	WORKERS' COMPENSATION AMENDMENTS
	2007 GENERAL SESSION
	STATE OF UTAH
	Chief Sponsor: Ron Bigelow
	Senate Sponsor:
LON	NG TITLE
Gen	eral Description:
	This bill modifies provisions in the Insurance Code, Independent Entities Code, Utah
Labo	or Code, and other statutes to provide for the privatization of the Workers'
Com	pensation Fund and to provide for an assigned risk plan to cover the residual
work	kers' compensation insurance market.
Higł	nlighted Provisions:
	This bill:
	 removes references to the Workers' Compensation Fund throughout the code
effec	ctive on the transition date;
	 enacts the Workers' Compensation Insurance Regulation chapter to provide for the
creat	tion of a Utah Workers' Compensation Assigned Risk Plan including:
	• defining terms;
	• providing for selection of a plan administrator and one or more servicing
carri	ers;
	• addressing rates;
	• providing for a reserve for the plan; and
	addressing deficits;
	 provides a process for the privatization of the Workers' Compensation Fund
inclu	ıding:
	• superseding the requirements of the Independent Entities Code;



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28	• requiring financial audits and actuarial studies;
29	• requiring a ruling from the Internal Revenue Service;
30	• providing for the creation of a successor mutual insurance company;
31	• providing for a transition date;
32	• requiring the transfer of assets to the reserve for the assigned risk plan;
33	• requiring the return of certain surpluses, if any; and
34	• providing for the assumption of liabilities and transfer of assets to the successor
35	mutual insurance company;
36	 provides for the repeal of the privatization process after the transition date;
37	 lists outstanding issues related to the implementation of this bill; and
38	 makes technical and conforming amendments.
39	Monies Appropriated in this Bill:
40	None
41	Other Special Clauses:
42	This bill has multiple effective dates and requires further action by the Legislature in
43	the 2008 Annual General Session to take effect.
44	This bill provides revisor instructions.
45	Utah Code Sections Affected:
46	AMENDS:
47	11-8-3, as last amended by Chapter 222, Laws of Utah 2000
48	31A-1-105 , as last amended by Chapter 222, Laws of Utah 2000
49	31A-15-103, as last amended by Chapter 90, Laws of Utah 2004
50	31A-19a-401, as last amended by Chapter 222, Laws of Utah 2000
51	31A-21-101, as last amended by Chapter 197, Laws of Utah 2006
52	31A-22-309, as last amended by Chapter 59, Laws of Utah 2001
53	31A-26-103, as last amended by Chapter 222, Laws of Utah 2000
54	31A-35-103 , as enacted by Chapter 293, Laws of Utah 1998
55	34A-2-102, as last amended by Chapter 222, Laws of Utah 2000
56	34A-2-103, as last amended by Chapter 295, Laws of Utah 2006
57	34A-2-107, as last amended by Chapter 114, Laws of Utah 2001
58	34A-2-201, as last amended by Chapter 222, Laws of Utah 2000

59	34A-2-203, as last amended by Chapter 275, Laws of Utah 2006
60	34A-2-209, as renumbered and amended by Chapter 375, Laws of Utah 1997
61	34A-2-210, as enacted by Chapter 375, Laws of Utah 1997
62	34A-2-211, as last amended by Chapter 222, Laws of Utah 2000
63	34A-2-406, as last amended by Chapter 222, Laws of Utah 2000
64	51-7-2, as last amended by Chapter 277, Laws of Utah 2006
65	51-7-4, as last amended by Chapters 71 and 178, Laws of Utah 2005
66	58-59-306, as repealed and reenacted by Chapter 260, Laws of Utah 2003
67	59-9-101, as last amended by Chapter 44, Laws of Utah 2006
68	63-5b-102, as last amended by Chapter 139, Laws of Utah 2006
69	63-38a-102, as last amended by Chapter 71, Laws of Utah 2005
70	63-55b-131, as last amended by Chapter 82, Laws of Utah 2006
71	63E-1-102, as last amended by Chapter 46, Laws of Utah 2006
72	63E-1-203, as last amended by Chapter 159, Laws of Utah 2002
73	67-4-2, as last amended by Chapter 222, Laws of Utah 2000
74	ENACTS:
75	31A-40-101 , Utah Code Annotated 1953
76	31A-40-102 , Utah Code Annotated 1953
77	31A-40-201 , Utah Code Annotated 1953
78	31A-40-202 , Utah Code Annotated 1953
79	31A-40-203 , Utah Code Annotated 1953
80	31A-40-204 , Utah Code Annotated 1953
81	31A-40-205 , Utah Code Annotated 1953
82	31A-40-301 , Utah Code Annotated 1953
83	31A-40-302 , Utah Code Annotated 1953
84	31A-40-303 , Utah Code Annotated 1953
85	31A-40-304 , Utah Code Annotated 1953
86	31A-40-305 , Utah Code Annotated 1953
87	31A-40-306 , Utah Code Annotated 1953
88	31A-40-307 , Utah Code Annotated 1953
89	31A-40-308 , Utah Code Annotated 1953

90	31A-40-309 , Utah Code Annotated 1953
91	31A-40-310 , Utah Code Annotated 1953
92	REPEALS:
93	31A-22-1001, as last amended by Chapter 222, Laws of Utah 2000
94	31A-33-101, as last amended by Chapter 222, Laws of Utah 2000
95	31A-33-102, as last amended by Chapter 222, Laws of Utah 2000
96	31A-33-103, as last amended by Chapter 222, Laws of Utah 2000
97	31A-33-103.5, as last amended by Chapters 33 and 116, Laws of Utah 2001
98	31A-33-104, as last amended by Chapter 14, Laws of Utah 2006
99	31A-33-105, as last amended by Chapter 107, Laws of Utah 1998
100	31A-33-106, as last amended by Chapter 275, Laws of Utah 2006
101	31A-33-107, as last amended by Chapter 130, Laws of Utah 1999
102	31A-33-108, as last amended by Chapter 252, Laws of Utah 2003
103	31A-33-109, as renumbered and amended by Chapter 240, Laws of Utah 1996
104	31A-33-110, as last amended by Chapter 204, Laws of Utah 1997
105	31A-33-111, as last amended by Chapter 130, Laws of Utah 1999
106	31A-33-112, as renumbered and amended by Chapter 240, Laws of Utah 1996
107	31A-33-113, as last amended by Chapter 116, Laws of Utah 2001
108	31A-33-114, as renumbered and amended by Chapter 240, Laws of Utah 1996
109	31A-33-115, as renumbered and amended by Chapter 240, Laws of Utah 1996
110	31A-33-116, as renumbered and amended by Chapter 240, Laws of Utah 1996
111	31A-33-117, as last amended by Chapter 375, Laws of Utah 1997
112	31A-33-118, as last amended by Chapter 107, Laws of Utah 1998
113	
114	Be it enacted by the Legislature of the state of Utah:
115	Section 1. Section 11-8-3 is amended to read:
116	11-8-3. Department of Environmental Quality to negotiate loans for sewage
117	facilities.
118	(1) The Department of Environmental Quality may negotiate loans from the Retirement
119	Systems Fund, State Land Principal Fund, [Workers' Compensation Fund,] or any state trust
120	and agency fund which has sums available for loaning, as these funds are defined in Title 51,

121	Chapter 5, Funds Consolidation Act, not to exceed \$1,000,000 in any fiscal year for the
122	purposes of providing the funding for the loans provided for in Section 11-8-2.
123	(2) The terms of any borrowing and repayment shall be negotiated between the
124	borrower and the lender consistent with the legal duties of the lender.
125	Section 2. Section 31A-1-105 is amended to read:
126	31A-1-105. Presumption of jurisdiction.
127	(1) Any insurer[, including the Workers' Compensation Fund created under Chapter
128	33,] that provides coverage of a resident of this state, property located in this state, or a
129	business activity conducted in this state, or that engages in any activity described in
130	Subsections 31A-15-102(2)(a) through (h), is:
131	(a) doing an insurance business in this state; and
132	(b) subject to the jurisdiction of the [insurance] commissioner and the courts of this
133	state under Sections 31A-2-309 and 31A-2-310 to the extent of that coverage or activity.
134	(2) Any person doing or purporting to do [an insurance] business in this state as
135	defined in Section 31A-1-301 is subject to the jurisdiction of the insurance commissioner and
136	this title, unless the insurer can establish that the exemptions of Section 31A-1-103 apply.
137	(3) This section does not limit the jurisdiction of the courts of this state under other
138	applicable law.
139	Section 3. Section 31A-15-103 is amended to read:
140	31A-15-103. Surplus lines insurance Unauthorized insurers.
141	(1) Notwithstanding Section 31A-15-102, a foreign insurer that has not obtained a
142	certificate of authority to do business in this state under Section 31A-14-202 may negotiate for
143	and make insurance contracts with persons in this state and on risks located in this state,
144	subject to the limitations and requirements of this section.
145	(2) For contracts made under this section, the insurer may, in this state, inspect the
146	risks to be insured, collect premiums and adjust losses, and do all other acts reasonably
147	incidental to the contract, through employees or through independent contractors.
148	(3) (a) Subsections (1) and (2) do not permit any person to solicit business in this state
149	on behalf of an insurer that has no certificate of authority.
150	(b) Any insurance placed with a nonadmitted insurer shall be placed with a surplus
151	lines producer licensed under Chapter 23a, Insurance Marketing - Licensing Producers,

152	Consultants, and Reinsurance Intermediaries.
153	(c) The commissioner may by rule prescribe how a surplus lines producer may:
154	(i) pay or permit the payment, commission, or other remuneration on insurance placed
155	by the surplus lines producer under authority of the surplus lines producer's license to one
156	holding a license to act as an insurance producer; and
157	(ii) advertise the availability of the surplus lines producer's services in procuring, on
158	behalf of persons seeking insurance, contracts with nonadmitted insurers.
159	(4) For contracts made under this section, nonadmitted insurers are subject to Sections
160	31A-23a-402 and 31A-23a-403 and the rules adopted under those sections.
161	(5) A nonadmitted insurer may not issue workers' compensation insurance coverage to
162	employers located in this state, except for stop loss coverages issued to employers securing
163	workers' compensation under Subsection $34A-2-201[(3)]$ (2).
164	(6) (a) The commissioner may by rule prohibit making contracts under Subsection (1)
165	for a specified class of insurance if authorized insurers provide an established market for the
166	class in this state that is adequate and reasonably competitive.
167	(b) The commissioner may by rule place restrictions and limitations on and create
168	special procedures for making contracts under Subsection (1) for a specified class of insurance
169	if <u>:</u>
170	(i) there have been abuses of placements in the class: or [if]
171	(ii) the policyholders in the class, because of limited financial resources, business
172	experience, or knowledge, cannot protect their own interests adequately.
173	(c) The commissioner may prohibit an individual insurer from making any contract
174	under Subsection (1) and all insurance producers from dealing with the insurer if:
175	(i) the insurer [has] willfully [violated] violates this section, Section 31A-4-102,
176	31A-23a-402, or 31A-26-303, or any rule adopted under any of these sections;
177	(ii) the insurer [has failed] fails to pay the fees and taxes specified under Section
178	31A-3-301; or
179	(iii) the commissioner has reason to believe that the insurer is in an unsound condition
180	or is operated in a fraudulent, dishonest, or incompetent manner or in violation of the law of its
181	domicile.
182	(d) (i) The commissioner may issue lists of unauthorized foreign insurers whose

183	solidity the commissioner doubts, or whose practices the commissioner considers
184	objectionable.
185	(ii) The commissioner shall issue lists of unauthorized foreign insurers the
186	commissioner considers to be reliable and solid.
187	(iii) In addition to the lists described in Subsections (6)(d)(i) and (ii), the commissioner
188	may issue other relevant evaluations of unauthorized insurers.
189	(iv) An action may not lie against the commissioner or any employee of the department
190	for any written or oral communication made in, or in connection with the issuance of, the lists
191	or evaluations described in this Subsection (6)(d).
192	(e) A foreign unauthorized insurer shall be listed on the commissioner's "reliable" list
193	only if the unauthorized insurer:
194	(i) [has delivered] delivers a request to the commissioner to be on the list;
195	(ii) [has established] establishes satisfactory evidence of good reputation and financial
196	integrity;
197	(iii) [has delivered] delivers to the commissioner a copy of [its] the foreign
198	unauthorized insurer's current annual statement certified by the foreign unauthorized insurer
199	and continues each subsequent year to file its annual statements with the commissioner within
200	60 days of its filing with the insurance regulatory authority where it is domiciled;
201	(iv) (A) (I) is in substantial compliance with the greater of:
202	(Aa) the solvency standards in Chapter 17, Part 6, Risk-Based Capital[;]; or [maintains]
203	(Bb) maintaining capital and surplus of at least \$15,000,000[, whichever is greater,];
204	and
205	(II) maintains in the United States an irrevocable trust fund in either a national bank or
206	a member of the Federal Reserve System, or maintains a deposit meeting the statutory deposit
207	requirements for insurers in the state where it is made, which trust fund or deposit:
208	[(f)] (Aa) shall be in an amount not less than \$2,500,000 for the protection of all of the
209	insurer's policyholders in the United States;
210	[(III)] (Bb) may consist of cash, securities, or investments of substantially the same
211	character and quality as those which are "qualified assets" under Section 31A-17-201; and
212	[(III)] (Cc) may include as part of the trust arrangement a letter of credit that qualifies
213	as acceptable security under Subsection 31A-17-404(3)(c)(iii); or

214	(B) in the case of any "Lloyd's" or other similar incorporated or unincorporated group
215	of alien individual insurers, maintains a trust fund that:
216	(I) shall be in an amount not less than \$50,000,000 as security to its full amount for all
217	policyholders and creditors in the United States of each member of the group;
218	(II) may consist of cash, securities, or investments of substantially the same character
219	and quality as those which are "qualified assets" under Section 31A-17-201; and
220	(III) may include as part of this trust arrangement a letter of credit that qualifies as
221	acceptable security under Subsection 31A-17-404(3)(c)(iii); and
222	(v) for an alien insurer not domiciled in the United States or a territory of the United
223	States, is listed on the Quarterly Listing of Alien Insurers maintained by the National
224	Association of Insurance Commissioners International Insurers Department.
225	(7) (a) [A] Unless the producer gives an applicant notice in writing of the known
226	deficiencies of one of the following insurers on the producer's investigation, and explains the
227	need to place the business with that insurer, a surplus lines producer may not, either knowingly
228	or without reasonable investigation of the financial condition and general reputation of the
229	insurer, place insurance under this section with:
230	(i) a financially unsound [insurers or with insurers] insurer;
231	(ii) an insurer engaging in unfair practices[,]; or [with]
232	(iii) an otherwise substandard [insurers, unless the producer gives the applicant notice
233	in writing of the known deficiencies of the insurer or the limitations on his investigation, and
234	explains the need to place the business with that insurer] insurer.
235	(b) A copy of [this] the notice required by Subsection (7)(a) shall be kept in the office
236	of the producer for at least five years.
237	(c) To be financially sound, an insurer shall satisfy standards that are comparable to
238	those applied under the laws of this state to authorized insurers. [Insurers]
239	(d) An insurer on the "doubtful or objectionable" list under Subsection (6)(d) and
240	[insurers] an insurer not on the commissioner's "reliable" list under Subsection (6)(e) are
241	presumed substandard.
242	(8) (a) A policy issued under this section shall:
243	(i) include a description of the subject of the insurance [and]:
244	(ii) indicate the coverage, conditions, and term of the insurance[;]:

245 (iii) indicate the premium charged and premium taxes to be collected from the 246 policyholder[,]; and

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(iv) state the name and address of the policyholder and insurer.

