powers and duties; special rule-making authority.

1 The council shall have the following powers and 2 duties:

3 (a) Assist the governor and the commissioner in the
4 development of overall administrative policy for the
5 unemployment compensation and workers' compensa6 tion systems of the state.

7 (b) Recommend legislation and establish regulations
8 designed to ensure the effective administration and
9 financial viability of the unemployment compensation
10 system and the workers' compensation system of West
11 Virginia.

(c) Review and approve, reject or modify rules and
regulations that are proposed or promulgated by the
commissioner for operation of the workers' compensation system before the filing of the rules and regulations
with the secretary of state. This provision is applicable

to any instance under chapter twenty-three of this code 17 18 which authorizes the commissioner to promulgate rules 19 and regulations. Notwithstanding any provision in this 20 code to the contrary, including sections one and two, article three and section three, article seven both of 21 22 chapter twenty-nine-a of this code, any rules and 23 regulations adopted pursuant to this section which are 24 applicable to the provisions of chapter twenty-three of 25 this code shall not be subject to sections nine through 26 sixteen, all of article three, chapter twenty-nine-a of this 27 code. The commissioner and the compensation programs 28 performance council shall follow the remaining provi-29 sions of said article, for giving notice to the public of 30 their actions and the holding of hearings or receiving 31 of comments on the rules. No later amendment to this 32 code shall have precedence over this section unless such 33 later amendment specifically provides to the contrary.

(d) In accordance with the laws and regulations of
West Virginia and the United States government,
establish and monitor performance measurements to
ensure the timeliness and accuracy of activities performed under the unemployment compensation laws and
the workers' compensation laws.

40 (e) Have the final right of approval of all base rates
41 for employers covered by the workers' compensation law
42 as recommended by the commissioner.

43 (f) Advocate sufficient administrative resources to
44 effectively operate the unemployment compensation
45 system and the workers' compensation system of West
46 Virginia.

47 (g) Approve the designation of health care providers
48 to make decisions regarding appropriateness of medical
49 services pursuant to subsection (d), section one, article
50 five, chapter twenty-three of this code.

(h) Ensure that the unemployment compensation
system and the workers' compensation system of West
Virginia develop and pursue an effective program of
outreach and communication to employers, workers and
others involved in these programs.

(i) Analyze opportunities to affect efficiencies and
improvements for employers and workers by developing
common definitions, interrelated systems and other
internal operational improvements, including longrange planning for improvements.

(j) Develop programs, linkages in the public sector
and the private sector, and information materials
designed to promote the early return to work of
individuals receiving unemployment compensation
benefits or workers' compensation benefits.

(k) Examine the current design and report recommendations to the governor and the Legislature regarding
the second injury reserve of the surplus fund and the
financial viability of the state's workers' compensation
system.

(1) Consider such other matters regarding the unemployment compensation system or the workers' compensation system as the commissioner or any appointed
member of the council may desire.

(m) On or before the first day of September, one 75 thousand nine hundred ninety-three, establish vocational 76 77 standards to be considered in making decisions on 78 permanent total disability awards under subdivision (n). 79 section six, article four, chapter twenty-three of this 80 code: Provided, That the compensation programs 81 performance council is expressly authorized to establish 82 this standard irrespective of court decisions interpreting any previous enactment of said subdivision: Provided. 83 84 however. That adoption of said vocational standard shall 85 require an affirmative vote of two thirds of the members 86 of said compensation programs performance council.

87 (n) Adopt criteria for the determination and standards
88 for the payment of attorneys' fees pursuant to subdivi89 sion (2), subsection (c), section sixteen, article four,
90 chapter twenty-three of this code.

CHAPTER 22A. MINES AND MINERALS.

ARTICLE 3. WEST VIRGINIA SURFACE COAL MINING AND RECLAMATION ACT.

§22A-3-8. Prohibition of surface mining without a permit; permit requirements; successor in interest; duration of permits; proof of insurance; termination of permits; permit fees.

1 No person may engage in surface-mining operations 2 unless such person has first obtained a permit from the 3 commissioner in accordance with the following:

4 (a) Within two months after the secretary of the 5 interior approves a permanent state program for West 6 Virginia, all surface-mining operators shall file an 7 application for a permit or modification of a valid 8 existing permit or underground opening approval 9 relating to those lands to be mined eight months after 10 that approval.

11 (b) No later than eight months after the secretary's 12 approval of a permanent state program for West 13 Virginia, no person may engage in or carry out, on lands 14 within this state, any surface-mining operations unless 15 such person has first obtained a permit from the 16 commissioner: *Provided*, That those persons conducting 17 such operations under a permit or underground opening 18 approval issued in accordance with section 502 (c) of Public Law 95-87, and in compliance therewith, may 19 20 conduct such operations beyond such period if an 21 application for a permit or modification of a valid 22 existing permit or underground opening approval was 23 filed within two months after the secretary's approval, 24 and the administrative decision pertaining to the 25 granting or denying of such permit has not been made 26 by the commissioner.

27 (c) All permits issued pursuant to the requirements of 28 this article shall be issued for a term not to exceed five 29 years: Provided, That if the applicant demonstrates that a specified longer term is reasonably needed to allow the 30 31 applicant to obtain necessary financing for equipment 32 and the opening of the operation, and if the application is full and complete for such specified longer term, the 33 commissioner may extend a permit for such longer 34 term: Provided, however, That subject to the prior 35 approval of the commissioner, with such approval being 36

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37 subject to the provisions of subsection (c), section 38 eighteen of this article, a successor in interest to a 39 permittee who applies for a new permit, or transfer of 40 a permit, within thirty days of succeeding to such 41 interest, and who is able to obtain the bond coverage of the original permittee, may continue surface-mining 42 and reclamation operations according to the approved 43 44 mining and reclamation plan of the original permittee 45 until such successor's permit application or application 46 for transfer is granted or denied.

(d) Proof of insurance shall be required on an annualbasis.

49 (e) A permit shall terminate if the permittee has not 50 commenced the surface-mining operations covered by 51 such permit within three years of the date the permit 52 was issued: Provided. That the commissioner may grant 53 reasonable extensions of time upon a timely showing that such extensions are necessary by reason of litigation 54 55 precluding such commencement, or threatening sub-56 stantial economic loss to the permittee, or by reason of 57 conditions beyond the control and without the fault or 58 negligence of the permittee: Provided, however, That 59 with respect to coal to be mined for use in a synthetic 60 fuel facility or specific major electric generating 61 facility, the permittee shall be deemed to have com-62 menced surface-mining operations at such time as the 63 construction of the synthetic fuel or generating facility 64 is initiated.

65 (f) Each application for a new surface-mining permit 66 filed pursuant to this article shall be accompanied by 67 a fee of one thousand dollars. All permit fees and 68 renewal fees provided for in this section or elsewhere in 69 this article shall be collected by the commissioner and deposited with the treasurer of the state of West 70 71 Virginia to the credit of the operating permit fees fund 72 and shall be used, upon requisition of the commissioner, 73 for the administration of this article.

(g) Prior to the issuance of any permit, the commissioner of energy shall ascertain from the commissioner
of labor compliance with section fourteen, article five,

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chapter twenty-one of this code. Upon issuance of the
permit, the commissioner of energy shall forward a copy
to the commissioner of labor, who shall assure continued
compliance under such permit.

81 (h) Prior to the issuance of any permit, the director 82 of the division of environmental protection shall 83 ascertain from the commissioner of the bureau of 84 employment programs whether the applicant is in 85 compliance with the provisions of section five, article 86 two, chapter twenty-three of this code. If the applicant 87 is not in compliance, then the permit shall not be issued 88 until the applicant returns to compliance: *Provided*. 89 That in all such inquiries the commissioner of the 90 bureau of employment programs shall make response to 91 the division of environmental protection within fifteen 92 calendar days, otherwise failure to respond timely shall 93 be considered to indicate the applicant is in compliance 94 and such failure will not be used to preclude issuance 95 of the permit.

CHAPTER 23. WORKERS' COMPENSATION.

ARTICLE 1. GENERAL ADMINISTRATIVE PROVISIONS.

§23-1-1. Commissioner of the bureau of employment programs; compensation programs performance council; official seal; legal services; rules.

1 The commissioner of the bureau of employment 2 programs appointed under the provisions of section one, 3 article two, chapter twenty-one-a of this code, has the 4 sole responsibility for the administration of this chapter 5 except for such matters as are entrusted to the compen-6 sation programs performance council created pursuant 7 to section one, article three, chapter twenty-one-a of this 8 code. In the administration of this chapter, the commis-9 sioner shall exercise all the powers and duties described 10 in this chapter and in article two, of said chapter. The 11 commissioner is authorized to promulgate rules and 12 regulations to implement the provisions of articles one 13 through five of this chapter. The commissioner shall have an official seal for the authentication of orders and 14 15 proceedings, upon which seal shall be engraved the 16 words "West Virginia Commissioner of Employment Programs" and such other design as the commissioner may prescribe. The courts in this state shall take judicial notice of the seal of the commissioner and in all cases copies of orders, proceedings or records in the office of the West Virginia commissioner of employment programs shall be equal to the original in evidence.

23 The attorney general shall perform all legal services 24 required by the commissioner under the provisions of 25this chapter: Provided. That in any case in which an 26 application for review is prosecuted from any final 27 decision of the workers' compensation appeal board to 28 the supreme court of appeals, as provided by section 29 four, article five of this chapter, or in any court 30 proceeding before the workers' compensation appeal 31 board, or in any proceedings before the office of judges, 32 in which such representation shall appear to the 33 commissioner to be desirable, the commissioner may 34 designate a regular employee of this office, qualified to 35 practice before such court to represent the commissioner 36 upon such appeal or proceeding, and in no case shall the person so appearing for the commissioner before the 37 38 court receive remuneration therefor other than such 39 person's regular salary.

§23-1-4. Office hours; records; confidentiality; exceptions.

1 (a) The offices of the commissioner shall be open for 2 the transaction of business between the hours of eight-3 thirty o'clock a.m., and five o'clock p.m., of each and 4 every day, excepting Saturdays, Sundays and legal 5 holidays, and be open upon such additional days and at 6 such additional times as the commissioner may elect, 7 and be in charge of his or her secretary or some other 8 competent person.

9 (b) Except as expressly provided for in this subsection, 10 information obtained from employers and claimants 11 pursuant to this chapter for the purposes of its admin-12 istration shall not be subject to the provisions of chapter 13 twenty-nine-b of this code unless such provisions are 14 hereafter specifically made applicable in whole or in 15 part. Such information as may be reasonably necessary

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may be released in formal orders or opinions of any 16 17 tribunal or court which is presented with an issue 18 arising under this chapter as well as in the presentations 19 of the parties before any such tribunal or court. 20 Similarly, claimants or other interested parties to an 21 issue arising under this chapter may, upon request, 22 obtain information from the division's records to the 23 extent necessary for the proper presentation or defense 24 of a claim or other matter. Information may be released 25 to any requestor if all identifying information has first 26 been eliminated from the records. Nothing in this 27 subsection shall prevent the release of information to 28 another agency of the state or of the federal government 29 for the legitimate purposes of those agencies: *Provided*, 30 That any such agency shall guarantee the confidentiality 31 of the information so provided to the fullest extent 32 possible in keeping with its own statutory and regula-33 tory mandates. Nothing in this section shall prevent the 34 commissioner from complying with any subpoena duces 35 tecum: Provided, however, That the issuing tribunal or 36 court shall take such actions as may be proper to 37 maintain the confidentiality of the information.

38 The commissioner may release, pursuant to a proper 39 request under the provisions of chapter twenty-nine-b of 40 this code, the following information:

41 (1) The base premium rate for a specific employer;

42 (2) Whether or not a specific employer has obtained43 coverage under the provisions of this chapter;

44 (3) Whether or not a specific employer is in good
45 standing or is delinquent or in default according to the
46 commissioner's records and the time periods thereof;
47 and

48 (4) If a specific employer is delinquent or in default,
49 what the payments due the commissioner are and what
50 the components of that payment are including the time
51 periods affected.

§23-1-11. Depositions; investigations.

1 (a) In an investigation into any matter arising under

2 this chapter, the commissioner may cause depositions of

3 witnesses residing within or without the state to be 4 taken in the manner prescribed by law for like depo-5 sitions in the circuit court, but such depositions shall be 6 upon reasonable notice to claimant and employer or 7 other affected persons or their respective attorneys. The 8 commissioner shall designate the person to represent 9 him or her for the taking of any such deposition.

10 (b) The commissioner shall also have discretion to accept and consider depositions taken within or without 11 12 the state by either the claimant or employer, provided 13 due and reasonable notice of the taking of such depo-14 sitions was given to the other party, claimant or 15 employer, as the case may be, or his or her attorney: 16 Provided, That the commissioner, upon due notice both 17 to the employer and claimant, shall have authority to 18 refuse or permit the taking of such depositions or to 19 reject such depositions after the taking thereof, if in his 20 or her opinion they were taken at such place or under 21 such circumstances as imposed an undue burden or 22 hardship upon the opposite party, and the commission-23 er's discretion to accept, refuse to approve, or reject such 24 depositions shall be binding in the absence of abuse of 25 such discretion.

§23-1-13. Rules of procedure and evidence; persons authorized to appear in proceedings; withholding of psychiatric and psychological reports and providing summaries thereof.

1 (a) The commissioner shall adopt reasonable and 2 proper rules of procedure, regulate and provide for the 3 kind and character of notices, and the service thereof. 4 in cases of accident and injury to employees, the nature 5 and extent of the proofs and evidence, the method of 6 taking and furnishing the same to establish the rights 7 to benefits or compensation from the fund hereinafter 8 provided for, or directly from employers as hereinafter 9 provided, as the case may require, and the method of making investigations, physical examinations and 10 inspections, and prescribe the time within which 11 12 adjudications and awards shall be made.

13 (b) At hearings and other proceedings before the

14 commissioner or before the duly authorized representa-

15 tive of the commissioner, an employer who is a natural

16 person may appear, and a claimant may appear, only

17 as follows:

18 (1) By an attorney duly licensed and admitted to thepractice of law in this state;

20 (2) By a nonresident attorney duly licensed and 21 admitted to practice before a court of record of general 22 jurisdiction in another state or country or in the District 23 of Columbia who has complied with the provisions of 24 rule 8.0—admission pro hac vice, West Virginia su-25 preme court rules for admission to the practice of law, 26 as amended;

27 (3) By a representative from a labor organization who 28 has been recognized by the commissioner as being 29 qualified to represent a claimant or who is an individual 30 otherwise found to be qualified by the commissioner to 31 act as a representative. Such representative shall 32 participate in the presentation of facts, figures and 33 factual conclusions as distinguished from the presentation of legal conclusions in respect to such facts and 34 35 figures: or

36 (4) Pro se.

(c) At hearings and other proceedings before the
commissioner or before the duly authorized representative of the commissioner, an employer who is not a
natural person may appear only as follows:

(1) By an attorney duly licensed and admitted to thepractice of law in this state;

(2) By a nonresident attorney duly licensed and
admitted to practice before a court of record of general
jurisdiction in another state or country or in the District
of Columbia who has complied with the provisions of
rule 8.0—admission pro hac vice, West Virginia supreme court rules for admission to the practice of law,
as amended;

50 (3) By a member of the board of directors of a 51 corporation or by an officer of the corporation, for purposes of representing the interest of the corporation
in the presentation of facts, figures and factual conclusions as distinguished from the presentation of legal
conclusions in respect to such facts and figures; or

56 (4) By a representative from an employer service 57 company who has been recognized by the commissioner 58 as being qualified to represent an employer or who is 59 an individual otherwise found to be qualified by the 60 commissioner to act as a representative. Such represen-61 tative shall participate in the presentation of facts, 62 figures and factual conclusions as distinguished from 63 the presentation of legal conclusions in respect to such 64 facts and figures.

