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	WORKERS COMPENSATION REALTH CARE AMENDMENTS
	2018 GENERAL SESSION
	STATE OF UTAH
	Chief Sponsor: Karen Mayne
	House Sponsor: James A. Dunnigan
L	ONG TITLE
G	eneral Description:
	This bill amends provisions of the Workers' Compensation Act related to health care
pr	roviders.
H	ighlighted Provisions:
	This bill:
	 addresses the rate at which certain workers' compensation carriers and self-insured
en	mployers must reimburse a hospital for covered medical services; and
	 makes technical and conforming changes.
M	Ioney Appropriated in this Bill:
	None
O	ther Special Clauses:
	None
U	tah Code Sections Affected:
A	MENDS:
	34A-2-107, as last amended by Laws of Utah 2017, Chapters 18 and 363
	34A-2-407, as last amended by Laws of Utah 2016, Chapter 242
Ве	e it enacted by the Legislature of the state of Utah:
	Section 1. Section 34A-2-107 is amended to read:
	34A-2-107. Appointment of workers' compensation advisory council



28	Composition Terms of members Duties Compensation.
29	(1) The commissioner shall appoint a workers' compensation advisory council
30	composed of:
31	(a) the following voting members:
32	(i) five employer representatives; and
33	(ii) five employee representatives; and
34	(b) the following nonvoting members:
35	(i) a representative of the workers' compensation insurance carrier that provides
36	workers' compensation insurance under Section 31A-22-1001;
37	(ii) a representative of a workers' compensation insurance carrier different from the
38	workers' compensation insurance carrier listed in Subsection (1)(b)(i);
39	(iii) a representative of health care providers;
40	(iv) the Utah insurance commissioner or the insurance commissioner's designee; and
41	(v) the commissioner or the commissioner's designee.
42	(2) Employers and employees shall consider nominating members of groups who
43	historically may have been excluded from the council, such as women, minorities, and
44	individuals with disabilities.
45	(3) (a) Except as required by Subsection (3)(b), as terms of current council members
46	expire, the commissioner shall appoint each new member or reappointed member to a two-year
47	term beginning July 1 and ending June 30.
48	(b) Notwithstanding the requirements of Subsection (3)(a), the commissioner shall, at
49	the time of appointment or reappointment, adjust the length of terms to ensure that the terms of
50	council members are staggered so that approximately half of the council is appointed every two
51	years.
52	(4) (a) When a vacancy occurs in the membership for any reason, the replacement shall
53	be appointed for the unexpired term.
54	(b) The commissioner shall terminate the term of a council member who ceases to be
55	representative as designated by the member's original appointment.
56	(5) The council shall confer at least quarterly for the purpose of advising the
57	commission, the division, and the Legislature on:

(a) the Utah workers' compensation and occupational disease laws;

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39	(b) the administration of the laws described in Subsection (3)(a); and
60	(c) rules related to the laws described in Subsection (5)(a).
61	(6) Regarding workers' compensation, rehabilitation, and reemployment of employees
62	who acquire a disability because of an industrial injury or occupational disease the council
63	shall:
64	(a) offer advice on issues requested by:
65	(i) the commission;
66	(ii) the division; and
67	(iii) the Legislature; and
68	(b) make recommendations to:
69	(i) the commission; and
70	(ii) the division.
71	[(7) The council shall study how hospital costs may be reduced for purposes of medical
72	benefits for workers' compensation. By no later than November 30, 2017, the council shall
73	submit, in accordance with Section 68-3-14, a written report to the Business and Labor Interim
74	Committee containing the council's recommendations.
75	[(8)] (7) The commissioner or the commissioner's designee shall serve as the chair of
76	the council and call the necessary meetings.
77	[(9)] (8) The commission shall provide staff support to the council.
78	[(10)] (9) A member may not receive compensation or benefits for the member's
79	service, but may receive per diem and travel expenses in accordance with:
80	(a) Section 63A-3-106;
81	(b) Section 63A-3-107; and
82	(c) rules made by the Division of Finance pursuant to Sections 63A-3-106 and
83	63A-3-107.
84	Section 2. Section 34A-2-407 is amended to read:
85	34A-2-407. Reporting of industrial injuries Regulation of health care
86	providers.
87	(1) As used in this section, "physician" is as defined in Section 34A-2-111.
88	(2) (a) An employee sustaining an injury arising out of and in the course of
89	employment shall provide notification to the employee's employer promptly of the injury.