248 (b) If the direct risk is assumed by more than one insurer, the policy shall state the 249 names and addresses of all insurers and the portion of the entire direct risk each has assumed.

250 (c) All policies issued under the authority of this section shall have attached or affixed 251 to the policy the following statement: "The insurer issuing this policy does not hold a certificate 252 of authority to do business in this state and thus is not fully subject to regulation by the Utah 253 insurance commissioner. This policy receives no protection from any of the guaranty 254 associations created under Title 31A, Chapter 28, Guaranty Associations."

255 (9) Upon placing a new or renewal coverage under this section, the surplus lines 256 producer shall promptly deliver to the policyholder or [his] the policyholder's agent evidence of 257 the insurance consisting either of the policy as issued by the insurer or, if the policy is not then 258 available, a certificate, cover note, or other confirmation of insurance complying with 259 Subsection (8).

260 (10) If the commissioner finds it necessary to protect the interests of insureds and the 261 public in this state, the commissioner may by rule subject policies issued under this section to 262 as much of the regulation provided by this title as is required for comparable policies written by 263 authorized foreign insurers.

264 (11) (a) Each surplus lines transaction in this state shall be examined to determine 265 whether [it] the surplus lines transaction complies with:

266 (i) the surplus lines tax levied under Chapter 3, Administration of the Insurance Laws; 267 (ii) the solicitation limitations of Subsection (3);

268 (iii) the requirement of Subsection (3) that placement be through a surplus lines 269 producer;

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(iv) placement limitations imposed under Subsections (6)(a), (b), and (c); and

271 272 (v) the policy form requirements of Subsections (8) and (10).

(b) The examination described in Subsection (11)(a) shall take place as soon as 273 practicable after the transaction. The surplus lines producer shall submit to the examiner 274 information necessary to conduct the examination within a period specified by rule.

275 (c) (i) The examination described in Subsection (11)(a) may be conducted by the

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- commissioner or by an advisory organization created under Section 31A-15-111 and authorized
- 277 by the commissioner to conduct these examinations. The commissioner is not required to

authorize any additional advisory organizations to conduct examinations under this Subsection(11)(c).

(ii) The commissioner's authorization of one or more advisory organizations to act as
 examiners under this Subsection (11)(c) shall be:

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(A) by rule[. In addition, the authorization shall be]; and

(B) evidenced by a contract, on a form provided by the commissioner, between the
 authorized advisory organization and the department.

(d) (i) The person conducting the examination described in Subsection (11)(a) shall
collect a stamping fee of an amount not to exceed 1% of the policy premium payable in
connection with the transaction.

(ii) Stamping fees collected by the commissioner shall be deposited in the General
 Fund. The commissioner shall establish this <u>stamping</u> fee by rule. Stamping fees collected by
 an advisory organization are the property of the advisory organization to be used in paying the
 expenses of the advisory organization.

(iii) Liability for paying the stamping fee is as required under Subsection 31A-3-303(1)
for taxes imposed under Section 31A-3-301. The commissioner shall adopt a rule dealing with
the payment of stamping fees. If stamping fees are not paid when due, the commissioner or
advisory organization may impose a penalty of 25% of the fee due, plus 1-1/2% per month
from the time of default until full payment of the fee.

297 (iv) Fees relative to policies covering risks located partially in this state shall be
 298 allocated in the same manner as under Subsection 31A-3-303(4).

(e) The commissioner, representatives of the department, advisory organizations,
representatives and members of advisory organizations, authorized insurers, and surplus lines
insurers are not liable for damages on account of statements, comments, or recommendations
made in good faith in connection with their duties under this Subsection (11)(e) or under
Section 31A-15-111.

304 (f) Examinations conducted under this Subsection (11) and the documents and305 materials related to the examinations are confidential.

306 Section 4. Section **31A-19a-401** is amended to read:

307	31A-19a-401. Scope of part.
308	(1) This part applies to workers' compensation insurance and employers' liability
309	insurance written in connection with [it] workers' compensation insurance.
310	(2) All insurers writing workers' compensation coverage[, including the Workers'
311	Compensation Fund created under Chapter 33,] are subject to this part.
312	Section 5. Section 31A-21-101 is amended to read:
313	31A-21-101. Scope of Chapters 21 and 22.
314	(1) Except as provided in Subsections (2) through (6), this chapter and Chapter 22,
315	Contracts in Specific Lines, apply to all insurance policies, applications, and certificates:
316	(a) delivered or issued for delivery in this state;
317	(b) on property ordinarily located in this state;
318	(c) on persons residing in this state when the policy is issued; or
319	(d) on business operations in this state.
320	(2) This chapter and Chapter 22 do not apply to:
321	(a) an exemption provided in Section 31A-1-103;
322	(b) an insurance policy procured under Sections 31A-15-103 and 31A-15-104;
323	(c) an insurance policy on business operations in this state:
324	(i) if:
325	(A) the contract is negotiated primarily outside this state; and
326	(B) the operations in this state are incidental or subordinate to operations outside this
327	state; and
328	(ii) except that insurance required by a Utah statute must conform to the statutory
329	requirements; or
330	(d) other exemptions provided in this title.
331	(3) (a) Sections 31A-21-102, 31A-21-103, 31A-21-104, Subsections 31A-21-107 (1)
332	and (3), and Sections 31A-21-306, 31A-21-308, 31A-21-312, and 31A-21-314 apply to ocean
333	marine and inland marine insurance.
334	(b) Section 31A-21-201 applies to inland marine insurance that is written according to
335	manual rules or rating plans.
336	(4) A group or blanket policy is subject to this chapter and Chapter 22, except:
337	(a) a group or blanket policy outside the scope of this title under Subsection

338	31A-1-103(3)(h); and
339	(b) other exemptions provided under Subsection (5).
340	(5) The commissioner may by rule exempt any class of insurance contract or class of
341	insurer from any or all of the provisions of this chapter and Chapter 22 if the interests of the
342	Utah insureds, creditors, or the public would not be harmed by the exemption.
343	(6) Workers' compensation insurance[, including that written by the Workers'
344	Compensation Fund created under Chapter 33, Workers' Compensation Fund,] is subject to this
345	chapter and Chapter 22.
346	(7) Unless clearly inapplicable, any provision of this chapter or Chapter 22 applicable
347	to either a policy or a contract is applicable to both.
348	Section 6. Section 31A-22-309 is amended to read:
349	31A-22-309. Limitations, exclusions, and conditions to personal injury
350	protection.
351	(1) (a) A person who has or is required to have direct benefit coverage under a policy
352	which includes personal injury protection may not maintain a cause of action for general
353	damages arising out of personal injuries alleged to have been caused by an automobile
354	accident, except where the person has sustained one or more of the following:
355	(i) death;
356	(ii) dismemberment;
357	(iii) permanent disability or permanent impairment based upon objective findings;
358	(iv) permanent disfigurement; or
359	(v) medical expenses to a person in excess of \$3,000.
360	(b) Subsection (1)(a) does not apply to a person making an uninsured motorist claim.
361	(2) (a) Any insurer issuing personal injury protection coverage under this part may only
362	exclude from this coverage benefits:
363	(i) for any injury sustained by the insured while occupying another motor vehicle
364	owned by or furnished for the regular use of the insured or a resident family member of the
365	insured and not insured under the policy;
366	(ii) for any injury sustained by any person while operating the insured motor vehicle
367	without the express or implied consent of the insured or while not in lawful possession of the
368	insured motor vehicle;

369	(iii) to any injured person, if the person's conduct contributed to [his] that person's
370	injury:
371	(A) by intentionally causing injury to [himself] the person; or
372	(B) while committing a felony;
373	(iv) for any injury sustained by any person arising out of the use of any motor vehicle
374	while located for use as a residence or premises;
375	(v) for any injury due to war, whether or not declared, civil war, insurrection, rebellion
376	or revolution, or to any act or condition incident to any of the foregoing; or
377	(vi) for any injury resulting from the radioactive, toxic, explosive, or other hazardous
378	properties of nuclear materials.
379	(b) [The provisions of this Subsection do] This Subsection (2) does not limit the
380	exclusions which may be contained in other types of coverage.
381	(3) The benefits payable to any injured person under Section 31A-22-307 are reduced
382	by:
383	(a) any benefits which that person receives or is entitled to receive as a result of an
384	accident covered in this code under any workers' compensation or similar statutory plan; and
385	(b) any amounts which that person receives or is entitled to receive from the United
386	States or any of its agencies because that person is on active duty in the military service.
387	(4) When a person injured is also an insured party under any other policy, including
388	those policies complying with this part, primary coverage is given by the policy insuring the
389	motor vehicle in use during the accident.
390	(5) (a) Payment of the benefits provided for in Section 31A-22-307 shall be made on a
391	monthly basis as expenses are incurred.
392	(b) Benefits for any period are overdue if they are not paid within 30 days after the
393	insurer receives reasonable proof of the fact and amount of expenses incurred during the
394	period. If reasonable proof is not supplied as to the entire claim, the amount supported by
395	reasonable proof is overdue if not paid within 30 days after that proof is received by the
396	insurer. Any part or all of the remainder of the claim that is later supported by reasonable proof
397	is also overdue if not paid within 30 days after the proof is received by the insurer.
398	(c) If the insurer fails to pay the expenses when due, these expenses shall bear interest
399	at the rate of $1-1/2\%$ per month after the due date.

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400 (d) The person entitled to the benefits may bring an action in contract to recover the 401 expenses plus the applicable interest. If the insurer is required by the action to pay any overdue 402 benefits and interest, the insurer is also required to pay a reasonable [attorney's] attorney fee to 403 the claimant. 404 (6) Every policy providing personal injury protection coverage is subject to the 405 following: 406 (a) that where the insured under the policy is or would be held legally liable for the 407 personal injuries sustained by any person to whom benefits required under personal injury 408 protection have been paid by another insurer, [including the Workers' Compensation Fund 409 ereated under Chapter 33,] the insurer of the person who would be held legally liable shall 410 reimburse the other insurer for the payment, but not in excess of the amount of damages 411 recoverable; and 412 (b) that the issue of liability for that reimbursement and its amount shall be decided by 413 mandatory, binding arbitration between the insurers. 414 Section 7. Section 31A-26-103 is amended to read: 415 31A-26-103. Workers' compensation claims. 416 In addition to being subject to this and other chapters of this title, insurers writing 417 workers' compensation insurance in this state[, including the Workers' Compensation Fund 418 created under Chapter 33,] are subject to the Labor Commission with respect to claims for and 419 payment of compensation and benefits. 420 Section 8. Section 31A-35-103 is amended to read: 421 **31A-35-103.** Exemption from other sections of this title. 422 Bail bond surety companies are [exempted] exempt from: 423 (1) Title 31A, Chapter 3, Department Funding, Fees, and Taxes, except Section 424 31A-3-103; 425 (2) Title 31A, Chapter 4, Insurance in General, except Sections 31A-4-102, 31A-4-103, 426 31A-4-104, and 31A-4-107; 427 (3) Title 31A, Chapter 5, Domestic Stock and Mutual Insurance Corporations, except 428 Section 31A-5-103, and 429 (4) Title 31A, Chapters 6, 6a, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 24, 25, 430 26, 27, 28, 29, 30, 31, 32, [33, and] 34, and 40.

431	Section 9. Section 31A-40-101 is enacted to read:
432	CHAPTER 40. WORKERS' COMPENSATION INSURANCE REGULATION
433	Part 1. General Provisions
434	<u>31A-40-101.</u> Title.
435	This chapter is known as "Workers' Compensation Insurance Regulation."
436	Section 10. Section 31A-40-102 is enacted to read:
437	<u>31A-40-102.</u> Definitions.
438	As used in this chapter:
439	(1) Notwithstanding Section 31A-1-301, "employer" is as defined in Section
440	<u>34A-2-103.</u>
441	(2) "Plan" means the Utah Workers' Compensation Assigned Risk Plan created by rule
442	in accordance with Section 31A-40-202.
443	(3) "Plan administrator" is the organization selected under Subsection 31A-40-202(4).
444	(4) "Plan reserve" means the Workers' Compensation Assigned Risk Plan Reserve
445	created in Section 31A-40-204.
446	(5) "Policy servicing and claims administration support" shall be defined by the
447	commissioner by rule made in accordance with Title 63, Chapter 46a, Utah Administrative
448	Rulemaking Act.
449	(6) "Residual market employer" means an employer who:
450	(a) is required to obtain workers' compensation coverage under Title 34A, Chapters 2
451	and 3; and
452	(b) can verify in writing in accordance with the plan that the employer is unable, except
453	under the plan, to obtain workers' compensation insurance from at least two workers'
454	compensation insurers.
455	(7) "Servicing carrier" means a workers' compensation insurer selected as a servicing
456	carrier in accordance with Subsection 31A-40-202(5).
457	(8) "Transition date" means the date determined in accordance with Section
458	<u>31A-40-307.</u>
459	(9) "Workers' compensation insurer" means an insurer licensed to write workers'
460	compensation insurance in this state.
461	Section 11. Section 31A-40-201 is enacted to read:

462	Part 2. Workers' Compensation Assigned Risk Plan Act
463	<u>31A-40-201.</u> Title.
464	This part is known as the "Workers' Compensation Assigned Risk Plan Act."
465	Section 12. Section 31A-40-202 is enacted to read:
466	31A-40-202. Utah Workers' Compensation Assigned Risk Plan creation.
467	(1) (a) In accordance with Title 63, Chapter 46a, Utah Administrative Rulemaking Act,
468	the commissioner shall by rule create an assigned risk plan known as the "Utah Workers'
469	Compensation Assigned Risk Plan":
470	(i) to provide workers' compensation insurance for a residual market employer who:
471	(A) applies for workers' compensation insurance under the plan; and
472	(B) qualifies for workers' compensation insurance under the plan; and
473	(ii) that takes effect on the transition date.
474	(b) The plan is not an agency or division of the department.
475	(2) The plan shall provide for the equitable apportionment among the workers'
476	compensation insurers of the workers' compensation insurance provided in accordance with
477	Subsection (1).
478	(3) A workers' compensation insurer shall participate in the plan.
479	(4) In accordance with Title 63, Chapter 56, Utah Procurement Code, the
480	commissioner shall select a person to be the plan administrator who:
481	(a) is authorized to provide actuarial and administrative support for the plan; and
482	(b) shall be a nationally recognized rating and administrative organization.
483	(5) (a) The commissioner shall establish eligibility criteria for a workers' compensation
484	insurer to qualify as a servicing carrier to provide policy servicing and claims administration
485	support under the plan including requiring that a servicing carrier be:
486	(i) licensed and actively writing workers' compensation insurance in the state; and
487	(ii) in good standing in its participation in the plan.
488	(b) The plan administrator shall solicit bids from workers' compensation insurers to act
489	as a servicing carrier.
490	(c) After the bid process under Subsection (5)(b), the commissioner shall select one or
491	more workers' compensation insurers to be servicing carriers.
492	(d) A servicing carrier shall begin servicing its workers' compensation insurance

493	obligations under the plan as of the transfer date.
494	(6) The commissioner may adopt a premium adjustment plan for any risk insured
495	through the plan that:
496	(a) has frequency or severity problems; or
497	(b) has any exposure that is greater than average for the class.
498	Section 13. Section 31A-40-203 is enacted to read:
499	<u>31A-40-203.</u> Rates.
500	(1) (a) A servicing carrier shall submit rates for the plan to the commissioner for
501	approval by no later than 30 days before the transition date.
502	(b) After initial rates are approved by the commissioner, new or modified rates may be
503	submitted to the commissioner for the commissioner's approval.
504	(c) The commissioner may approve a retrospective rating plan for any risk insured
505	under the plan.
506	(2) (a) A rate may not be used under the plan unless approved by the commissioner.
507	(b) An approved rate may not take effect less than 30 days after the day on which the
508	commissioner approves the rate.
509	(c) A rate filing is considered approved if the commissioner fails to make a
510	determination within 30 days after the day on which a rate filing is made.
511	(3) A rate approved by the commissioner shall reflect:
512	(a) loss experience for residual market employers; and
513	(b) expenses and cost of capital needed to support the provision of workers'
514	compensation insurance under the plan to the extent that it is actuarially appropriate so that the
515	plan is self-supporting.
516	(4) In accordance with Chapter 19a, Part 2, General Rate Regulation, the commissioner
517	<u>may:</u>
518	(a) approve a rate filing that meets the requirements of Section 31A-19a-201;
519	(b) approve an assessment submitted by the plan administrator on workers'
520	compensation insurance offered under the plan; or
521	(c) disapprove a rate filing in accordance with Section 31A-19a-206.
522	(5) Notwithstanding any other provisions of this part, a rating organization may make
523	rate filings under this section.

524	Section 14. Section 31A-40-204 is enacted to read:
525	31A-40-204. Workers' Compensation Assigned Risk Plan Reserve.
526	(1) (a) There is created the "Workers' Compensation Assigned Risk Plan Reserve" to
527	assist in maintaining the financial stability of the plan.
528	(b) The plan reserve shall consist of:
529	(i) assets deposited in accordance with Section 31A-40-308;
530	(ii) assets deposited in accordance with Subsection (4); and
531	(iii) interest and earnings on the plan reserve.
532	(2) The commissioner shall act as trustee of the plan reserve, except that the state
533	treasurer shall:
534	(a) invest the plan reserve by following the procedures and requirements of Title 51,
535	Chapter 7, State Money Management Act; and
536	(b) deposit all interest or other earnings derived from the plan reserve into the plan
537	reserve.
538	(3) The assets of the plan reserve are for the exclusive benefit of the plan and may not
539	be diverted or appropriated for any purpose other than as provided in Section 31A-40-205.
540	(4) If the successor mutual insurance company, as defined in Section 31A-40-302,
541	ceases to write workers' compensation insurance in this state, within 30 days from the day on
542	which the successor mutual insurance company no longer writes a policy of workers'
543	compensation insurance in this state, the successor mutual company shall transfer to the plan
544	reserve all assets held in trust for the purpose of providing workers' compensation in Utah for
545	injuries and diseases including all administrative expenses.
546	Section 15. Section 31A-40-205 is enacted to read:
547	<u>31A-40-205.</u> Deficits.
548	(1) The commissioner shall determine whether or not there is a deficit for the plan in a
549	fiscal year within 24 months of the end of the fiscal year.
550	(2) A deficit in the plan in any single fiscal year shall be eliminated, by the
551	commissioner at the commissioner's discretion:
552	(a) directing the Division of Finance to transfer monies from the accumulated interest
553	and earnings from the plan reserve;
554	(b) imposing an assessment on workers' compensation insurance offered under the

555	plan, which may include an assessment that constitutes a separate charge on a policy issued
556	under the plan; or
557	(c) doing a combination of Subsections (2)(a) and (b).
558	Section 16. Section 31A-40-301 is enacted to read:
559	Part 3. Privatization of the Workers' Compensation Fund Act
560	<u>31A-40-301.</u> Title.
561	This part is known as the "Privatization of the Workers' Compensation Fund Act."
562	Section 17. Section 31A-40-302 is enacted to read:
563	<u>31A-40-302.</u> Definitions.
564	As used in this part:
565	(1) "Assets" means property of all kinds, real and personal, tangible and intangible, and
566	includes:
567	<u>(a) cash;</u>
568	(b) stock or other investments;
569	(c) goodwill;
570	(d) real property;
571	(e) an ownership interest;
572	(f) a license;
573	(g) a cause of action; and
574	(h) any similar property.
575	(2) "Injury Fund" means the Injury Fund as defined in Section 31A-33-101.
576	(3) "Subsidiary of the Workers' Compensation Fund" means:
577	(a) a subsidiary of the Workers' Compensation Fund;
578	(b) an entity controlled by the Workers' Compensation Fund; or
579	(c) a joint enterprise controlled by the Workers' Compensation Fund.
580	(4) "Successor mutual insurance company" means the mutual insurance company
581	granted the certificate of authority or license under Section 31A-40-306.
582	(5) "Workers' Compensation Fund" means the nonprofit, quasi-public corporation
583	established by Chapter 33, Workers' Compensation Fund.
584	Section 18. Section 31A-40-303 is enacted to read:
585	31A-40-303. Relationship to Independent Entities Code.

586	This part supersedes Title 63E, Independent Entities Code, as to requirements for:
587	(1) the privatization of the Workers' Compensation Fund; and
588	(2) the transfer of the Injury Fund.
589	Section 19. Section 31A-40-304 is enacted to read:
590	31A-40-304. Financial audits and actuarial studies.
591	(1) (a) On or before September 1, 2007, the commissioner shall contract with a
592	nationally recognized accounting firm and a nationally recognized actuarial consulting firm to
593	<u>conduct:</u>
594	(i) one or more financial audits of the Workers' Compensation Fund and all
595	subsidiaries of the Workers' Compensation Fund; and
596	(ii) one or more actuarial studies of the adequacy of the reserve of the Workers'
597	Compensation Fund and of all the subsidiaries of the Workers' Compensation Fund.
598	(b) At a minimum, the audits and studies required by this section shall provide the
599	information required by Sections 31A-40-308 and 31A-40-309.
600	(2) The cost of any audit or study conducted under this section shall be paid by the
601	Workers' Compensation Fund from the Injury Fund.
602	(3) (a) After the completion of the audits and studies conducted under this section, the
603	commissioner shall make a report to the governor.
604	(b) The commissioner's report shall include:
605	(i) a discussion of the findings of the audits and studies; and
606	(ii) a statement as to whether the assets of the Workers' Compensation Fund and the
607	monies from the Injury Fund that are to be transferred to the successor mutual insurance
608	company in accordance with Sections 31A-40-307 and 31A-40-310 are adequate to:
609	(A) permit the payment of all liabilities under policies of insurance assumed by the
610	successor mutual insurance company as determined on the basis of sound actuarial principles;
611	and
612	(B) cover all outstanding indebtedness or other liabilities of the Workers'
613	Compensation Fund.
614	Section 20. Section 31A-40-305 is enacted to read:
615	<u>31A-40-305.</u> Internal Revenue Service ruling.
616	The Workers' Compensation Fund shall obtain a private letter ruling from the United

617	States Internal Revenue Service indicating that neither the state nor the successor mutual
618	insurance company will have any tax liability as the result of the privatization of the Workers'
619	Compensation Fund in accordance with this part.
620	Section 21. Section 31A-40-306 is enacted to read:
621	<u>31A-40-306.</u> Creation of a successor mutual insurance company.
622	(1) In accordance with Chapter 5, Domestic Stock and Mutual Insurance Corporations,
623	the board of directors of the Workers' Compensation Fund shall:
624	(a) on or before September 30, 2008, submit a mutualization plan to the commissioner;
625	and
626	(b) after submitting a mutualization plan as required by Subsection (1)(a), organize a
627	mutual insurance company to:
628	(i) write workers' compensation insurance, including workers' compensation insurance
629	in this state; and
630	(ii) be the successor organization to the Workers' Compensation Fund.
631	(2) (a) The successor mutual insurance company organized under this section shall
632	apply for a certificate of authority or license under this title to write workers' compensation
633	insurance in this state.
634	(b) If the commissioner determines that the successor mutual insurance company meets
635	the requirements of this title to obtain the certificate of authority or license described in
636	Subsection (2)(a), the commissioner shall grant the successor mutual insurance company the
637	certificate of authority or license.
638	(3) The certificate of authority of the Workers' Compensation Fund expires on the
639	transition date.
640	Section 22. Section 31A-40-307 is enacted to read:
641	<u>31A-40-307.</u> Transition date.
642	(1) (a) The Legislature may enact during the 2008 Annual General Session a process to
643	determine a transition date as provided in this section.
644	(b) The transition date process may provide for:
645	(i) a certification by the governor that the requirements of this part have been complied
646	with by all persons required to take an action under this part and Section 31A-40-202
647	including:

648	(A) the commissioner;
649	(B) the Workers' Compensation Fund; and
650	(C) the successor mutual insurance company;
651	(ii) a period of time after the certification of not less than 30 days to prepare for the
652	implementation of the transition; and
653	(iii) a process by which the governor provides a copy of the governor's certification to:
654	(A) the speaker of the House of Representatives;
655	(B) the president of the Senate;
656	(C) the commissioner;
657	(D) the Workers' Compensation Fund;
658	(E) the successor mutual insurance company; and
659	(F) the Office of Legislative Research and General Counsel; and
660	(iv) a deadline by which the persons take the actions required by this part and Section
661	<u>31A-40-202.</u>
662	(2) On the transition date:
663	(a) the Workers' Compensation Fund shall transfer the assets of the Injury Fund to the
664	successor mutual insurance company in accordance with Section 31A-40-310;
665	(b) the Workers' Compensation Fund shall transfer the assets of the Workers'
666	Compensation Fund to the successor mutual insurance company;
667	(c) the successor mutual insurance company shall assume all debts and liabilities of the
668	Workers' Compensation Fund;
669	(d) the Workers' Compensation Fund is dissolved and shall file any necessary
670	dissolution documents with the Division of Corporations and Commercial Code; and
671	(e) the plan shall take effect including the plan administrator and any servicing carrier
672	assuming their obligations under the plan.
673	Section 23. Section 31A-40-308 is enacted to read:
674	<u>31A-40-308.</u> Transfer of assets to plan reserve.
675	(1) As part of an actuarial study required by Section 31A-40-304, the Workers'
676	Compensation Fund shall identify all policies that are risks associated with residual market
677	employers that may be required to seek workers' compensation insurance from the plan.
678	(2) The nationally recognized actuarial consulting firm performing the actuarial study

679	described in Subsection (1) shall determine the percentage of the annual premium volume
680	currently paid by policyholders to the Workers' Compensation Fund that is represented by the
681	risks identified under Subsection (1).
682	(3) Based on the determination under Subsection (2), the successor mutual insurance
683	company shall deposit into the plan reserve no later than two years after the transition date
684	assets that are equal in value to a proportional share of the Workers' Compensation Fund's
685	assets for any policy of record with the Workers' Compensation Fund on the transition date
686	that:
687	(a) is nonrenewed due to risk characteristics; and
688	(b) becomes a risk related to a residual market employer in the 24 months following
689	the transition date.
690	Section 24. Section 31A-40-309 is enacted to read:
691	<u>31A-40-309.</u> Return of excess surplus.
692	(1) If an audit or study conducted under Section 31A-40-304 finds that the premium to
693	surplus ratio of the Workers' Compensation Fund is 2 to 1 or less, the commissioner may order
694	the successor mutual insurance company to issue an extraordinary dividend to policyholders of
695	record of the Workers' Compensation Fund on January 1, 2008.
696	(2) The successor mutual insurance company shall issue a dividend required by the
697	commissioner under this section within 30 days of the transition date.
698	Section 25. Section 31A-40-310 is enacted to read:
699	<u>31A-40-310.</u> Assumption of liabilities and transfer of assets by the successor
700	mutual insurance company.
701	As of the transition date, the successor mutual insurance company shall:
702	(1) assume all debts and liabilities of the Workers' Compensation Fund; and
703	(2) subject to Subsection 31A-40-204(4), hold in an irrevocable trust the Injury Fund
704	assets for the purpose of providing workers' compensation in Utah for injuries and diseases
705	including all administrative expenses.
706	Section 26. Section 34A-2-102 is amended to read:
707	34A-2-102. Definition of terms.
708	As used in this chapter:
709	(1) "Average weekly wages" means the average weekly wages as determined under

710	Section 34A-2-409.
711	(2) "Award" means a final order of the commission as to the amount of compensation
712	due:
713	(a) any injured employee; or
714	(b) the dependents of any deceased employee.
715	(3) "Compensation" means the payments and benefits provided for in this chapter or
716	Chapter 3, Utah Occupational Disease Act.
717	(4) (a) "Decision" means the ruling of:
718	(i) an administrative law judge; or[,]
719	(ii) in accordance with Section 34A-2-801, the commissioner or Appeals Board; and
720	(b) may include:
721	[(a)] (i) an award or denial of medical, disability, death, or other related benefits under
722	this chapter or Chapter 3, Utah Occupational Disease Act; or
723	[(b)] (ii) another adjudicative ruling in accordance with this chapter or Chapter 3, Utah
724	Occupational Disease Act.
725	(5) "Director" means the director of the division, unless the context requires otherwise.
726	(6) "Disability" means an administrative determination that may result in an
727	entitlement to compensation as a consequence of becoming medically impaired as to function.
728	Disability can be total or partial, temporary or permanent, industrial or nonindustrial.
729	(7) "Division" means the Division of Industrial Accidents.
730	(8) "Impairment" is a purely medical condition reflecting any anatomical or functional
731	abnormality or loss. Impairment may be either temporary or permanent, industrial or
732	nonindustrial.
733	(9) "Order" means an action of the commission that determines the legal rights, duties,
734	privileges, immunities, or other interests of one or more specific persons, but not a class of
735	persons.
736	(10) (a) "Personal injury by accident arising out of and in the course of employment"
737	includes any injury caused by the willful act of a third person directed against an employee
738	because of the employee's employment.
739	(b) "Personal injury by accident arising out of and in the course of employment" does
740	not include a disease, except as the disease results from the injury.