(d) The commissioner or his or her representative may
require an individual appearing on behalf of a natural
person or corporation to produce satisfactory evidence
that he or she is properly qualified and authorized to
so appear pursuant to this section.

(e) Subsections (b), (c) and (d) of this section shall not
be construed as being applicable to proceedings before
the office of judges pursuant to the provisions of article
five of this chapter.

74 (f) At the direction of a treating or evaluating 75 psychiatrist or clinical doctoral level psychologist, a 76 psychiatric or psychological report concerning a claim-77 ant who is receiving treatment or is being evaluated for 78 psychiatric or psychological problems may be withheld 79 from the claimant. In that event, a summary of the 80 report shall be compiled by the reporting psychiatrist 81 or clinical doctoral level psychologist which summary 82 shall be provided to the claimant upon his or her request. Any representative or attorney of the claimant 83 84 must agree to provide such a claimant with only the 85 summary before the full report shall be provided to the 86 representative or attorney for his or her use in prepar-87 ing the claimant's case. Such a report shall only be 88 withheld from the claimant in those instances where the 89 treating or evaluating psychiatrist or clinical doctoral 90 level psychologist certifies that exposure to the contents 91 of the full report is likely to cause serious harm to the

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92 claimant or is likely to cause the claimant to pose a93 serious threat of harm to a third party.

§23-1-16. Omission to subscribe to workers' compensation fund or to perform duty required by commissioner; false testimony or certification; criminal penalties.

Any person, firm or corporation which is required by 1 2 the provisions of this chapter to subscribe to the 3 workers' compensation fund, and which knowingly fails to subscribe thereto, or which knowingly and willfully 4 5 fails to make any report or perform any other act or 6 duty required by the commissioner within the time 7 specified by the commissioner, shall be guilty of a 8 felony, and, upon conviction thereof, shall be fined not 9 less than one thousand dollars and not more than ten 10 thousand dollars. Any person or firm, or the officer of any corporation, who knowingly makes a false report or 11 12 statement under oath, affidavit or certification respect-13 ing any information required by the commissioner, or 14 who shall knowingly testify falsely in any proceeding before the commissioner or the office of judges, shall be 15 considered guilty of a felony, and, upon conviction 16 thereof, shall be fined not less than one thousand dollars 17 and not more than ten thousand dollars or confined in 18 the penitentiary for not more than three years, or both. 19

ARTICLE 2. EMPLOYERS AND EMPLOYEES SUBJECT TO CHAP-TER; EXTRATERRITORIAL COVERAGE.

§23-2-1c. Extraterritorial coverage; approval and change of agreements.

1 (a) Whenever, with respect to an employee of an 2 employer who is a subscriber in good standing to the 3 workers' compensation fund or an employer who has 4 elected to pay compensation directly, as provided in 5 section nine of this article, there is a possibility of 6 conflict with respect to the application of workers' 7 compensation laws because the contract of employment 8 is entered into and all or some portion of the work is 9 performed or is to be performed in a state or states other than this state, the employer and the employee may 10 agree to be bound by the laws of this state or by the 11

laws of such other state in which all or some portion of 12 13 the work of the employee is to be performed: *Provided*, 14 That the commissioner shall have the authority to 15 review and accept or reject any such agreement. Any 16 such review shall be conducted in keeping with the 17 commissioner's fiduciary obligations to the workers' 18 compensation fund which may include, among other 19 things, the nexus of the employer and the employee to 20 the state: Provided, however, That nothing in this section 21 shall be construed so as to require such an agreement 22 in those instances where subdivision (3), subsection (b), 23 section one of this article or subdivision (1), subsection 24 (a), section one-a of this article are applicable. Such 25 agreement shall be in writing and filed with the 26 commissioner within ten days after execution thereof 27 but shall not become effective until approved by the 28 commissioner and shall, thereafter, remain in effect 29 until terminated or modified by agreement of the 30 parties similarly filed or by order of the commissioner. 31 If the parties agree to be bound by the laws of this state, 32 an employee injured within the terms and provisions of 33 this chapter shall be entitled to benefits under this 34 chapter regardless of the situs of the injury or exposure 35 to occupational pneumoconiosis or other occupational 36 disease, and the rights of the employee and his or her 37 dependents under the laws of this state shall be the 38 exclusive remedy against the employer on account of injury, disease or death in the course of and as a result 39 40 of the employment.

(b) If the parties agree to be bound by the laws of 41 42 another state and the employer has complied with the 43 laws of that state, the rights of the employee and his or 44 her dependents under the laws of that state shall be the 45 exclusive remedy against the employer on account of 46 injury, disease or death in the course of and as a result 47 of the employment without regard to the situs of the 48 injury or exposure to occupational pneumoconiosis or 49 other occupational disease.

50 (c) If the employee is a resident of a state other than 51 this state and is subject to the terms and provisions of 52 the workers' compensation law or similar laws of a state

53 other than this state, such employee and his dependents 54 shall not be entitled to the benefits payable under this 55 chapter on account of injury, disease or death in the 56 course of and as a result of employment temporarily 57 within this state, and the rights of such employee and 58 his dependents under the laws of such other state shall 59 be the exclusive remedy against the employer on 60 account of such injury, disease or death.

61 (d) If any employee or his or her dependents be 62 awarded workers' compensation benefits or recover damages from the employer under the laws of another 63 64 state for an injury received in the course of and 65 resulting from the employment, the amount so awarded 66 or recovered, whether paid or to be paid in future 67 installments, shall be credited against the amount of any 68 benefits payable under this chapter for the same injury.

§23-2-1d. Primary contractor liability; definitions; applications and exceptions; certificates of good standing; reimbursement and indemnification; termination of contracts; effective date; collections efforts.

1 (a) For the exclusive purposes of this section, the term 2 "employer" as defined in section one of this article shall 3 include any primary contractor who regularly subcon-4 tracts with other employers for the performance of any 5 work arising from or as a result of the primary 6 contractor's own contract: Provided. That a subcontractor shall not include one providing goods rather than 7 8 services. In the event that such a subcontracting 9 employer defaults on its obligations to make payments 10 to the commissioner, then such primary contractor shall 11 be liable for such payments. Notwithstanding the 12 foregoing, nothing contained in this section shall extend 13 or except to such primary contractor or subcontractors 14 the provisions of sections six, six-a or eight of this 15 article. This section is applicable only with regards to 16 subcontractors with whom the primary contractor has 17 a contract. It is not applicable to the primary contractor 18 with regard to sub-subcontractors. However, a subcon-19 tractor for the purposes of a contract with the primary contractor can itself become a primary contractor with 20

20

21 regard to other employers with whom it subcontracts.

(b) A primary contractor may avoid initial liability
under subsection (a) of this section if it obtains from the
commissioner, prior to the initial performance of any
work by the subcontractor's employees, a certificate that
the subcontractor is in good standing with the workers'
compensation fund.

28 (1) Failure to obtain the certificate of good standing 29 prior to the initial performance of any work by the 30 subcontractor shall result in the primary contractor 31 being equally liable with the subcontractor for all 32 delinquent and defaulted premiums, premium deposits, 33 interest and other penalties arising during the life of the 34 contract or due to work performed in furtherance of the 35 contract: Provided, That the commissioner shall be 36 entitled to collect only once for the amount of premiums, 37 premium deposits and interest due to the default, but 38 the commissioner may impose other penalties on the 39 primary contractor or on the subcontractor, or both.

40 (2) In order to continue avoiding liability under this 41 section, the primary contractor shall request that the 42 commissioner of the bureau of employment programs 43 inform the primary contractor of any subsequent default 44 by the subcontractor. In the event that the subcontractor 45 does default, the commissioner shall then notify the 46 primary contractor of the default by placing a notice in 47 the first class United States mail, postage prepaid, and 48 addressed to the primary contractor at the address 49 furnished to the commissioner by the primary contrac-50 tor. Such mailing shall be good and sufficient notice to 51 the primary contractor of the subcontractor's default. 52 However, the primary contractor shall not become liable 53 under this section until the first day of the calendar 54 quarter following the calendar quarter in which the 55 notice is given and then such liability shall only be for 56 that following calendar quarter and thereafter and only 57 if the subcontract has not been terminated: Provided, 58 That the commissioner shall be entitled to collect only 59 once for the amount of premiums, premium deposits and 60 interest due to the default, but the commissioner may 61 impose other penalties on the primary contractor or on

62 the subcontractor, or both.

63 (c) In any situation where a subcontractor defaults with regard to its payment obligations under this 64 65 chapter or fails to provide a certificate of good standing as provided for in this section, such default or failure 66 67 shall be good and sufficient cause for a primary 68 contractor to hold the subcontractor responsible and to 69 seek reimbursement or indemnification for any amounts 70 paid on behalf of the subcontractor to avoid or cure a workers' compensation default, plus related costs 71 72 including reasonable attorneys' fees, and to terminate its 73 subcontract with the subcontractor notwithstanding any provision to the contrary in the contract. 74

(d) The provisions of this section are applicable only
to those contracts entered into or extended on or after
the first day of January, one thousand nine hundred
ninety-four.

(e) The commissioner may take any action authorized
by section five-a of this article in furtherance of his or
her efforts to collect amounts due from the primary
contractor under this section.

§23-2-4. Classification of industries; accounts; rate of premiums; prior notice of rate changes; exceptions.

1 The commissioner shall distribute into groups or 2 classes the employments subject to this chapter, in 3 accordance with the nature of the business and the 4 degree of hazard incident thereto. And the commissioner shall have power, in like manner, to reclassify 5 6 such industries into groups or classes at any time, and 7 to create additional groups or classes. The commissioner 8 may make necessary expenditures to obtain statistical 9 and other information to establish the classes provided for in this section. 10

11 The commissioner shall keep an accurate account of 12 all money or moneys paid or credited to the compensa-13 tion fund, and of the liability incurred and disburse-14 ments made against same; and an accurate account of 15 all money or moneys received from each individual subscriber, and of the liability incurred and disbursements made on account of injuries and death of the
employees of each subscriber, and of the receipts and
incurred liability of each group or class.

20 In compensable fatal and total permanent disability 21 cases, other than occupational pneumoconiosis, the 22 amount charged against the employer's account shall be 23 such sum as is estimated to be the average incurred loss 24 of such cases to the fund. The amount charged against 25 the employer's account in compensable occupational 26 pneumoconiosis claims for total permanent disability or 27 for death shall be such sum as is estimated to be the 28 average incurred loss of such occupational pneumoconi-29 osis cases to the fund.

It shall be the duty of the commissioner and the 30 31 compensation programs performance council to fix and 32 maintain the lowest possible rates of premiums consist-33 ent with the maintenance of a solvent workers' compen-34 sation fund and the creation and maintenance of a 35 reasonable surplus in each group after providing for the 36 payment to maturity of all liability incurred by reason 37 of injury or death to employees entitled to benefits under 38 the provisions of this chapter. A readjustment of rates 39 shall be made yearly on the first day of July, or at any 40 time the same may be necessary. At such times as the commissioner elects to readjust the base rates for the 41 42 various industrial classifications, the commissioner shall 43 file a schedule of the readjusted base rates for each 44 industrial class with the office of the secretary of state 45 for publication in the state register pursuant to article 46 two, chapter twenty-nine-a of this code. Such schedule 47 shall be so filed at least thirty days prior to the first day 48 of the quarter to which an adjustment of rates is to be 49 applicable. At such times as the commissioner elects to 50 readjust the individual merit rates for the subscribers 51 to the fund, the commissioner shall provide notice of 52 such merit rate adjustments to the affected employers 53 at least thirty days prior to the first day of the quarter 54 to which an adjustment of rates is to be applicable. The 55 commissioner shall not retroactively increase or de-56 crease rates except in instances of fraud, mistake or

57 reliance upon incorrect information furnished by the 58 employer. The determination of the lowest possible rates 59 of premiums within the meaning hereof and of the 60 existence of any surplus or deficit in the fund shall be 61 predicated solely upon the experience and statistical 62 data compiled from the records and files in the 63 commissioner's office under this and prior workers' 64 compensation laws of this state for the period from the 65 first day of June, one thousand nine hundred thirteen, 66 to the nearest practicable date prior to such adjustment: 67 *Provided*, That any expected future return, in the nature 68 of interest or income from invested funds, shall be 69 predicated upon the average realization from invest-70 ments to the credit of the compensation fund for the two 71 years next preceding. Any reserves set up for future 72 liabilities and any commutation of benefits shall 73 likewise be predicated solely upon prior experience 74 under this and preceding workers' compensation laws 75 and upon expected realization from investments deter-76 mined by the respective past periods, as aforesaid.

77 The commissioner and the compensation programs 78 performance council may fix a rate of premiums 79 applicable alike to all subscribers forming a group or 80 class, and such rates shall be determined from the 81 record of such group or class shown upon the books of the commissioner: Provided, That if any group has a 82 83 sufficient number of employers with considerable difference in their degrees of hazard, the commissioner 84 85 may fix a rate for each subscriber of such group, such 86 rate to be based upon the subscriber's record on the 87 books of the commissioner for a period not to exceed 88 three years ending the thirty-first day of December of 89 the year preceding the year in which the rate is to be 90 effective; and the liability part of such record shall 91 include such cases as have been acted upon by the 92 commissioner during such three-year period, irrespec-93 tive of the date the injury was received; and any 94 subscriber in a group so rated, whose record for such 95 period cannot be obtained, shall be given a rate based 96 upon the subscriber's record for any part of such period 97 as may be deemed just and equitable by the commissioner; and the commissioner shall have authority to fix 98

99 a reasonable minimum and maximum for any group to
100 which this individual method of rating is applied, and
101 to add to the rate determined from the subscriber's
102 record such amount as is necessary to liquidate any
103 deficit in the schedule as to create a reasonable surplus.

104 It shall be the duty of the commissioner, when the 105 commissioner changes any rate, to notify every employer 106 affected thereby of that fact and of the new rate and 107 when the same takes effect. It shall also be the 108 commissioner's duty to furnish to each employer yearly. or more often if requested by the employer, a statement 109 110 giving the name of each of the employer's employees 111 who were paid for injury and the amounts so paid 112 during the period covered by the statement.

§23-2-5. Application; payment of premiums; payroll report; premiums; deposits; delinquency; default; reinstatement; payment of benefits; notice to employees; criminal provisions; penalties.

(a) For the purpose of creating a workers' compensa-1 2 tion fund, each employer who is required to subscribe 3 to the fund or who elects to subscribe to the fund shall 4 pay premiums calculated as a percentage of the 5 employer's payroll at the rate determined by the 6 commissioner and then in effect. At the time each 7 employer subscribes to the fund, the application 8 required by the commissioner shall be filed and a 9 premium deposit equal to the first quarter's estimated 10 premium payment shall be remitted. The minimum 11 quarterly premium to be paid by any employer shall be 12 ten dollars.

(1) Thereafter, premiums shall be paid quarterly on
or before the last day of the month following the end
of the quarter, and shall be the prescribed percentage
of the total earnings of all employees during the
preceding quarter.

(2) At the time each premium is paid, every subscribing employer shall make a payroll report to the
commissioner for the preceding quarter. The report
shall be on the form or forms prescribed by the

22 commissioner, and shall contain all information re-23 quired by the commissioner.