90	(b) If the employee is unable to provide the notification required by Subsection (2)(a),
91	the following may provide notification of the injury to the employee's employer:
92	(i) the employee's next of kin; or
93	(ii) the employee's attorney.
94	(c) An employee claiming benefits under this chapter or Chapter 3, Utah Occupationa
95	Disease Act, shall comply with rules adopted by the commission regarding disclosure of
96	medical records of the employee medically relevant to the industrial accident or occupational
97	disease claim.
98	(3) (a) An employee is barred for any claim of benefits arising from an injury if the
99	employee fails to notify within the time period described in Subsection (3)(b):
100	(i) the employee's employer in accordance with Subsection (2); or
101	(ii) the division.
102	(b) The notice required by Subsection (3)(a) shall be made within:
103	(i) 180 days of the day on which the injury occurs; or
104	(ii) in the case of an occupational hearing loss, the time period specified in Section
105	34A-2-506.
106	(4) The following constitute notification of injury required by Subsection (2):
107	(a) an employer's report filed with:
108	(i) the division; or
109	(ii) the employer's workers' compensation insurance carrier;
110	(b) a physician's injury report filed with:
111	(i) the division;
112	(ii) the employer; or
113	(iii) the employer's workers' compensation insurance carrier;
114	(c) a workers' compensation insurance carrier's report filed with the division; or
115	(d) the payment of any medical or disability benefits by:
116	(i) the employer; or
117	(ii) the employer's workers' compensation insurance carrier.
118	(5) (a) An employer and the employer's workers' compensation insurance carrier, if
119	any, shall file a report in accordance with the rules made under Subsection (5)(b) of a:
120	(i) work-related fatality; or

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121	(ii) work-related injury resulting in:
122	(A) medical treatment;
123	(B) loss of consciousness;
124	(C) loss of work;
125	(D) restriction of work; or
126	(E) transfer to another job.
127	(b) An employer or the employer's workers' compensation insurance carrier, if any,
128	shall file a report required by Subsection (5)(a), and any subsequent reports of a previously
129	reported injury as may be required by the commission, within the time limits and in the manner
130	established by rule by the commission made after consultation with the workers' compensation
131	advisory council and in accordance with Title 63G, Chapter 3, Utah Administrative
132	Rulemaking Act. A rule made under this Subsection (5)(b) shall:
133	(i) be reasonable; and
134	(ii) take into consideration the practicality and cost of complying with the rule.
135	(c) A report is not required to be filed under this Subsection (5) for a minor injury, such
136	as a cut or scratch that requires first aid treatment only, unless:
137	(i) a treating physician files a report with the division in accordance with Subsection
138	(9); or
139	(ii) a treating physician is required to file a report with the division in accordance with
140	Subsection (9).
141	(6) An employer and its workers' compensation insurance carrier, if any, required to
142	file a report under Subsection (5) shall provide the employee with:
143	(a) a copy of the report submitted to the division; and
144	(b) a statement, as prepared by the division, of the employee's rights and
145	responsibilities related to the industrial injury.
146	(7) An employer shall maintain a record in a manner prescribed by the commission by
147	rule of all:
148	(a) work-related fatalities; or
149	(b) work-related injuries resulting in:
150	(i) medical treatment;
151	(ii) loss of consciousness:

152	(iii) loss of work;
153	(iv) restriction of work; or
154	(v) transfer to another job.
155	(8) (a) Except as provided in Subsection (8)(b), an employer or a workers'
156	compensation insurance carrier who refuses or neglects to make a report, maintain a record, or
157	file a report as required by this section is subject to a civil assessment:
158	(i) imposed by the division, subject to the requirements of Title 63G, Chapter 4,
159	Administrative Procedures Act; and
160	(ii) that may not exceed \$500.
161	(b) An employer or workers' compensation insurance carrier is not subject to the civil
162	assessment under this Subsection (8) if:
163	(i) the employer or workers' compensation insurance carrier submits a report later than
164	required by this section; and
165	(ii) the division finds that the employer or workers' compensation insurance carrier has
166	shown good cause for submitting a report later than required by this section.
167	(c) (i) A civil assessment collected under this Subsection (8) shall be deposited into the
168	Uninsured Employers' Fund created in Section 34A-2-704 to be used for a purpose specified in
169	Section 34A-2-704.
170	(ii) The administrator of the Uninsured Employers' Fund shall collect money required
171	to be deposited into the Uninsured Employers' Fund under this Subsection (8)(c) in accordance
172	with Section 34A-2-704.
173	(9) (a) A physician attending an injured employee shall comply with rules established
174	by the commission regarding:
175	(i) fees for physician's services;
176	(ii) disclosure of medical records of the employee medically relevant to the employee's
177	industrial accident or occupational disease claim;
178	(iii) reports to the division regarding:
179	(A) the condition and treatment of an injured employee; or
180	(B) any other matter concerning industrial cases that the physician is treating; and
181	(iv) rules made under Section 34A-2-407.5.
182	(b) A physician who is associated with, employed by, or bills through a hospital is

subject to Subsection (9)(a).

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- (c) A hospital providing services for an injured employee is not subject to the requirements of Subsection (9)(a) except for rules made by the commission that are described in Subsection (9)(a)(ii) or (iii) or Section 34A-2-407.5.
 - (d) The commission's schedule of fees may reasonably differentiate remuneration to be paid to providers of health services based on:
 - (i) the severity of the employee's condition;
- (ii) the nature of the treatment necessary; and
- (iii) the facilities or equipment specially required to deliver that treatment.
- 192 (e) This Subsection (9) does not prohibit a contract with a provider of health services 193 relating to the pricing of goods and services.
 - (10) A copy of the initial report filed under Subsection (9)(a)(iii) shall be furnished to:
- 195 (a) the division;
- (b) the employee; and
- (c) (i) the employer; or
- 198 (ii) the employer's workers' compensation insurance carrier.
- 199 (11) (a) As used in this Subsection (11):
 - (i) "Balance billing" means charging a person, on whose behalf a workers' compensation insurance carrier or self-insured employer is obligated to pay medical benefits under this chapter or Chapter 3, Utah Occupational Disease Act, for the difference between what the workers' compensation insurance carrier or self-insured employer reimburses the hospital for covered medical services and what the hospital charges for those covered medical services.
 - (ii) "Covered medical services" means medical services provided by a hospital that are covered by workers' compensation medical benefits under this chapter or Chapter 3, Utah Occupational Disease Act.
- 209 (iii) "Health benefit plan" means the same as that term is defined in Section 210 31A-22-619.6.
- 211 (iv) "Self-insured employer" means the same as that term is defined in Section 212 34A-2-201.5.
- 213 (b) Subject to Subsection (11)(d), a workers' compensation insurance carrier or

self-insured employer may contract, either in writing or by mutual oral agreement, with a hospital to establish reimbursement rates.

- (c) Subject to Subsection (11)(d), [for the time period beginning on May 10, 2016, and ending on July 1, 2018,] a workers' compensation insurance carrier or self-insured employer that is reimbursing a hospital that has not entered into a contract described in Subsection (11)(b) shall reimburse the hospital for covered medical services at 85% of the billed hospital fees for the covered medical services.
 - (d) A hospital may not engage in balance billing.
- (e) Covered services paid under a health benefit plan are subject to coordination of benefits in accordance with Sections 31A-22-619.6 and 34A-2-213.
- (12) (a) Subject to appellate review under Section 34A-1-303, the commission has exclusive jurisdiction to hear and determine:
- (i) whether goods provided to or services rendered to an employee are compensable pursuant to this chapter or Chapter 3, Utah Occupational Disease Act, including:
 - (A) medical, nurse, or hospital services;
 - (B) medicines; and

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- (C) artificial means, appliances, or prosthesis;
- (ii) except for amounts charged or paid under Subsection (11), the reasonableness of the amounts charged or paid for a good or service described in Subsection (12)(a)(i); and
 - (iii) collection issues related to a good or service described in Subsection (12)(a)(i).
- (b) Except as provided in Subsection (12)(a), Subsection 34A-2-211(6), or Section 34A-2-212, a person may not maintain a cause of action in any forum within this state other than the commission for collection or payment for goods or services described in Subsection (12)(a) that are compensable under this chapter or Chapter 3, Utah Occupational Disease Act.

Legislative Review Note Office of Legislative Research and General Counsel