741	(11) "Safe" and "safety," as applied to any employment or place of employment, means
742	the freedom from danger to the life or health of employees reasonably permitted by the nature
743	of the employment.
744	[(12) "Workers' Compensation Fund" means the nonprofit, quasi-public corporation
745	created in Title 31A, Chapter 33, Workers' Compensation Fund.]
746	Section 27. Section 34A-2-103 is amended to read:
747	34A-2-103. Employers enumerated and defined Regularly employed
748	Statutory employers.
749	(1) (a) The state, and each county, city, town, and school district in the state are
750	considered employers under this chapter and Chapter 3, Utah Occupational Disease Act.
751	(b) For the purposes of the exclusive remedy in this chapter and Chapter 3, Utah
752	Occupational Disease Act, prescribed in Sections 34A-2-105 and 34A-3-102, the state is
753	considered to be a single employer and includes any office, department, agency, authority,
754	commission, board, institution, hospital, college, university, or other instrumentality of the
755	state.
756	(2) (a) Except as provided in Subsection (4), each person, including each public utility
757	and each independent contractor, who regularly employs one or more workers or operatives in
758	the same business, or in or about the same establishment, under any contract of hire, express or
759	implied, oral or written, is considered an employer under this chapter and Chapter 3, Utah
760	Occupational Disease Act.
761	(b) As used in this Subsection (2):
762	(i) "Independent contractor" means any person engaged in the performance of any work
763	for another who, while so engaged, is:
764	(A) independent of the employer in all that pertains to the execution of the work;
765	(B) not subject to the routine rule or control of the employer;
766	(C) engaged only in the performance of a definite job or piece of work; and
767	(D) subordinate to the employer only in effecting a result in accordance with the
768	employer's design.
769	(ii) "Regularly" includes all employments in the usual course of the trade, business,
770	profession, or occupation of the employer, whether continuous throughout the year or for only a
771	portion of the year.

772	(3) (a) The client company in an employee leasing arrangement under Title 58, Chapter
773	59, Professional Employer Organization Registration Act, is considered the employer of leased
774	employees and shall secure workers' compensation benefits for them by complying with
775	Subsection $34A-2-201(1)$ [or (2)] and commission rules.
776	(b) An insurance carrier may underwrite workers' compensation secured in accordance
777	with Subsection (3)(a) showing the leasing company as the named insured and each client
778	company as an additional insured by means of individual endorsements.
779	(c) Endorsements shall be filed with the division as directed by commission rule.
780	(d) The division shall promptly inform the Division of Occupation and Professional
781	Licensing within the Department of Commerce if the division has reason to believe that [an
782	employee leasing company] a professional employer organization is not in compliance with
782 783	Subsection $34A-2-201(1)$ [or (2)] and commission rules.
784	(4) A domestic employer who does not employ one employee or more than one
785	employee at least 40 hours per week is not considered an employer under this chapter and
786	Chapter 3, Utah Occupational Disease Act.
787	(5) (a) As used in this Subsection (5):
788	(i) (A) "agricultural employer" means a person who employs agricultural labor as
789	defined in Subsections 35A-4-206(1) and (2) and does not include employment as provided in
790	Subsection 35A-4-206(3); and
791	(B) notwithstanding Subsection (5)(a)(i)(A), only for purposes of determining who is a
792	member of the employer's immediate family under Subsection (5)(a)(ii), if the agricultural
793	employer is a corporation, partnership, or other business entity, "agricultural employer" means
794	an officer, director, or partner of the business entity;
795	(ii) "employer's immediate family" means:
796	(A) an agricultural employer's:
797	(I) spouse;
798	(II) grandparent;
799	(III) parent;
800	(IV) sibling;
801	(V) child;
802	(VI) grandchild;
	-

803	(VII) nephew; or
804	(VIII) niece;
805	(B) a spouse of any person provided in Subsection (5)(a)(ii)(A)(II) through (VIII); or
806	(C) an individual who is similar to those listed in Subsections (5)(a)(ii)(A) or (B) as
807	defined by rules of the commission; and
808	(iii) "nonimmediate family" means a person who is not a member of the employer's
809	immediate family.
810	(b) For purposes of this chapter and Chapter 3, Utah Occupational Disease Act, an
811	agricultural employer is not considered an employer of a member of the employer's immediate
812	family.
813	(c) For purposes of this chapter and Chapter 3, Utah Occupational Disease Act, an
814	agricultural employer is not considered an employer of a nonimmediate family employee if:
815	(i) for the previous calendar year the agricultural employer's total annual payroll for all
816	nonimmediate family employees was less than \$8,000; or
817	(ii) (A) for the previous calendar year the agricultural employer's total annual payroll
818	for all nonimmediate family employees was equal to or greater than \$8,000 but less than
819	\$50,000; and
820	(B) the agricultural employer maintains insurance that covers job-related injuries of the
821	employer's nonimmediate family employees in at least the following amounts:
822	(I) \$300,000 liability insurance, as defined in Section 31A-1-301; and
823	(II) \$5,000 for health care benefits similar to benefits under health care insurance as
824	defined in Section 31A-1-301.
825	(d) For purposes of this chapter and Chapter 3, Utah Occupational Disease Act, an
826	agricultural employer is considered an employer of a nonimmediate family employee if:
827	(i) for the previous calendar year the agricultural employer's total annual payroll for all
828	nonimmediate family employees is equal to or greater than \$50,000; or
829	(ii) (A) for the previous year the agricultural employer's total payroll for nonimmediate
830	family employees was equal to or exceeds \$8,000 but is less than \$50,000; and
831	(B) the agricultural employer fails to maintain the insurance required under Subsection
832	(5)(c)(ii)(B).
833	(6) An employer of agricultural laborers or domestic servants who is not considered an

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employer under this chapter and Chapter 3, Utah Occupational Disease Act, may come under
this chapter and Chapter 3, Utah Occupational Disease Act, by complying with:

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(a) this chapter and Chapter 3, Utah Occupational Disease Act; and

(b) the rules of the commission.

(7) (a) If any person who is an employer procures any work to be done wholly or in
part for the employer by a contractor over whose work the employer retains supervision or
control, and this work is a part or process in the trade or business of the employer, the
contractor, all persons employed by the contractor, all subcontractors under the contractor, and
all persons employed by any of these subcontractors, are considered employees of the original
employer for the purposes of this chapter and Chapter 3, Utah Occupational Disease Act.

(b) Any person who is engaged in constructing, improving, repairing, or remodelling a
residence that the person owns or is in the process of acquiring as the person's personal
residence may not be considered an employee or employer solely by operation of Subsection
(7)(a).

(c) A partner in a partnership or an owner of a sole proprietorship is not considered an
employee under Subsection (7)(a) if the employer who procures work to be done by the
partnership or sole proprietorship obtains and relies on either:

(i) a valid certification of the partnership's or sole proprietorship's compliance with
Section 34A-2-201 indicating that the partnership or sole proprietorship secured the payment of
workers' compensation benefits pursuant to Section 34A-2-201; or

(ii) if a partnership or sole proprietorship with no employees other than a partner of the
partnership or owner of the sole proprietorship, a workers' compensation policy issued by an
insurer pursuant to Subsection 31A-21-104(8) stating that:

(A) the partnership or sole proprietorship is customarily engaged in an independentlyestablished trade, occupation, profession, or business; and

(B) the partner or owner personally waives the partner's or owner's entitlement to the
benefits of this chapter and Chapter 3, Utah Occupational Disease Act, in the operation of the
partnership or sole proprietorship.

862 (d) A director or officer of a corporation is not considered an employee under
863 Subsection (7)(a) if the director or officer is excluded from coverage under Subsection
864 34A-2-104(4).

865	(e) A contractor or subcontractor is not an employee of the employer under Subsection
866	(7)(a), if the employer who procures work to be done by the contractor or subcontractor obtains
867	and relies on either:
868	(i) a valid certification of the contractor's or subcontractor's compliance with Section
869	34A-2-201; or
870	(ii) if a partnership, corporation, or sole proprietorship with no employees other than a
871	partner of the partnership, officer of the corporation, or owner of the sole proprietorship, a
872	workers' compensation policy issued by an insurer pursuant to Subsection 31A-21-104(8)
873	stating that:
874	(A) the partnership, corporation, or sole proprietorship is customarily engaged in an
875	independently established trade, occupation, profession, or business; and
876	(B) the partner, corporate officer, or owner personally waives the partner's, corporate
877	officer's, or owner's entitlement to the benefits of this chapter and Chapter 3, Utah
878	Occupational Disease Act, in the operation of the partnership's, corporation's, or sole
879	proprietorship's enterprise under a contract of hire for services.
880	(f) (i) For purposes of this Subsection (7)(f), "eligible employer" means a person who:
881	(A) is an employer; and
882	(B) procures work to be done wholly or in part for the employer by a contractor,
883	including:
884	(I) all persons employed by the contractor;
885	(II) all subcontractors under the contractor; and
886	(III) all persons employed by any of these subcontractors.
887	(ii) Notwithstanding the other provisions in this Subsection (7), if the conditions of
888	Subsection (7)(f)(iii) are met, an eligible employer is considered an employer for purposes of
889	Section 34A-2-105 of the contractor, subcontractor, and all persons employed by the contractor
890	or subcontractor described in Subsection (7)(f)(i)(B).
891	(iii) Subsection (7)(f)(ii) applies if the eligible employer:
892	(A) under Subsection (7)(a) is liable for and pays workers' compensation benefits as an
893	original employer under Subsection (7)(a) because the contractor or subcontractor fails to
894	comply with Section 34A-2-201;
895	(B) (I) secures the payment of workers' compensation benefits for the contractor or

896	subcontractor pursuant to Section 34A-2-201;
897	(II) procures work to be done that is part or process of the trade or business of the
898	eligible employer; and
899	(III) does the following with regard to a written workplace accident and injury
900	reduction program that meets the requirements of Subsection 34A-2-111(3)(d):
901	(Aa) adopts the workplace accident and injury reduction program;
902	(Bb) posts the workplace accident and injury reduction program at the work site at
903	which the eligible employer procures work; and
904	(Cc) enforces the workplace accident and injury reduction program according to the
905	terms of the workplace accident and injury reduction program; or
906	(C) (I) obtains and relies on:
907	(Aa) a valid certification described in Subsection (7)(c)(i) or (7)(e)(i);
908	(Bb) a workers' compensation policy described in Subsection (7)(c)(ii) or (7)(e)(ii); or
909	(Cc) proof that a director or officer is excluded from coverage under Subsection
910	34A-2-104(4);
911	(II) is liable under Subsection (7)(a) for the payment of workers' compensation benefits
912	if the contractor or subcontractor fails to comply with Section 34A-2-201;
913	(III) procures work to be done that is part or process in the trade or business of the
914	eligible employer; and
915	(IV) does the following with regard to a written workplace accident and injury
916	reduction program that meets the requirements of Subsection 34A-2-111(3)(d):
917	(Aa) adopts the workplace accident and injury reduction program;
918	(Bb) posts the workplace accident and injury reduction program at the work site at
919	which the eligible employer procures work; and
920	(Cc) enforces the workplace accident and injury reduction program according to the
921	terms of the workplace accident and injury reduction program.
922	Section 28. Section 34A-2-107 is amended to read:
923	34A-2-107. Workers' compensation advisory council.
924	(1) The commissioner shall appoint a workers' compensation advisory council
925	composed of:
926	(a) the following voting members:

927	(i) five employer representatives; and
928	(ii) five employee representatives; and
929	(b) the following nonvoting members:
930	[(i) a representative of the Workers' Compensation Fund;]
931	$[\frac{(ii)}{(ii)}]$ a representative of $[\frac{1}{a}]$ two private insurance $[\frac{carrier}{carrier}]$
932	[(iii)] (ii) a representative of health care providers;
933	[(iv)] (iii) the Utah insurance commissioner or the insurance commissioner's designee;
934	and
935	[(v)] (iv) the commissioner or the commissioner's designee.
936	(2) Employers and employees shall consider nominating members of groups who
937	historically may have been excluded from the council, such as women, minorities, and
938	individuals with disabilities.
939	(3) (a) Except as required by Subsection (3)(b), as terms of current council members
940	expire, the commissioner shall appoint each new member or reappointed member to a two-year
941	term beginning July 1 and ending June 30.
942	(b) Notwithstanding the requirements of Subsection (3)(a), the commissioner shall, at
943	the time of appointment or reappointment, adjust the length of terms to ensure that the terms of
944	council members are staggered so that approximately half of the council is appointed every two
945	years.
946	(4) (a) When a vacancy occurs in the membership for any reason, the replacement shall
947	be appointed for the unexpired term.
948	(b) The commissioner shall terminate the term of any council member who ceases to be
949	representative as designated by the member's original appointment.
950	(5) The council shall confer at least quarterly for the purpose of advising the
951	commission, the division, and the Legislature on:
952	(a) the Utah workers' compensation and occupational disease laws;
953	(b) the administration of the laws described in Subsection (5)(a); and
954	(c) rules related to the laws described in Subsection (5)(a).
955	(6) Regarding workers' compensation, rehabilitation, and reemployment of employees
956	who are disabled because of an industrial injury or occupational disease the council shall:
957	(a) offer advice on issues requested by:

958	(i) the commission;
959	(ii) the division; and
960	(iii) the Legislature; and
961	(b) make recommendations to:
962	(i) the commission; and
963	(ii) the division.
964	(7) The commissioner or the commissioner's designee shall serve as the chair of the
965	council and call the necessary meetings.
966	(8) The commission shall provide staff support to the council.
967	(9) (a) (i) [Members who are not government employees] A member of the council
968	who is not a government employee may not receive compensation or benefits for [their] the
969	member's services, but may receive per diem and expenses incurred in the performance of the
970	member's official duties at the rates established by the Division of Finance under Sections
971	63A-3-106 and 63A-3-107.
972	(ii) [Members] A member of the council who is not a government employee may
973	decline to receive per diem and expenses for [their] the member's service.
974	(b) (i) [State] A state government officer [and] or employee [members] member who
975	[do] does not receive salary, per diem, or expenses from [their] the state government officer's
976	or employee's agency for [their] the member's service may receive per diem and expenses
977	incurred in the performance of [their] the member's official duties from the council at the rates
978	established by the Division of Finance under Sections 63A-3-106 and 63A-3-107.
979	(ii) [State] A state government officer [and] or employee [members] member may
980	decline to receive per diem and expenses for [their] the member's service.
981	Section 29. Section 34A-2-201 is amended to read:
982	34A-2-201. Employers to secure workers' compensation benefits for employees.
983	An employer shall secure the payment of workers' compensation benefits for its
984	employees by:
985	[(1) insuring, and keeping insured, the payment of this compensation with the Workers'
986	Compensation Fund;]
987	$\left[\frac{(2)}{(1)}\right]$ insuring, and keeping insured, the payment of this compensation with any
988	[stock corporation or mutual association] insurer authorized to transact the business of workers'

989	compensation insurance in this state; or
990	[(3)] (2) obtaining approval from the division in accordance with Section 34A-2-201.5
991	to pay direct compensation as a self-insured employer in the amount, in the manner, and when
992	due as provided for in this chapter or Chapter 3, Utah Occupational Disease Act.
993	Section 30. Section 34A-2-203 is amended to read:
994	34A-2-203. Payment of premiums for workers' compensation.
995	[(1) Until June 30, 2007, a department, commission, board, or other agency of the state
996	shall pay the insurance premium on its employees direct to the Workers' Compensation Fund.]
997	[(2)] (1) Beginning July 1, 2007, the state shall secure the payment of workers'
998	compensation benefits for its employees:
999	(a) by:
1000	[(i) insuring, and keeping insured, the payment of this compensation with the Workers'
1001	Compensation Fund;]
1002	[(ii)] (i) insuring, and keeping insured, the payment of this compensation with [any
1003	stock corporation or mutual association] an insurer authorized to transact the business of
1004	workers' compensation insurance in this state; or
1005	[(iii)] (ii) paying direct compensation as a self-insured employer in the amount, in the
1006	manner, and when due as provided for in this chapter or Chapter 3, Utah Occupational Disease
1007	Act;
1008	(b) in accordance with Title 63A, Chapter 4, Risk Management; and
1009	(c) subject to Subsection $\left[\frac{(3)}{2}\right]$.
1010	[(3)] (2) (a) If the state determines to secure the payment of workers' compensation
1011	benefits for its employees by paying direct compensation as a self-insured employer in the
1012	amount, in the manner, and due as provided for in this chapter or Chapter 3, Utah Occupational
1013	Disease Act, the state is:
1014	(i) exempt from Section 34A-2-202.5 and Subsection 34A-2-704(14); and
1015	(ii) required to pay a premium assessment as provided in Section 34A-2-202.
1016	(b) If the state chooses to pay workers' compensation benefits for its employees
1017	through insuring under Subsection $\left[\frac{(2)(a)(i)}{(2)(a)(i)}, \frac{(1)(a)(i)}{(2)(a)(i)}\right]$ the state shall obtain that
1018	insurance in accordance with Title 63, Chapter 56, Utah Procurement Code.
1019	Section 31. Section 34A-2-209 is amended to read:

102034A-2-209. Employer's penalty for violation -- Notice of noncompliance -- Proof1021required -- Admissible evidence -- Criminal prosecution.

- (1) (a) (i) Any employer who fails to comply, and every officer of a corporation or
 association that fails to comply, with Section 34A-2-201 is guilty of a class B misdemeanor.
- 1024

(ii) Each day's failure to comply with Subsection (1)(a)(i) is a separate offense.

(b) All funds, fines, or penalties collected or assessed under Subsection (1)(a) shall be
deposited in the Uninsured Employers' Fund created by Section 34A-2-704 and used for the
purposes of that fund.

(c) If the division sends written notice of noncompliance by certified mail to the
last-known address of the employer, corporation, or officers of a corporation or association,
and the employer, corporation, or officers do not within ten days provide to the division proof
of compliance, the notice and failure to provide proof constitutes prima facie evidence that the
employer, corporation, or officers are in violation of this section.

1033 (2) (a) (i) If the division has reason to believe that an employer is conducting business 1034 without securing the payment of compensation [in one of the three ways] as provided in Section 34A-2-201, the division may give the employer, or in the case of an employer 1035 1036 corporation, the corporation or the officers of the corporation, notice of noncompliance by 1037 certified mail to the last-known address of the employer, corporation, or officers, and if the 1038 employer, corporation, or officers do not, within ten days, provide to the division proof of 1039 compliance, the employer and every officer of an employer corporation is guilty of a class B 1040 misdemeanor.

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(ii) Each day's failure to comply with Subsection (2)(a)(i) is a separate offense.

(b) All funds, fines, or penalties collected or assessed under Subsection (2)(a) shall be
deposited in the Uninsured Employers' Fund created by Section 34A-2-704 and used for the
purposes of that fund.

1045 (3) All forms and records kept by the division or its designee pursuant to Section
1046 34A-2-205 are admissible as evidence to establish noncompliance under this section.

1047 (4) The commission or division on behalf of the commission is authorized to prosecute
1048 or request the attorney general or district attorney to prosecute a criminal action in the name of
1049 the state to enforce the provisions of this chapter or Chapter 3, Utah Occupational Disease Act.
1050 Section 32. Section 34A-2-210 is amended to read:

105134A-2-210. Power to bring suit for noncompliance.1052(1) (a) The commission or the division on behalf of the commission may maintain a1053suit in any court of the state to enjoin any employer, within this chapter or Chapter 3, Utah1054Occupational Disease Act, from further operation of the employer's business, when the1055employer fails to provide for the payment of benefits [in one of the three ways] as provided in1056Section 34A-2-201.

1057 (b) Upon a showing of failure to provide for the payment of benefits, the court shall 1058 enjoin the further operation of the employer's business until the payment of these benefits has 1059 been secured by the employer as required by Section 34A-2-201. The court may enjoin the 1060 employer without requiring bond from the commission or division.

(2) If the division has reason to believe that an employer is conducting a business
without securing the payment of compensation [in one of the three ways] as provided in
Section 34A-2-201, the division may give the employer five days written notice by registered
mail of the noncompliance and if the employer within the five days written notice does not
remedy the default:

1066 (a) the commission or the division on behalf of the commission may file suit under1067 Subsection (1); and

(b) the court may, ex parte, issue without bond a temporary injunction restraining thefurther operation of the employer's business.

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34A-2-211. Noncompliance by employer.

Section 33. Section 34A-2-211 is amended to read:

(1) (a) In addition to the remedies specified in Section 34A-2-210, if the division has
reason to believe that an employer is conducting business without securing the payment of
benefits [in one of the three ways provided in] as required under Section 34A-2-201, the
division may give that employer written notice of the noncompliance by certified mail to the
last-known address of the employer.

1077 (b) If the employer does not remedy the default within 15 days after [delivery of] the 1078 day on which the notice is delivered, the division may issue an order requiring the employer to 1079 appear before the division and show cause why the employer should not be ordered to comply 1080 with Section 34A-2-201.

1081

1 (c) If it is found that the employer [has] failed to provide for the payment of benefits

1082	[in one of the three ways provided in] in accordance with Section 34A-2-201, the division may
1083	require any employer to comply with Section 34A-2-201.
1084	(2) (a) Notwithstanding Subsection (1), the division may impose a penalty against the
1085	employer under this Subsection (2):
1086	(i) subject to the notice and other requirements of Title 63, Chapter 46b,
1087	Administrative Procedures Act; and
1088	(ii) if the division believes that an employer of one or more employees is conducting
1089	business without securing the payment of benefits [in one of the three ways provided in] in
1090	accordance with Section 34A-2-201.
1091	(b) The penalty imposed under Subsection (2)(a) shall be the greater of:
1092	(i) \$1,000; or
1093	(ii) three times the amount of the premium the employer would have paid for workers'
1094	compensation insurance based on the rate filing [of the Workers' Compensation Fund]
1095	designated by the commissioner of a servicing carrier under Title 31A, Chapter 40, Workers'
1096	Compensation Insurance Regulation, during the period of noncompliance.
1097	(c) For purposes of Subsection (2)(b)(ii), the premium is calculated by applying rates
1098	and rate multipliers to the payroll basis under Subsection (2)(d), using the highest rated
1099	employee class code applicable to the employer's operations.
1100	(d) The payroll basis for the purpose of calculating the premium penalty shall be 150%
1101	of the state's average weekly wage multiplied by the highest number of workers employed by
1102	the employer during the period of the employer's noncompliance multiplied by the number of
1103	weeks of the employer's noncompliance up to a maximum of 156 weeks.
1104	(3) The penalty imposed under Subsection (2) shall be deposited in the Uninsured
1105	Employers' Fund created by Section 34A-2-704 and used for the purposes of that fund.
1106	(4) (a) An employer who disputes the determination, imposition, or amount of a
1107	penalty imposed under Subsection (2) shall request a hearing before an administrative law
1108	judge within 30 days of:
1109	(i) the date [of issuance of] on which the administrative action imposing the penalty is
1110	issued: or
1111	(ii) the administrative action becomes a final order of the commission.
1112	(b) The employer's request for a hearing under Subsection (4)(a) shall specify the facts

1113	and grounds that are the basis of the employer's objection to the determination, imposition, or
1114	amount of the penalty.
1115	(c) An administrative law judge's decision under this Subsection (4) may be reviewed
1116	pursuant to Part 8, Adjudication.
1117	(5) (a) After a penalty has been issued and becomes a final order of the commission,
1118	the division on behalf of the commission may file an abstract for any uncollected penalty in the
1119	district court.
1120	(b) The abstract filed under Subsection (5)(a) shall state:
1121	(i) the amount of the uncollected penalty;
1122	(ii) reasonable [attorneys'] attorney fees;
1123	(iii) costs of collection; and
1124	(iv) court costs.
1125	(c) The filed abstract shall have the effect of a judgment of that court.
1126	(6) Any administrative action issued by the division under this section shall:
1127	(a) be in writing;
1128	(b) be sent by certified mail to the last-known address of the employer;
1129	(c) state the findings and administrative action of the division; and
1130	(d) specify its effective date, which may be immediate or may be at a later date.
1131	(7) The final order of the commission under this section, upon application by the
1132	division on behalf of the commission made on or after the effective date of the order to a court
1133	of general jurisdiction in any county in this state, may be enforced by an order to comply
1134	entered ex parte and without notice by the court.
1135	Section 34. Section 34A-2-406 is amended to read:
1136	34A-2-406. Exemptions from chapter for employees temporarily in state.
1137	(1) Any employee who has been hired in another state and the employee's employer are
1138	exempt from this chapter and Chapter 3, Utah Occupational Disease Act, while the employee is
1139	temporarily within this state doing work for the employee's employer if:
1140	(a) the employer has furnished workers' compensation insurance coverage under the
1141	workers' compensation or similar laws of the other state;
1142	(b) the coverage covers the employee's employment while in this state; and
1143	(c) [(i)] the extraterritorial provisions of this chapter and Chapter 3 are recognized in

- 1144 the other state and employers and employees who are covered in this state are likewise
- exempted from the application of the workers' compensation or similar laws of the other state[;
- 1146 or]<u>.</u>
- 1147 [(ii) the Workers' Compensation Fund:]
- 1148 [(A) is an admitted insurance carrier in the other state; or]
- 1149 [(B) has agreements with a carrier and is able to furnish workers' compensation
- insurance or similar coverage to Utah employers and their subsidiaries or affiliates doing
 business in the other state.]
- (2) The benefits under the workers' compensation or similar laws of the other state are
 the exclusive remedy against an employer for any injury, whether resulting in death or not,
 received by an employee while working for the employer in this state.
- (3) A certificate from an authorized officer of the industrial commission or similar
 department of the other state certifying that the employer is insured in the other state and has
 provided extraterritorial coverage insuring the employer's employees while working in this
 state is prima facie evidence that the employer carries compensation insurance.
- 1159 Section 35. Section **51-7-2** is amended to read:
- 1160 **51-7-2.** Exemptions from chapter.
- 1161 The following funds are exempt from this chapter:
- (1) funds invested in accordance with the participating employees' designation or
- direction pursuant to a public employees' deferred compensation plan established and operatedin compliance with Section 457 of the Internal Revenue Code of 1986, as amended:
- 1165 [(2) funds of the Workers' Compensation Fund;]
- 1166 $\left[\frac{(3)}{(2)}\right]$ funds of the Utah State Retirement Board;
- 1167 [(4)] (3) funds of the Utah Housing Corporation;
- 1168 [(5)] (4) endowment funds of higher education institutions; and
- 1169 [(6)] (5) permanent and other land grant trust funds established pursuant to the Utah
- 1170 Enabling Act and the Utah Constitution.
- 1171 Section 36. Section **51-7-4** is amended to read:
- 1172 51-7-4. Transfer of functions, powers, and duties relating to public funds to state
 1173 treasurer -- Exceptions -- Deposit of income from investment of state money.
- 1174 (1) Unless otherwise required by the Utah Constitution or applicable federal law, the

1175	functions, powers, and duties vested by law in each and every state officer, board, commission,
1176	institution, department, division, agency, and other similar instrumentalities relating to the
1177	deposit, investment, or reinvestment of public funds, and the purchase, sale, or exchange of any
1178	investments or securities of or for any funds or accounts under the control and management of
1179	these instrumentalities, are transferred to and shall be exercised by the state treasurer, except:
1180	(a) funds assigned to the Utah State Retirement Board for investment under Section
1181	49-11-302;
1182	(b) funds of member institutions of the state system of higher education:
1183	(i) acquired by gift, devise, or bequest, or by federal or private contract or grant;
1184	(ii) derived from student fees or from income from operations of auxiliary enterprises,
1185	which fees and income are pledged or otherwise dedicated to the payment of interest and
1186	principal of bonds issued by such institutions; and
1187	(iii) any other funds which are not included in the institution's work program as
1188	approved by the State Board of Regents;
1189	(c) inmate funds as provided in Section 64-13-23 or in Title 64, Chapter 9b, Work
1190	Programs for Prisoners;
1191	(d) trust funds established by judicial order;
1192	[(e) funds of the Workers' Compensation Fund;]
1193	[(f)] (e) funds of the Utah Housing Corporation; and
1194	$\left[\frac{(g)}{(f)}\right]$ endowment funds of higher education institutions.
1195	(2) All public funds held or administered by the state or any of its boards,
1196	commissions, institutions, departments, divisions, agencies, or similar instrumentalities and not
1197	transferred to the state treasurer as provided by this section shall be:
1198	(a) deposited and invested by the custodian in accordance with this chapter, unless
1199	otherwise required by statute or by applicable federal law; and
1200	(b) reported to the state treasurer in a form prescribed by the state treasurer.
1201	(3) Unless otherwise provided by the constitution or laws of this state or by contractual
1202	obligation, the income derived from the investment of state money by the state treasurer shall
1203	be deposited in and become part of the General Fund.
1204	Section 37. Section 58-59-306 is amended to read:
1205	58-59-306. Financial requirements, contractual relations, and allocation of rights,

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duties, and obligations.