24 (3) After subscribing to the fund, each employer shall 25 remit with each payroll report and premium payment. 26 an amount calculated to be sufficient to maintain a 27 premium deposit equal to the previous quarter's premium payment: Provided. That the commissioner 28 may reduce the amount of the premium deposit required 29 30 from seasonal employers for those quarters during 31 which employment is significantly reduced. The pre-32 mium deposit shall be credited to the employer's account 33 on the books of the commissioner and used to pay premiums and any other sums due the fund when an 34 35 employer becomes delinquent.

36 (4) All premiums and premium deposits required to 37 be paid by this chapter shall be paid by the employers 38 to the commissioner, who shall maintain record of all 39 sums so received. On and after the first day of October, 40 one thousand nine hundred ninety-one, any such sum mailed to the commissioner shall be deemed to be 41 42 received on the date the envelope transmitting it is 43 postmarked by the United States postal service. All 44 sums received by the commissioner shall be deposited 45 in the state treasury to the credit of the workers' compensation division in the manner now prescribed by 46 47 law.

48 (5) The commissioner may encourage employer efforts 49 to create and maintain safe workplaces, to encourage 50 loss prevention programs, and to encourage employer 51 provided wellness programs, through the normal 52 operation of the experience rating formula, seminars 53 and other public presentations, the development of 54 model safety programs and other initiatives as may be determined by the commissioner. 55

56 (b) Failure of an employer to timely pay premium, to 57 timely file a payroll report, or to maintain an adequate 58 premium deposit, shall cause the employer's account to 59 become delinquent. No employer will be declared 60 delinquent or be assessed any penalty therefor if the 61 commissioner determines that such delinquency has

62 been caused by delays in the administration of the fund. 63 The commissioner shall, in writing, within sixty days of 64 the end of each quarter notify all delinquent employers 65 of their failure to timely pay premiums, to timely file 66 a payroll report, or to maintain an adequate premium 67 deposit. The notification shall demand the filing of the 68 delinquent payroll report and payment of delinquent 69 premiums, and/or payment of an amount sufficient to 70 maintain the premium deposit, before the end of the 71 third month following the end of the preceding quarter. 72 The notification shall also require payment of interest 73 on the delinquent premium payment and/or premium 74 deposit pursuant to section thirteen of this article.

(c) Whenever the commissioner notifies an employer
of the delinquent status of his or her account, the
notification shall explain the legal consequence of
subsequent default by employers required to subscribe
to the fund, and the effects of termination of any electing
employer's account.

81 (d) Failure by the employer, who is required to 82 subscribe to the fund and who fails to resolve his or her 83 delinquency within the prescribed period, shall place 84 the account in default and shall deprive such defaulting 85 employer of the benefits and protection afforded by this 86 chapter, including section six of this article, and he or 87 she shall be liable as provided in section eight of this 88 article. The defaulting employer's liability under said 89 section shall be retroactive to twelve o'clock p.m., of the 90 last day of the month following the end of the quarter 91 for which the delinquency occurs. The commissioner 92 shall notify the defaulting employer of the method by 93 which the employer may be reinstated with the fund. 94 The commissioner shall also notify the employees of such 95 employer by written notice as hereinafter provided for 96 in this section.

97 (e) Failure by any employer, who voluntarily elects to
98 subscribe, to resolve his or her delinquency within the
99 prescribed period shall automatically terminate the
100 election of such employer to pay into the workers'
101 compensation fund and shall deprive such delinquent
102 employer of the benefits and protection afforded by this

103 chapter, including section six of this article, and he or
104 she shall be liable as provided in section eight of this
105 article. The defaulting employer's liability under said
106 section shall be retroactive to twelve o'clock p.m., of the
107 last day of the month following the end of the quarter
108 for which the delinquency occurs.

109 (f) (1) Except as provided for in subdivision (3) of this 110 subsection, any employer who is required to subscribe 111 to the fund and who is in default on the effective date 112 of this section or who subsequently defaults, and any 113 employer who has elected to subscribe to the fund and 114 whose account is terminated prior to the effective date 115 of this section or whose account is subsequently termi-116 nated, shall be restored immediately to the benefits and 117 protection of this chapter only upon the filing of all 118 delinquent payroll and other reports required by the 119 commissioner and payment into the fund of all unpaid 120 premiums, an adequate premium deposit, and accrued 121 interest. Interest shall be calculated as provided for by 122 section thirteen of this article. In addition, for every 123 defaulted or terminated employer whose default or 124 termination lasts for two consecutive quarters or who 125 has defaulted or been terminated for two quarters out 126 of the preceding eight consecutive quarters, then when 127 any such employer's application for reinstatement is 128 filed or upon any such employer's restoration to the 129 benefits and protection of this chapter, for the next eight 130 quarters, including the quarter in which such restora-131 tion occurs, or when any such employer's application for 132 reinstatement is filed, the employer shall pay premiums 133 to the commissioner at a penalty rate. The applicable 134 penalty premium rate shall be determined by first 135 calculating the employer's premium under the provi-136 sions of section four of this article, but including any applicable experience modification, and then multiply-137 138 ing that premium by one hundred ten percent.

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139 The commissioner shall not have the authority to 140 waive either accrued interest or the imposition of the 141 penalty premium rate. Any employer whose default or 142 termination does not last for two consecutive quarters 143 or who has not been in default two quarters out of the 144 preceding eight consecutive quarters shall not have a 145 penalty premium rate imposed. The provisions of section 146 seventeen of this article apply to any action or decision 147 of the commissioner under this section. For purposes of 148 section four of this article, the extra ten percent of 149 premium constituting the penalty shall not be used in 150 determining any entitlement to experience modification 151 of the employer's premium rate for future years.

152 (2) The commissioner shall have the authority to 153 restore a defaulted or terminated employer under a 154 reinstatement agreement. Such reinstatement agree-155 ment shall require the payment in full of all premiums, 156 premium deposits, past accrued interest and future 157 interest calculated pursuant to the provisions of section 158 thirteen of this article. The reinstatement agreement 159 shall not permit any modification or waiver of the 160 penalty premium rate provided for in subdivision (1) of 161 this subsection. Notwithstanding the filing of a rein-162 statement application or the entering into of a reinstate-163 ment agreement, the commissioner is authorized to file 164 a lien against the employer as provided for by section 165 five-a of this article. In addition, entry into a repayment 166 agreement is discretionary with the commissioner. Such 167 discretion shall be exercised in keeping with the 168 commissioner's fiduciary obligations to the workers' 169 compensation fund. Should the commissioner decline to 170 enter into a repayment agreement and should the 171 employer not comply with the provisions of subdivision 172 (1) of this subsection, then the commissioner may 173 proceed with any of the collection efforts provided for 174 by section five-a of this article or as otherwise provided 175 for by this code. Applications for reinstatement shall: 176 (A) Be made upon forms prescribed by the commis-177 sioner; (B) include a report of the gross payroll of the 178 employer during the entire period of delinquency and 179 default, which payroll information shall be certified by 180 the employer or its authorized agent; and (C) include a 181 payment equal to one half of one percent of the gross 182 payroll during the period of delinquency and default but 183 not to exceed the amount of the entire liability due and 184 owing for the period of delinquency and default. An 185 employer who applies for reinstatement shall be entitled

186 to the benefits and protection of this chapter on the day 187 the application is received by the commissioner: 188 Provided. That if the commissioner reinstates an 189 employer subject to the terms of a repayment agree-190 ment, the subsequent failure of the employer to make 191 scheduled payments or to pay accrued or future interest 192 in accordance with the repayment agreement or to 193 timely file current premiums within the month follow-194 ing the end of the quarter for which the report and 195 payment are due, or to otherwise maintain its account 196 in good standing or, if the repayment agreement does 197 not require earlier restoration of the premium deposit. 198 to restore the premium deposit to the required amount 199 by the end of the repayment period shall cause the 200 reinstatement application or the repayment agreement. 201 or both, to be null, void and of no effect, and the 202 employer shall be denied the benefits and protection of 203 this chapter effective from the date that such employer's 204 account originally became delinquent.

205 (3) Any employer who fails to maintain his or her 206 account in good standing with regard to subsequent 207 premiums and premium deposits prior to the final 208 resolution of an application for reinstatement as 209 provided for in subdivision (1) of this subsection shall 210 cause the reinstatement application to be null, void and 211 of no effect, and the employer shall be denied the 212 benefits and protection of this chapter effective from the 213 date that such employer's account originally became 214 delinquent.

215 (4) Following any failure of an employer to comply 216 with the provisions of a repayment agreement, the 217 commissioner may then make and continue with any of 218 the collection efforts provided for by this chapter or 219 elsewhere in this code even if the employer files another 220 reinstatement application.

221 (g) No employee of an employer required by this 222 chapter to subscribe to the workers' compensation fund 223 shall be denied benefits provided by this chapter 224 because the employer failed to subscribe or because the employer's account is either delinquent or in default. 225

(h) (1) The provisions of this section shall not deprive
any individual of any cause of action which has accrued
as a result of an injury or death which occurred during
any period of delinquency not resolved in accordance
with the provisions of this article, or subsequent failure
to comply with the terms of the repayment agreement.

232 (2) Upon withdrawal from the fund or termination of 233 election of any employer, he or she shall be refunded the 234 balance due him or her of his or her deposit, after 235 deducting all amounts owed by him or her to the 236 workers' compensation fund, and the commissioner shall 237 notify the employees of such employer of said termina-238 tion in such manner as he or she may deem best and 239 sufficient.

240 (3) Notice to employees in this section provided for 241 shall be given by posting written notice that the 242 employer is defaulted under the compensation law of 243 West Virginia, and in the case of employers required by 244 this chapter to subscribe and pay premiums to the fund. 245 that the defaulted employer is liable to his or her 246 employees for injury or death, both in workers' compen-247 sation benefits and in damages at common law or by 248 statute; and in the case of employers not required by this 249 chapter to subscribe and pay premiums to the fund, but 250 voluntarily electing to do so as herein provided, that 251 neither the employer nor the employees of such em-252 plover are protected by said laws as to any injury or 253 death sustained after the date specified in said notice. 254Such notice shall be in the form prescribed by the 255commissioner and shall be posted in a conspicuous place 256 at the chief works of the employer, as the same appear 257 in records of the commissioner. If said chief works of 258 the employer cannot be found or identified, then said 259 notices shall be posted at the front door of the courthouse 260 of the county in which said chief works are located, 261 according to the records in the commissioner's office. 262 Any person who shall, prior to the reinstatement of said 263 employer, as hereinbefore provided for, or prior to sixty 264 days after the posting of said notice, whichever shall 265 first occur, remove, deface, or render illegible said 266 notice, shall be guilty of a misdemeanor, and, upon

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conviction thereof, shall be fined not to exceed five 267 268 hundred dollars, and said notice shall state this 269 provision upon its face. The commissioner may require 270 any sheriff, deputy sheriff, constable or other official of 271 the state of West Virginia, who may be authorized to 272 serve civil process, to post such notice and to make 273 return thereof of the fact of such posting to the 274 commissioner, and any failure of such officer to post any 275 notice within ten days after he or she shall have received 276 the same from the commissioner, without just cause or 277 excuse, shall constitute a willful failure or refusal to 278 perform a duty required of him or her by law within 279 the meaning of section twenty-eight, article five, chapter 280 sixty-one of this code. Any person actually injured by 281 reason of such failure shall have an action against said 282 official, and upon any official bond he or she may have 283 given, for such damages as such person may actually 284 have incurred, but not to exceed, in the case of any 285 surety upon said bond, the amount of the penalty of said 286 bond. Any official posting said notice as herein required 287 shall be entitled to the same fee as is now or may 288 hereafter be provided for the service of process in suits 289 instituted in courts of record in the state of West 290 Virginia, which fee shall be paid by the commissioner 291 out of any funds at his or her disposal, but shall be 292 charged by him or her against the account of the 293 employer to whose delinquency such notice relates.

§23-2-5a. Collection of premiums from defaulting employers; interest and penalties; civil remedies; creation and enforcement of lien against employer and purchaser; duty of secretary of state to register liens; distraint powers; insolvency proceedings; secretary of state to withhold certificates of dissolution; injunctive relief; bond; attorney fees and costs.

1 (a) The commissioner in the name of the state may 2 commence a civil action against an employer who, after 3 due notice, defaults in any payment required by this 4 chapter. If judgment is against the employer, such 5 employer shall pay the costs of the action. Civil action under this section shall be given preference on the
calendar of the court over all other civil actions. Upon
prevailing in any such civil action, the commissioner
shall be entitled to recover his or her attorneys' fees and
costs of action from the employer.

11 (b) In addition to the foregoing provisions of this 12 section, any payment, interest and penalty thereon due 13 and unpaid under this chapter shall be a personal 14 obligation of the employer immediately due and owing 15 to the commissioner and shall, in addition thereto, be a 16 lien enforceable against all the property of the employer: 17 Provided, That no such lien shall be enforceable as 18 against a purchaser (including a lien creditor) of real 19 estate or personal property for a valuable consideration 20 without notice, unless docketed as provided in section 21 one, article ten-c, chapter thirty-eight of this code: 22 Provided, however, That such lien may be enforced as 23 other judgment liens are enforced through the provi-24 sions of chapter thirty-eight of this code and the same 25 shall be deemed by the circuit court to be a judgment 26 lien for this purpose.

27 (c) In addition to all other civil remedies prescribed 28 herein the commissioner may in the name of the state. 29 after giving appropriate notice as required by due 30 process, distrain upon any personal property, including 31 intangible property, of any employer delinquent for any 32 payment, interest and penalty thereon. If the commis-33 sioner has good reason to believe that such property or 34 a substantial portion thereof is about to be removed 35 from the county in which it is situated, upon giving 36 appropriate notice, either before or after the seizure, as 37 is proper in the circumstances, he or she may likewise 38 distrain in the name of the state before such delinquency 39 occurs. For such purpose, the commissioner may require 40 the services of a sheriff of any county in the state in 41 levying such distress in the county in which the sheriff 42 is an officer and in which such personal property is situated. A sheriff so collecting any payment, interest 43 44 and penalty thereon shall be entitled to such compen-45 sation as is provided by law for his or her services in 46 the levy and enforcement of executions. Upon prevailing

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in any distraint action, the commissioner shall be 47 entitled to recover his or her attorneys' fees and costs 48 49 of action from the employer.

50 (d) In case a business subject to the payments, interest 51 and penalties thereon imposed under this chapter shall 52 be operated in connection with a receivership or 53 insolvency proceeding in any state court in this state, the 54 court under whose direction such business is operated 55 shall, by the entry of a proper order or decree in the 56 cause, make provisions, so far as the assets in administration will permit, for the regular payment of such payments, interest and penalties as the same become due.

60 (e) The secretary of state of this state shall withhold 61 the issuance of any certificate of dissolution or withdra-62 wal in the case of any corporation organized under the 63 laws of this state or organized under the laws of any 64 other state and admitted to do business in this state. 65 until notified by the commissioner that all payments. 66 interest and penalties thereon against any such corpo-67 ration which is an employer under this chapter have 68 been paid or that provision satisfactory to the commis-69 sioner has been made for payment.

