Florida House of Representatives - 2001

HB 1927

By the Committee on Insurance and Representatives Waters, Ross, Melvin, Fields, Clarke, Brown, Simmons, Negron, Kallinger, Sobel and Lee

1	A bill to be entitled
2	An act relating to workers' compensation;
3	amending s. 440.02, F.S.; revising definitions;
4	amending s. 440.09, F.S.; requiring certain
5	entities actively engaged in the construction
б	industry to secure payment of compensation
7	under chapter 440, F.S., after a certain date;
8	amending s. 440.13, F.S.; providing an
9	additional criterion for determining certain
10	value of nonprofessional attendant care
11	provided by a family member; requiring carriers
12	to allow employees to change physicians under
13	certain circumstances; specifying payments for
14	independent medical examinations; deleting
15	selection of independent medical examiner
16	criteria; specifying the number of medical
17	opinions admissible into evidence; providing an
18	exception to certain recourse for payment for
19	services rendered; amending s. 440.134, F.S.;
20	revising a definition; revising certain
21	grievance procedures for workers' compensation
22	managed care arrangements; amending s. 440.15,
23	F.S.; revising criteria for payment of
24	compensation for permanent total disability;
25	revising criteria for payment of permanent
26	impairment and wage-loss benefits; amending s.
27	440.185, F.S.; requiring additional information
28	in a report of injury; amending s. 440.191,
29	F.S.; including managed care arrangements under
30	provisions relating to the Employee Assistance
31	and Ombudsman Office; revising procedures for

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1	petitions for benefits under the office;
2	amending s. 440.192, F.S.; revising procedures
3	for resolving benefit disputes; transferring
4	duties and responsibilities of the Division of
5	Workers' Compensation to the Office of the
6	Judges of Compensation Claims; amending s.
7	440.20, F.S.; prohibiting approval of
8	settlement proposals providing for attorney's
9	fees in excess of certain amounts; amending s.
10	440.25, F.S.; limiting continuances under
11	procedures for mediation and hearings;
12	providing for selections of mediators by the
13	Chief Judge; providing for holding mediation
14	conferences instead of mediation hearings under
15	certain circumstances; providing for completion
16	of pretrial stipulations; authorizing a judge
17	of compensation claims to sanction certain
18	parties under certain circumstances; requiring
19	a judge of compensation claims to order a
20	pretrial hearing for certain purposes under
21	certain circumstances; revising final hearing
22	time limitations and procedures; deleting a
23	requirement that judges of compensation claims
24	adopt and enforce certain uniform local rules;
25	specifying resolution of determination of pay
26	claims; requiring resolution of certain claims
27	through an expedited dispute resolution
28	process; providing for dismissal of certain
29	petitions for lack of prosecution under certain
30	circumstances; amending s. 440.29, F.S.;
31	providing for receipt into evidence of medical
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1	reports from independent medical examiners;
2	amending s. 440.34, F.S.; providing for limited
3	additional attorney's fees in medical-only
4	cases; prohibiting approval of attorney's fees
5	in excess of certain amounts; deleting criteria
6	for determining certain attorney's fees;
7	amending s. 440.345, F.S.; requiring a summary
8	report of attorney's fees to the Governor and
9	Legislature; amending s. 440.4416, F.S.;
10	revising membership, member criteria, terms,
11	and meetings requirements of the Workers'
12	Compensation Oversight Board; deleting an
13	obsolete provision; providing additional
14	reporting requirements for the board; amending
15	s. 627.0915, F.S.; deleting obsolete
16	provisions; requiring a study of construction
17	industry exemptions; repealing s. 440.45(3),
18	F.S., relating to rotating docketing judges of
19	compensation claims; providing an effective
20	date.
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22	Be It Enacted by the Legislature of the State of Florida:
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24	Section 1. Paragraph (b) of subsection (14) and
25	subsection (37) of section 440.02, Florida Statutes, are
26	amended to read:
27	440.02 DefinitionsWhen used in this chapter, unless
28	the context clearly requires otherwise, the following terms
29	shall have the following meanings:
30	(14)
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"Employee" includes any person who is an officer 1 (b) 2 of a corporation and who performs services for remuneration 3 for such corporation within this state, whether or not such 4 services are continuous. 5 1. Any officer of a corporation may elect to be exempt б from this chapter by filing written notice of the election 7 with the division as provided in s. 440.05. 8 2. As to officers of a corporation who are actively engaged in the construction industry, no more than three 9 officers of such corporation or of any group of affiliated 10 11 corporations may elect to be exempt from this chapter by 12 filing written notice of the election with the division as 13 provided in s. 440.05. 14 3. An officer of a corporation who elects to be exempt from this chapter by filing a written notice of the election 15 with the division as provided in s. 440.05 is not an employee. 16 17 Services are presumed to have been rendered to the corporation 18 19 if the officer is compensated by other than dividends upon 20 shares of stock of the corporation which the officer owns. The term "affiliated" means and includes one or more corporations 21 22 or entities, any one of which is a corporation actively 23 engaged in the construction industry, under the same or 24 substantially the same control of a group of business entities 25 which are connected or associated so that one entity controls 26 or has the power to control each of the other business 27 entities. The term "affiliated" includes the officers, 28 directors, executives, shareholders active in management, 29 employees, and agents of the affiliated corporation. The ownership by one business entity of a controlling interest in 30 another business entity or a pooling of equipment or income 31

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among business entities shall be prima facie evidence that one 1 2 business entity is affiliated with another. 3 (37) "Catastrophic injury" means a permanent 4 impairment constituted by: 5 (a) Spinal cord injury involving severe paralysis of б an arm, a leg, or the trunk; 7 (b) Amputation of an arm, a hand, a foot, or a leg 8 involving the effective loss of use of that appendage; (c) Severe brain or closed-head injury as evidenced 9 10 by: 11 1. Severe sensory or motor disturbances; 12 2. Severe communication disturbances; 13 3. Severe complex integrated disturbances of cerebral 14 function; 15 4. Severe episodic neurological disorders; or 16 5. Other severe brain and closed-head injury conditions at least as severe in nature as any condition 17 provided in subparagraphs 1.-4.; 18 19 (d) Second-degree or third-degree burns of 25 percent 20 or more of the total body surface or third-degree burns of 5 21 percent or more to the face and hands; or 22 (e) Total or industrial blindness; or 23 (f) Any other injury that would otherwise qualify under this chapter of a nature and severity that would qualify 24 25 an employee to receive disability income benefits under Title 26 II or supplemental security income benefits under Title XVI of 27 the federal Social Security Act as the Social Security Act 28 existed on July 1, 1992, without regard to any time 29 limitations provided under that act. 30 Section 2. Subsection (9) is added to section 440.09, 31 Florida Statutes, to read: 5

