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A bill to be entitled An act relating to workers' compensation; creating the "Florida No-fault Workers' Compensation and Employer Liability Act"; providing a short title; providing legislative intent; authorizing the election of provisions of the act in lieu of the application of chapter 440, F.S.; providing for notice of election; providing for revocation of election; providing for notice to employees; specifying application of certain definitions; specifying benefits payable to employees; providing criteria; providing for certain periodic medical evaluations; specifying accidental death and dismemberment insurance coverage; requiring continuation of coverage for employees under certain circumstances; specifying employer duties to employees; providing for tort exemptions; providing for employer's defenses; providing for coworker immunity; providing for notice of claims; limiting certain defenses by employers under certain circumstances; specifying procedures for filing and responding to claims; limiting expert witness testimony under certain circumstances; providing for determination of comparative negligence under certain circumstances; authorizing the Department of Labor and Employment Security to adopt rules requiring proof of insurance or financial responsibility; providing for implementation

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and administration with reference to certain provisions of the Workers' Compensation Law relating to waiver of exemption, notice of exemption or acceptance, and waiver of exemption or acceptance, coverage, specified activities within the course of employment, drug-free workplaces, coercion of employees, benefits as lien against assets, misrepresentation, fraudulent activities, security for benefits, compensation for injuries when third parties are liable, benefits notice, effect of unconstitutionality, proceedings against the state, pooling liabilities, self-insured public utilities, local government pools, administrative procedures, rulemaking, and coverage; authorizing the department to adopt rules; providing penalties; providing an effective date. Be It Enacted by the Legislature of the State of Florida: Section 1. Short title.--This act may be cited as the "Florida No-fault Workers' Compensation and Employer Liability Section 2. Legislative intent. -- It is the intent of the Legislature that this act be an optional alternative to

the provisions of chapter 440, Florida Statutes, the Workers'

Compensation Law. The Legislature further intends that this act form the basis for 24-hour health care, loss-of-income

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for all workers of this state; that employers and employees share in the cost of such a system; and that employers and 2 3 employees share in the responsibility for safety in the workplace. This act is based upon the mutual renunciation of 4 5 common law rights and defenses with respect to certain claims 6 and upon the mutual acceptance of limitations on rights, 7 claims, and defenses in exchange for the benefits and 8 protection of this act. It is also the intent of the Legislature to set forth the exclusive duties of employers to 9 10 their employees and to set forth and limit the defenses that 11 employers may raise in response to claims brought against them by their employees. 12 Application. -- Notwithstanding sections 13 Section 3. 440.03 and 440.38, Florida Statutes, or any other provision of 14 the law, any employer may elect to be bound by this act as an 15 alternative to and instead of chapter 440, Florida Statutes. 16 17 All employees of any employer who elects to be bound by this act are bound and governed by this act. 18 19 Section 4. Notice of election. -- Every employer who elects to be bound by this act shall file a notice with the 20 21 Department of Insurance and provide proof of financial 22 responsibility pursuant to this act. After receiving such notice, the Department of Insurance shall send to the employer 23 24 a confirmation of the date of receipt. Commencing on the 60th day after the Department of Insurance receives the notice, the 25

Section 5. Revocation of election.--Coverage under this act continues until the employer revokes the election or ceases doing business. However, the benefits under this act

employer and employees of the employer are governed by this

act unless the employer has not provided proof of financial

responsibility to the Department of Insurance.

must continue for all employees for at least 180 days after the employer revokes the election or ceases doing business.

Section 6. Notice to employees.--Each employer who elects to be bound by this act shall provide notice to each employee pursuant to rule adopted by the Department of Labor and Employment Security. However, failure to provide such notice does not affect the liabilities, responsibilities, or defenses of the employer or claims of employees.

Section 7. Definitions.--

- (1) As used in this act, the term "department" means the Department of Labor and Employment Security.
- (2) The definitions contained in section 440.02, Florida Statutes, apply to this act.

Section 8. Benefits payable to employees. --

- (1) Under this act, employers shall provide to their employees and shall pay for medical insurance benefits that are equal to or greater than those provided under the standard health benefit plan developed by the Department of Insurance under section 627.6699, Florida Statutes. The benefits must be payable for injury or illness, occurring on or off the job, and regardless of fault. There shall be no deductibles for employees, but employers may use and fund deductibles to reduce insurance costs.
- (a) Employers may charge an employee up to the lesser of 25 percent of the premium cost or 6 percent of the employee's wages and collect the employees' share through payroll deductions.
- (b) Employers and providers may elect to use managed care systems, such as health maintenance organizations or preferred provider organizations, to provide benefits under this act.