70 (f) In any case when an employer required to sub-71 scribe to the fund defaults in payments of premium, 72 premium deposits, or interest thereon, for as many as 73 two calendar quarters, which quarters need not be 74 consecutive, and remains in default after due notice, and 75 the commissioner has been unable to collect such 76 payments by any of the other civil remedies prescribed 77 herein, the commissioner may bring action in the circuit 78 court of Kanawha county to enjoin such employer from 79 continuing to carry on the business in which such liability was incurred: Provided, That the commissioner 80 may as an alternative to this action require such 81 82 delinquent employer to file a bond in the form prescribed by the commissioner with satisfactory surety in 83 84 an amount not less than fifty percent more than the 85 payments, interest and penalties due.

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§23-2-5b. Legislative purpose; application for settlement; reinstatement; amount of settlement; when settlement void; notification of rights.

1 The Legislature hereby declares that it is the purpose 2 of this section to provide any employer who may, as of 3 the effective date of this section, be in default in any 4 payment due under the provisions in this article an 5 opportunity to settle the amount of the default in 6 accordance with the provisions hereinafter set forth. For 7 purposes of this section, the term "default" shall apply 8 to any employer who has failed to subscribe or pay 9 premiums to the workers' compensation fund in accor-10 dance with the provisions of this chapter.

11 (a) On or before the first day of February, one 12 thousand nine hundred ninety-four, any employer who 13 may qualify under this section shall apply to the 14 commissioner for a settlement of the amount of default. 15 Such application shall: (1) Be made on a form prescribed by the commissioner; (2) include the gross payroll of the 16 17 employer during the entire period of delinquency and 18 default, which payroll information shall be certified by 19 the employer or its authorized agent; and (3) include a 20 payment equal to one half of one percent of the gross 21 payroll during the period of delinquency and default. 22 but not to exceed the amount of the entire liability due 23 and owing for the period of delinguency and default.

24 (b) Notwithstanding other provisions of this chapter 25 to the contrary, upon timely receipt of the application 26 prescribed in subdivision (a) of this section, the em-27 ployer shall be entitled to the benefits and protections 28 of this chapter: Provided, That such entitlement shall 29 not affect any cause of action which has accrued against 30 the employer as a result of an injury sustained during 31 any period of default prior to the date of the application: 32 Provided, however, That the subsequent failure of the 33 employer to make scheduled payments or to pay accrued 34 or future interest in accordance with any repayment 35 agreement or to timely file current premiums within the 36 month following the end of the quarter for which the 37 report and payment are due, or to otherwise maintain 38 its account in good standing or, if a repayment agree-
Enr. H. B. 2802]

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39 ment does not require earlier restoration of the pre-40 mium deposit, to restore the premium deposit to the 41 required amount by the end of any repayment period 42 shall cause the application or any repayment agreement, 43 or both, to be null, void and of no effect, and the 44 employer shall be denied the benefits and protection of 45 this chapter effective from the date that such employer's 46 account originally became delinquent.

47 (c) After the commissioner shall have received the 48 application of an employer as prescribed herein, the 49 commissioner and the employer or its authorized agent 50 shall agree, in writing, on or before the first day of July, 51 one thousand nine hundred ninety-four, to settle the 52 default in an amount which shall include all delinguent 53 premium payments, plus interest, compounded monthly, 54 at the rate of nine percent per annum. The commis-55 sioner may authorize payment of the amount set forth 56 in the agreement on a payment schedule, which period 57 shall not exceed three years from the date of the 58 execution of the agreement. The agreement shall set 59 forth that the employer shall be in default if any 60 payment shall not be received by the commissioner within fifteen days of the due date thereof. 61

62 (d) If the employer shall fail to pay timely current 63 premiums in accordance with the provisions of this 64 chapter or if the employer shall default upon any 65 payment set forth under the terms of the agreement, such application or agreement, or both, shall be null, 66 67 void and of no effect and the commissioner shall have 68 the authority to proceed in accordance with the provi-69 sions of this chapter. Current premiums shall be timely 70 paid when they are paid within the month following the 71 end of the quarter for which the reported payment is 72 due.

(e) The commissioner shall notify in writing, by the
first day of January, one thousand nine hundred ninetyfour, all employers, who are in default as indicated by
the records of the commissioner, of the employer's right
to apply for a settlement in accordance with the
provisions of this section. The commissioner may also
take additional steps, as deemed appropriate, to notify

80 other employers of the rights set forth herein. The
81 written notice of the commissioner shall include the
82 form required for application and the commissioner
83 shall make such form available to other employers.

§23-2-5c. Statute of limitations; effective date for new payments; previous payments due not affected.

1 (1) For payments due after the effective date of this 2 section, every action or process to collect any premium, 3 premium deposit, interest or penalty due from an 4 employer pursuant to this article by the commissioner 5 shall be brought or issued within five years next after 6 the date on which the employer is required by the section imposing the premium, premium deposit. 7 8 interest or penalty to file a report and pay the amount 9 due thereunder. The limitation provided by this section 10 shall likewise apply to enforcement of the lien, if any, 11 securing the payment of such premium, premium 12 deposit, interest or penalty, but shall not apply in event 13 of fraud or in event the employer wholly fails to file the 14 report required by the section imposing the premium, 15 premium deposit, interest or penalty. For payments that 16 were due prior to the effective date of this section, there 17 shall continue to be no limitation on when actions or 18 processes may be brought or issued.

§23-2-5d. Uncollectible receivables; write-offs.

1 The commissioner, with the approval of the attorney 2 general, may write-off any uncollected receivable due

3 under the provisions of this article which the commis-

4 sioner and the attorney general deem to be uncollectible.

§23-2-15. Liabilities of successor employer; waiver of payment by commissioner; assignment of predecessor employer's premium rate to successor.

(a) Notwithstanding any provisions of section five-a of
 this article to the contrary, in the event that a new
 employer acquires by sale or other transfer or assumes
 all or substantially all of a predecessor employer's actual
 business, business assets, customers, clients, contracts,

Enr. H. B. 2802]

operations, stock of goods, equipment or substantially all 6 of its employees, then any liens for payments owed to 7 8 the commissioner for premiums, premium deposits, 9 interest or claims losses by the predecessor employer or any liens held by the commissioner against the prede-10 11 cessor employer's property shall be extended to the 12 assets acquired as the result of the sale or transfer by the new employer and shall be enforceable against such 13 14 assets by the commissioner to the same extent as 15 provided for the enforcement of liens against the 16 predecessor employer pursuant to said section. As used 17 in this section, the term "assets" is defined as provided in section fourteen of this article. The foregoing 18 19 provisions are expressly intended to impose upon such 20 new employers the duty of obtaining, prior to the date of such acquisition, verification from the commissioner 21 22 that the predecessor employer's account with the 23 commissioner is in good standing.

24 (b) At any time prior to or following the acquisition 25 described in subsection (a) of this section, the buyer or 26 other recipient may file a certified petition with the 27 commissioner requesting that the commissioner waive 28 the payment by the buyer or other recipient of premi-29 ums, premium deposits, interest and imposition of the 30 modified rate of premiums attributable to the predeces-31 sor employer, or any combination thereof. The commis-32 sioner shall review the petition by considering the six 33 factors set forth below:

- 34 (1) The exact nature of the default;
- 35 (2) The amount owed to the commissioner;
- 36 (3) The solvency of the fund;

37 (4) The financial condition of the buyer or other 38 recipient;

39 (5) The equities exhibited towards the fund by the40 buyer or other recipient during the acquisition process;41 and

42 (6) The potential economic impact upon the state and 43 the specific geographic area in which the buyer or other recipient is to be or is located, if the acquisition werenot to occur.

46 Unless requested by a party or by the commissioner. 47 no hearing need be held on the petition. However, any 48 decision made by the commissioner on the petition shall 49 be in writing and shall include appropriate findings of 50 fact and conclusions of law. Such decision shall be 51 effective ten days following notice to the public of the 52 decision unless an objection is filed in the manner herein 53 provided. Such notice shall be given by the commission-54 er's publication of a Class I legal advertisement which complies with the provisions of article three, chapter 55 fifty-nine of this code. The publication shall include a 56 57 summary of the decision and a statement advising that 58 any person objecting to the decision must file, within ten 59 days after publication of the notice, a verified response 60 with the commissioner setting forth the objection and 61 the basis therefor. The publication area shall be 62 Kanawha county, West Virginia. If any such objection 63 is filed, the commissioner shall hold an administrative 64 hearing, conducted pursuant to article five, chapter 65 twenty-nine-a of this code, within fifteen days of 66 receiving the response unless the buyer or other 67 recipient consents to a later hearing. Nothing in this 68 subsection shall be construed to be applicable to the 69 seller or other transferor or to affect in any way a 70 proceeding under sections five and five-a of this article.

71 (c) In the factual situations set forth in subsection (a) 72 of this section, if the predecessor's modified rate of 73 premium, as calculated in accordance with section four 74 of this article, is greater than the manual rate of 75 premium, as calculated in accordance with said section. 76 for other employers in the same class or group, then the 77 new employer shall also assume the predecessor employ-78 er's modified rates for the payment of premiums as 79 determined under sections four and five of this article 80 until sufficient time has elapsed for the new employer's 81 experience record to be combined with the experience record of the predecessor employer. 82

§23-2-17. Employer right to hearing; content of petition; appeal.

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Enr. H. B. 2802]

Notwithstanding any provision in this chapter to the 1 2 contrary and notwithstanding any provision in section 3 five, article five, chapter twenty-nine-a of this code to 4 the contrary, in any situation where an employer objects 5 to a decision or action of the commissioner made under 6 the provisions of this article, then such employer shall 7 be entitled to file a petition demanding a hearing upon 8 such decision or action which petition must be filed 9 within thirty days of the employer's receipt of notice of 10 the disputed commissioner's decision or action or, in the 11 absence of such receipt, within sixty days of the date of 12 the commissioner's making such disputed decision or 13 taking such disputed action, such time limitations being 14 hereby declared to be a condition of the right to litigate 15 such decision or action and hence jurisdictional.

16 The employer's petition shall clearly identify the 17 decision or action disputed and the bases upon which the 18 employer disputes the decision or action. Upon receipt 19 of such a petition, the commissioner shall schedule a 20 hearing which shall be conducted in accordance with the 21 provisions of article five, chapter twenty-nine-a of this 22 code. An appeal from a final decision of the commis-23 sioner shall be taken in accord with the provisions of 24 articles five and six of said chapter: Provided, That all 25 such appeals shall be taken to the circuit court of 26 Kanawha county.

ARTICLE 2B. OCCUPATIONAL SAFETY AND HEALTH PROGRAMS.

§23-2B-1. Occupational safety and health activities; voluntary compliance; consultative services.

In order to carry out the purposes of this chapter and to encourage voluntary compliance with occupational safety and health laws, regulations and standards and to promote more effective workplace health and safety programs, the commissioner acting in conjunction with the performance council created pursuant to section one, article three, chapter twenty-one-a of this code, shall:

8 (a) Develop greater knowledge and interest in the 9 causes and prevention of industrial accidents, occupa-10 tional diseases and related subjects through: 11 (1) Research, conferences, lectures and the use of 12 public communications media;

(2) The collection and dissemination of accident anddisease statistics; and

(3) The publication and distribution of training and
accident prevention materials, including audio and
visual aids;

18 (b) Provide consultative services for employers on safety and health matters and prescribe procedures 19 20 which will permit any employer to request a special 21 inspection or investigation, focused on specific problems 22 or hazards in the place of employment of the employer 23 or to request assistance in developing a plan to correct 24 such problems or hazards, which will not directly result 25 in a citation and civil penalty; and

(c) Place emphasis, in the research, education and
consultation program, on development of a model for
providing services to groups of small employers in
particular industries and their employees and for all
employers whose experience modification factor for rate
setting purposes is in excess of the criteria established
by the compensation programs performance council.

§23-2B-2. Mandatory programs; safety committees; requirements; rules; exceptions.

(a) Based upon and to the extent authorized by criteria 1 2 established by the compensation programs performance 3 council, the commissioner is authorized to conduct 4 special inspections or investigations focused on specific 5 problems or hazards in the work place with or without 6 the agreement of the employer. The commissioner shall 7 issue a report on his or her findings and shall furnish 8 a copy of the report to the employer and to any 9 bargaining unit representing the employees of the 10 employer. The commissioner may share information 11 obtained or developed pursuant to this article with other 12 governmental agencies.

(b) For any employer whose experience modification
 factor exceeds the criteria established by the compen sation programs performance council, the commissioner

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16 may require the employer to establish a safety commit-

tee composed of representatives of the employer and theemployees of the employer.

(c) In carrying out the provisions of this article, the
commissioner and the compensation programs performance council shall promulgate rules which shall
include, but are not limited to, the following provisions:

(1) Prescribing the membership of the committees,
training, frequency of meetings, record keeping and
compensation of employee representatives on safety
committees; and

(2) Prescribing the duties and functions of safetycommittees which include, but are not limited to:

(A) Establishing procedures for workplace safety
inspections; and for investigating job-related accidents,
illnesses and deaths; and

32 (B) Evaluating accident and illness prevention33 programs.

(d) An employer that is a member of a multi-employer
group operating under a collective bargaining agreement that contains provisions regulating the formation
and operation of a safety committee that meets or
exceeds the minimum requirements of this section shall
be considered to have met the requirements of this
section.

41 (e) It is not the purpose of this article to either
42 supercede the federal Occupational Health and Safety
43 Act program, federal Mine Safety and Health Act
44 program or to create a state counterpart to this
45 program.

§23-2B-3. Premium rate credits; qualified loss management program; loss management firms; penalties; rules.

1 (a) The commissioner, in conjunction with the compen-2 sation programs performance council, is authorized to 3 establish by rule a premium credit program for certain 4 employers. The program shall be applicable solely to 5 regular subscribers to the workers' compensation fund and not to self-insurers. Participation in any premium
credit program shall be voluntary and no employer shall
be required to participate.

9 (b) The program shall apply a prospective credit to the 10 premium rate of a subscribing employer who partici-11 pates in a qualified loss management program. The 12 prospective credit shall be given for a period of up to 13 three years, provided that the employer remains in the 14 program for a corresponding period of time.

15 (c) The rule shall specify the requirements of a 16 qualified loss management program and shall include a 17 requirement that a recognized loss management firm 18 participate in the program. A loss management firm 19 shall be recognized if it has demonstrated an ability to 20 significantly reduce workers' compensation losses for its 21 client employers by implementing a loss control man-22 agement program. The amount of credit against 23 premium rates that may be allowed by the commis-24 sioner shall vary from firm to firm and shall be 25 primarily determined by the loss reduction success 26 experienced by all of the subscribing employers of the 27 sponsoring loss management firm over a period of time 28 to be determined by the commissioner.

29 (d) A credit shall be applied to the employer's 30 premium rate for up to three years. The amount of the 31 credit applied to the first year is based on the credit 32 factor assigned to the loss management firm on the date 33 the employer subscribes to the program. The amount of 34 the credit applied to the second and third years shall be 35 based on the credit factor assigned to the loss manage-36 ment firm and in effect on each first day of July of the 37 pertinent year: Provided, That the applicable credit is 38 halved in the third year.

(e) The employer may terminate participation in the
program upon three years of continuous participation in
the program without penalty. Sooner termination may
result in a penalty being applied to the employer's
premium rate.

44 (f) An employer who has subscribed to an existing 45 program of a qualified loss management firm prior to 46 the effective date of this section shall be subject to a 47 reduction in credit as follows:

48 (1) Participation for one year or less shall result in49 credit for the full three years;

50 (2) Participation for more than one year but less than
51 two years shall result in a credit for two years;

52 (3) Participation for two years or more but less than 53 three years shall result in a credit for one year; and

54 (4) Participation for three years or more shall result55 in no credit.