1 440.09 Coverage.--2 (9) Notwithstanding other provisions of this chapter, effective January 1, 2004, all partners or sole proprietors 3 4 actively engaged in the construction industry shall secure the 5 payment of compensation under this chapter. 6 Section 3. Paragraph (b) of subsection (2), paragraphs 7 (a), (b), (e), and (f) of subsection (5), paragraph (c) of 8 subsection (9), and paragraph (b) of subsection (14) of section 440.13, Florida Statutes, are amended, and paragraph 9 (f) is added to subsection (2) of said section, read: 10 11 440.13 Medical services and supplies; penalty for violations; limitations.--12 13 (2) MEDICAL TREATMENT; DUTY OF EMPLOYER TO FURNISH.--14 (b) The employer shall provide appropriate professional or nonprofessional attendant care performed only 15 16 at the direction and control of a physician when such care is medically necessary. The value of nonprofessional attendant 17 care provided by a family member must be determined as 18 follows: 19 20 1. If the family member is not employed, the per-hour value equals the federal minimum hourly wage. 21 22 2. If the family member is employed and elects to leave that employment to provide attendant or custodial care, 23 the per-hour value of that care equals the per-hour value of 24 the family member's former employment, not to exceed the 25 26 per-hour value of such care available in the community at 27 large. 28 3. If the family member remains employed while providing attendant or custodial care, the per-hour value of 29 that care equals the per-hour value of the family member's 30 31 6

employment, not to exceed the per-hour value of such care 1 2 available in the community at large. 3 4. A family member or a combination of family members providing nonprofessional attendant care under this paragraph 4 5 may not be compensated for more than a total of 12 hours per б day. 7 (f) Upon the written request of the employee, the 8 carrier shall give the employee the opportunity for one change 9 of physician during the course of treatment for any one accident. The employee shall be entitled to select another 10 11 physician from among not fewer than three carrier-authorized 12 physicians who are not professionally affiliated. 13 (5) INDEPENDENT MEDICAL EXAMINATIONS.--14 In any dispute concerning overutilization, medical (a) benefits, compensability, or disability under this chapter, 15 16 the carrier or the employee may select an independent medical examiner. The examiner may be a health care provider treating 17 or providing other care to the employee. An independent 18 19 medical examiner may not render an opinion outside his or her 20 area of expertise, as demonstrated by licensure and applicable 21 practice parameters. Upon the written request of the employee, 22 the carrier shall pay the cost of one independent medical examination per accident. The cost of any additional 23 independent medical examination shall be borne by the party 24 25 requesting the additional independent medical examination. 26 Only the costs of independent medical examinations expressly 27 relied upon by the judge of compensation claims to award 28 benefits in the final compensation order shall be taxable costs under s. 4<u>40.34(3)</u>. 29 30 31

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1 (b) Each party is bound by his or her selection of an independent medical examiner and is entitled to an alternate 2 3 examiner only if: 4 1. The examiner is not qualified to render an opinion 5 upon an aspect of the employee's illness or injury which is material to the claim or petition for benefits; б 7 2. The examiner ceases to practice in the specialty 8 relevant to the employee's condition; 9 3. The examiner is unavailable due to injury, death, 10 or relocation outside a reasonably accessible geographic area; 11 or 12 4. The parties agree to an alternate examiner. 13 14 Any party may request, or a judge of compensation claims may require, designation of a division medical advisor as an 15 16 independent medical examiner. The opinion of the advisors acting as examiners shall not be afforded the presumption set 17 18 forth in paragraph (9)(c). 19 (e) No medical opinion other than the opinion of a 20 medical advisor appointed by the judge of compensation claims 21 or division, an independent medical examiner, or an authorized 22 treating provider is admissible in proceedings before the judges of compensation claims. The employee and the carrier 23 may each submit into evidence, and the judge of compensation 24 25 claims shall admit, the medical opinion of no more than one 26 independent medical examiner per specialty. In cases involving 27 occupational disease or repetitive trauma, no medical opinions 28 are admissible unless based on reliable scientific principles sufficiently established to have gained general acceptance in 29 the pertinent area of specialty. 30 31

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(f) Attorney's fees incurred by an injured employee in
 connection with delay of or opposition to an independent
 medical examination, including, but not limited to, motions
 for protective orders, are not recoverable under this chapter.

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(9) EXPERT MEDICAL ADVISORS.--

б (c) If there is disagreement in the opinions of the 7 health care providers, if two health care providers disagree 8 on medical evidence supporting the employee's complaints or the need for additional medical treatment, or if two health 9 care providers disagree that the employee is able to return to 10 11 work, the division may, and the judge of compensation claims 12 may shall, upon his or her own motion or within 15 days after 13 receipt of a written request by either the injured employee, 14 the employer, or the carrier, order the injured employee to be evaluated by an expert medical advisor. The opinion of the 15 16 expert medical advisor is presumed to be correct unless there is clear and convincing evidence to the contrary as determined 17 by the judge of compensation claims. The expert medical 18 19 advisor appointed to conduct the evaluation shall have free 20 and complete access to the medical records of the employee. An 21 employee who fails to report to and cooperate with such 22 evaluation forfeits entitlement to compensation during the 23 period of failure to report or cooperate.

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(14) PAYMENT OF MEDICAL FEES.--

(b) Fees charged for remedial treatment, care, and attendance may not exceed the applicable fee schedules adopted under this chapter, except as provided pursuant to a contract entered into between an employer or carrier and a certified health care provider or health care facility for the direct or indirect payment of medical services for covered expenses.

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Section 4. Paragraph (d) of subsection (1), subsection 1 2 (2), and paragraphs (c) and (d) of subsection (15) of section 3 440.134, Florida Statutes, are amended to read: 4 440.134 Workers' compensation managed care 5 arrangement. --6 (1) As used in this section, the term: 7 "Grievance" means a written complaint filed by an (d) 8 injured worker expressing dissatisfaction with the insurer's 9 workers' compensation managed care arrangement's refusal to provide medical care provided by an insurer's workers' 10 11 compensation managed care arrangement health care providers, 12 expressed in writing by an injured worker. 13 (2)14 (a) (b) Effective January 1, 1997, The employer may shall, subject to the terms and limitations specified 15 16 elsewhere in this section and chapter, furnish to the employee solely through managed care arrangements such medically 17 necessary remedial treatment, care, and attendance for such 18 19 period as the nature of the injury or the process of recovery 20 requires. (b) (a) The agency shall authorize an insurer to offer 21 22 or utilize a workers' compensation managed care arrangement after the insurer files a completed application along with the 23 payment of a \$1,000 application fee, and upon the agency's 24 25 being satisfied that the applicant has the ability to provide 26 quality of care consistent with the prevailing professional 27 standards of care and the insurer and its workers' 28 compensation managed care arrangement otherwise meets the 29 requirements of this section. No insurer may offer or utilize a managed care arrangement without such authorization. The 30 31 authorization, unless sooner suspended or revoked, shall 10

automatically expire 2 years after the date of issuance unless 1 2 renewed by the insurer. The authorization shall be renewed 3 upon application for renewal and payment of a renewal fee of \$1,000, provided that the insurer is in compliance with the 4 5 requirements of this section and any rules adopted hereunder. 6 An application for renewal of the authorization shall be made 7 90 days prior to expiration of the authorization, on forms 8 provided by the agency. The renewal application shall not 9 require the resubmission of any documents previously filed with the agency if such documents have remained valid and 10 11 unchanged since their original filing.