- (2)(a) Under this act, employers shall provide and pay for disability insurance benefits for their employees to cover employee wage loss, due to injury or illness, occurring on or off the job, and regardless of fault. The minimum disability benefits that must be paid under this act are equal to two-thirds of an employee's wage loss for up to 24 consecutive months which wage loss is due to a particular injury or illness that results in 10 or more days of lost work.
- (b) If an employee is not able to perform the normal duties of his or her regular job but is able to perform other work available and offered by his or her employee, the employee must accept and perform the offered employment. The wages paid must be credited toward the employer's obligation under this section.
- (c) Employers may charge an employee up to the lesser of 25 percent of the premium cost or 2 percent of the employee's wages and collect the employee's share through payroll deductions.
- employee may request an additional independent evaluation of his or her own, to be paid for by the employer, if there is a reduction in or denial of benefits.
- (4) Under this act, employers shall provide and pay for accidental death and dismemberment insurance coverage for each employee in an amount that is not less than twice the employee's annual wages, with a minimum of \$25,000 and a maximum of \$200,000.
- (5) Employers must continue an employee's insurance coverage under this act for a period of 90 days after

31 bodily function.

termination of employment and must allow employees to extend and pay for coverage for an additional 18 months thereafter. 2 3 Section 9. Except as provided in an employment contract or an applicable collective bargaining agreement, an 4 5 employer need not provide or pay for any benefits or 6 compensation in excess of the amounts set forth in this act 7 unless the employee proves that the employer breached a duty 8 and the breach caused loss, damage, injury, illness, or death 9 to the employee. 10 Section 10. Employer's exclusive duties to 11 employees.--Every employer has a duty to provide: (1) A safe workplace. 12 (2) Sufficient coworkers to do the work. 13 14 (3) Safe and sufficient tools and equipment, unless such tools and equipment are to be provided by the employee 15 under the terms of employment. 16 17 (4) Adequate safety instruction and warnings of 18 dangers in the workplace. 19 (5) Selection, training, and supervision of competent 20 coworkers. 21 Section 11. Tort exemption; limitation on right to 22 damages; punitive damages .--23 (1) In any action in tort which is brought against the 24 employer, or against any person or organization legally responsible for the employer's acts or omissions, an employee 25 may recover damages in tort for pain, suffering, mental 26 27 anguish, and inconvenience because of bodily injury, sickness, or disease arising out of the employment only if the injury or 28 29 disease consists in whole or in part of:

(a) Significant and permanent loss of an important

1 (b) Permanent injury within a reasonable degree of medical probability, other than scarring or disfigurement. 2 3 (c) Significant and permanent scarring or 4 disfigurement. 5 (d) Death. 6 When, in a proceeding brought pursuant to this 7 act, an employer questions whether the employee has met the 8 requirements of subsection (1), the employer may file an appropriate motion with the court, and the court shall, on a 9 one-time basis only, 30 days before the date set for the trial 10 11 or the pretrial hearing, whichever is first, by examining the pleadings and the evidence before it, ascertain whether the 12 employee will be able to submit some evidence that the 13 employee will meet the requirements of subsection (1). If the 14 court finds that the employee will not be able to submit such 15 evidence, the court must dismiss the employee's claim without 16 17 prejudice. Employer's defenses.--In response to any 18 Section 12. 19 claim filed by an employee against an employer for compensation in excess of the benefits provided under this 20 act, an employer may not raise the defenses of assumption of 21 risk, contributory negligence, or injury caused by a fellow 22 servant. However, employers may raise one or more of the 23 24 following defenses: 25 (1) Comparative negligence; Intentional act of the employee to inflict 26 (2) 27 self-injury; (3) Intentional act of a coworker to injure the 28 29 employee, unless there is an independent act of negligence on 30 the part of the employer; or