56 (g) This section shall not become effective until the 57 commissioner, in conjunction with the compensation

58 programs performance council, promulgates an approp-

59 riate rule to implement the section's provisions.

ARTICLE 4. DISABILITY AND DEATH BENEFITS.

§23-4-1e. Temporary total disability benefits not to be paid for periods of penitentiary or jail confinement; denial of workers' compensation benefits for injuries or disease incurred while incarcerated.

1 (a) Notwithstanding any provision of this code to the 2 contrary, no person shall be jurisdictionally entitled to temporary total disability benefits for that period of 3 4 time in excess of three days during which such person is incarcerated in a penitentiary or jail: Provided, That 5 6 incarceration shall not affect the claimant's eligibility 7 for payment of expenses: Provided, however, That this 8 subsection is applicable only to injuries and diseases incurred prior to any period of incarceration. Upon 9 10 release from confinement, the payment of benefits for the remaining period of temporary total disability shall 11 12 be made if justified by the evidence and authorized by order of the commissioner. 13

(b) Notwithstanding any provision of this code to the
contrary, no person incarcerated in a penitentiary or jail
who suffers injury or a disease in the course of and
resulting from his or her work during such period of
incarceration which work is imposed by the administra-

tion of the penitentiary or jail and is not suffered during
such person's usual employment with his or her usual
employer when not incarcerated shall receive benefits
under the provisions of this chapter for such injury or
disease.

§23-4-1f. Certain psychiatric injuries and diseases not compensable.

For the purposes of this chapter, no alleged injury or disease shall be recognized as a compensable injury or disease which was solely caused by nonphysical means and which did not result in any physical injury or disease to the person claiming benefits. It is the purpose of this section to clarify that so-called mental-mental claims are not compensable under this chapter.

§23-4-3. Schedule of maximum disbursements for medical, surgical, dental and hospital treatment; legislative approval; guidelines; preferred provider agreements; charges in excess of scheduled amounts not to be made; required disclosure of financial interest in sale or rental of medically related mechanical appliances or devices; promulgation of rules to enforce requirement; consequences of failure to disclose; contract by employer with hospital, physician, etc., prohibited; criminal penalties for violation; payments to certain providers prohibited; medical cost and care programs; payments; interlocutory orders.

1 (a) The commissioner shall establish and alter from 2 time to time as he or she may determine to be approp-3 riate a schedule of the maximum reasonable amounts to be paid to chiropractic physicians, medical physicians. 4 5 osteopathic physicians, podiatrists, optometrists, voca-6 tional rehabilitation specialists, pharmacists, ophthalmologists and others practicing medicine and surgery, 7 8 surgeons, hospitals or other persons, firms or corpora-9 tions for the rendering of treatment or services to injured employees under this chapter. The commissioner 10 11 also, on the first day of each regular session and also from time to time, as the commissioner may consider 12

appropriate, shall submit the schedule, with any
changes thereto, to the Legislature. The promulgation of
the schedule is not subject to the legislative rule-making
review procedures established in sections nine through
sixteen, article three, chapter twenty-nine-a of this code.

18 The commissioner shall disburse and pay from the 19 fund for such personal injuries to such employees as may 20 be entitled thereto hereunder as follows:

21 (1) Such sums for medicines, medical, surgical, dental 22 and hospital treatment or services, crutches, artificial 23 limbs and such other and additional approved mechan-24 ical appliances and devices as may be reasonably 25 required. The commissioner shall determine that which 26 is reasonably required within the meaning of this 27 section in accordance with the guidelines developed by 28 the health care advisory panel pursuant to section three-29 b of this article: *Provided*. That nothing herein shall prevent the implementation of guidelines applicable to 30 31 a particular type of treatment or service or to a 32 particular type of injury before guidelines have been 33 developed for other types of treatment or services or injuries: Provided, however, That any guidelines for 34 35 utilization review which are developed in addition to the 36 guidelines provided for in said section may be utilized 37 by the commissioner until superseded by guidelines 38 developed by the health care advisory panel pursuant to 39 said section. Each health care provider who seeks to 40 provide services or treatment which are not within any 41 such guideline shall submit to the commissioner specific 42 justification for the need for such additional services in 43 the particular case and the commissioner shall have the 44 justification reviewed by a health care professional 45 before authorizing any such additional services. The 46 commissioner is authorized to enter into preferred 47 provider agreements.

(2) Payment for such medicine, medical, surgical,
dental and hospital treatment or services, crutches,
artificial limbs and such other and additional approved
mechanical appliances and devices authorized under
this subdivision may be made to the injured employee
or to the person, firm or corporation who or which has

[Enr. H. B. 2802

54 rendered such treatment or furnished any of the items specified above, or who has advanced payment for same. 55 56 as the commissioner may deem proper, but no such payments or disbursements shall be made or awarded 57 58 by the commissioner unless duly verified statements on 59 forms prescribed by the commissioner shall be filed 60 with the commissioner within two years after the 61 cessation of such treatment or the delivery of such appliances: Provided, That no payment hereunder shall 62 63 be made unless such verified statement shows no charge 64 for or with respect to such treatment or for or with 65 respect to any of the items specified above has been or 66 will be made against the injured employee or any other 67 person, firm or corporation, and when an employee 68 covered under the provisions of this chapter is injured 69 in the course of and as a result of his or her employment 70 and is accepted for medical, surgical, dental or hospital 71 treatment or services or any mechanical appliances and 72 devices, the person, firm or corporation rendering such 73 treatment is hereby prohibited from making any charge 74 or charges therefor or with respect thereto against the 75 injured employee or any other person, firm or corpora-76 tion which would result in a total charge for the 77 treatment rendered in excess of the maximum amount 78 set forth therefor in the commissioner's schedule 79 established as aforesaid.

80 (b) No chiropractic physician, medical physician, 81 osteopathic physician, podiatrist or others practicing 82 medicine or surgery (collectively and individually 83 referred to hereinafter as "practitioner" or "practition-84 ers") shall refer his or her patients to the practitioner 85 himself or herself or to a supplier of mechanical 86 appliances or devices owned in whole or in part by the 87 practitioner, the practitioner's partnership or profes-88 sional corporation, or a member of the practitioner's 89 immediate family for the purchase or rental of any 90 mechanical appliances or devices which the practitioner 91 has prescribed or recommended to such patient except 92 upon the terms prescribed by this section. Examples of 93 mechanical appliances or devices are described as 94 follows, but these examples are described for illustrative 95 purposes only and are not intended to limit the range

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Enr. H. B. 2802]

96 of items included by this phrase: Hearing aids; crutches;

97 artificial limbs; oxygen concentrators; and TENS units.
98 For the purposes of this subsection, the term "practitioner" shall include natural persons, partnerships and

100 professional corporations.

101 (1) In order to avoid the bar of this subdivision, a 102 practitioner shall first disclose to his or her patient the 103 ownership interest of the practitioner, or of the practi-104 tioner's partnership or professional corporation, or of a 105 member of the practitioner's immediate family in the 106 entity which would sell or rent the mechanical appliance 107 or device to the patient. If the practitioner would sell 108 or rent the mechanical appliance or device as part of his 109 or her practice and not as a separate legal entity, the 110 practitioner shall disclose this fact to the patient. These 111 disclosures must be delivered in writing to the patient.

112 (2) The commissioner may include in any rules 113 promulgated to implement this section a requirement 114 that the written notice disclose to the patient that he or 115 she is free to use any lawful supplier of the mechanical appliance or device prescribed or recommended and 116 117 that other suppliers may offer the mechanical appliance 118 or device for less cost but of equal or better quality 119 elsewhere and that the patient is encouraged to comparison shop. The commissioner's rule may also provide for 120 121 a differing level of reimbursement to the supplier if the 122 supplier is the practitioner himself or herself or if the 123 supplier is owned in whole or in part by the practitioner, 124 the practitioner's partnership or professional corpora-125 tion or a member of the practitioner's immediate family 126 as compared to the reimbursement of a supplier who is 127 wholly independent from the practitioner.

128 (3) Failure by a practitioner to comply with the 129 provisions of this subsection shall cause the practitioner 130 to forfeit his, her or its right to reimbursement for the 131 services rendered by the practitioner to the patient and. 132 if any such services have previously been reimbursed, 133 the commissioner shall either seek recovery of such 134 funds by any lawful means or by deducting such 135 amounts from future payments to the practitioner on account of services rendered to the same patient or to 136

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137 other claimants of the workers' compensation fund. In 138 addition, failure by a practitioner to comply with the provisions of this subsection shall also result in the 139 140 denial of payment to the supplier of the mechanical 141 appliance or device if that supplier is one which is 142 owned in whole or in part by the practitioner, the 143 practitioner's partnership or professional corporation. or 144 a member of the practitioner's immediate family. If 145 such supplier has already been reimbursed for the cost 146 of the pertinent mechanical appliance or device, then the 147 commissioner shall either seek recovery of such funds 148 by any lawful means or by deducting such amounts from 149 future payments to the supplier on account of goods 150 delivered to the same patient or to other claimants of 151 the workers' compensation fund.

152 (c) No employer shall enter into any contracts with 153 any hospital, its physicians, officers, agents or employees 154 to render medical, dental or hospital service or to give medical or surgical attention therein to any employee 155 156 for injury compensable within the purview of this 157 chapter, and no employer shall permit or require any 158 employee to contribute, directly or indirectly, to any 159 fund for the payment of such medical, surgical, dental 160 or hospital service within such hospital for such 161 compensable injury. Any employer violating this section 162 shall be liable in damages to the employer's employees 163 as provided in section eight, article two of this chapter. 164 and any employer or hospital or agent or employee 165 thereof violating the provisions of this section shall be guilty of a misdemeanor, and, upon conviction thereof. 166 167 shall be punished by a fine not less than one hundred dollars nor more than one thousand dollars or by 168 imprisonment not exceeding one year, or both: Provided, 169 That the foregoing provisions of this subsection shall not 170 be deemed to prohibit an employer from participating 171 in a preferred provider organization or program or a 172 health maintenance organization or other medical cost 173 containment relationship with the providers of medical, 174 hospital or other health care: Provided, however, That 175 nothing in this section shall be deemed to restrict the 176 right of a claimant to select a health care provider for 177 treatment of a compensable injury or disease. 178

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179 (d) When an injury has been reported to the commis-180 sioner by the employer without protest, the commis-181 sioner may pay, or order an employer who or which 182 made the election and who or which received the 183 permission mentioned in section nine, article two of this chapter to pay, within the maximum amount provided 184 185 by schedule established by the commissioner as afore-186 said, bills for medical or hospital services without 187 requiring the injured employee to file an application for 188 benefits.

189 (e) The commissioner shall provide for the replace-190 ment of artificial limbs, crutches, hearing aids, eye-191 glasses and all other mechanical appliances provided in 192 accordance with this section which later wear out, or 193 which later need to be refitted because of the progres-194 sion of the injury which caused the same to be originally 195 furnished, or which are broken in the course of and as 196 a result of the employee's employment. The fund or self-197 insured employer shall pay for these devices, when 198 needed, notwithstanding any time limits provided by 199 law.

(f) No payment shall be made to a health care provider
who is suspended or terminated under the terms of
section three-c of this article except as provided in
subsection (c) of said section.

204 (g) The commissioner is authorized to engage in and 205 contract for medical cost containment programs. 206 medical case management programs and utilization 207 review programs. Payments for these programs shall be 208 made from the supercedeas reserve of the surplus fund. 209 Any order issued pursuant to any such program shall 210 be interlocutory in nature until an objecting party has 211 exhausted all review processes provided for by the 212 commissioner.

(h) Notwithstanding the foregoing, the commissioner
may establish fee schedules, make payments and take
other actions required or allowed pursuant to article
twenty-nine-d, chapter sixteen of this code.

§23-4-3a. Wrongfully seeking payment for services or supplies; criminal penalties; restitution.

(a) If any person who is a health care provider shall:

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(1) Knowingly, and with intent to defraud, secure or
attempt to secure payment from the workers' compensation fund or a self-insured employer for services or
supplies when such person is not entitled to such
payment or is entitled to some lesser amount of
payment; or

8 (2) Knowingly make any charge or charges against 9 any injured employee or any other person, firm or 10 corporation which would result in a total charge for the 11 treatment or service rendered in excess of the maximum 12 amount set forth therefor in the commissioner's schedule 13 of maximum reasonable amounts to be paid for such 14 treatment or services issued pursuant to subsection (a), 15 section three of this article, then in either case, such 16 person shall be guilty of a felony, and, upon conviction 17 thereof, shall be fined not more than ten thousand 18 dollars, or imprisoned not more than two years, or both fined and imprisoned. In addition to any other penalty 19 20 imposed, the court shall order any person convicted 21 under this section to make full restitution of all moneys 22 paid by the commissioner, a self-insured employer. 23 injured employee or other person as the result of the violation of this section. 24

(b) Any person who is a health care provider who fails. 25 26 in violation of subsection (e), section three-c of this article, to post a notice, in the form required by the 27 commissioner, in the provider's public waiting area that 28 the provider cannot accept any patient whose treatment 29 or other services or supplies would ordinarily be paid 30 for from the workers' compensation fund unless such 31 patient consents, in writing, prior to the provision of 32 such treatment or other services or supplies, to make 33 payment for that treatment or other services or supplies 34 himself or herself, shall be guilty of a misdemeanor. 35 and, upon conviction thereof, shall be fined one thousand 36 dollars. 37

(c) Any person who is a health care provider, who is
suspended or terminated under section three-c of this
article and, who intentionally attempts to collect any

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sum of money from an injured employee who was not, 41 42 prior to the provision of any treatment or other services 43 or supplies, provided with the notice required by subsection (c) of said section, shall be guilty of a 44 45 misdemeanor, and, upon conviction thereof, shall be 46 fined not more than ten thousand dollars, or imprisoned 47 in the county jail not more than twelve months, or both 48 fined and imprisoned.

49 (d) For the purposes of this section, the term "person who is a health care provider" shall mean any person 50 51 who has rendered, or who represents that he has rendered, any treatment to an injured employee under 52 53 this chapter, or any person who has supplied, or who 54 represents that he has supplied, any medication or any 55 crutches, artificial limbs and other mechanical applian-56 ces and devices for such injured employee. The term 57 shall include, but not be limited to, persons practicing medicine and surgery, podiatry, dentistry, nursing, 58 59 pharmacy, optometry, osteopathic medicine and 60 surgery, chiropractic, physical therapy, psychology, 61 radiologic technology, occupational therapy or voca-62 tional rehabilitation, and shall also include hospitals, 63 professional corporations and other corporations, firms 64 and business entities.

(e) Any person convicted under the provisions of this
section shall, from and after such conviction, be barred
from providing future services or supplies to injured
employees under this chapter and shall cease to receive
payment for such services or supplies.

§23-4-3c. Suspension or termination of providers of health care.

(a) The commissioner may suspend for up to one year
 or terminate the right of any health care provider,
 including a provider of rehabilitation services within the
 meaning of section nine of this article, to obtain payment
 for services rendered to injured employees:

6 (1) If the commissioner finds that the health care 7 provider is regularly providing excessive, medically 8 unreasonable or unethical care to injured employees; 9 (2) If the commissioner finds that a health care 10 provider is attempting to make any charge or charges 11 against the injured employee or any other person, firm 12 or corporation which would result in a total charge for 13 any treatment rendered in excess of the maximum 14 amount set by the commissioner, in violation of section 15 three of this article;

(3) If the commissioner determines that the health
care provider has had his or her license to practice
suspended or terminated by the appropriate authority
in this state or in another state; or

20 (4) If the commissioner determines that the health
21 care provider has been convicted of any crime in
22 relation to his or her practice.