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(1) Nothing contained in this chapter or in any professional employer agreement shall
affect, modify, or amend any collective bargaining agreement, or the rights or obligations of
any client, PEO, or covered employee under the federal National Labor Relations Act, the
federal Railway Labor Act, or similar state law.

(2) Nothing contained in this chapter or any professional employer agreement shall
affect, modify, or amend any state, local, or federal licensing, registration, or certification
requirement applicable to any client or covered employee.

(a) A covered employee who must be licensed, registered, or certified according to law
or regulation is considered solely an employee of the client for purposes of license, registration,
or certification requirement.

(b) A PEO may not be considered to engage in any occupation, trade, profession, or
other activity that is subject to licensing, registration, or certification requirements, or is
otherwise regulated by a governmental entity solely by entering into and maintaining a
coemployment relationship with a covered employee who is subject to the requirements or
regulation.

(c) Unless otherwise expressly agreed to by the client in the professional employer
agreement, a client has the sole right to direct and control the professional or licensed activities
of covered employees and of the client's business.

(3) With respect to a bid, contract, purchase order, or agreement entered into with the
state or a political subdivision of the state, a client company's status or certification as a small,
minority-owned, disadvantaged, or woman-owned business enterprise or as a historically
underutilized business is not affected because the client company has entered into an agreement
with a registrant or uses the services of a registrant.

(4) (a) At least quarterly, a PEO shall have an independent certified public accountant,
licensed to practice in the jurisdiction in which the PEO is domiciled, review the PEO's records
and prepare a statement indicating whether all federal, state, and local withholding taxes,
unemployment taxes, FICA taxes, workers' compensation premiums, and employee benefit
plan premiums have been paid.

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(b) The PEO must provide the statement to a client upon request from the client.

1236 (5) (a) Except as specifically provided in this chapter, the coemployment relationship

1237	between the client and the PEO, and between each coemployer and each covered employee,
1238	shall be governed by the professional employer agreement.
1239	(b) Nothing contained in any professional employer agreement or this chapter shall be
1240	considered to:
1241	(i) diminish, abolish, or remove the rights of covered employees as to clients or
1242	obligations of the client as to a covered employee, existing prior to the effective date of a
1243	professional employer agreement;
1244	(ii) terminate an employment relationship existing prior to the effective date of a
1245	professional employer agreement; or
1246	(iii) create any new or additional enforceable right of a covered employee against a
1247	PEO not specifically allocated to the PEO in the professional employer agreement or this
1248	chapter.
1249	(c) Each professional employer agreement shall include the following:
1250	(i) (A) the PEO shall reserve a right of direction and control over the covered
1251	employees; and
1252	(B) the client may retain the right to exercise the direction and control over covered
1253	employees as is necessary to conduct the client's business, to discharge any fiduciary
1254	responsibility which it may have, or to comply with any applicable licensure requirements;
1255	(ii) the PEO shall have responsibility to:
1256	(A) pay agreed upon wages and salaries to covered employees;
1257	(B) withhold, collect, report, and remit payroll-related and unemployment taxes; and
1258	(C) the extent the PEO has assumed responsibility in the professional employer
1259	agreement, to make payments for employee benefits for covered employees;
1260	(iii) the PEO and the client shall both have a right to hire, terminate, and discipline the
1261	covered employees; and
1262	(iv) the responsibility to obtain workers' compensation coverage for covered
1263	employees, from a carrier licensed to do business in Utah and otherwise in compliance with all
1264	applicable requirements, shall be specifically allocated to the client in the professional
1265	employer agreement.
1266	(d) Except as specifically provided in this chapter or in the professional employer
1267	agreement, in each coemployment relationship:

- (i) the client may exercise all rights and is obligated to perform all duties andresponsibilities otherwise applicable to an employer in an employment relationship;
- (ii) (A) the PEO may exercise only those rights, and is obligated to perform only those
 duties and responsibilities, specifically required by this chapter or set forth in the professional
 employer agreement; and
- (B) the rights, duties, and obligations of the PEO as coemployer with respect to any
 covered employee is limited to those arising under the professional employer agreement and
 this chapter during the term of coemployment by the PEO of the covered employee; and
- (iii) unless otherwise expressly agreed by the PEO and the client in a professional
 employer agreement, the client retains the exclusive right to direct and control the covered
 employees as is necessary to conduct the client's business, to discharge any of the client's
 fiduciary responsibilities, or to comply with any licensure requirements applicable to the client
 or to the covered employees.
- (e) With respect to each professional employer agreement entered into by a PEO, the
 PEO shall provide written notice to each covered employee affected by the agreement of the
 general nature of the coemployment relationship between and among the PEO, the client, and
 the covered employee.
- (f) (i) Except to the extent otherwise expressly provided by the applicable professionalemployer agreement:
- (A) a client is solely responsible for the quality, adequacy, or safety of the goods orservices produced or sold in the client's business;
- (B) a client is solely responsible for directing, supervising, training, and controlling the
 work of the covered employees with respect to the business activities of the client and solely
 responsible for the acts, errors, or omissions of the covered employees with regard to those
 activities; and
- (C) a client is not liable for the acts, errors, or omissions of a PEO, or of any covered
 employee of the client and a PEO when the covered employee is acting under the express
 direction and control of the PEO.
- (ii) Nothing in this Subsection (5)(f) shall serve to limit any contractual liability or
 obligation specifically provided in a professional employer agreement, nor shall this Subsection
 (5)(f) in any way limit the liabilities and obligations of any PEO or client as defined elsewhere

1299 in this chapter. 1300 (iii) A covered employee is not, solely as the result of being a covered employee of a 1301 PEO, an employee of the PEO for purposes of general liability insurance, fidelity bonds, surety 1302 bonds, employer's liability which is not covered by workers' compensation, or liquor liability 1303 insurance carried by the PEO, unless the covered employee is included by specific reference in 1304 the professional employer agreement and applicable prearranged employment contract, 1305 insurance contract, or bond. 1306 (g) A registrant under this chapter is not engaged in the sale of insurance by offering, 1307 marketing, selling, administering, or providing PEO services or employee benefit plans for 1308 covered employees. 1309 (h) (i) (A) Covered employees whose services are subject to sales tax are considered 1310 the employees of the client for purposes of collecting and levying sales tax on the services 1311 performed by the covered employees. 1312 (B) Nothing contained in this chapter shall relieve a client of any sales tax liability with 1313 respect to its goods or services. 1314 (ii) No portion of a PEO fee to a client that represents pass-through amounts to be paid 1315 for covered employee wages, employment-related taxes, withholding, or benefits is subject to 1316 any sales or excise tax. 1317 (i) (i) A client and a PEO shall each be considered an employer for purposes of 1318 sponsoring retirement and welfare benefit plans for its covered employees. 1319 (ii) A fully insured welfare benefit plan offered to the covered employees of a single 1320 PEO is considered a single employer welfare benefit plan and may not be considered a multiple 1321 employer welfare arrangement, and is exempt from the licensing requirements contained in 1322 Title 31A, Insurance Code. 1323 (iii) PEOs are exempt from Title 31A, Chapter 30, Individual, Small, and Group 1324 Employer Health Insurance Act. 1325 (iv) (A) Any PEO offering workers' compensation coverage, a health benefit plan, or 1326 any other insurance plan, must comply with all federal and state laws applicable to these 1327 products. 1328 (B) If the PEO chooses to use a third-party administrator for the receipt and payment of 1329 health benefit claims, that third-party administrator must be licensed to do business in the state

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1330 under Title 31A, Insurance Code. 1331 (C) Anything pertaining to the insurance products referred to in this section or the use 1332 of an unlicensed third-party administrator is subject to administrative penalties and forfeitures 1333 under Title 31A, Insurance Code. 1334 (v) If a PEO offers to its covered employees any health benefit plan which is not fully 1335 insured by an authorized insurer, the plan shall: 1336 (A) utilize a third-party administrator licensed by the Utah State Insurance Department; 1337 and 1338 (B) hold all plan assets, including participant contributions, in a trust account. 1339 (vi) If a PEO offers to its covered employees any health benefit plan which is not fully 1340 insured by an authorized insurer, the PEO shall: 1341 (A) represent that such plan is not fully insured; and 1342 (B) deliver to each plan participant a summary plan description that accurately 1343 describes the terms of the plan, including disclosure that the plan is self-funded or partially 1344 self-funded. 1345 (vii) (A) The Department of Insurance may audit on a random basis, or upon finding a 1346 reasonable need, any health benefit plan which is not fully insured by an authorized insurer. 1347 (B) The cost of the audit shall be borne by the PEO if there is material noncompliance. 1348 (j) (i) The client in a coemployment relationship shall secure workers' compensation 1349 benefits for the covered employees by complying with Subsection 34A-2-201(1) [or (2)] and 1350 commission rules under Subsection 34A-2-103(3)(a). 1351 (ii) Every authorized insurer who offers or provides Workers' Compensation Insurance coverage to a PEO, its client companies, or both shall comply with Title 31A, Chapter 19a, 1352 1353 Utah Rate Regulation Act, and Chapter 21, Insurance Contracts in General, prior to the 1354 issuance of an insurance policy. 1355 (iii) The exclusive remedy provisions of Sections 34A-2-105 and 34A-3-102 apply to 1356 both the client company and the PEO in a coemployer relationship under this section. 1357 (k) (i) For purposes of Title 35A, Chapter 4, Employment Security Act, covered 1358 employees of a registered PEO are considered the employees of the PEO, which shall be 1359 responsible for the payment of contributions, penalties, and interest on wages paid by the PEO 1360 to its covered employees during the term of the applicable professional employer agreement.

1361 (ii) The PEO shall report and pay all required contributions to the unemployment compensation fund using its state employer account number and the contribution rate of the 1362 1363 PEO. 1364 (iii) On the termination of a contract between a PEO and a client or the failure by a 1365 PEO to submit reports or make tax payments as required by this chapter, the client shall be 1366 treated as a new employer without a previous experience record unless that client is otherwise 1367 eligible for an experience rating. 1368 Section 38. Section **59-9-101** is amended to read: 1369 59-9-101. Tax basis -- Rates -- Exemptions -- Rate reductions. 1370 (1) (a) Except as provided in Subsection (1)(b), (1)(d), or (5), every admitted insurer 1371 shall pay to the commission on or before March 31 in each year, a tax of 2-1/4% of the total 1372 premiums received by it during the preceding calendar year from insurance covering property 1373 or risks located in this state. 1374 (b) This Subsection (1) does not apply to: 1375 (i) workers' compensation insurance, assessed under Subsection (2); 1376 (ii) title insurance premiums taxed under Subsection (3): 1377 (iii) annuity considerations; 1378 (iv) insurance premiums paid by an institution within the state system of higher 1379 education as specified in Section 53B-1-102; and 1380 (v) ocean marine insurance. 1381 (c) The taxable premium under this Subsection (1) shall be reduced by: 1382 (i) all premiums returned or credited to policyholders on direct business subject to tax in this state; 1383 1384 (ii) all premiums received for reinsurance of property or risks located in this state; and 1385 (iii) the dividends, including premium reduction benefits maturing within the year: 1386 (A) paid or credited to policyholders in this state; or 1387 (B) applied in abatement or reduction of premiums due during the preceding calendar 1388 year. 1389 (d) (i) For purposes of this Subsection (1)(d): 1390 (A) "Utah variable life insurance premium" means an insurance premium paid: 1391 (I) by:

1392	(Aa) a corporation; or
1393	(Bb) a trust established or funded by a corporation; and
1394	(II) for variable life insurance covering risks located within the state.
1395	(B) "Variable life insurance" means an insurance policy that provides for life
1396	insurance, the amount or duration of which varies according to the investment experience of
1397	one or more separate accounts that are established and maintained by the insurer pursuant to
1398	Title 31A, Insurance Code.
1399	(ii) Notwithstanding Subsection (1)(a), beginning on January 1, 2006, the tax on that
1400	portion of the total premiums subject to a tax under Subsection (1)(a) that is a Utah variable
1401	life insurance premium shall be calculated as follows:
1402	(A) 2-1/4% of the first \$100,000 of Utah variable life insurance premiums:
1403	(I) paid for each variable life insurance policy; and
1404	(II) received by the admitted insurer in the preceding calendar year; and
1405	(B) 0.08% of the Utah variable life insurance premiums that exceed \$100,000:
1406	(I) paid for the policy described in Subsection (1)(d)(ii)(A); and
1407	(II) received by the admitted insurer in the preceding calendar year.
1408	(iii) (A) On or before October 1, 2009, and every three years after October 1, 2009, the
1409	Revenue and Taxation Interim Committee shall study the rate reduction contained in this
1410	Subsection (1)(d).
1411	(B) As part of the study required by Subsection (1)(d)(iii)(A) the Revenue and
1412	Taxation Interim Committee shall:
1413	(I) hear testimony from the commission and industry representatives;
1414	(II) make recommendations concerning whether the rate reduction should be continued,
1415	modified, or repealed; and
1416	(III) make findings regarding:
1417	(Aa) the cost of the rate reduction;
1418	(Bb) the purpose and effectiveness of the rate reduction; and
1419	(Cc) any benefits of the rate reduction to the state.
1420	(2) (a) Every admitted insurer writing workers' compensation insurance in this state[,
1421	including the Workers' Compensation Fund created under Title 31A, Chapter 33, Workers'
1422	Compensation Fund,] shall pay to the tax commission, on or before March 31 in each year, a

premium assessment of between 1% and 8% of the total workers' compensation premium
income received by the insurer from workers' compensation insurance in this state during the
preceding calendar year.