1 (4) Substance abuse or intoxication on the part of the employee, which contributes to the loss, injury, or illness. 2 3 Section 13. Coworker immunity. -- Except in the case of intentional acts to injure, coworkers are immune from suits 4 5 for injuries caused to fellow employees, and the liability of 6 an employer may not be reduced by a coworker's percentage of 7 fault. 8 Section 14. Notice of claims asserting fault. -- Not more than 180 days after a death, injury, or illness that 9 10 arises out of and in the course of employment and that is the 11 fault of the employer, an employee or his or her personal representative must file a notice of claim asserting such 12 fault. The employer shall deliver a copy of the claim to the 13 Department of Labor and Employment Security and to the 14 employer's insurance provider or self-insurance administrator. 15 The notice of claim need not be in any particular form, and 16 17 the only required information is the employee's name, address, phone number, and Social Security number; the employer's name, 18 19 address, phone number, and employer identification number, if available; and the approximate date and a brief description of 20 the incident or basis of the claim. Failure to file a notice 21 of claim asserting fault in accordance with this section bars 22 the claim. Notwithstanding any provision of this section, an 23 employer may require employees to report any accident, injury, 24 25 or illness that occurs during the course and scope of employment within 24 hours after the occurrence of such an 26 27 accident, injury, or illness. However, a failure to comply with this reporting requirement is not a bar to benefits or 28 29 compensation but may be raised as a defense applicable to 30 causation or negligent failure to seek proper treatment.

Section 15. Response to claims.--Within 60 days after receiving notice of a claim, the employer must provide a response to the employee and must file with the Department of Labor and Employment Security its response, admitting or denying fault and setting forth any defenses to be relied upon by the employer.

- (1) If an employer admits fault and raises no defenses other than comparative negligence, substance abuse, or intoxication, the employer is responsible on the claim for 100 percent of the employee's reasonable medical and rehabilitative expenses, 85 percent of the employee's past wage loss and loss of capacity to earn in the future, and no more than \$250,000 in noneconomic damages. However, an employee's recovery must be reduced by the employee's percentage of comparative negligence or causation attributable to substance abuse or intoxication.
- (a) Within 60 days after receiving an employer's response, the matter must be referred to mandatory, binding arbitration on the issues of comparative negligence or causation due to substance abuse or intoxication.
- (b) After the determination of comparative negligence or causation due to substance abuse or intoxication, the employee may demand mediation or arbitration or file suit within 2 years, but the court shall order mediation or nonbinding arbitration upon the request of either party.
- (c) An employee is entitled to reasonable attorney's fees and costs incurred after receiving an employer's response.
- 29 (2) If an employer denies liability or raises defenses
 30 other than comparative negligence or substance abuse or
 31 intoxication, or fails to file a timely response to the notice

of claim, the employee may file suit to recover damages within 4 years thereafter. An employee who is the prevailing party shall recover 100 percent of his or her attorney's fees and costs incurred subsequent to the date of injury or loss.

- (3) An employee may recover damages for only that portion of stress, psychiatric injuries, or mental injuries which is the fault of the employer and which arises out of and is attributable to the course and scope of employment.
- (4) Health, disability, wage continuation, or accidental death and dismemberment benefits paid by or on behalf of the employer and pertaining to injury or illness that is the subject matter of an employee claim must be an offset to and must be deducted from the claim before any percentage fault on the part of the employee is calculated.
- arbitration under this act. Arbitration may be conducted by any person mutually agreed upon by the parties. If the parties cannot agree, the court may select a qualified arbitrator from nominees submitted by the parties or may refer the matter to any recognized arbitration service or association.

Section 16. Expert witnesses.--An expert witness may not testify in any proceeding regarding a claim under this act unless a written report is furnished to the opposing party at least 30 days before the testimony of the expert witness is offered.

(1) The report must include the qualifications, background, and experience of the expert; the specific facts relied upon by the expert in forming his or her opinions; the sources of the expert's information or facts, and the authorities used by the expert, whether or not relied upon in

forming the opinions; and the specific opinions to be offered by the expert in the proceedings.

(2) The fact that an expert testifies to opinions that vary from those given in the written report does not bar the expert's testimony, unless the court finds that there was an intentional attempt to deceive or that the variance is so great that it undermines the fairness of the proceedings.

Section 17. <u>Comparative negligence.--In any proceeding</u> to determine comparative negligence or fault attributable to the employee for substance abuse or intoxication, the trier of fact is bound by the following standards:

- (1) If the employee is partly at fault and such fault was a contributing cause to the loss, injury, or illness, but the employee's fault was not equal to or greater than that of the employer, the percentage of fault which must be attributed to the employee is 25 percent.
- (2) If the employee is partly at fault and such fault was a contributing cause to the loss, injury, or illness, and the employee's fault was equal to but not greater than that of the employer, the percentage of fault which must be attributed to the employee is 50 percent.
- (3) If the employee is partly at fault and such fault was a contributing cause to the loss, injury, or illness, and the employee's fault was greater than that of the employer, the percentage of fault which must be attributed to the employee is 75 percent.