12 (15)(c) At the time the workers' compensation managed 13 care arrangement is implemented, the insurer must provide 14 detailed information to workers and health care providers describing how a grievance may be registered with the insurer. 15 16 Within 15 days after the date the request for medical care is received by the insurer or by the insurer's workers' 17 compensation managed care arrangement, whichever date is 18 19 earlier, the insurer shall grant or deny the request. If the 20 insurer denies the request, the insurer shall notify the injured worker in writing of his or her right to file a 21 22 grievance. 23 (d) Grievances must be considered in a timely manner 24 and must be transmitted to appropriate decisionmakers who have 25 the authority to fully investigate the issue and take 26 corrective action. If the insurer or the insurer's workers' 27 compensation managed care arrangement fails to notify the 28 injured worker of the outcome of the grievance in writing 29 within 15 days after the date of receiving the grievance, the grievance shall be presumed to be resolved against the injured 30 31

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worker and the grievance procedures shall be presumed to be 1 2 exhausted for purposes of s. 440.192(3). 3 Section 5. Paragraphs (b) and (d) of subsection (1) 4 and paragraph (a) of subsection (3) of section 440.15, Florida 5 Statutes, are amended to read: 440.15 Compensation for disability.--Compensation for 6 7 disability shall be paid to the employee, subject to the 8 limits provided in s. 440.12(2), as follows: (1) PERMANENT TOTAL DISABILITY.--9 10 (b) Only A catastrophic injury as defined in s. 440.02 11 shall, in the absence of conclusive proof of a substantial 12 earning capacity, constitute permanent total disability. In 13 all other cases, permanent total disability shall be 14 determined based upon the facts. Compensation shall be 15 payable under this subsection if the employee has no 16 substantial earning capacity. An employee has no substantial earning capacity if the employee is unable to work 17 uninterruptedly, either on a full-time or part-time basis, 18 19 including sedentary work, within a reasonable radius of the 20 employee's residence. Only claimants with catastrophic 21 injuries are eligible for permanent total benefits. In no 22 other case may permanent total disability be awarded. 23 (d) If an employee who is being paid compensation for 24 permanent total disability becomes rehabilitated to the extent that she or he establishes a substantial an earning capacity, 25 26 the employee shall be paid, instead of the compensation 27 provided in paragraph (a), benefits pursuant to subsection 28 (3). The division shall adopt rules to enable a permanently 29 and totally disabled employee who may have reestablished a substantial an earning capacity to undertake a trial period of 30 31 reemployment without prejudicing her or his return to

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permanent total status in the case that such employee is
 unable to sustain a substantial an earning capacity.

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(3) PERMANENT IMPAIRMENT AND WAGE-LOSS BENEFITS.--

(a) Impairment benefits.--

I. Once the employee has reached the date of maximum
medical improvement, impairment benefits are due and payable
within 20 days after the carrier has knowledge of the
impairment.

9 2. The three-member panel, in cooperation with the division, shall establish and use a uniform permanent 10 impairment rating schedule. This schedule must be based on 11 12 medically or scientifically demonstrable findings as well as 13 the systems and criteria set forth in the American Medical 14 Association's Guides to the Evaluation of Permanent Impairment; the Snellen Charts, published by American Medical 15 16 Association Committee for Eye Injuries; and the Minnesota Department of Labor and Industry Disability Schedules. The 17 schedule should be based upon objective findings. The schedule 18 19 shall be more comprehensive than the AMA Guides to the 20 Evaluation of Permanent Impairment and shall expand the areas already addressed and address additional areas not currently 21 22 contained in the guides. On August 1, 1979, and pending the adoption, by rule, of a permanent schedule, Guides to the 23 Evaluation of Permanent Impairment, copyright 1977, 1971, 24 25 1988, by the American Medical Association, shall be the 26 temporary schedule and shall be used for the purposes hereof. For injuries after July 1, 1990, pending the adoption by 27 28 division rule of a uniform disability rating schedule, the 29 Minnesota Department of Labor and Industry Disability Schedule shall be used unless that schedule does not address an injury. 30 31 In such case, the Guides to the Evaluation of Permanent

Impairment by the American Medical Association shall be used. 1 2 Determination of permanent impairment under this schedule must 3 be made by a physician licensed under chapter 458, a doctor of osteopathic medicine licensed under chapters 458 and 459, a 4 5 chiropractic physician licensed under chapter 460, a podiatric physician licensed under chapter 461, an optometrist licensed 6 7 under chapter 463, or a dentist licensed under chapter 466, as 8 appropriate considering the nature of the injury. No other persons are authorized to render opinions regarding the 9 existence of or the extent of permanent impairment. 10

11 3. All impairment income benefits shall be based on an 12 impairment rating using the impairment schedule referred to in 13 subparagraph 2. Impairment income benefits are paid weekly at 14 a the rate equal to of 50 percent of the employee's compensation rate average weekly temporary total disability 15 16 benefit not to exceed the maximum weekly benefit under s. 440.12. An employee's entitlement to impairment income 17 benefits begins the day after the employee reaches maximum 18 19 medical improvement or the expiration of temporary benefits, 20 whichever occurs earlier, and continues until the earlier of:

a. The expiration of a period computed at the rate of3 weeks for each percentage point of impairment; or

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b. The death of the employee.

24 After the employee has been certified by a doctor 4. 25 as having reached maximum medical improvement or 6 weeks 26 before the expiration of temporary benefits, whichever occurs 27 earlier, the certifying doctor shall evaluate the condition of 28 the employee and assign an impairment rating, using the 29 impairment schedule referred to in subparagraph 2. Compensation is not payable for the mental, psychological, or 30 31 emotional injury arising out of depression from being out of

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work. If the certification and evaluation are performed by a 1 2 doctor other than the employee's treating doctor, the 3 certification and evaluation must be submitted to the treating doctor, and the treating doctor must indicate agreement or 4 5 disagreement with the certification and evaluation. The certifying doctor shall issue a written report to the 6 7 division, the employee, and the carrier certifying that 8 maximum medical improvement has been reached, stating the 9 impairment rating, and providing any other information required by the division. If the employee has not been 10 11 certified as having reached maximum medical improvement before 12 the expiration of 102 weeks after the date temporary total 13 disability benefits begin to accrue, the carrier shall notify 14 the treating doctor of the requirements of this section. 15 The carrier shall pay the employee impairment 5. 16 income benefits for a period based on the impairment rating. The division may by rule specify forms and 17 6. procedures governing the method of payment of wage loss and 18 19 impairment benefits for dates of accidents before January 1, 20 1994, and for dates of accidents on or after January 1, 1994. Section 6. Subsection (2) of section 440.185, Florida 21 22 Statutes, is amended to read: 440.185 Notice of injury or death; reports; penalties 23 24 for violations .--25 (2) Within 7 days after actual knowledge of injury or death, the employer shall report such injury or death to its 26 27 carrier, in a format prescribed by the division, and shall 28 provide a copy of such report to the employee or the 29 employee's estate. The report of injury shall contain the following information: 30 31 The name, address, and business of the employer; (a) 15

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1 The name, social security number, street, mailing (b) 2 address, telephone number, and occupation of the employee; 3 (c) The cause and nature of the injury or death; 4 (d) The year, month, day, and hour when, and the 5 particular locality where, the injury or death occurred; and 6 (e) A record of the employee's earnings for the 13 7 weeks prior to the date of injury; and 8 (f)(e) Such other information as the division may 9 require. 10 The carrier shall, within 14 days after the employer's receipt 11 12 of the form reporting the injury, file the information 13 required by this subsection with the division in Tallahassee. 14 However, the division may by rule provide for a different reporting system for those types of injuries which it 15 16 determines should be reported in a different manner and for those cases which involve minor injuries requiring 17 professional medical attention in which the employee does not 18 19 lose more than 7 days of work as a result of the injury and is 20 able to return to the job immediately after treatment and resume regular work. 21 22 Section 7. Section 440.191, Florida Statutes, is 23 amended to read: 24 440.191 Employee Assistance and Ombudsman Office .--(1)(a) In order to effect the self-executing features 25 26 of the Workers' Compensation Law, this chapter shall be 27 construed to permit injured employees and employers or the 28 employer's carrier to resolve disagreements without undue 29 expense, costly litigation, or delay in the provisions of benefits. It is the duty of all who participate in the 30 31 workers' compensation system, including, but not limited to, 16

1 carriers, service providers, health care providers, <u>managed</u>
2 <u>care arrangements</u>, attorneys, employers, and employees, to
3 attempt to resolve disagreements in good faith and to
4 cooperate with the division's efforts to resolve disagreements
5 between the parties. The division may by rule prescribe
6 definitions that are necessary for the effective
7 administration of this section.