(b) Total workers' compensation premium income means the net written premium as
calculated before any premium reduction for any insured employer's deductible, retention, or
reimbursement amounts and also those amounts equivalent to premiums as provided in Section
34A-2-202.

(c) The percentage of premium assessment applicable for a calendar year shall be
determined by the Labor Commission under Subsection (2)(d). The total premium income
shall be reduced in the same manner as provided in Subsections (1)(c)(i) and (1)(c)(ii), but not
as provided in Subsection (1)(c)(iii). The tax commission shall promptly remit from the
premium assessment collected under Subsection (2):

(i) an amount of up to 7.25% of the premium income to the state treasurer for credit to
the Employers' Reinsurance Fund created under Subsection 34A-2-702(1);

(ii) an amount equal to 0.25% of the premium income to the state treasurer for credit tothe restricted account in the General Fund, created by Section 34A-2-701; and

(iii) an amount of up to 0.50% and any remaining assessed percentage of the premium
income to the state treasurer for credit to the Uninsured Employers' Fund created under Section
34A-2-704.

(d) (i) The Labor Commission shall determine the amount of the premium assessment
for each year on or before each October 15 of the preceding year. The Labor Commission shall
make this determination following a public hearing. The determination shall be based upon the
recommendations of a qualified actuary.

(ii) The actuary shall recommend a premium assessment rate sufficient to provide
payments of benefits and expenses from the Employers' Reinsurance Fund and to project a
funded condition with assets greater than liabilities by no later than June 30, 2025.

(iii) The actuary shall recommend a premium assessment rate sufficient to provide
payments of benefits and expenses from the Uninsured Employers' Fund and to maintain it at a
funded condition with assets equal to or greater than liabilities.

(iv) At the end of each fiscal year the minimum approximate assets in the Employers'
Reinsurance Fund shall be \$5,000,000 which amount shall be adjusted each year beginning in

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1454 1990 by multiplying by the ratio that the total workers' compensation premium income for the
1455 preceding calendar year bears to the total workers' compensation premium income for the
1456 calendar year 1988.

(v) The requirements of Subsection (2)(d)(iv) cease when the future annual
disbursements from the Employers' Reinsurance Fund are projected to be less than the
calculations of the corresponding future minimum required assets. The Labor Commission
shall, after a public hearing, determine if the future annual disbursements are less than the
corresponding future minimum required assets from projections provided by the actuary.

(vi) At the end of each fiscal year the minimum approximate assets in the Uninsured
Employers' Fund shall be \$2,000,000, which amount shall be adjusted each year beginning in
1464 1990 by multiplying by the ratio that the total workers' compensation premium income for the
preceding calendar year bears to the total workers' compensation premium income for the
calendar year 1988.

(e) A premium assessment that is to be transferred into the General Fund may becollected on premiums received from Utah public agencies.

(3) Every admitted insurer writing title insurance in this state shall pay to the
commission, on or before March 31 in each year, a tax of .45% of the total premium received
by either the insurer or by its agents during the preceding calendar year from title insurance
concerning property located in this state. In calculating this tax, "premium" includes the
charges made to an insured under or to an applicant for a policy or contract of title insurance
for:

(a) the assumption by the title insurer of the risks assumed by the issuance of the policyor contract of title insurance; and

(b) abstracting title, title searching, examining title, or determining the insurability of
title, and every other activity, exclusive of escrow, settlement, or closing charges, whether
denominated premium or otherwise, made by a title insurer, an agent of a title insurer, a title
insurance producer, or any of them.

(4) Beginning July 1, 1986, former county mutuals and former mutual benefit
associations shall pay the premium tax or assessment due under this chapter. All premiums
received after July 1, 1986, shall be considered in determining the tax or assessment.

1484 (5) The following insurers are not subject to the premium tax on health care insurance

1485	that would otherwise be applicable under Subsection (1):
1486	(a) insurers licensed under Title 31A, Chapter 5, Domestic Stock and Mutual Insurance
1487	Corporations;
1488	(b) insurers licensed under Title 31A, Chapter 7, Nonprofit Health Service Insurance
1489	Corporations;
1490	(c) insurers licensed under Title 31A, Chapter 8, Health Maintenance Organizations
1491	and Limited Health Plans;
1492	(d) insurers licensed under Title 31A, Chapter 9, Insurance Fraternals;
1493	(e) insurers licensed under Title 31A, Chapter 11, Motor Clubs;
1494	(f) insurers licensed under Title 31A, Chapter 13, Employee Welfare Funds and Plans;
1495	and
1496	(g) insurers licensed under Title 31A, Chapter 14, Foreign Insurers.
1497	(6) An insurer issuing multiple policies to an insured may not artificially allocate the
1498	premiums among the policies for purposes of reducing the aggregate premium tax or
1499	assessment applicable to the policies.
1500	(7) The retaliatory provisions of Title 31A, Chapter 3, Department Funding, Fees, and
1501	Taxes, apply to the tax or assessment imposed under this chapter.
1502	Section 39. Section 63-5b-102 is amended to read:
1503	63-5b-102. Definitions.
1504	(1) (a) "Absent" means:
1505	(i) not physically present or not able to be communicated with for 48 hours; or
1506	(ii) for local government officers, as defined by local ordinances.
1507	(b) "Absent" does not include a person who can be communicated with via telephone,
1508	radio, or telecommunications.
1509	(2) "Attack" means a nuclear, conventional, biological, or chemical warfare action
1510	against the United States of America or this state.
1511	(3) "Department" means the Department of Administrative Services, the Department of
1512	Agriculture and Food, the Alcoholic Beverage Control Commission, the Department of
1513	Commerce, the Department of Community and Culture, the Department of Corrections, the
1514	Department of Environmental Quality, the Department of Financial Institutions, the
1515	Department of Health, the Department of Human Resource Management, the Department of

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1516 Workforce Services, the Labor Commission, the National Guard, the Department of Insurance, 1517 the Department of Natural Resources, the Department of Public Safety, the Public Service 1518 Commission, the Department of Human Services, the State Tax Commission, the Department 1519 of Technology Services, the Department of Transportation, any other major administrative 1520 subdivisions of state government, the State Board of Education, the State Board of Regents, the 1521 Utah Housing Corporation, [the Workers' Compensation Fund,] the State Retirement Board, 1522 and each institution of higher education within the system of higher education. 1523 (4) "Disaster" means a situation causing, or threatening to cause, widespread damage, 1524 social disruption, or injury or loss of life or property resulting from attack, internal disturbance, 1525 natural phenomenon, or technological hazard. 1526 (5) "Division" means the Division of Emergency Services and Homeland Security 1527 established in Title 53, Chapter 2, Part 1, Emergency Services and Homeland Security Act. 1528 (6) "Emergency interim successor" means a person designated by this chapter to 1529 exercise the powers and discharge the duties of an office when the person legally exercising the 1530 powers and duties of the office is unavailable. 1531 (7) "Executive director" means the person with ultimate responsibility for managing and overseeing the operations of each department, however denominated. 1532 1533 (8) "Internal disturbance" means a riot, prison break, disruptive terrorism, or strike. 1534 (9) "Natural phenomenon" means any earthquake, tornado, storm, flood, landslide, 1535 avalanche, forest or range fire, drought, epidemic, or other catastrophic event. 1536 (10) (a) "Office" includes all state and local offices, the powers and duties of which are 1537 defined by constitution, statutes, charters, optional plans, ordinances, articles, or by-laws. 1538 (b) "Office" does not include the office of governor or the legislative or judicial offices. 1539 (11) "Place of governance" means the physical location where the powers of an office 1540 are being exercised. 1541 (12) "Political subdivision" includes counties, cities, towns, townships, districts, 1542 authorities, and other public corporations and entities whether organized and existing under 1543 charter or general law. 1544 (13) "Political subdivision officer" means a person holding an office in a political 1545 subdivision. 1546 (14) "State officer" means the attorney general, the state treasurer, the state auditor, and

1547	the executive director of each department.
1548	(15) "Technological hazard" means any hazardous materials accident, mine accident,
1549	train derailment, air crash, radiation incident, pollution, structural fire, or explosion.
1550	(16) "Unavailable" means:
1551	(a) absent from the place of governance during a disaster that seriously disrupts normal
1552	governmental operations, whether or not that absence or inability would give rise to a vacancy
1553	under existing constitutional or statutory provisions; or
1554	(b) as otherwise defined by local ordinance.
1555	Section 40. Section 63-38a-102 is amended to read:
1556	63-38a-102. Definitions.
1557	As used in this chapter:
1558	(1) (a) "Agency" means each department, commission, board, council, agency,
1559	institution, officer, corporation, fund, division, office, committee, authority, laboratory, library,
1560	unit, bureau, panel, or other administrative unit of the state.
1561	(b) "Agency" does not include the legislative branch, the board of regents, the Utah
1562	Higher Education Assistance Authority, the board of trustees of each higher education
1563	institution, each higher education institution and its associated branches, centers, divisions,
1564	institutes, foundations, hospitals, colleges, schools, or departments, a public education entity,
1565	or an independent agency.
1566	(2) (a) "Dedicated credits revenues" means revenues from collections by an agency that
1567	are deposited directly into an account for expenditure on a separate line item and program.
1568	(b) "Dedicated credits" does not mean:
1569	(i) federal revenues and the related pass through or the related state match paid by one
1570	agency to another;
1571	(ii) revenues that are not deposited in governmental funds;
1572	(iii) revenues from any contracts; and
1573	(iv) revenues received by the Attorney General's Office from billings for professional
1574	services.
1575	(3) "Fees" means revenue collected by an agency for performing a service or providing
1576	a function that the agency deposits or accounts for as dedicated credits or fixed collections.
1577	(4) (a) "Fixed collections revenues" means revenue from collections:

1578	(i) fixed by law or by the appropriation act at a specific amount; and
1579	(ii) required by law to be deposited into a separate line item and program.
1580	(b) "Fixed collections" does not mean:
1581	(i) federal revenues and the related pass through or the related state match paid by one
1582	agency to another;
1583	(ii) revenues that are not deposited in governmental funds;
1584	(iii) revenues from any contracts; and
1585	(iv) revenues received by the Attorney General's Office from billings for professional
1586	services.
1587	(5) (a) "Governmental fund" means funds used to account for the acquisition, use, and
1588	balances of expendable financial resources and related liabilities using a measurement focus
1589	that emphasizes the flow of financial resources.
1590	(b) "Governmental fund" does not include internal service funds, enterprise funds,
1591	capital projects funds, debt service funds, or trust and agency funds as established in Section
1592	51-5-4.
1593	(6) "Independent agency" means the Utah State Retirement Office[7] and the Utah
1594	Housing Corporation[, and the Workers' Compensation Fund].
1595	(7) "Program" means the function or service provided by an agency for which the
1596	agency collects fees.
1597	(8) "Revenue types" means the categories established by the Division of Finance under
1598	the authority of this chapter that classify revenue according to the purpose for which it is
1599	collected.
1600	Section 41. Section 63-55b-131 is amended to read:
1601	63-55b-131. Repeal dates, Title 31A.
1602	(1) Section 31A-23a-415 is repealed July 1, 2011.
1603	(2) Title 31A, Chapter 40, Part 3, Privatization of the Workers' Compensation Fund
1604	Act, is repealed 30 days after the transition date determined under Section 31A-40-307.
1605	Section 42. Section 63E-1-102 is amended to read:
1606	63E-1-102. Definitions.
1607	As used in this title:
1608	(1) "Authorizing statute" means the statute creating an entity as an independent entity.

1609	(2) "Committee" means the Retirement and Independent Entities Committee created in
1610	Section 63E-1-201.
1611	(3) "Independent corporation" means a corporation incorporated in accordance with
1612	Chapter 2, Independent Corporations Act.
1612	(4) (a) "Independent entity" means an entity having a public purpose relating to the
1614	state or its citizens that is individually created by the state or is given by the state the right to
1615	exist and conduct its affairs as an:
1615	
	(i) independent state agency; or
1617	(ii) independent corporation.(b) "Independent contraction" in all data that
1618	(b) "Independent entity" includes the:
1619	(i) Dairy Commission created in Title 4, Chapter 22, Dairy Promotion Act;
1620	(ii) Heber Valley Railroad Authority created in Title 9, Chapter 3, Part 3, Heber Valley
1621	Historic Railroad Authority;
1622	(iii) Utah Science Center Authority created in Title 9, Chapter 3, Part 4, Utah Science
1623	Center Authority;
1624	(iv) Utah Housing Corporation created in Title 9, Chapter 4, Part 9, Utah Housing
1625	Corporation Act;
1626	(v) Utah State Fair Corporation created in Title 9, Chapter 4, Part 11, Utah State Fair
1627	Corporation Act;
1628	[(vi) Workers' Compensation Fund created in Title 31A, Chapter 33, Workers'
1629	Compensation Fund;]
1630	[(vii)] (vi) Utah State Retirement Office created in Title 49, Chapter 11, Utah State
1631	Retirement Systems Administration;
1632	[(viii)] (vii) School and Institutional Trust Lands Administration created in Title 53C,
1633	Chapter 1, Part 2, School and Institutional Trust Lands Administration;
1634	[(ix)] (viii) Utah Communications Agency Network created in Title 63C, Chapter 7,
1635	Utah Communications Agency Network Act; and
1636	[(x)] (ix) Utah Capital Investment Corporation created in Title 63, Chapter 38f, Part
1637	12, Utah Venture Capital Enhancement Act.
1638	(c) Notwithstanding this Subsection (4), "independent entity" does not include:
1639	(i) the Public Service Commission of Utah created in Section 54-1-1;

1640	(ii) an institution within the state system of higher education;
1641	(iii) a city, county, or town;
1642	(iv) a local school district;
1643	(v) a special district created under the authority of Title 17A, Special Districts; or
1644	(vi) a local district created under the authority of Title 17B, Limited Purpose Local
1645	Government Entities.
1646	(5) "Independent state agency" means an entity that is created by the state, but is
1647	independent of the governor's direct supervisory control.
1648	(6) "Monies held in trust" means monies maintained for the benefit of:
1649	(a) one or more private individuals, including public employees;
1650	(b) one or more public or private entities; or
1651	(c) the owners of a quasi-public corporation.
1652	(7) "Public corporation" means an artificial person, public in ownership, individually
1653	created by the state as a body politic and corporate for the administration of a public purpose
1654	relating to the state or its citizens.
1655	(8) "Quasi-public corporation" means an artificial person, private in ownership,
1656	individually created as a corporation by the state which has accepted from the state the grant of
1657	a franchise or contract involving the performance of a public purpose relating to the state or its
1658	citizens.
1659	Section 43. Section 63E-1-203 is amended to read:
1660	63E-1-203. Exemptions from committee activities.
1661	Notwithstanding the other provisions of this Part 2 and Subsection 63E-1-102(4), the
1662	[following independent entities are] Utah Housing Corporation created in Title 9, Chapter 4,
1663	Part 9, Utah Housing Corporation Act, is exempt from the study by the committee under
1664	Section 63E-1-202[:].
1665	[(1) the Utah Housing Corporation created in Title 9, Chapter 4, Part 9, Utah Housing
1666	Corporation Act; and]
1667	[(2) the Workers' Compensation Fund created in Title 31A, Chapter 33, Workers'
1668	Compensation Fund.]
1669	Section 44. Section 67-4-2 is amended to read:
1670	67-4-2. Definitions.