Section 18. Proof of insurance or financial
responsibility.--The Department of Labor and Employment
Security may adopt rules requiring an employer to provide
adequate insurance, an approved self-insurance plan, or proof
of financial responsibility to meet the employer's obligations

under this act. Failure to comply with such rules or to provide benefit coverage required by this act subjects the employer to strict liability in tort for any injuries or illnesses incurred by employees during any such period of noncompliance and within the course of their employment, in addition to any other penalties provided by law.

Section 19. Waiver of exemption. --

- (1) Each employer who has in her or his employment any employee who is not included in the definition of the term employee" or who is excluded or exempted from the operation of this act may at any time waive such exclusion or exemption and accept this act by giving notice thereof as provided in section 10, and by so doing is as fully protected and covered by this act as if such an exclusion or exemption were not contained in this act.
- specifically secures the benefits of this act to any person who is not included in the definition of the term "employee" or whose services are not included in the definition of the term "employment" or who is otherwise excluded or exempted from the operation of this act, the acceptance of the policy or contract of insurance by the insured and the writing of same by the carrier constitutes a waiver of the exclusion or exemption and an acceptance of this act with respect to such person, notwithstanding any other provision of this act.

Section 20. <u>Notice of exemption or acceptance and</u> waiver of exemption or acceptance.--

(1) Every sole proprietor or partner who elects to be included in the definition of the term "employee" or who, after such election, revokes that election, shall mail to the Department of Labor and Employment Security in Tallahassee

notice to that effect, in accordance with a form to be prescribed by the department.

- (2) Notice given under subsection (1) is ineffective until 30 days after the date it is mailed to the department in Tallahassee. However, if an accident or occupational disease occurs less than 30 days after the effective date of the insurance policy under which the payment of benefits is secured or the date the employer qualified as a self-insurer, that notice is effective as of 12:01 a.m. of the day following the date it is mailed to the department in Tallahassee.
- (3) The department may assess a fee of no more than \$50, which must accompany each request for election or renewal of election under this section. The proceeds of this fee which are collected by the department must be used to administer this section and to audit the businesses that pay the fee for compliance with this act.

Section 21. <u>Coverage; other states or other</u> benefits.--

- is employed outside this state, and the injury or illness would entitle the employee or the employee's dependents to benefits if it had happened in this state, the employee or his or her dependents are entitled to benefits if the contract of employment was made in this state or the employment was principally localized in this state. However, this subsection does not authorize an employee who receives compensation or damages under the laws of any other state to receive compensation for the same injury in an amount greater than is provided under this act.
- (2) Benefits are not payable under this act in respect to the disability or death of any employee covered by the

Federal Employer's Liability Act, the Longshoremen's and Harbor Worker's Compensation Act, or the Jones Act.

Section 22. Construction design professionals.--Except as provided in this act, neither a construction design professional who is retained to perform professional services on a construction project, nor any employee of a construction design professional in the performance of professional services on the site of the construction project, is liable for any injuries resulting from the employer's failure to comply with safety standards on the construction project, unless responsibility for safety practices is specifically assumed by contract. The immunity provided by this subsection to any construction design professional is inapplicable to the negligent preparation of design plans or specifications.

Section 23. Employee intoxication or drug use.--

- (1) To ensure that the workplace is a drug and alcohol free environment and to deter the use of drugs and alcohol at the workplace, if the employer has reason to suspect that an injury to an employee was occasioned primarily by the employee's intoxication or use of any drug, which affected the employee to the extent that the employee's normal faculties were impaired, the employer may require the employee to submit to a test for the presence of any or all drugs or alcohol in her or his system.
- (2) If the injured worker refuses to submit to a test for nonprescription controlled substances or alcohol, it is presumed in the absence of clear and convincing evidence to the contrary that the injury was occasioned primarily by the influence of a nonprescription controlled substance or alcohol.