8 (b) An Employee Assistance and Ombudsman Office is 9 created within the Division of Workers' Compensation to inform 10 and assist injured workers, employers, carriers, and health 11 care providers, and managed care arrangements in fulfilling 12 their responsibilities under this chapter. The division may by 13 rule specify forms and procedures for administering requests 14 for assistance provided by this section.

15 (c) The Employee Assistance and Ombudsman Office, Division of Workers' Compensation, shall be a resource 16 available to all employees who participate in the workers' 17 compensation system and shall take all steps necessary to 18 19 educate and disseminate information to employees and 20 employers. Upon receiving a notice of injury or death, the Employee Assistance and Ombudsman Office is authorized to 21 22 initiate contact with the injured employee or employee's representative to discuss rights and responsibilities of the 23 24 employee under this chapter and the services available through the Employee Assistance and Ombudsman Office. 25 26 (2)(a) An employee may not file a petition requesting 27 any benefit under this chapter unless the employee has 28 exhausted the procedures for informal dispute resolution under 29 this section. (a)(b) If at any time the employer or its carrier 30 fails to provide benefits to which the employee believes she 31 17

or he is entitled, the employee shall contact the office to 1 2 request assistance in resolving the dispute. The office may 3 review petitions for benefits filed under s. 440.192 shall investigate the dispute and may shall attempt to facilitate an 4 5 agreement between the employee and the employer or carrier. The employee, the employer, and the carrier shall cooperate 6 7 with the office and shall timely provide the office with any 8 documents or other information that it may require in connection with its efforts under this section. 9

10 (b)(c) The office may compel parties to attend 11 conferences in person or by telephone in an attempt to resolve 12 disputes quickly and in the most efficient manner possible. 13 Settlement agreements resulting from such conferences must be 14 submitted to the Office of the Judges of Compensation Claims 15 for approval.

16 (c) (d) The Employee Assistance and Ombudsman Office may assign an ombudsman to assist the employee in resolving 17 the dispute. If the dispute is not resolved within 30 days 18 19 after the employee contacts the office, The ombudsman may 20 shall, at the employee's request, assist the employee in drafting a petition for benefits and explain the procedures 21 22 for filing petitions. The division may by rule determine the method used to calculate the 30-day period. The Employee 23 Assistance and Ombudsman Office may not represent employees 24 before the judges of compensation claims. An employer or 25 26 carrier may not pay any attorneys' fees on behalf of the employee for services rendered or costs incurred in connection 27 28 with this section, unless expressly authorized elsewhere in 29 this chapter. Section 8. Subsections (1), (2), (5), (7), and (8) of 30 31 section 440.192, Florida Statutes, are amended to read:

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440.192 Procedure for resolving benefit disputes .--1 2 (1) Subject to s. 440.191, any employee who has not 3 received a benefit to which the employee believes she or he is 4 entitled under this chapter shall serve by certified mail upon 5 the employer, the employer's carrier, and the Office of the 6 Judges of Compensation Claims division in Tallahassee a 7 petition for benefits meeting that meets the requirements of 8 this section. The Chief Judge division shall refer the petition to the Office of the judges of compensation claims. 9 10 (2) Upon receipt of a petition, the Office of the 11 Judges of Compensation Claims shall review each petition and 12 shall dismiss each petition or any portion of the petition, 13 upon the judge's its own motion or upon the motion of any 14 party, that does not on its face specifically identify or 15 itemize the following: (a) Name, address, telephone number, and social 16 17 security number of the employee. Name, address, and telephone number of the 18 (b) 19 employer. 20 (c) A detailed description of the injury and cause of 21 the injury, including the location of the occurrence and the 22 date or dates of accident. 23 (d) A detailed description of the employee's job, work responsibilities, and work the employee was performing when 24 the injury occurred. 25 26 (e) The time period for which compensation was not 27 timely provided and the specific classification of the 28 compensation. 29 (f) Date of maximum medical improvement, character of disability, and specific statement of all benefits or 30 31 compensation that the employee is seeking. 19

1 The specific All travel costs to which the (g) 2 employee believes she or he is entitled, including dates of travel and purpose of travel, means of transportation, and 3 mileage, including the date the request for mileage was filed 4 5 with the carrier and a copy of the request for mileage filed 6 with the carrier. 7 (h) Specific listing of all medical charges alleged 8 unpaid, including the name and address of the medical 9 provider, the amounts due, and the specific dates of 10 treatment. 11 (i) The type or nature of treatment care or attendance 12 sought and the justification for such treatment. If the 13 employee is under the care of a physician for the injury 14 identified under paragraph (c), a copy of the physician's 15 request, authorization, or recommendation for treatment, care, 16 or attendance must accompany the petition. (j) Specific explanation of any other disputed issue 17 that a judge of compensation claims will be called to rule 18 19 upon. 20 (k) Any other information and documentation the Chief 21 Judge may require by rule. 22 23 The dismissal of any petition or portion of the petition under 24 this section is without prejudice and does not require a 25 hearing. 26 (5) All motions to dismiss must state with 27 particularity the basis for the motion. The judge of 28 compensation claims shall enter an order upon such motions 29 without hearing, unless good cause for hearing is shown. When any petition or portion of a petition is dismissed for lack of 30 31 specificity under this subsection, the claimant must be 20

allowed 20 days after the date of the order of dismissal in
 which to file an amended petition. Any grounds for dismissal
 for lack of specificity under this section not asserted within
 <u>45</u> 30 days after receipt of the petition for benefits are
 thereby waived.

6 (7) Notwithstanding the provisions of s. 440.34, a 7 judge of compensation claims may not award attorney's fees 8 payable by the carrier for services expended or costs incurred 9 prior to the filing of a petition that does not meeting meet 10 the requirements of this section.

(8) Within 30 14 days after receipt of a petition for 11 12 benefits by certified mail, the carrier must either pay the 13 requested benefits without prejudice to its right to deny 14 within 120 days from receipt of the petition or file a response to petition notice of denial with the Office of the 15 16 Judges of Compensation Claims division. The carrier must list all benefits requested but not paid and explain its 17 justification for nonpayment in the response to petition 18 19 notice of denial. A carrier that does not deny compensability 20 in accordance with s. 440.20(4) is deemed to have accepted the employee's injuries as compensable, unless it can establish 21 material facts relevant to the issue of compensability that 22 could not have been discovered through reasonable 23 investigation within the 120-day period. The carrier shall 24 25 provide copies of the response notice to the filing party, 26 employer, and claimant by certified mail. 27 Section 9. Paragraphs (a) and (b) of subsection (11) 28 of section 440.20, Florida Statutes, are amended to read: 29 440.20 Time for payment of compensation; penalties for 30 late payment. --31