1671	As used in this chapter:
1672	(1) "Federal funds" means cash received from the United States government or from
1673	other individuals or entities for or on behalf of the United States and deposited with the state
1674	treasurer or any agency of the state.
1675	(2) "General Fund" means monies received into the treasury and not specially
1676	appropriated to any other fund.
1677	(3) "Maintain custody" means to direct the safekeeping and investment of state funds.
1678	(4) (a) "State entity" means each department, commission, board, council, agency,
1679	institution, officer, corporation, fund, division, office, committee, authority, laboratory, library,
1680	unit, bureau, panel, or other administrative unit of the state.
1681	(b) "State entity" includes independent state agencies and public corporations.
1682	(5) (a) "State funds" means funds that are owned, held, or administered by a state
1683	entity, regardless of the source of the funds.
1684	(b) "State funds" includes funds of independent state agencies or public corporations,
1685	regardless of the source of funds.
1686	(c) "State funds" does not include funds held by the Utah State Retirement Board [or
1687	the Workers' Compensation Fund].
1688	(6) "Warrant" means an order in a specific amount drawn upon the treasurer by the
1689	Division of Finance or another state agency.
1690	Section 45. Repealer.
1691	This bill repeals:
1692	Section 31A-22-1001, Obligation to write workers' compensation insurance.
1693	Section 31A-33-101, Definitions.
1694	Section 31A-33-102, Establishment of the Workers' Compensation Fund and the
1695	Injury Fund.
1696	Section 31A-33-103, Legal nature of Workers' Compensation Fund.
1697	Section 31A-33-103.5, Powers of Fund Limitations.
1698	Section 31A-33-104, Workers' Compensation Fund exempted.
1699	Section 31A-33-105, Price of insurance Liability of state.
1700	Section 31A-33-106, Board of directors Status of the fund in relationship to the
1701	state.

- H.B. 397 1702 Section 31A-33-107, Duties of board -- Creation of subsidiaries -- Entering into 1703 joint enterprises. 1704 Section 31A-33-108, Powers and duties of chief executive officer. 1705 Section 31A-33-109, Liability limited. 1706 Section 31A-33-110, Audits and examinations required. Section 31A-33-111, Adoption of rates. 1707 1708 Section 31A-33-112, Withdrawal of policyholders. 1709 Section 31A-33-113, Cancellation of policies. 1710 Section 31A-33-114, Premium assessment. Section 31A-33-115, Interest and costs of collecting delinquent premium. 1711 1712 Section 31A-33-116, Dividends. 1713 Section 31A-33-117, Availability of employers' reports. 1714 Section 31A-33-118, Scope of chapter. 1715 Section 46. Effective date. 1716 (1) The amendments in this bill to the following sections take effect on the transition date determined in accordance with Section 31A-40-307 if the Legislature enacts during the 1717 1718 2008 Annual General Session a process to determine a transition date in Section 31A-40-307: (a) Section 11-8-3; 1719 1720 (b) Section 31A-1-105; 1721 (c) Section 31A-15-103; 1722 (d) Section 31A-19a-401; 1723 (e) Section 31A-21-101; 1724 (f) Section 31A-22-309; 1725 (g) Section 31A-26-103; 1726 (h) Section 31A-35-103; 1727 (i) Section 34A-2-102; 1728 (j) Section 34A-2-103; 1729 (k) Section 34A-2-107; 1730 (1) Section 34A-2-201; 1731 (m) Section 34A-2-203;
- 1732 (n) Section 34A-2-211;

1733	(o) Section 34A-2-406;
1734	<u>(p) Section 51-7-2;</u>
1735	(q) Section 51-7-4;
1736	<u>(r) Section 58-59-306;</u>
1737	(s) Section 59-9-101;
1738	(t) Section 63-5b-102;
1739	(u) Section 63-38a-102;
1740	(v) Section 63E-1-102;
1741	(w) Section 63E-1-203; and
1742	(x) Section 67-4-2.
1743	(2) The amendments to Section 63-55b-131 in this bill take effect on May 4, 2008, if
1744	the Legislature enacts during the 2008 Annual General Session a process to determine a
1745	transition date in Section 31A-40-307.
1746	(3) The sections in Title 31A, Chapter 40, enacted in this bill take effect on May 4,
1747	2008, if the Legislature enacts during the 2008 Annual General Session a process to determine
1748	a transition date in Section 31A-40-307.
1749	(4) The repeal of the following sections takes effect on the transition date determined
1750	in accordance with Section 31A-40-307, if the Legislature enacts during the 2008 Annual
1751	General Session a process to determine a transition date in Section 31A-40-307:
1752	(a) Section 31A-22-1001;
1753	(b) Section 31A-33-101;
1754	(c) Section 31A-33-102;
1755	(d) Section 31A-33-103;
1756	(e) Section 31A-33-103.5;
1757	(f) Section 31A-33-104;
1758	(g) Section 31A-33-105;
1759	(h) Section 31A-33-106;
1760	(i) Section 31A-33-107;
1761	(j) Section 31A-33-108;
1762	(k) Section 31A-33-109;
1763	<u>(1) Section 31A-33-110;</u>

1764	(m) Section 31A-33-111;
1765	(n) Section 31A-33-112;
1766	(o) Section 31A-33-113;
1767	(p) Section 31A-33-114;
1768	(q) Section 31A-33-115;
1769	(r) Section 31A-33-116;
1770	(s) Section 31A-33-117; and
1771	(t) Section 31A-33-118.
1772	(5) (a) In determining whether or not to enact during the 2008 Annual General Session
1773	a process to determine a transition date in Section 31A-40-307, the Legislature may consider
1774	issues related to both the assigned risk plan and the privatization process and make any
1775	modifications to Title 31A, Chapter 40, Workers' Compensation Insurance Regulation, as part
1776	of any legislation enacting a process to determine a transition date.
1777	(b) Issues described in Subsection (5)(a) include:
1778	(i) as to an assigned risk plan:
1779	(A) the degree to which the assigned risk plan should be established by statute and the
1780	extent to which it should be established by rule;
1781	(B) the nature of the plan and the plan reserve, including for purposes of accounting
1782	and legal responsibility in relation to the Insurance Department and the state;
1783	(C) how to address employers who may be residual market employers and who employ
1784	individuals in more than one state;
1785	(D) the appropriate method to address deficits, if any, with the assigned risk plan
1786	including use of a reserve, imposition of assessments, or use of a reinsurance pool;
1787	(E) rating issues such as requiring merit rating or addressing small or new employers:
1788	and
1789	(F) ensuring that employers who are insured under the assigned risk plan are residual
1790	market employers;
1791	(ii) as to the privatization process:
1792	(A) how to address constitutional issues, if any, related to directing how assets and
1793	contracts of the Workers' Compensation Fund are treated under a privatization process;
1794	(B) how to address issues, if any, related to liability of the state under a privatization

1795	process;					
1796	(C) whether all conditions required by Title 31A, Chapter 40, Part 3, Privatization of					
1797	the Workers' Compensation Fund Act, can be complied with such as the requirement to obtain					
1798	a specific type of Internal Revenue Service ruling;					
1799	(D) the time it would require to accomplish the privatization and the transition to an					
1800	assigned risk plan;					
1801	(E) whether or not Title 31A, Chapter 40, Part 3, Privatization of the Workers'					
1802	Compensation Fund Act, should supersede Title 63E, Chapter 1, Part 4, Privatization of					
1803	Independent Entities, in all aspects;					
1804	(F) how subsidiaries of the Workers' Compensation Fund should be treated;					
1805	(G) whether issues related to antitrust or monopolies are raised by the privatization;					
1806	(H) whether, and if so, how to address use of the name Workers' Compensation Fund;					
1807	and					
1808	(I) whether, and if so, how to inform the public of the privatization; and					
1809	(iii) miscellaneous issues such as:					
1810	(A) how to adjust the membership of the Workers' Compensation Advisory Council;					
1811	and					
1812	(B) how the penalty for noncompliance by an employer with workers' compensation					
1813	obligations should be determined.					
1814	Section 47. Revisor instructions.					
1815	It is the intent of the Legislature that if this bill takes effect because the Legislature					
1816	enacts during the 2008 Annual General Session a process to determine a transition date in					
1817	Section 31A-40-307, the Office of Legislative Research and General Counsel in preparing the					
1818	Utah Code database for publication:					
1819	(1) on the transition date determined in accordance with Section 31A-40-307 make the					
1820	following changes:					
1821	(a) replace the phrase "the date determined in accordance with Section 31A-40-307" in					
1822	Subsection 31A-40-102(8) with the actual transition date;					
1823	(b) modify Subsection 31A-40-204(1)(b) to read:					
1824	"(b) The plan reserve shall consist of:					
1825	(i) assets deposited into the plan reserve on [insert the date that is the day after the					

1826 <u>actual transition date, but two years later];</u>

- 1827 (ii) assets deposited in accordance with Subsection (4); and
- 1828 (iii) interest and earnings on the plan reserve."; and
- 1829 (c) replace the phrases "successor mutual insurance company, as defined in Section
- 1830 <u>31A-40-302" and "successor mutual insurance company" in Subsection 31A-40-204(4) with</u>
- 1831 the actual name of the successor mutual insurance company; and
- 1832 (2) repeal Title 31A, Chapter 40, Part 3, Privatization of the Workers' Compensation
- 1833 Fund Act, in accordance with Section 63-55b-131.

Legislative Review Note as of 2-9-07 7:27 AM

As required by legislative rule and practice, the Office of Legislative Research and General Counsel provides the following legislative review note to assist the Legislature in making its own determination as to the constitutionality of the bill. The note is based on an analysis of relevant state and federal constitutional law as applied to the bill. The note is not written for the purpose of influencing whether the bill should become law, but is written to provide information relevant to legislators' consideration of this bill. The note is not a substitute for the judgment of the judiciary, which has authority to determine the constitutionality of a law in the context of a specific case.

This bill, if it takes effect, requires the Workers' Compensation Fund (WCF) to transfer certain assets to the state as a reserve for potential deficits of an assigned risk plan created to address the residual workers' compensation market. This bill also requires the creation of a successor mutual insurance company to the WCF. The successor mutual insurance company is then required to hold assets representing the Injury Fund in trust until such time as the successor no longer writes workers' compensation in Utah. At that time, the successor mutual insurance company is required to transfer those assets to the state. These provisions are examples of requirements in this bill that raise constitutional issues.

This bill's restrictions on the use of and requirements to transfer assets currently held by the WCF result in a high probability that, if challenged, the bill could be held unconstitutional on principles such as due process, equal protection, or takings. The Utah Supreme Court in Workers' Compensation Fund v. State, 125 P.3d 852 (2005), affirmed that the "State of Utah has no ownership interest in the Workers' Compensation Fund or its assets other than as a policyholder." However, the Court explained that its ruling did "not prevent the Legislature from modifying the structure and management of the WCF or adjusting the level of the State's influence thereupon, as it sees fit" and noted "the Legislature's ability to modify [WCF's] governing statutes." Therefore, a court would need to determine whether the state has authority under its power to modify the structure and management of the WCF to impose requirements on the use and transfer of assets of the WCF and its successor mutual insurance company or whether because the WCF's assets "belong to the WCF policyholders and not to the State" these assets could not be controlled either in the short-term or long-term by the state in a manner different than for a private workers' compensation insurer. See also, e.g., Hansen v. Utah State Ret. Bd., 652 P.2d 1332 (Utah 1982); State Tax Commission v. Department of Finance, 576 P.2d 1297 (Utah 1978). The language of the Utah Supreme Court suggests a high probability that the Utah Supreme Court could find that the powers of the Legislature may be limited by constitutional concerns.

Office of Legislative Research and General Counsel

	H.B. 397 - Workers' Compensation Amendments			
Revised				
Fiscal Note	2007 General Session			
	State of Utah			

State Impact

Enactment of this bill would require an appropriation of \$285,000 in General Fund (including \$15,600 in one-time costs) in FY 2009 to the Insurance Department for the additional staff and contracted expertise needed to implement the provisions of the bill. The bill may end the federal income tax benefit, estimated at \$33,000,000, which would be passed on to all customers including the state of Utah. This would be an increase of about ten percent over current rates. The State of Utah currently spends about \$8,000,000 on workers' compensation insurance so the increase would be about \$800,000 spread proportionately over all funds and agencies. Residual account reserves may be impacted and are currently estimated at \$300,000,000. There is a legislative review note attached to this bill raising constitutional issues indicating likely litigation expenses.

	FY 2007 <u>Approp.</u>	FY 2008 <u>Approp.</u>	FY 2009 <u>Approp.</u>		FY 2008	
				Revenue	Revenue	Revenue
General Fund	\$0	\$285,500	\$269,900	\$0	¢0	
General Fund, One-Time	\$ 0	(\$285,500)	\$15,600	\$0	\$0	\$0
Total	\$0	\$0	\$285,500		\$0	\$0

Individual, Business and/or Local Impact

Enactment of this bill likely will not result in direct, measurable costs and/or benefits for individuals. Local government entities and businesses would likely pay about 10% more in premiums generally and residual market employers would pay more as a result of provisions in this legislation.

2/15/2007, 5:38:56 PM, Lead Analyst: Eckersley, S.

Office of the Legislative Fiscal Analyst