1 (3) The Department of Labor and Employment Security shall provide by rule for the authorization and regulation of 2 3 drug testing policies, procedures, and methods. Testing of injured employees may not commence until such rules are 4 5 adopted. 6 Section 24. Drug-free workplaces. -- Any employer who 7 elects to be bound by this act may also elect to operate under 8 chapter 440, Florida Statutes, pertaining to drug-free 9 workplaces. 10 Section 25. Coercion of employees. -- An employer may 11 not discharge, threaten to discharge, intimidate, or coerce any employee by reason of the employee's valid claim for 12 benefits under this act. 13 Section 26. Benefits; lien against assets. -- Benefits 14 have the same preference of lien against the assets of the 15 carrier or employer without limit of an amount as is now or 16 may hereafter be allowed by law to the claimant for unpaid 17 18 wages or otherwise. 19 Section 27. Misrepresentation; fraudulent activities; 20 penalties .--21 (1) Any person who willfully makes any false or 22 misleading statement or representation for the purpose of 23 obtaining or denying any benefit or payment under this act: 24 Who presents or causes to be presented any written 25 or oral statement as part of, or in support of, a claim for 26 payment or other benefit pursuant to this act, knowing that 27 the statement contains any false or misleading information concerning any fact or thing material to such claim; or 28 29 (b) Who prepares or makes any written or oral 30 statement that is intended to be presented to any employer,

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or in support of, any claim for payment or other benefit
    pursuant to this act, knowing that the statement contains any
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    false or misleading information concerning any fact or thing
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    material to such claim,
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    commits a felony of the third degree, punishable as provided
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    in section 775.082, Florida Statutes, section 775.083, Florida
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    Statutes, or section 775.084, Florida Statutes.
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          (2)(a) All claim forms provided for in this act must
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    contain a notice that clearly states in substance the
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    following: "Any person who, knowingly and with intent to
    injure, defraud, or deceive any employer or employee,
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    insurance company, or self-insured program, files a statement
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    of claim containing any false or misleading information,
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    commits a felony of the third degree."
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          (b)1. Any physician licensed under chapter 458,
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    Florida Statutes, osteopath licensed under chapter 459,
    Florida Statutes, chiropractor licensed under chapter 460,
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    Florida Statutes, or any other practitioner licensed under the
    laws of this state who knowingly and willfully assists,
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    conspires with, or urges any person to fraudulently violate
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    any provision of this act, or any person who, due to such
    assistance, conspiracy, or urging by such a physician,
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    osteopath, chiropractor, or practitioner, knowingly and
    willfully benefits from the proceeds derived from the use of
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    such fraud, commits a felony of the third degree, punishable
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    as provided in section 775.082, Florida Statutes, section
    775.083, Florida Statutes, or section 775.084, Florida
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    Statutes. If a physician, osteopath, chiropractor, or other
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    practitioner is adjudicated guilty of a violation of this
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    subparagraph, the Board of Medicine as set forth in chapter
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458, Florida Statutes, the Board of Osteopathic Medicine as

set forth in chapter 459, Florida Statutes, the Board of

Chiropractic as set forth in chapter 460, Florida Statutes, or

other appropriate licensing authority, whichever is

appropriate, shall hold an administrative hearing to consider

the imposition of administrative sanctions as provided by law

against the physician, osteopath, chiropractor, or other

practitioner.
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- 2. Any attorney who knowingly and willfully assists, conspires with, or urges any claimant to fraudulently violate any provision of this act, or any person who, due to such assistance, conspiracy, or urging on such an attorney's part, knowingly and willfully benefits from the proceeds derived from the use of such fraud, commits a felony of the third degree, punishable as provided in section 775.082, Florida Statutes, section 775.083, Florida Statutes, or section 775.084, Florida Statutes.
- 3. Neither a person or governmental unit licensed under chapter 395, Florida Statutes, to maintain or operate a hospital, nor an administrator or employee of any such hospital, shall knowingly and willfully allow the use of the facilities of such a hospital by any person in a scheme or conspiracy to fraudulently violate any provision of this act.

 Any hospital administrator or employee who violates this subparagraph commits a felony of the third degree, punishable as provided in section 775.082, Florida Statutes, section 775.083, Florida Statutes, or section 775.084, Florida Statutes. Any adjudication of guilt for a violation of this subparagraph, or the use of business practices demonstrating a pattern indicating that the spirit of the law set forth in this act is not being followed, constitutes grounds for

suspension or revocation of the license to operate the hospital or the imposition of an administrative penalty of up to \$5,000 by the licensing agency as set forth in chapter 395, Florida Statutes.