The commissioner shall consult with medical experts, including the health care advisory panel established pursuant to section three-b of this article, for purposes of determining whether a health care provider should be suspended or terminated pursuant to this section.

28 (b) Upon the commissioner determining that there is 29 probable cause to believe that a health care provider 30 should be suspended or terminated pursuant to this 31 section, the commissioner shall provide such health care 32 provider with written notice which shall state the nature 33 of the charges against the health care provider and the 34 time and place at which such health care provider shall 35 appear to show cause why the health care provider's 36 right to receive payment under this chapter should not 37 be suspended or terminated, at which time and place 38 such health care provider shall be afforded an opportun-39 ity to review the commissioner's evidence and to crossexamine the commissioner's witnesses and also afforded 40 41 the opportunity to present testimony and enter evidence 42 in support of its position. The hearing shall be conducted 43 in accordance with the provisions of article five, chapter 44 twenty-nine-a of this code. The hearing may be con-45 ducted by the commissioner or a hearing officer 46 appointed by the commissioner. The commissioner or 47 hearing officer shall have the power to subpoena 48 witnesses, papers, records, documents and other data

49 and things in connection with the proceeding hereunder 50 and to administer oaths or affirmations in any such 51 hearing. If, after reviewing the record of such hearing. 52 the commissioner determines that the right of such 53 health care provider to obtain payment under this 54 article should be suspended for a specified period of time or should be terminated, the commissioner shall 55 issue a final order suspending or terminating the right 56 57 of such health care provider to obtain payment for 58 services under this article. Any health care provider so 59 suspended or terminated shall be notified in writing and 60 the notice shall specify the reasons for the action so 61 taken. Any appeal by the health care provider shall be 62 brought in the circuit court of Kanawha county or in the 63 county in which the provider's principal place of 64 business is located. The scope of the court's review of 65 such an appeal shall be as provided in section four of 66 said article. The provider may be suspended or termi-67 nated, based upon the final order of the commissioner. 68 pending final disposition of any appeal. Such final order 69 may be stayed by the circuit court after hearing, but 70 shall not be stayed in or as a result of any ex parte proceeding. If the health care provider does not appeal 71 72 the final order of the commissioner within thirty days, 73 it shall be final.

74 (c) No payment shall be made to a health care 75 provider or to an injured employee for services provided 76 by a health care provider after the effective date of a 77 commissioner's final order terminating or suspending 78 the health care provider: Provided, That nothing herein 79 shall prohibit payment by the commissioner or self-80 insured employer to a suspended or terminated health 81 care provider for medical services rendered where the 82 medical services were rendered to an injured employee 83 in an emergency situation. The suspended or terminated 84 provider is prohibited from making any charge or 85 charges for any services so provided against the injured 86 employee unless the injured employee, before any 87 services are rendered, is given notice by the provider in 88 writing that the provider does not participate in the workers' compensation program and that the injured 89 employee will be solely responsible for all payments to 90

91 the provider, and unless the injured employee also signs 92 a written consent, before any services are rendered, to 93 make payment directly and to waive any right to 94 reimbursement from the commissioner or the self-95 insured employer. The written consent and waiver 96 signed by the injured employee shall be filed by the 97 provider with the commissioner and shall be made a 98 part of the claim file.

99 (d) The commissioner shall notify each claimant, 100 whose duly authorized treating physician or other health 101 care provider has been suspended or terminated 102 pursuant to this section, of the suspension or termination 103 of the provider's rights to obtain payment under this 104 chapter and shall assist the claimant in arranging for 105 transfer of his or her care to another physician or 106 provider.

(e) Each suspended or terminated provider shall post
in the provider's public waiting area or areas a written
notice, in the form required by the commissioner, of the
suspension or termination of the provider's rights to
obtain payment under this chapter.

(f) A suspended or terminated provider may apply for reinstatement at the end of the term of suspension or, if terminated, after one year from the effective date of termination.

(g) The commissioner shall promulgate rules for the purpose of implementing this section.

§23-4-6. Classification of and criteria for disability benefits.

1 Where compensation is due an employee under the 2 provisions of this chapter for personal injury, the 3 compensation shall be as provided in the following 4 schedule:

(a) The expressions "average weekly wage earnings,
wherever earned, of the injured employee, at the date
of injury" and "average weekly wage in West Virginia",
as used in this chapter, shall have the meaning and shall
be computed as set forth in section fourteen of this
article except for the purpose of computing temporary

11 total disability benefits for part-time employees pursuant to the provisions of section six-d of this article.

13 (b) If the injury causes temporary total disability, the 14 employee shall receive during the continuance thereof 15 weekly benefits as follows: A maximum weekly benefit 16 to be computed on the basis of seventy percent of the 17 average weekly wage earnings, wherever earned, of the injured employee, at the date of injury, not to exceed the 18 19 percentage of the average weekly wage in West Virgi-20 nia, as follows: On or after the first day of July, one 21 thousand nine hundred sixty-nine, forty-five percent; on 22 or after the first day of July, one thousand nine hundred 23 seventy, fifty percent; on or after the first day of July, 24 one thousand nine hundred seventy-one, fifty-five 25 percent; on or after the first day of July, one thousand 26 nine hundred seventy-three, sixty percent; on or after 27 the first day of July. one thousand nine hundred seventy-28 four, eighty percent; on or after the first day of July, 29 one thousand nine hundred seventy-five, one hundred 30 percent.

31 The minimum weekly benefits paid hereunder shall 32 not be less than twenty-six dollars per week for injuries 33 occurring on or after the first day of July, one thousand 34 nine hundred sixty-nine; not less than thirty-five dollars 35 per week for injuries occurring on or after the first day 36 of July, one thousand nine hundred seventy-one; not less 37 than forty dollars per week for injuries occurring on or 38 after the first day of July, one thousand nine hundred 39 seventy-three; not less than forty-five dollars per week 40 for injuries occurring on or after the first day of July, 41 one thousand nine hundred seventy-four; and for injuries 42 occurring on or after the first day of July, one thousand 43 nine hundred seventy-six, thirty-three and one-third 44 percent of the average weekly wage in West Virginia, 45 except as provided in section six-d of this article.

46 (c) Subdivision (b) of this section shall be limited as
47 follows: Aggregate award for a single injury causing
48 temporary disability shall be for a period not exceeding
49 two hundred eight weeks.

50 (d) If the injury causes permanent total disability,

51 benefits shall be payable during the remainder of life 52 at the maximum or minimum weekly benefits as 53 provided in subdivision (b) of this section for temporary 54 total disability. A permanent disability of eighty-five percent or more shall entitle the employee to a rebut-55 56 table presumption of a permanent total disability for the 57 purpose of this section. Under no circumstances shall 58 the commissioner grant an additional permanent 59 disability award to a claimant receiving a permanent 60 total disability award, or to a claimant who has 61 previously been granted permanent disability awards 62 totaling eighty-five percent or more and has been 63 granted a permanent total disability award: Provided, That if any claimant thereafter sustains another 64 65 compensable injury and has permanent partial disabil-66 ity resulting therefrom, the total permanent disability 67 award benefit rate shall be computed at the highest 68 benefit rate justified by any of the compensable injuries, 69 and the cost of any increase in the permanent total 70 disability benefit rate shall be paid from the second 71 injury reserve created by section one, article three of 72 this chapter. In any claim in which a claimant aggre-73 gates permanent partial disability awards in the amount 74 of eighty-five percent or more after the effective date of 75 this subsection, the claimant shall be entitled to a 76 permanent total disability award unless the evidence 77 establishes that the claimant is not permanently and 78 totally disabled pursuant to subdivision (n) of this 79 section.

80 (e) If the injury causes permanent disability less than 81 permanent total disability, the percentage of disability 82 to total disability shall be determined and the award 83 computed on the basis of four weeks' compensation for 84 each percent of disability determined, at the following 85 maximum or minimum benefit rates: Seventy percent 86 of the average weekly wage earnings, wherever earned, 87 of the injured employee, at the date of injury, not to 88 exceed the percentage of the average weekly wage in 89 West Virginia, as follows: On or after the first day of 90 July, one thousand nine hundred sixty-nine, forty-five 91 percent; on or after the first day of July, one thousand 92 nine hundred seventy, fifty percent; on or after the first 93

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day of July, one thousand nine hundred seventy-one, fifty-five percent; on or after the first day of July, one thousand nine hundred seventy-three, sixty percent; on

96 or after the first day of July, one thousand nine hundred97 seventy-five, sixty-six and two-thirds percent.

98 The minimum weekly benefit under this subdivision 99 shall be as provided in subdivision (b) of this section for 100 temporary total disability.

101 (f) If the injury results in the total loss by severance 102 of any of the members named in this subdivision, the 103 percentage of disability shall be determined by the 104 commissioner, with the following table establishing the 105 minimum percentage of disability. In determining the percentage of disability, the commissioner may be 106 107 guided by, but shall not be limited to, the disabilities 108 enumerated in the following table, and in no event shall 109 the disability be less than that specified in the following 110 table:

111 The loss of a great toe shall be considered a ten 112 percent disability.

113 The loss of a great toe (one phalanx) shall be consi-114 dered a five percent disability.

115 The loss of other toes shall be considered a four 116 percent disability.

The loss of other toes (one phalanx) shall be considereda two percent disability.

119 The loss of all toes shall be considered a twenty-five 120 percent disability.

121 The loss of forepart of foot shall be considered a thirty 122 percent disability.

123 The loss of a foot shall be considered a thirty-five 124 percent disability.

125 The loss of a leg shall be considered a forty-five 126 percent disability.

127 The loss of thigh shall be considered a fifty percent 128 disability.

129 The loss of thigh at hip joint shall be considered a 130 sixty percent disability. 131 The loss of a little or fourth finger (one phalanx) shall 132 be considered a three percent disability. 133 The loss of a little or fourth finger shall be considered 134 a five percent disability. 135 The loss of ring or third finger (one phalanx) shall be 136 considered a three percent disability. The loss of ring or third finger shall be considered a 137 138 five percent disability. The loss of middle or second finger (one phalanx) shall 139 140 be considered a three percent disability. 141 The loss of middle or second finger shall be considered 142 a seven percent disability. 143 The loss of index or first finger (one phalanx) shall be considered a six percent disability. 144 145 The loss of index or first finger shall be considered 146 a ten percent disability. 147 The loss of thumb (one phalanx) shall be considered 148 a twelve percent disability. 149 The loss of thumb shall be considered a twenty 150 percent disability. 151 The loss of thumb and index finger shall be considered 152 a thirty-two percent disability. 153 The loss of index and middle finger shall be consi-154 dered a twenty percent disability. 155 The loss of middle and ring finger shall be considered 156 a fifteen percent disability. 157 The loss of ring and little finger shall be considered 158 a ten percent disability. 159 The loss of thumb, index and middle finger shall be 160 considered a forty percent disability. 161 The loss of index, middle and ring finger shall be 162 considered a thirty percent disability. 163 The loss of middle, ring and little finger shall be considered a twenty percent disability. 164

163 The loss of four fingers shall be considered a thirty-164 two percent disability.

165 The loss of hand shall be considered a fifty percent 166 disability.

167 The loss of forearm shall be considered a fifty-five 168 percent disability.

169 The loss of arm shall be considered a sixty percent 170 disability.

171 The total and irrecoverable loss of the sight of one eye 172 shall be considered a thirty-three percent disability. For 173 the partial loss of vision in one, or both eyes, the 174 percentages of disability shall be determined by the 175 commissioner, using as a basis the total loss of one eye.

176 The total and irrecoverable loss of the hearing of one 177 ear shall be considered a twenty-two and one-half 178 percent disability. The total and irrecoverable loss of 179 hearing of both ears shall be considered a fifty-five 180 percent disability.

181 For the partial loss of hearing in one, or both ears,
182 the percentage of disability shall be determined by the
183 commissioner, using as a basis the total loss of hearing
184 in both ears.

185 Should a claimant sustain a compensable injury which 186 results in the total loss by severance of any of the bodily 187 members named in this subdivision, die from sickness 188 or noncompensable injury before the commissioner 189 makes the proper award for such injury, the commis-190 sioner shall make such award to claimant's dependents as defined in this chapter, if any; such payment to be 191 192 made in the same installments that would have been 193 paid to claimant if living: Provided, That no payment 194 shall be made to any surviving spouse of such claimant 195 after his or her remarriage, and that this liability shall not accrue to the estate of such claimant and shall not 196 be subject to any debts of, or charges against, such 197 198 estate.

199 (g) Should a claimant to whom has been made a 200 permanent partial award of from one percent to eighty201 four percent, both inclusive, die from sickness or 202 noncompensable injury, the unpaid balance of such 203 award shall be paid to claimant's dependents as defined 204 in this chapter, if any; such payment to be made in the 205 same installments that would have been paid to clai-206 mant if living: Provided, That no payment shall be made 207 to any surviving spouse of such claimant after his or her 208 remarriage, and that this liability shall not accrue to the 209 estate of such claimant and shall not be subject to any 210 debts of, or charges against, such estate.

(h) For the purposes of this chapter, a finding of the
occupational pneumoconiosis board shall have the force
and effect of an award.

(i) The award for permanent disabilities intermediate
to those fixed by the foregoing schedule and permanent
disability of from one percent to eighty-four percent
shall be the same proportion and shall be computed and
allowed by the commissioner.

219 (j) The percentage of all permanent disabilities other 220 than those enumerated in subdivision (f) of this section 221 shall be determined by the commissioner, and awards 222 made in accordance with the provisions of subdivision 223 (d) or (e) of this section. Where there has been an injury 224 to a member as distinguished from total loss by 225 severance of that member, the commissioner in deter-226 mining the percentage of disability may be guided by, 227 but shall not be limited to, the disabilities enumerated 228 in subdivision (f) of this section.

(k) Compensation payable under any subdivision of
this section shall not exceed the maximum nor be less
than the weekly benefits specified in subdivision (b) of
this section.

233 (1) Except as otherwise specifically provided in this 234 chapter, temporary total disability benefits payable 235 under subdivision (b) of this section shall not be 236 deductible from permanent partial disability awards 237 payable under subdivision (e) or (f) of this section. 238 Compensation, either temporary total or permanent 239 partial, under this section shall be payable only to the 240 injured employee and the right thereto shall not vest in Enr. H. B. 2802]

his or her estate, except that any unpaid compensation which would have been paid or payable to the employee up to the time of his or her death, if he or she had lived, shall be paid to the dependents of such injured employee if there be such dependents at the time of death.

246 (m) The following permanent disabilities shall be 247 conclusively presumed to be total in character:

248 Loss of both eyes or the sight thereof.

249 Loss of both hands or the use thereof.

250 Loss of both feet or the use thereof.

251 Loss of one hand and one foot or the use thereof.

In all other cases permanent disability shall be
determined by the commissioner in accordance with the
facts in the case and award made in accordance with
the provisions of subdivision (d) or (e).

256 (n) A disability which renders the injured employee 257 unable to engage in substantial gainful activity requiring skills or abilities comparable to those of any gainful 258 259 activity in which he or she has previously engaged with 260 some regularity and over a substantial period of time 261 shall be considered in determining the issue of total 262 disability. In addition, the vocational standards adopted pursuant to subsection (m) of section seven, article three, 263 264 chapter twenty-one-a of this code shall be considered 265 once they are effective.