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(11)(a) Upon joint petition of all interested parties, 1 2 a lump-sum payment in exchange for the employer's or carrier's 3 release from liability for future medical expenses, as well as future payments of compensation expenses and any other 4 5 benefits provided under this chapter, shall be allowed at any б time in any case in which the employer or carrier has filed a 7 written notice of denial or response to petition within 120 8 days after the date of the injury, and the judge of compensation claims at a hearing to consider the settlement 9 proposal finds a justiciable controversy as to legal or 10 11 medical compensability of the claimed injury or the alleged 12 accident. The employer or carrier may not pay any attorney's 13 fees on behalf of the claimant for any settlement under this 14 section unless expressly authorized elsewhere in this chapter. Upon the joint petition of all interested parties and after 15 giving due consideration to the interests of all interested 16 parties, including the possible future medical costs of the 17 claimant, the judge of compensation claims may enter a 18 19 compensation order approving and authorizing the discharge of 20 the liability of the employer for compensation and remedial treatment, care, and attendance, as well as rehabilitation 21 22 expenses, by the payment of a lump sum. The judge of compensation claims shall not approve settlement proposals, 23 24 including any stipulations or agreements between the parties 25 or a claimant and his or her attorney related to the 26 settlement proposal, that provide for an attorney's fee in 27 excess of the amount permitted in s. 440.34.Such a 28 compensation order so entered upon joint petition of all 29 interested parties is not subject to modification or review under s. 440.28. If the settlement proposal together with 30 31 supporting evidence is not approved by the judge of

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compensation claims, it shall be considered void. Upon 1 2 approval of a lump-sum settlement under this subsection, the 3 judge of compensation claims shall send a report to the Chief Judge of the amount of the settlement and a statement of the 4 nature of the controversy. The Chief Judge shall keep a record 5 б of all such reports filed by each judge of compensation claims 7 and shall submit to the Legislature a summary of all such 8 reports filed under this subsection annually by September 15. (b) Upon joint petition of all interested parties, a 9 lump-sum payment in exchange for the employer's or carrier's 10 11 release from liability for future medical expenses, as well as 12 future payments of compensation and rehabilitation expenses, 13 and any other benefits provided under this chapter, may be 14 allowed at any time in any case after the injured employee has 15 attained maximum medical improvement. An employer or carrier 16 may not pay any attorney's fees on behalf of the claimant for any settlement, unless expressly authorized elsewhere in this 17 chapter. The judge of compensation claims shall not approve 18 19 settlement proposals, including any stipulations or agreements 20 between the parties or a claimant and his or her attorney related to the settlement proposal, that provide for an 21 22 attorney's fee in excess of the amount permitted in s. 440.34. A compensation order so entered upon joint petition of all 23 interested parties shall not be subject to modification or 24 25 review under s. 440.28. However, a judge of compensation 26 claims is not required to approve any award for lump-sum 27 payment when it is determined by the judge of compensation 28 claims that the payment being made is in excess of the value 29 of benefits the claimant would be entitled to under this chapter. The judge of compensation claims shall make or cause 30 to be made such investigations as she or he considers 31

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necessary, in each case in which the parties have stipulated 1 2 that a proposed final settlement of liability of the employer 3 for compensation shall not be subject to modification or review under s. 440.28, to determine whether such final 4 5 disposition will definitely aid the rehabilitation of the injured worker or otherwise is clearly for the best interests 6 7 of the person entitled to compensation and, in her or his 8 discretion, may have an investigation made by the Rehabilitation Section of the Division of Workers' 9 Compensation. The joint petition and the report of any 10 11 investigation so made will be deemed a part of the proceeding. 12 An employer shall have the right to appear at any hearing 13 pursuant to this subsection which relates to the discharge of 14 such employer's liability and to present testimony at such hearing. The carrier shall provide reasonable notice to the 15 employer of the time and date of any such hearing and inform 16 the employer of her or his rights to appear and testify. When 17 the claimant is represented by counsel or when the claimant 18 19 and carrier or employer are represented by counsel, final 20 approval of the lump-sum settlement agreement, as provided for 21 in a joint petition and stipulation, shall be approved by 22 entry of an order within 15 7 days after the filing of such joint petition and stipulation without a hearing, unless the 23 judge of compensation claims determines, in her or his 24 discretion, that additional testimony is needed before such 25 26 settlement can be approved or disapproved and so notifies the 27 parties. The probability of the death of the injured employee 28 or other person entitled to compensation before the expiration 29 of the period during which such person is entitled to compensation shall, in the absence of special circumstances 30

31 making such course improper, be determined in accordance with

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CODING: Words stricken are deletions; words underlined are additions.

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the most recent United States Life Tables published by the 1 2 National Office of Vital Statistics of the United States 3 Department of Health and Human Services. The probability of the happening of any other contingency affecting the amount or 4 5 duration of the compensation, except the possibility of the б remarriage of a surviving spouse, shall be disregarded. As a 7 condition of approving a lump-sum payment to a surviving 8 spouse, the judge of compensation claims, in the judge of 9 compensation claims' discretion, may require security which will ensure that, in the event of the remarriage of such 10 11 surviving spouse, any unaccrued future payments so paid may be 12 recovered or recouped by the employer or carrier. Such 13 applications shall be considered and determined in accordance 14 with s. 440.25. 15 Section 10. Subsections (1), (3), and (4) of section 16 440.25, Florida Statutes, are amended to read: 440.25 Procedures for mediation and hearings.--17 (1) Within 60 21 days after a petition for benefits is 18 19 filed under s. 440.192, a mediation conference concerning such petition shall be held. Within 10 $7~{\rm days}$ after such petition 20 is assigned to a judge of compensation claims filed, the judge 21 22 of compensation claims shall notify the interested parties by order that a mediation conference concerning such petition 23 will be held. Such order notice shall give the date by which, 24 25 time, and location of the mediation conference must be held. 26 Such order notice may be served personally upon the interested 27 parties or may be sent to the interested parties by mail. 28 Continuances may be granted only if the requesting party 29 demonstrates to the judge of compensation claims that the reason for requesting the continuance arises from 30 circumstances beyond the party's control. Any order granting 31

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1 a continuance must set forth the date of the rescheduled 2 mediation conference. 3 (3)(a) Such mediation conference shall be conducted 4 informally and shall does not require the use of formal rules 5 of evidence or procedure. Any information from the files, б reports, case summaries, mediator's notes, or other 7 communications or materials, oral or written, relating to a 8 mediation conference under this section obtained by any person performing mediation duties is privileged and confidential and 9 may not be disclosed without the written consent of all 10 parties to the conference. Any research or evaluation effort 11 directed at assessing the mediation program activities or 12 13 performance must protect the confidentiality of such 14 information. Each party to a mediation conference has a privilege during and after the conference to refuse to 15 16 disclose and to prevent another from disclosing communications made during the conference whether or not the contested issues 17 are successfully resolved. This subsection and paragraphs 18 19 (4)(a) and (b) shall not be construed to prevent or inhibit 20 the discovery or admissibility of any information that is otherwise subject to discovery or that is admissible under 21 applicable law or rule of procedure, except that any conduct 22 or statements made during a mediation conference or in 23 negotiations concerning the conference are inadmissible in any 24 25 proceeding under this chapter. 26 (b)1. Unless the parties conduct a private mediation under subparagraph 2., mediation shall be conducted by a 27 28 mediator selected by the Chief Judge from among the mediators 29 The Chief Judge shall select a mediator. The mediator shall be employed on a full-time basis by the Office of the Judges of 30 Compensation Claims. A mediator must be a member of The 31 26

Florida Bar for at least 5 years and must complete a mediation 1 2 training program approved by the Chief Judge. Adjunct 3 mediators may be employed by the Office of the Judges of Compensation Claims on an as-needed basis and shall be 4 5 selected from a list prepared by the Chief Judge. An adjunct 6 mediator must be independent of all parties participating in 7 the mediation conference. An adjunct mediator must be a member 8 of The Florida Bar for at least 5 years and must complete a 9 mediation training program approved by the Chief Judge. An adjunct mediator shall have access to the office, equipment, 10 11 and supplies of the judge of compensation claims in each 12 district.