- (c) Any person damaged as a result of a violation of any provision of this subsection, when there has been a criminal adjudication of guilt, has a cause of action to recover treble compensatory damages, plus all reasonable investigation and litigation expenses, including attorney's fees at the trial and appellate courts.
- (d) As used in this subsection, the term "statement" includes, but is not limited to, any notice, statement, proof of injury, bill for services, diagnosis, prescription, hospital or doctor records, X-ray, test result, or other evidence of loss, injury, or expense.
- (e) This subsection also applies with respect to any employer, insurer, self-insurer, adjusting firm, or agent or representative thereof who intentionally injures, defrauds, or deceives any claimant with regard to any claim. Such a claimant has the right to recover damages as provided in this subsection.

Section 28. <u>Security for benefits; insurance carriers</u> and self-insurers.--

- (1) Every employer must secure the payment of benefits under this act:
- (a) By insuring and keeping insured the payment of such benefits with any stock company or mutual company, or association or exchange, that is authorized to do business in the state;
- 30 (b) By furnishing to the Department of Labor and
 31 Employment Security satisfactory proof of the employer's

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financial ability to pay such benefits and receiving an authorization from the department to pay such benefits 2 3 directly in accordance with the following provisions: 1. The department may, as a condition to the 4 5 authorization, require the employer to deposit in a depository 6 designated by the department either an indemnity bond or 7 securities, at the option of the employer, of a kind and in an 8 amount determined by the department and subject to the 9 conditions as the department prescribes, which must include 10 authorization to the department in the case of default to sell 11 any such securities as necessary to obtain amounts sufficient to pay awards of benefits or to bring suit upon such bonds, to 12 procure prompt payment of benefits under this act. 13 Furthermore, the department shall require, as a condition to 14 authorization to self-insure, proof that the employer has 15 provided for competent personnel with whom to deliver benefits 16 17 and to provide a safe working environment. In addition, the department shall require the employer to carry reinsurance at 18 19 levels that will ensure the actuarial soundness of the employer in accordance with rules adopted by the department. 20 21 The department may by rule require that, if an individual self-insurer becomes insolvent, such indemnity bonds, 22 securities, and reinsurance policies are payable to the 23 24 appropriate guaranty fund. Any employer who secures benefits 25 in accordance with this paragraph shall be known as a self-insurer and shall be classed as a carrier of his or her 26 27 own insurance. 28 If the employer fails to conform to the 29 requirements set forth in subparagraph 1., the department

shall revoke the employer's authority to self-insure, unless

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of an independent actuary who is a member of the American Society of Actuaries as to the actuarial present value of the employer's determined and estimated future benefit payments based on cash reserves, using a 4-percent discount rate, and a qualifying security deposit equal to 1.5 times the value so certified. The employer shall thereafter annually provide such a certified opinion until such time as the employer meets the requirements of subparagraph 1. The qualifying security deposit must be adjusted at the time of each such annual report. Upon the failure of the employer to timely provide such opinion or to timely provide a security deposit in an amount equal to 1.5 times the value certified in the latest opinion, the department shall then revoke the employer's authorization to self-insure, and such a failure must be deemed to constitute an immediate serious danger to the public health, safety, or welfare sufficient to justify the summary suspension of the employer's authorization to self-insure pursuant to section 120.68, Florida Statutes.

3. Upon the suspension or revocation of the employer's authorization to self-insure, the employer shall provide to the department the certified opinion of an independent actuary who is a member of the American Society of Actuaries of the actuarial present value of the determined and estimated future benefit payments of the employer for claims incurred while the member exercised the privilege of self-insurance, using a discount rate of 4 percent. The employer shall provide such an opinion at 6-month intervals thereafter until such time as the latest opinion shows no remaining value of claims. With each such opinion, the employer shall deposit with the department a qualifying security deposit in an amount equal to the value certified by the actuary. The department has a

 cause of action against an employer, and against any successor of the employer, who fails to timely provide such opinion or who fails to timely maintain the required security deposit with the department. The department shall recover a judgment in the amount of the actuarial present value of the determined and estimated future compensation payments of the employer for claims incurred while the employer exercised the privilege of self-insurance, together with attorney's fees. As used in this section, the term "successor of an employer" means any person, business entity, or group of persons or business entities which holds or acquires legal or beneficial title to the majority of the assets or the majority of the shares of the employer.