§23-4-8c. Occupational pneumoconiosis board—Reports and distribution thereof; presumption; findings required of board; objection to findings; procedure thereon; limitations on refilings; consolidation of claims.

1 (a) The occupational pneumoconiosis board, as soon as 2 practicable, after it has completed its investigation, 3 shall make its written report, to the commissioner, of its 4 findings and conclusions on every medical question in 5 controversy and the commissioner shall send one copy 6 thereof to the employee or claimant and one copy to the 7 employer, and the board shall also return to and file 8 with the commissioner all the evidence as well as all

9 statements under oath, if any, of the persons who appear
10 before it on behalf of the employee or claimant, or
11 employer and also all medical reports and X-ray
12 examinations produced by or on behalf of the employee
13 or claimant, or employer.

14 (b) If it can be shown that the claimant or deceased employee has been exposed to the hazard of inhaling 15 16 minute particles of dust in the course of and resulting from his or her employment for a period of ten years 17 18 during the fifteen years immediately preceding the date 19 of his or her last exposure to such hazard and that such 20 claimant or deceased employee has sustained a chronic 21 respiratory disability, then it shall be presumed that 22 such claimant is suffering or such deceased employee 23 was suffering at the time of his or her death from 24 occupational pneumoconiosis which arose out of and in 25 the course of his or her employment. This presumption 26 shall not be conclusive.

(c) The findings and conclusions of the board shall setforth, among other things, the following:

(1) Whether or not the claimant or the deceased
employee has contracted occupational pneumoconiosis
and, if so, the percentage of permanent disability
resulting therefrom.

(2) Whether or not the exposure in the employment
was sufficient to have caused the claimant's or deceased
employee's occupational pneumoconiosis or to have
perceptibly aggravated an existing occupational pneumoconiosis, or other occupational disease.

(3) What, if any, physician appeared before the board
on behalf of the claimant or employer, and what, if any,
medical evidence was produced by or on behalf of the
claimant or employer.

(d) If either party objects to the whole or any part of
such findings and conclusions of the board, such party
shall file with the commissioner or, on or after the first
day of July, one thousand nine hundred ninety-one, with
the office of judges, within thirty days from receipt of
such copy to such party, unless for good cause shown,

the commissioner or chief administrative law judge 48 49 extends such time, such party's objections thereto in 50 writing, specifying the particular statements of the board's findings and conclusions to which such party 51 52 objects. The filing of an objection within the time 53 specified is hereby declared to be a condition of the right 54 to litigate such findings and hence jurisdictional. After 55 the time has expired for the filing of objections to the 56 findings and conclusions of the board, the commissioner 57 or administrative law judge shall proceed to act as 58 provided in this chapter. If after the time has expired 59 for the filing of objections to the findings and conclu-60 sions of the board no objections have been filed, the 61 report of a majority of the board of its findings and 62 conclusions on any medical question shall be taken to be 63 plenary and conclusive evidence of the findings and 64 conclusions therein stated. If objection has been filed to 65 the findings and conclusions of the board, notice thereof 66 shall be given to the board, and the members thereof 67 joining in such findings and conclusions shall appear at 68 the time fixed by the commissioner or office of judges 69 for the hearing to submit to examination and cross-70 examination in respect to such findings and conclusions. 71 At such hearing, evidence to support or controvert the 72 findings and conclusions of the board shall be limited 73 to examination and cross-examination of the members 74 of the board, and to the taking of testimony of other 75 qualified physicians and roentgenologists.

76 (e) In the event that a claimant receives a final 77 decision that he or she has no evidence of occupational 78 pneumoconiosis, then such claimant is barred for a 79 period of three years from the date of the occupational 80 pneumoconiosis board's decision or until his or her 81 employment with the employer who employed the 82 claimant at the time designated as the claimant's last 83 date of exposure in the denied claim has terminated, 84 whichever is sooner, from filing a new claim or pursuing 85 a previously filed, but unruled upon, claim for occupa-86 tional pneumoconiosis or requesting a modification of 87 any prior ruling finding him or her not to be suffering 88 from occupational pneumoconiosis. For the purposes of 89 this subsection, a claimant's employment shall be

90 deemed to be terminated if, for any reason, he or she has not worked for that employer for a period in excess 91 92 of ninety days. Any previously filed, but unruled upon, 93 claim shall be consolidated with the claim in which the 94 board's decision is made and shall be denied together 95 with the decided claim. The provisions of this subsection shall not be applied in any claim where doing so would, 96 97 in and of itself, later cause a claimant's claim to be 98 forever barred by the provisions of section fifteen of this 99 article.

§23-4-16. Commissioner's jurisdiction over case continuous; modification of finding or order; time limitation on awards; reimbursement of claimant for expenses; reopening cases involving permanent total disability; promulgation of rules.

1 (a) The power and jurisdiction of the commissioner 2 over each case shall be continuing and he may from time 3 to time, after due notice to the employer, make such 4 modifications or changes with respect to former findings 5 or orders as may be justified: Provided, That no further 6 award may be made in fatal cases arising after the 7 seventh day of March, one thousand nine hundred 8 twenty-nine, except within two years after the death of 9 the employee, or in case of nonfatal injuries, on and after 10 the seventh day of March, one thousand nine hundred 11 twenty-nine, except within five years after payments for 12 temporary disability shall have ceased or not more than 13 two times within five years after the commissioner shall 14 have made the last payment in the original award or any 15 subsequent increase thereto in any permanent disability 16 case: Provided, however, That no such modification or change may be made in any case in which no award has 17 18 been made, except within five years after the date of injury: Provided further, That a further award may be 19 made for medical benefits only at any time. In any case 20 in which an injured employee shall make application for 21 a further adjustment of his claim, if such application be 22 23 in writing and filed within the applicable time limit as 24 prescribed herein, the commissioner shall pass upon and 25 determine the merits of such application within thirty Enr. H. B. 2802]

26 days after the filing thereof.

27 (b) If such application is based on a report of any 28 medical examination made of the claimant and submit-29 ted by the claimant to the commissioner in support of 30 his application, and the claim is opened for further 31 consideration and additional award is later made, the 32 claimant shall be reimbursed for the expenses of such 33 examination. Such reimbursement shall be made by the 34 commissioner to the claimant, in addition to all other 35 benefits awarded, upon due proof of the amount thereof 36 being furnished the commissioner by the claimant, but 37 shall in no case exceed the sum fixed pursuant to the 38 commissioner's schedule of maximum reasonable fees 39 established under the provisions of section three of this 40 article.

41 (c) The commissioner shall have continuing power and
42 jurisdiction over claims in which permanent total
43 disability awards have been made after the effective
44 date of this section.

45 (1) The commissioner shall continuously monitor 46 permanent total disability awards and may from time 47 to time, after due notice to the claimant, reopen a claim 48 for reevaluation of the continuing nature of the disability and possible modification of the award: Provided, 49 That such reopenings shall not be done sooner than 50 51 every two years: Provided, however, That any individual 52 claimant shall only be reevaluated a total of two times 53 after which he or she may not be again reevaluated 54 under the provisions of this subsection. The commissioner may reopen a claim for reevaluation when, in the 55 56 commissioner's sole discretion, he or she concludes that 57 there exists good cause to believe that the claimant no 58 longer meets the eligibility requirements under subdi-59 vision (n), section six of this article. The eligibility 60 requirements, including any vocational standards, shall 61 be applied as those requirements are stated at the time 62 of a claim's reopening. This section shall not be applicable to any claim in which the final decision on 63 the eligibility of the claimant to a permanent total 64 65 disability award was made more than ten years prior to the date of proposed reevaluation. 66

67 (2) Upon reopening a claim under this subsection, the 68 commissioner may take evidence, have the claimant 69 evaluated, make findings of fact and conclusions of law 70 and shall vacate, modify or affirm the original perman-71 ent total disability award as the record requires. The 72 claimant's former employer shall not be a party to the 73 reevaluation, but shall be notified of the reevaluation and may submit such information to the commissioner 74 75 as the employer may elect. In the event the claimant 76 retains his or her award following the reevaluation, then 77 the claimant's reasonable attorneys' fees incurred in 78 defending the award shall be paid by the workers' 79 compensation division from the supercedeas reserve of 80 the surplus fund. In addition, the workers' compensation 81 division shall reimburse a prevailing claimant for his or 82 her costs in obtaining one evaluation on each issue 83 during the course of the reevaluation with such reim-84 bursement being made from the supercedeas reserve of 85 the surplus fund. The compensation programs perfor-86 mance council shall adopt criteria for the determination 87 of reasonable attorneys' fees.

(3) This subsection shall not be applied to awards
made under the provisions of subdivision (m) of section
six of this article. The claimant may seek review of the
commissioner's final order as otherwise provided for in
article five of this chapter for review of orders granting
or denying permanent disability awards.

§23-4-19. Wrongfully seeking compensation; criminal penalties; restitution; termination of compensation.

1 Any person who shall knowingly and with fraudulent 2 intent secure or attempt to secure larger compensation, 3 or compensation for a longer term than he or she is entitled to, from the workers' compensation fund or 4 from a self-insured employer, or knowingly and with 5 6 like intent secure or attempt to secure compensation 7 from such fund or self-insured employer when he or she 8 is not entitled thereto, or shall knowingly and with like 9 intent aid and abet anyone in the commission of the offenses herein set forth, shall be guilty of a felony, and, 10 11 upon conviction thereof, shall be fined not exceeding five

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12 thousand dollars, or imprisoned not exceeding two 13 years, or both, and in addition to any other penalty 14 imposed, the court shall order any person convicted 15 under this section to make full restitution of all moneys 16 paid by the commissioner or self-insured employer as 17 the result of the violation of this section. If the person 18 so convicted is receiving compensation from such fund 19 or self-insured employer, he or she shall, from and after 20 such conviction, cease to receive such compensation as 21 a result of that alleged injury or disease.

§23-4-22. Permanent disability evaluations; limitations; notice.

1 Notwithstanding any provision in this chapter to the 2 contrary, any claim which was closed for the receipt of 3 temporary total disability benefits or which was closed 4 on a no lost time basis and which closure was more than 5 five years prior to the effective date of this section shall 6 not be considered to still be open or the subject for an 7 evaluation of the claimant for permanent disability 8 merely because such evaluation has not heretofore been 9 conducted and a decision on permanent disability has 10 not been made: Provided, That if a request for an 11 evaluation was made in such a claim prior to the twenty-12 ninth day of March, one thousand nine hundred ninety-13 three, the commissioner shall have such evaluation 14 performed. In every such instance, such a claim shall 15 be a case in which no award has been made for the 16 purposes of section sixteen of this article. In every claim 17 closed after the effective date of this section, the commissioner shall give notice to the parties of the 18 19 claimant's right to a permanent disability evaluation.

§23-4-23. Permanent total disability benefits; reduction of disability benefits; social security benefits; applications; release of information; credit or reduction of benefits; application of section; severability.

1 (a) This section is applicable whenever benefits are 2 being paid for permanent total disability benefits 3 arising under subdivision (d), (m) or (n), section six of 4 this article or under section eight-c of this article. This 5 section is not applicable to the receipt of temporary total disability benefits, the receipt of permanent partial disability benefits, the receipt of benefits by partially or wholly dependent persons or to the receipt of benefits pursuant to the provisions of subsection (e), section ten of this article. This section is not applicable to the receipt of medical benefits or the payment therefor.

12 (b) Whenever applicable benefits are paid to a 13 beneficiary with respect to the same time period for 14 which old-age insurance benefit payments under the 15 Social Security Act, 42 U.S.C. 401 and 402, or payments 16 under a self-insurance plan, a wage continuation plan 17 or a disability insurance policy provided by an employer, are also received or being received by the 18 19 beneficiary, then such applicable benefits shall be 20 reduced by these amounts:

21 (1) Fifty percent of the amount of full old-age 22 insurance benefits received or being received under the 23 Social Security Act: Provided, That if the claimant is 24 receiving reduced old-age retirement benefits, then ten 25percent of the amount of old-age social security insu-26 rance benefits, had such benefits not been reduced, shall 27 be deducted from the applicable benefits: Provided. 28 *however*. That social security disability benefits shall not 29 be deducted from the applicable benefits when such 30 disability benefits are later changed to old-age insu-31 rance benefits upon the claimant's attaining the age 32 specified for such conversion by the social security 33 administration:

(2) The after-tax amount of the payments received or
being received under a self-insurance plan, a wage
continuation plan, or under a disability insurance policy
provided by an employer if the employee did not
contribute directly to the plan or to the payment of
premiums regarding the disability insurance policy; or

40 (3) The proportional amount, based on the ratio of the
41 employer's contributions to the total insurance premi42 ums for the policy period involved, of the after-tax
43 amount of the payments received or being received by
44 the employee pursuant to a disability insurance policy

45 provided by an employer if the employee did contribute 46 directly to the payment of premiums regarding the 47 disability insurance policy: *Provided*, That in no event 48 shall applicable benefits be reduced below the minimum 49 weekly benefits as provided for in subdivisions (b) and 50 (d), section six of this article.

51 (c) The commissioner shall notify a claimant or self-52 insured employer of possible eligibility for social 53 security benefits and the requirements for establishing 54 proof of application for those benefits. Notification shall 55 be promptly mailed by the commissioner or self-insured employer to the claimant after the date on which by 56 57 reason of age the claimant may be entitled to social 58 security benefits. A self-insured employer shall file a 59 copy of any such notice of possible eligibility with the 60 commissioner within ten days of its mailing to the 61 claimant.

62 (1) Within thirty days after the receipt of the 63 notification of possible eligibility, the claimant shall:

64 (A) Make application for social security benefits;

65 (B) Provide the commissioner or a self-insured 66 employer with proof of that application; and

67 (C) Provide the commissioner or self-insured employer 68 with an authorization for release of information which 69 shall be utilized by the commissioner or self-insured 70 employer to obtain necessary benefit entitlement and 71 amount information from the social security administra-72 tion. The authorization for release of information shall 73 be effective for one year.

74 (2) Failure of the claimant to provide the proof of 75 application or authorization for release of information 76 shall allow the commissioner or self-insured employer 77 with the approval of the commissioner to discontinue the payment of applicable benefits until the proof of 78 application and the authorization for release of informa-79 80 tion is provided. Compensation benefits withheld shall 81 be reimbursed to the claimant upon the providing of the required proof of application or the authorization for 82 release of information. or both. 83

84 (d) If the commissioner or the self-insured employer 85 is required to submit a new authorization for release of 86 information to the social security administration in 87 order to receive information necessary to comply with 88 this section, the claimant shall provide the new author-89 ization for release of information within thirty days of 90 a request by the commissioner or self-insured employer. 91 Failure of the claimant to provide the new authorization 92 for release of information shall allow the commissioner or self-insured employer with the approval of the 93 94 commissioner to discontinue the payment of applicable 95 benefits until the authorization for release of informa-96 tion is provided. Compensation benefits withheld shall 97 be reimbursed to the claimant upon the providing of the 98 authorization for release of information.