13 2. In the event the parties agree or in the event no mediators under subparagraph 1. are available to conduct the 14 15 required mediation within the period specified in this 16 section, the parties shall hold a mediation conference at the 17 carrier's expense within the 60-day period set for mediation. The mediation conference shall be conducted by a mediator 18 certified under s. 44.106 and having sufficient experience in 19 20 workers' compensation. If the parties do not agree upon a mediator within 10 days after the date of the order, the 21 22 claimant shall notify the judge in writing and the judge shall 23 appoint a mediator under this subparagraph within 7 days. 24

In the event both parties agree, the results of the mediation conference shall be binding and neither party shall have a right to appeal the results. In the event either party refuses to agree to the results of the mediation conference, the results of the mediation conference as well as the testimony, witnesses, and evidence presented at the conference shall not be admissible at any subsequent proceeding on the claim. The

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mediator shall not be called in to testify or give deposition 1 2 to resolve any claim for any hearing before the judge of 3 compensation claims. The employer may be represented by an attorney at the mediation conference if the employee is also 4 5 represented by an attorney at the mediation conference. 6 (c) The parties shall complete the pretrial 7 stipulations prior to the conclusion of the mediation 8 conference if the claims, except for attorney's fees and 9 costs, have not been settled and any claims in any filed 10 petition remain unresolved. The judge of compensation claims 11 may sanction a party or both parties for failure to complete 12 the pretrial stipulations prior to the conclusion of the 13 mediation conference. 14 (4)(a) If the parties fail to agree upon written 15 submission of pretrial stipulations at the mediation 16 conference, on the 10th day following commencement of 17 mediation, the questions in dispute have not been resolved, the judge of compensation claims shall order a pretrial 18 19 hearing to occur within 14 days after the date of mediation 20 ordered by the judge of compensation claims hold a pretrial hearing. The judge of compensation claims shall give the 21 22 interested parties at least 7 days' advance notice of the pretrial hearing by mail. At the pretrial hearing, the judge 23 of compensation claims shall, subject to paragraph (b), set a 24 25 date for the final hearing that allows the parties at least 30 26 days to conduct discovery unless the parties consent to an 27 earlier hearing date. 28 (b) The final hearing must be held and concluded 29 within 60 45 days after the date the mediation conference is held pretrial hearing. Continuances may be granted only if the 30 31 requesting party demonstrates to the judge of compensation

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claims that the reason for requesting the continuance arises
 from circumstances beyond the party's control. <u>Any order</u>
 <u>granting a continuance shall set forth the date of the</u>
 rescheduled final hearing.

5 (c) The judge of compensation claims shall give the 6 interested parties at least 7 days' advance notice of the 7 final hearing, served upon the interested parties by mail.

8 The final hearing shall be held in the county (d) where the injury occurred, if the injury occurred in this 9 state, unless otherwise agreed to between the parties and 10 11 authorized by the judge of compensation claims in the county 12 where the injury occurred. If the injury occurred without the 13 state and is one for which compensation is payable under this 14 chapter, then the final hearing above referred to may be held in the county of the employer's residence or place of 15 16 business, or in any other county of the state which will, in the discretion of the Chief Judge, be the most convenient for 17 a hearing. The final hearing shall be conducted by a judge of 18 19 compensation claims, who shall, within 14 days after final 20 hearing, unless otherwise agreed by the parties, determine the 21 dispute in a summary manner. At the final such hearing, the 22 claimant and employer may each present evidence in respect of the claims presented by the petition for benefits such claim 23 and may be represented by any attorney authorized in writing 24 for such purpose. When there is a conflict in the medical 25 26 evidence submitted at the hearing, the provisions of s. 440.13 27 shall apply. The report or testimony of the expert medical 28 advisor shall be made a part of the record of the proceeding 29 and shall be given the same consideration by the judge of compensation claims as is accorded other medical evidence 30 31 submitted in the proceeding; and all costs incurred in

1 connection with such examination and testimony may be assessed 2 as costs in the proceeding, subject to the provisions of s. 3 440.13. No judge of compensation claims may make a finding of 4 a degree of permanent impairment that is greater than the 5 greatest permanent impairment rating given the claimant by any 6 examining or treating physician, except upon stipulation of 7 the parties.

8 (e) The order making an award or rejecting the claim, 9 referred to in this chapter as a "compensation order," shall be issued by the judge of compensation claims within 21 days 10 11 after the final hearing and shall set forth the findings of ultimate facts and the mandate; and the order need not include 12 13 any other reason or justification for such mandate. The compensation order shall be filed in the office of the 14 division at Tallahassee. A copy of such compensation order 15 16 shall be sent by mail to the parties and attorneys of record at the last known address of each, with the date of mailing 17 noted thereon. 18

19 (f) Each judge of compensation claims is required to 20 submit a special report to the Chief Judge in each contested 21 workers' compensation case in which the case is not determined 22 in a summary manner within 14 days after the of final hearing or within the timeframes specified in this section. The Said 23 form shall be provided by the Chief Judge and shall contain 24 the names of the judge of compensation claims and of the 25 26 attorneys involved and a brief explanation by the judge of 27 compensation claims as to the reason for the such a delay in 28 issuing a final order or exceeding the timeframes specified in 29 this section. The Chief Judge shall compile these special reports into an annual public report to the Governor, the 30 31 Secretary of Labor and Employment Security, the Legislature,

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The Florida Bar, and the <u>statewide</u> appellate district judicial
 nominating <u>commission</u> commissions.

3 (g) Judges of compensation claims shall adopt and 4 enforce uniform local rules for workers' compensation.

5 (g)(h) Notwithstanding any other provision of this б section, the judge of compensation claims may require the 7 appearance of the parties and counsel before her or him 8 without written notice for an emergency conference where there is a bona fide emergency involving the health, safety, or 9 welfare of an employee. An emergency conference under this 10 11 section may result in the entry of an order or the rendering of an adjudication by the judge of compensation claims. 12

13 (h)(i) To expedite dispute resolution and to enhance 14 the self-executing features of the Workers' Compensation Law, the Chief Judge shall make provision by rule or order for the 15 16 resolution of appropriate motions by judges of compensation claims without oral hearing upon submission of brief written 17 statements in support and opposition, and for expedited 18 discovery and docketing. Unless the judge of compensation 19 20 claims orders a hearing under paragraph (i), claims related to the determination of pay under s. 440.14 shall be resolved 21 22 under this paragraph.