- 4. A qualifying security deposit must consist, at the option of the employer, of:
- a. Surety bonds, in a form and containing such terms as prescribed by the department, issued by a corporation surety authorized to transact surety business by the department, and having policyholders' and financial ratings, as reported in A.M. Best's Insurance Reports,

 Property-Liability, of not less than "A" and "V," respectively.
- b. Certificates of deposit with financial institutions, the deposits of which are insured through the Federal Deposit Insurance Corporation or the Federal Savings and Loan Insurance Corporation.
- <u>c. Irrevocable letters of credit in favor of the department issued by financial institutions described in sub-subparagraph b.</u>
- d. Direct obligations of the United States Treasury
 backed by the full faith and credit of the United States.

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e. Securities issued by this state and backed by the full faith and credit of this state.

3 5. The qualifying security deposit shall be held by the department, or by a depository authorized by the 4 department, exclusively for the benefit claimants under this 5 6 The security is not subject to assignment, execution, attachment, or any legal process whatsoever, except as 7 8 necessary to guarantee the payment of benefits under this act. A surety bond may not be terminated, nor may any other 9 10 qualifying security be allowed to lapse, without 90 days' 11 prior notice to the department and deposit by the self-insuring employer of other qualifying security of equal 12 value within 10 business days after such notice. Failure to 13 provide such notice or failure to timely provide qualifying 14 replacement security after such notice constitutes grounds for 15 the department to call or sue upon the surety bond, or to act 16 17 with respect to other pledged security in any manner necessary to preserve its value for the purposes intended by this 18 section, including the exercise of rights under a letter of 19 credit, the sale of any security at then-prevailing market 20 rates, or the withdrawal of any funds represented by any 21 22 certificate of deposit forming part of the qualifying security 23 deposit;

- (c) By entering into a contract with a public utility under an approved utility-provided self-insurance program, as set forth in section 35. The department shall adopt rules to implement this paragraph;
- (d) By entering into an interlocal agreement with other local governmental entities to create a local government pool pursuant to section 36;

- (e) By entering into a contract with an individual self-insurer under an approved individual self-insurer-provided self-insurance program as set forth in section 35. The department may adopt rules to implement this subsection.
- (2)(a) The department shall adopt rules by which businesses may become qualified to provide underwriting claims-adjusting, loss control, and safety engineering services to self-insurers.
- (b) The department shall adopt rules requiring self-insurers to file any reports necessary to fulfill the requirements of this act. Any self-insurer who fails to file any report as prescribed by the rules adopted by the department is subject to a civil penalty in an amount not to exceed \$1,000 for each such failure.
- (3) The state and its boards, bureaus, departments, and agencies and all of its political subdivisions that employ labor are considered to be insurers under the terms of this act, unless they elect to procure and maintain insurance to secure the benefits of this act to their employees; and they are hereby authorized to pay the premiums for such insurance.

Section 29. <u>Compensation for injuries when third</u> persons are liable.--

(1) If an employee who is subject to this act is injured or killed in the course of his employment by the negligence or wrongful act of a third-party tortfeasor, the injured employee or, if the employee dies, his or her dependents may accept benefits under this act, and the injured employee or the deceased employee's dependents or personal representatives may pursue a remedy by action at law or otherwise against the third-party tortfeasor. However, any

benefits paid must be deducted from any claim for damages before the liability of the tortfeasor is determined. 2 3 (2) There is no right of subrogation for benefits paid 4 under this act. 5 Section 30. Benefits notice. -- Every employer who has 6 secured benefits under this act shall keep posted in a 7 conspicuous place or places, in and about her or his place or 8 places of business, typewritten or printed notices, in 9 accordance with a form prescribed by the Department of Labor 10 and Employment Security, stating that the employer has secured 11 the payment of benefits in accordance with this act. Such notices must contain the name and address of the carrier, if 12 any, with whom the employer has secured payment of benefits 13 and the date of the expiration of the policy. 14 Section 31. Effect of unconstitutionality. -- If any 15 part of this act is adjudged unconstitutional by the courts, 16 17 and such adjudication has the effect of invalidating any payment of benefits under this act, the period between the 18 19 time the injury was sustained and the time of such adjudication must not be computed as a part of the time 20 21 prescribed by law for the commencement of any action against the employer in respect of such injury; but the amount of any 22 benefits paid under this act on account of the injury must be 23 24 deducted from the amount of damages awarded in an action in 25 respect of the injury. Section 32. Proceedings against state. -- Any person 26 27 entitled to benefits by reason of the injury or death of an employee of the state, its boards, bureaus, departments, 28 29 agencies, or subdivisions employing labor may maintain 30 proceedings and actions at law against the state, its boards,

bureaus, departments, agencies, and subdivisions for the

benefits, which proceedings and action at law must be in the same manner as provided in this act with respect to other employers.