99 (e) Within thirty days after either the date of first 100 payment of benefits or after the date of application for 101 any benefit under subsection (b) of this section, which-102 ever is later, the claimant shall provide the commis-103 sioner or self-insured employer with a properly executed 104 authorization for release of information which shall be 105 utilized by the commissioner or self-insured employer to 106 obtain necessary benefit entitlement and amount 107 information from the appropriate source. The authori-108 zation for release of information shall be effective for 109 one year. Failure of the claimant to provide a properly 110 executed authorization for release of information shall 111 allow the commissioner or self-insured employer with 112 the approval of the commissioner to discontinue the 113 payment of applicable benefits until the authorization 114 for release of information is provided. Compensation 115 benefits withheld shall be reimbursed to the claimant 116 upon the providing of the authorization for release of 117 information. If the commissioner or the self-insured 118 employer is required to submit a new authorization for 119 release of information to the appropriate source in order 120 to receive information necessary to comply with this 121 section, the claimant shall provide the new authorization 122 for release of information within thirty days of a request 123 by the commissioner or self-insured employer. Failure 124 of the claimant to provide the new authorization for 125 release of information shall allow the commissioner or self-insured employer with the approval of the commissioner to discontinue the payment of applicable benefits
until the authorization for release of information is
provided. Compensation benefits withheld shall be
reimbursed to the claimant upon the providing of the
authorization for release of information.

132 (f) Any benefit payments under the Social Security 133 Act, or any fund, policy or program as specified under 134 subsection (b) of this section which the claimant receives 135 after the effective date of this section and during a 136 period in which the claimant also receives unreduced 137 workers' compensation benefits shall be considered to 138 create an overpayment of benefits for that period. The 139 commissioner or self-insured employer shall calculate 140 the amount of the overpayment and send a notice of 141 overpayment and a request for reimbursement to the 142 claimant. Failure by the claimant to reimburse the 143 commissioner or self-insured employer within thirty 144 days after the mailing date of the notice of request for 145 reimbursement shall allow the commissioner or the self-146 insured employer, with the approval of the commis-147 sioner, to discontinue fifty percent of future benefits 148 payments. The benefit payments withheld shall be 149 credited against the amount of the overpayment. 150 Payment of the appropriate benefit shall resume when 151 the total amount of the overpayment has been withheld. 152 Any self-insured employer taking a credit or making a 153 reduction as provided for in this subsection shall 154 immediately report to the commissioner the amount of 155 the credit or reduction and, as requested by the 156 commissioner, furnish to the commissioner satisfactory 157 proof of the basis for a credit or reduction.

(g) Nothing in this section shall be considered to
compel a claimant to apply for early federal social
security old-age benefits or to apply for other early or
reduced benefits.

(h) This section applies to awards of permanent totaldisability made after the effective date of this section.

(i) The commissioner and the compensation programsperformance council shall promulgate the appropriate

rules for the interpretation, processing and enforcementof this section.

(j) If any portion of this section or any application of
this section is subsequently found to be unconstitutional
or in violation of applicable law, it shall not affect the
validity of the remainder of this section or such
applications of the section as are not unconstitutional or
in such violation.

§23-4-24. Permanent total disability awards; retirement age; limitations on eligibility and the introduction of evidence; effects of other types of awards; procedures; requests for awards; jurisdiction.

1 Notwithstanding any provision of this chapter to the 2 contrary, from and after the effective date of this section 3 the following provisions shall be in effect.

4 (a) Except as stated below, no claimant shall be 5 awarded permanent total disability benefits arising 6 under subdivision (d) or (n), section six or of section 7 eight-c of this article who terminates active employment 8 and is receiving full old-age retirement benefits under 9 the Social Security Act, 42 U.S.C. 401 and 402. Any such 10 claimant shall be evaluated only for the purposes of 11 receiving a permanent partial disability award pre-12 mised solely upon the claimant's impairments. This 13 subsection shall not be applicable in any claim in which 14 the claimant has completed the submission of his or her 15 evidence on the issue of permanent total disability prior 16 to the later of the following: Termination of active 17 employment or the initial receipt of full old-age 18 retirement benefits under the Social Security Act. Once 19 the claimant has terminated active employment and has 20 begun to receive full old-age social security retirement 21 benefits, the claimant shall not be permitted to produce 22 additional evidence of permanent total disability before 23 the commissioner, the office of judges, the appeal board 24 or the supreme court of appeals nor shall such a claim 25 be remanded for the production of such evidence.

26 (b) For the purposes of subdivision (d), section six of 27 this article, the award of permanent partial disability 28 benefits under the provisions of section six-b of this 29 article or under that portion of section six-a of this 30 article which awards twenty weeks of benefits to a 31 claimant who has occupational pneumoconiosis but 32 without measurable pulmonary impairment therefrom 33 shall not be counted towards the eighty-five percent 34 needed to gain the rebuttable presumption of permanent 35 total disability when such claimant has terminated 36 active employment and is receiving federal nondisability 37 pension or retirement benefits, including old-age 38 benefits under the Social Security Act. This subsection 39 shall not affect any other awards of permanent partial disability benefits and their use in achieving the 40 41 rebuttable eighty-five percent presumption.

42 (c) The office of judges shall not have jurisdiction to 43 initially hear and decide any claim pertaining in whole 44 or in part to subdivision (d) or (n), section six of this 45 article. Any claim for permanent total disability 46 benefits arising under said subdivisions shall first be 47 presented to the commissioner as part of the initial claim filing or by way of an application for modification 48 49 or adjustment pursuant to section sixteen of this article 50 and section one-a, article five of this chapter. The office 51 of judges may consider such a claim only after the 52 commissioner has entered an appropriate order.

§23-4-25. Permanent total disability benefits; reduction of disability benefits for wages earned by claimant.

1 (a) After the effective date of this section, a reduction 2 in the amount of benefits as specified in subsection (b) 3 of this section shall be made whenever benefits are being paid for a permanent total disability award 4 5 regardless of when such benefits were awarded. This 6 section is not applicable to the receipt of medical 7 benefits or the payment therefor, the receipt of perman-8 ent partial disability benefits, the receipt of benefits by 9 partially or wholly dependant persons, or to the receipt 10 of benefits pursuant to the provisions of subsection (e), 11 section ten of this article. Prior to the application of this 12 section to any claimant, the commissioner shall give the 13 claimant notice of the effect of this section upon a 14 claimant's award if and when such claimant later earns 15 wages.

16 (b) Whenever applicable benefits are paid to a 17 claimant with respect to the same time period in which 18 the claimant has earned wages as a result of his or her 19 employment, the following reduction in applicable 20 benefits shall be made. The claimant's applicable 21 monthly benefits and monthly net wages received from 22 the current employment shall be added together. If such 23 total exceeds by more than one hundred and twenty 24 percent of the amount of the claimant's monthly net 25 wages earned during his or her last employment prior 26 to the award of permanent total disability benefits, then 27 such excess shall be reduced by one dollar for each two 28 dollars that the claimant's monthly net wages exceed the 29 one hundred and twenty percent level: Provided, That 30 in no event shall applicable benefits be reduced below 31 the minimum weekly benefits as provided for in subdivisions (b) and (d), section six of this article. 32

ARTICLE 5. REVIEW.

§23-5-1. Notice by commissioner of decision; procedures on claims; objections and hearing; mediation.

1 (a) The commissioner shall have full power and 2 authority to hear and determine all questions within his 3 or her jurisdiction. In matters arising under articles 4 three and four of this chapter, the commissioner or a 5 designated deputy shall promptly review and investi-6 gate all claims. The parties to a claim shall file such 7 information in support of their respective positions as 8 they deem proper. In addition, the commissioner or a 9 designated deputy is authorized to develop such addi-10 tional information as he or she deems to be necessary 11 in the interests of fairness to the parties and in keeping 12 with the commissioner's fiduciary obligations to the 13 fund. With regard to any issue which is ready for a 14 decision, the commissioner or designated deputy shall 15 explain the basis of his or her decisions.

(b) Except with regard to interlocutory matters, upon
making any decision, upon the making or refusing to
make any award, or upon the making of any modification or change with respect to former findings or orders,
as provided by section sixteen, article four of this
chapter, the commissioner shall give notice, in writing,

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22 to the employer, employee, claimant, as the case may be, 23 of his or her action, which notice shall state the time 24 allowed for filing an objection to such finding, and such 25 action of the commissioner shall be final unless the 26 employer, employee, claimant or dependant shall, within 27 thirty days after the receipt of such notice, object in 28 writing, to such finding, and unless an objection is filed 29 within such thirty-day period, such finding or action 30 shall be forever final, such time limitation being hereby 31 declared to be a condition of the right to litigate such 32 finding or action and hence jurisdictional. Any such 33 objection shall be filed with the office of judges with a 34 copy served upon the commissioner and other parties in 35 accordance with the procedures set forth in sections one-36 g and one-h of this article.

37 (c) Where a finding or determination of the commis-38 sioner is protested only by the employer, and the 39 employer does not prevail in its protest and, in the event 40 the claimant is required to attend a hearing by subpoena 41 or agreement of counsel or at the express direction of 42 the commissioner, then such claimant in addition to 43 reasonable traveling and other expenses shall be 44 reimbursed for loss of wages incurred by the claimant 45 in attending such hearing.

46 (d) Once an objection has been filed with the office of 47 judges, the parties to the objection shall be offered an 48 opportunity for mediation of the disputed issue by the 49 commissioner. If all of the parties to the objection agree .50 to mediation, the commissioner shall designate a deputy 51 who was not involved in the original decision to act as 52 mediator: *Provided*, That on issues related solely to the 53 medical necessity of proposed medical treatment or 54 diagnostic services, the commissioner shall offer the 55 parties to the objection a selection of names of medical 56 providers in the appropriate specialty. The parties shall 57 then either agree upon a medical provider who shall act 58 as mediator or, in the absence of an agreement, the commissioner shall select a medical provider who shall 59 60 act as mediator. In cases where issues of medical necessity are intertwined with nonmedical treatment or 61 62 nondiagnostic issues, both a medical provider and a designated deputy shall act as comediators and shall 63 consider their respective issues. Neither shall be 64

65 empowered to overturn the decision of the other.

Upon entering into mediation, the parties shall inform
the office of judges of that action and the office of judges
shall stay further action on the objection.

69 The mediator shall solicit the positions of the parties 70 and shall review such additional information as the parties or the commissioner shall furnish. The mediator 71 72 shall then issue a decision in writing with the necessary 73 findings of fact and conclusions of law to support that 74 decision. If any party disagrees with the decision, that 75 party may note its objection to the office of judges, the 76 commissioner and the other parties, and the office of 77 judges shall lift the stay on the original protest. The 78 decision and any information introduced during the 79 attempted mediation shall be subject to consideration by 80 the office of judges in making its decision on the 81 objection. Upon acceptance by the parties of the result 82 of the mediation, the office of judges shall dismiss the 83 objection with prejudice.

The mediator shall conduct the mediation in an
informal manner and without regard to the formal rules
of evidence and procedure. Once the parties agree to
mediation, then the agreement cannot be withdrawn.

88 (e) The panel of medical providers who shall serve as 89 mediators shall be selected and approved by the 90 compensation programs performance council. A medical 91 provider serving as a mediator shall have the same 92 protections from liability as does the commissioner with regard to his or her decisions including coverage by the 93 94 board of risk management which shall be provided by the workers' compensation division. 95

§23-5-1b. Refusal to reopen claim; notice; objection.

If, however, in any case in which application for 1 2 further adjustment of a claim is filed under the next 3 preceding section, it shall appear to the commissioner 4 that such application fails to disclose a progression or 5 aggravation in the claimant's condition, or some other 6 fact or facts which were not theretofore considered by 7 the commissioner in his or her former findings, and 8 which would entitle such claimant to greater benefits 9 than the claimant has already received, the commissioner shall, within a reasonable time, notify the 10

claimant and the employer that such application fails to 11 12 establish a prima facie cause for reopening the claim. 13 Such notice shall be in writing stating the reasons for 14 denial and the time allowed for objection to such 15 decision of the commissioner. The claimant may, within 16 thirty days after receipt of such notice, object in writing 17 to such finding and unless the objection is filed within 18 such thirty-day period, no such objection shall be 19 allowed, such time limitation being hereby declared to 20 be a condition of the right to such objection and hence 21 jurisdictional. Upon receipt of an objection, the commis-22 sioner or office of judges shall afford the claimant an 23 evidentiary hearing as provided in section one or one-24 h of this article.

§23-5-1h. Hearings on objections to commissioner's decisions by office of administrative law judges.

1 On or after the first day of July, one thousand nine 2 hundred ninety-one, objections to a commissioner's 3 decision made pursuant to the provisions of section one 4 of this article shall be filed with the office of judges. 5 Upon receipt of an objection, the office of judges shall, 6 within fifteen days from receipt thereof, set a time and 7 place for the hearing of evidence and shall notify the 8 commissioner of the filing of the objection. Hearings 9 may be conducted at the county seat of the county 10 wherein the injury occurred, or at any other place which 11 may be agreed upon by the interested parties, and in 12 the event the interested parties cannot agree, and it 13 appears in the opinion of the chief administrative law 14 judge or the chief administrative law judge's authorized 15 representative that the ends of justice require the taking 16 of evidence elsewhere, then at such place as the chief 17 administrative law judge or such authorized represen-18 tative may direct, having due regard for the convenience 19 of witnesses. The employer, the claimant and the 20 commissioner shall be notified of such hearing at least 21 ten days in advance, and the hearing shall be held 22 within thirty days after the filing of the objection unless 23 such hearing be postponed by agreement of the parties 24 or by the chief administrative law judge or such 25 authorized representative for good cause. The commis-26 sioner shall be a party to any proceeding under this

article which involves a claim chargeable against the
workers' compensation fund, the disabled workers' relief
fund or such other fund as may then be under the
commissioner's management and control.

31 The office of judges shall keep full and complete 32 records of all proceedings concerning a disputed claim. 33 All testimony upon a disputed claim shall be recorded 34 but need not be transcribed unless the claim is appealed 35 or in such other circumstances as, in the opinion of the 36 chief administrative law judge, may require such 37 transcription. Upon receipt of notice of the filing of an 38 objection, the commissioner shall forthwith forward to 39 the chief administrative law judge all records, or copies 40 of such records, in the commissioner's office which 41 relate to the matter objected to. All such records or 42 copies thereof and any evidence taken at hearings 43 conducted by the office of judges shall constitute the 44 record upon which the matter shall be decided. The 45 office of judges shall not be bound by the usual common 46 law or statutory rules of evidence. At any time within 47 thirty days after hearing, if the chief administrative law 48 judge or the chief administrative law judge's authorized 49. representative is of the opinion that the facts have not 50 been adequately developed at such hearing, he or she 51 may order supplemental hearings or obtain such 52 additional evidence as he or she deems warranted upon 53 due notice to the parties.

54 All hearings shall be conducted as determined by the 55 chief administrative law judge pursuant to the rules of 56 practice and procedure promulgated pursuant to section 57 one-g of this article. Upon consideration of the entire 58 record, the chief administrative law judge or an 59 administrative law judge within the office of judges 60 shall, within thirty days after final hearing, render a 61 decision affirming, reversing or modifying the commis-62 sioner's action. Said decision shall contain findings of 63 fact and conclusions of law and shall be mailed to all 64 interested parties.

§23-5-6. Article applies to claims arising under §23-2-9.

1 The provisions of this article shall also apply to all 2 claims arising under section nine, article two of this 3 chapter.

80 Enr. H. B. 2802]

The Joint Committee on Enrolled Bills hereby certifies that the foregoing billis correctly enrolled.

Chairman Senate Comm Mee Ernest C.S Chairman House Committee

Originating in the House.

Takes effect from passage. the S enate Donaldy J. Kon egates of the Senate P_{i} Speaker of the House of Delegates 6 th .. this the The within 1993. day of . Governor C GCU C CHI

PRESENTED TO THE GOVERNOR Date 1:0 Š Time