(i) (j) To further expedite dispute resolution and to 23 enhance the self-executing features of the system, those 24 petitions filed in accordance with s. 440.192 that involve a 25 26 claim for benefits of \$5,000 or less shall, in the absence of 27 compelling evidence to the contrary, be presumed to be 28 appropriate for expedited resolution under this paragraph; and 29 any other claim filed in accordance with s. 440.192, upon the written agreement of both parties and application by either 30 31 party, may similarly be resolved under this paragraph. Claims

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for medical-only benefits of \$5,000 or less or medical mileage 1 2 reimbursement shall, in the absence of compelling evidence to 3 the contrary, be resolved through the expedited dispute resolution process under this paragraph. For purposes of 4 5 expedited resolution pursuant to this paragraph, the Chief Judge shall make provision by rule or order for expedited and 6 7 limited discovery and expedited docketing in such cases. At 8 least 15 days prior to hearing, the parties shall exchange and file with the judge of compensation claims a pretrial outline 9 of all issues, defenses, and witnesses on a form promulgated 10 by the Chief Judge; provided, in no event shall such hearing 11 be held without 15 days' written notice to all parties. No 12 13 pretrial hearing shall be held. The judge of compensation 14 claims shall limit all argument and presentation of evidence at the hearing to a maximum of 30 minutes, and such hearings 15 16 shall not exceed 30 minutes in length. Neither party shall be required to be represented by counsel. The employer or carrier 17 may be represented by an adjuster or other qualified 18 representative. The employer or carrier and any witness may 19 20 appear at such hearing by telephone. The rules of evidence 21 shall be liberally construed in favor of allowing introduction 22 of evidence. (j) A judge of compensation claims, upon the motion of 23 a party or the judge's own motion, may dismiss a petition for 24 lack of prosecution if no petitions, responses, motions, 25 26 orders, requests for hearings, or notices of deposition have 27 been filed for a period of 12 months, unless good cause is 28 shown. Dismissals for lack of prosecution are without 29 prejudice and do not require a hearing.

30 Section 11. Subsection (4) of section 440.29, Florida31 Statutes, is amended to read:

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1 440.29 Procedure before the judge of compensation 2 claims.--3 (4) All medical reports of authorized treating health 4 care providers or independent medical examiners, whose medical 5 opinion is submitted under s. 440.13(5)(e), relating to the б claimant and subject accident shall be received into evidence 7 by the judge of compensation claims upon proper motion. 8 However, such records must be served on the opposing party at 9 least 30 days before the final hearing. This section does not limit any right of further discovery, including, but not 10 11 limited to, depositions. 12 Section 12. Subsections (1) and (3) of section 440.34, 13 Florida Statutes, are amended to read: 14 440.34 Attorney's fees; costs.--15 (1) A fee, gratuity, or other consideration may not be paid for services rendered for a claimant in connection with 16 any proceedings arising under this chapter, unless approved as 17 reasonable by the judge of compensation claims or court having 18 19 jurisdiction over such proceedings. Except as provided by this 20 subsection, any attorney's fee approved by a judge of compensation claims for services rendered to a claimant must 21 equal to 20 percent of the first \$5,000 of the amount of the 22 benefits secured, 15 percent of the next \$5,000 of the amount 23 of the benefits secured, 10 percent of the remaining amount of 24 25 the benefits secured to be provided during the first 10 years 26 after the date the claim is filed, and 5 percent of the 27 benefits secured after 10 years. However, in medical-only 28 petitions, the judge of compensation claims shall consider the following factors in each case and may approve an additional 29 increase or decrease the attorney's fee, not to exceed \$1,000 30 based on a reasonable hourly rate, if the judge of 31

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compensation claims expressly finds that the attorney's fee, 1 2 based on benefits secured, fails to fairly compensate the 3 attorney and, in her or his judgment, the circumstances of the particular case warrant such action. The judge of 4 5 compensation claims shall not approve a compensation order, a 6 joint stipulation for lump-sum settlement, a stipulation or 7 agreement between a claimant and his or her attorney, or any 8 other agreement related to benefits under this chapter that 9 provides for an attorney's fee in excess of the amount permitted by this section.+ 10 11 (a) The time and labor required, the novelty and 12 difficulty of the questions involved, and the skill requisite to perform the legal service properly. 13 14 (b) The fee customarily charged in the locality for 15 similar legal services. 16 (c) The amount involved in the controversy and the benefits resulting to the claimant. 17 (d) The time limitation imposed by the claimant or the 18 19 circumstances. 20 (e) The experience, reputation, and ability of the 21 lawyer or lawyers performing services. 22 (f) The contingency or certainty of a fee. (3) If the claimant should prevail in any proceedings 23 before a judge of compensation claims or court, there shall be 24 25 taxed against the employer the reasonable costs of such 26 proceedings, not to include the attorney's fees of the 27 claimant. A claimant shall be responsible for the payment of 28 her or his own attorney's fees, except that a claimant shall 29 be entitled to recover a reasonable attorney's fee from a carrier or employer: 30 31

(a) Against whom she or he successfully asserts a 1 2 petition claim for medical benefits only, if the claimant has 3 not filed or is not entitled to file at such time a claim for disability, permanent impairment, wage-loss, or death 4 5 benefits, arising out of the same accident; or (b) In any case in which the employer or carrier files 6 7 a response to petition notice of denial with the Office of the 8 Judges of Compensation Claims division and the injured person 9 has employed an attorney in the successful prosecution of the claim; or 10 11 (c) In a proceeding in which a carrier or employer 12 denies that an injury occurred for which compensation benefits 13 are payable, and the claimant prevails on the issue of 14 compensability; or (d) In cases where the claimant successfully prevails 15 16 in proceedings filed under s. 440.24 or s. 440.28. 17 Regardless of the date benefits were initially requested, 18 19 attorney's fees shall not attach under this subsection until 20 30 days from the date the carrier or employer, if self-insured, receives the petition. In applying the factors 21 22 set forth in subsection (1) to cases arising under paragraphs 23 (a), (b), (c), and (d), the judge of compensation claims must only consider only such benefits and the time reasonably spent 24 in obtaining them as were secured for the claimant within the 25 26 scope of paragraphs (a), (b), (c), and (d). 27 Section 13. Section 440.345, Florida Statutes, is 28 amended to read: 29 440.345 Reporting of attorney's fees.--All fees paid to attorneys for services rendered under this chapter shall be 30 31 reported to the division as the division requires by rule. The

division shall annually summarize the such data in a report to 1 2 the Governor, the President of the Senate, and the Speaker of 3 the House of Representatives Workers' Compensation Oversight 4 Board. 5 Section 14. Subsections (1) and (2) of section б 440.4416, Florida Statutes, are amended to read: 7 440.4416 Workers' Compensation Oversight Board .--8 (1) There is created within the Department of Labor 9 and Employment Security the Workers' Compensation Oversight Board. The board shall be composed of the following members, 10 11 each of whom has knowledge of, or experience with, the 12 workers' compensation system: 13 (a) Five Six members selected by the Governor, none of 14 whom shall be a member of the Legislature at the time of appointment, consisting of the following: 15 16 1. One representative Two representatives of the workers' compensation insurance industry employers. 17 18 One representative Four representatives of workers' 2. 19 compensation health care providers employees, one of whom must 20 be a representative of an employee's union whose members are 21 covered by workers' compensation pursuant to this chapter. 22 3. One representative of workers' compensation 23 claimant's attorneys. 24 4. One representative of workers' compensation defense 25 attorneys. 26 5. One representative who is either an employer or a 27 nonsalaried and nonmanagement employee. 28 (b) Two Three members selected by the President of the 29 Senate, none of whom shall be members of the Legislature at 30 the time of appointment, consisting of: 31