Section 33. Pooling liabilities .--

- (1) The Department of Labor and Employment Security shall adopt rules permitting two or more employers to enter into agreements to pool their liabilities under this act for the purpose of qualifying as a group self-insurer's fund, which shall be classified as a self-insurer, and each employer member of such approved group shall be known as a group self-insurer's fund member and shall be classified as a self-insurer, as defined in this act.
 - (2) The department shall adopt rules:
- (a) Requiring monetary reserves to be maintained by such self-insurers to insure their financial solvency; and
- (b) Governing their organization and operation to assure compliance with such requirements.
- (3) The department shall adopt rules implementing the reserve requirements in accordance with accepted actuarial techniques.
- (4) Any self-insurer established under this section, except a self-insurer that is a state or local governmental entity, is required to carry reinsurance in accordance with rules adopted by the department.
- (5) A dividend or premium refund of any self-insurer established under this section, otherwise earned, must not be made contingent upon continued membership in the fund, renewal of any policy, or the payment of renewal premiums for membership in the fund or on any policy issued by such self-insurer. Before making any dividend or premium refund, the group self-insurer must submit to the department:

1 An audited certified financial statement. An annual report of financial condition. 2 (b) 3 (c) A loss reserve review by a qualified actuary. 4 5 The required information listed in paragraphs (a)-(c) must be 6 submitted annually, no later than 7 months after the end of 7 the group self-insurer's fund year. A request for such a 8 dividend or premium refund may not be made before the required information has been filed. The request for such a dividend 9 10 or premium refund must include a resolution of the board of 11 trustees of the group self-insurer requesting approval of a specific amount to be distributed. Any dividend, premium 12 refund, or premium discount or credit must not discriminate on 13 the basis of continued coverage or continued membership in the 14 group self-insurer. The department shall review such a 15 request and shall issue a decision within 60 days after the 16 17 filing. Failure to issue a decision within 60 days constitutes approval of the request. Any dividend or premium 18 19 refund approved by the department for distribution which 20 cannot be paid to the applicable member or policyholder or former member or policyholder of the group self-insurer 21 because the former member or policyholder cannot be reasonably 22 located becomes the property of the group self-insurer. 23 24 The department may impose a civil penalty, not to 25 exceed \$1,000 per occurrence, for any violation of this act or 26 rules adopted under this act. 27 (7) Premiums, contributions, and assessments received 28 by a group self-insurer's fund are subject to sections 29 624.509(1) and (2) and 624.5092, Florida Statutes, except that 30 the tax rate is 1.6 percent of the gross amount of such premiums, contributions, and assessments. 31

(8) This section does not apply to any program, intergovernmental agreement, cooperative effort, consortium, or agency through which two or more governmental entities, without pooling their liabilities, administer the payment of workers' compensation to their respective employees.

Section 34. Self-insured public utilities.--A self-insured public utility, as authorized by paragraph (1)(b) of section 29, may assume by contract the liabilities under this act of contractors and subcontractors, or each of them, employed by or on behalf of the public utility when performing work on or adjacent to property owned or used by the public utility.

Section 35. Local government pools.--

- (1) Any two or more local governmental entities may enter into interlocal agreements for the purpose of securing the payment of benefits under this act, and the local government pool that is thereby created must:
- (a) Maintain a continuing program of excess insurance coverage and reserve evaluation to protect the financial stability of the fund in an amount and manner determined by a qualified and independent actuary.
- (b) Submit to the Department of Labor and Employment
 Security, within 6 months after the end of the fiscal year, an
 audited fiscal year-end financial statement by an independent
 certified public accountant.
- (c) Have a governing body that is composed entirely of local elected officials.
- (2) A local government pool that meets the requirements of this section is not subject to section 34 and is not required to file any report with the department under paragraph (2)(b) of section 29, which is uniquely required of

group self-insurer funds qualified under section 30. If any of the requirements of this section are not met, the local government pool is subject to section 34. Section 36. Administrative procedure; rulemaking authority .-- The Department of Labor and Employment Security shall adopt rules to govern the performance of any programs, duties, or responsibilities with which it is charged under this act. Section 37. This act shall take effect January 1, 2001. SENATE SUMMARY Provides an alternative system of workers' compensation to that provided under ch. 440, F.S. Authorizes employers to elect to participate in such an alternative system in lieu of one that conforms to ch. 440, F.S. (See bill for details.)