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1 1. A representative of employers who employs at least 2 10 employees in Florida for which workers' compensation 3 coverage is provided pursuant to this chapter, and who is a licensed general contractor actively engaged in the 4 5 construction industry in this state. 1.2. A representative of employers who employs fewer 6 7 than 25 10 employees in Florida for which workers' 8 compensation coverage is provided pursuant to this chapter. 2.3. A representative of employees who is a 9 nonsalaried and nonmanagement employee of an employer 10 employing at least 25 persons. 11 (c) Two Three members selected by the Speaker of the 12 13 House of Representatives, none of whom shall be members of the 14 Legislature at the time of appointment, consisting of: 15 A representative of employers who employs fewer 1. than 10 employees in Florida and who is a licensed general 16 contractor actively engaged in the construction industry in 17 this state for which workers' compensation coverage is 18 provided pursuant to this chapter. 19 1.2. A representative of employers who employs at 20 least 25 10 employees in Florida for which workers' 21 22 compensation coverage is provided pursuant to this chapter. 23 2.3. A representative of employees who is a 24 nonsalaried and nonmanagement employee of an employer 25 employing fewer than 25 persons. 26 (d) Additionally, the Insurance Commissioner and the 27 secretary of the Department of Labor and Employment Security 28 shall be nonvoting ex officio members. 29 (d)(e) The terms of all current board members shall expire December 31, 2001. New original appointments to the 30 31 board shall be made on or before January 1, 2002 1994. 37

Vacancies in the membership of the board shall be filled in 1 2 the same manner as the original appointments. Except as to ex 3 officio members of the board, Three appointees of the Governor, one appointee two appointees of the President of the 4 5 Senate, and one appointee two appointees of the Speaker of the House of Representatives shall serve for terms of 2 years, and 6 7 the remaining appointees shall serve for terms of 4 years. 8 Thereafter, all members shall serve for terms of 4 years; 9 except that a vacancy shall be filled by appointment for the 10 remainder of the term. The board shall have an organizational 11 meeting on or before March 1, 1994, the time and place of such meeting to be determined by the Governor. 12

13 (e)(f) Each member is accountable to the Governor for 14 proper performance of his or her duties as a member of the 15 board. The Governor may remove from office any member for 16 malfeasance, misfeasance, neglect of duty, drunkenness, 17 incompetence, permanent inability to perform official duties, 18 or for pleading guilty or nolo contendere to, or having been 19 adjudicated guilty of, a first degree misdemeanor or a felony.

20 (f)(g) A vacancy shall occur upon failure of a member 21 to attend four consecutive meetings of the board or 50 percent 22 of the meetings of the board during a 12-month period, unless 23 the board by majority votes to excuse the absence of such 24 member.

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(2) POWERS AND DUTIES; ORGANIZATION. --

(a) The board shall have all the powers necessary and
convenient to carry out and effectuate the purposes of this
section, including, but not limited to, the power to:

1. Conduct public hearings.

30 2. Report to the Legislature by January 1, 1995, as to
 31 the feasibility of a return-to-work program that includes

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1 incentives for employers who encourage such a program and 2 disincentives for employers who hinder such a program. 3 2.3. Prescribe qualifications for board employees. 4 3.4. Appear on its own behalf before other boards, 5 commissions, or agencies of the state or Federal Government. 6 4.5. Make and execute contracts to the extent that 7 such contracts are consistent with duties and powers set forth 8 in this section and elsewhere in the law of this state. (b) The board shall adopt bylaws, formulate workers' 9 compensation legislation or amendments, review, advise, and 10 11 appear before the Legislature in connection with legislation 12 that impacts the workers' compensation system, advise the 13 division on policy, administrative and legislative issues, and 14 appear before other state or federal agencies in connection with matters impacting the workers' compensation system. 15 16 (c) The Governor board shall select a chair from among the employer or employee members of the board. The member 17 designated as chair who shall serve as chair for a term period 18 19 of 2 years or and until a successor is elected and qualified, 20 unless removed from the board by the Governor. The chair shall be the chief administrative officer of the board and shall 21 have the authority to plan, direct, coordinate, and execute 22 the powers and duties of the board. 23 24 (d) The board shall hold at least one regularly 25 scheduled meeting each quarter and other such meetings during 26 the year as it deems necessary, except that the chair, a 27 quorum of the board, or the division may call meetings. The 28 board shall hold at least two meetings a year outside Leon 29 County. The board shall maintain transcripts of each meeting. Such transcripts shall be available to any interested person 30 in accordance with chapter 119. 31

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(e) The board shall approve the bylaws or amendments 1 2 thereto by unanimous vote. All other board actions or 3 recommendations shall be approved by not less than a majority vote of the members present employee representatives and 4 5 majority vote of employer representatives, unless the bylaws б otherwise provide. 7 (f) The board shall submit all formal reports and 8 publications made by the board to the division at least 30 9 days prior to the release or publication of the information. The board shall include in all formal reports and publications 10 11 any response from the division. 12 Section 15. Section 627.0915, Florida Statutes, is 13 amended to read: 14 627.0915 Rate filings; workers' compensation, 15 drug-free workplace, and safe employers. -- The Department of 16 Insurance shall approve rating plans for workers' compensation insurance that give specific identifiable consideration in the 17 setting of rates to employers that either implement a 18 19 drug-free workplace program pursuant to rules adopted by the 20 Division of Workers' Compensation of the Department of Labor and Employment Security or implement a safety program pursuant 21 22 to provisions of the rating plan approved by the Division of Safety pursuant to rules adopted by the Division of Safety of 23 the Department of Labor and Employment Security or implement 24 both a drug-free workplace program and a safety program. The 25 26 Division of Safety may by rule require that the client of a 27 help supply services company comply with the essential 28 requirements of a workplace safety program as a condition for 29 receiving a premium credit. The plans must take effect January 1, 1994, must be actuarially sound, and must state the savings 30 31

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anticipated to result from such drug-testing and safety 1 2 programs. 3 Section 16. The joint underwriting plan authorized by 4 s. 627.311(4), Florida Statutes, shall conduct a study of 5 construction industry exemptions permitted under chapter 440, Florida Statutes. The study shall contain an examination of 6 7 the ramifications of such exemptions on the construction 8 industry and on the entire workers' compensation system in 9 this state, including the potential impact of requiring all 10 partners or sole proprietors actively engaged in the 11 construction industry who elect to be excluded from the 12 definition of "employee" in s. 440.02, Florida Statutes, to 13 obtain a minimum premium or "if any" workers' compensation 14 insurance policy. The study also shall examine the cost and availability of such insurance coverage, and shall make 15 16 recommendations regarding insurance coverage for partners and 17 sole proprietors who currently elect to be excluded from chapter 440, Florida Statutes. The joint underwriting plan 18 19 shall complete this study and deliver copies of its written 20 report to the President of the Senate and the Speaker of the 21 House of Representatives no later than January 1, 2002. 22 Section 17. Subsection (3) of section 440.45, Florida 23 Statutes, is repealed. 24 Section 18. This act shall take effect October 1, 2001. 25 26 27 28 29 30 31

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2	HOUSE SUMMARY
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4	Revises various workers' compensation provisions relating to the duty of an employer to furnish medical treatment,
5	workers' compensation managed care arrangements, compensation for disability, notice of injury or death,
6	the Employee Assistance and Ombudsman Office, procedures for resolving benefit disputes, penalties for late
7	payment of compensation, procedures for mediation and hearings, procedures before judges of compensation
8	claims, attorney's fees and costs, reporting of attorney's fees, the Workers' Compensation Oversight
9	Board, and rate filings. Requires a joint underwriting plan to conduct a study of construction industry
10	exemptions permitted under chapter 440, Florida Statutes. See bill for details.
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