MAINE STATE LEGISLATURE

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(EMERGENCY) SECOND SPECIAL SESSION

ONE HUNDRED AND THIRT	EENTH LEGISLATURE
Legislative Document	No. 1918
S.P. 692	In Senate, October 16, 1987
Received by the Secretary of 1987. Referred to the Committee or printed pursuant to Joint Rule 14	n Labor and 2,500 ordered
JOY J. O'BR Presented by Senator COLLINS of A Cosponsored by Representative	IEN, Secretary of the Senate roostook. e WILLEY of Hampden.
STATE OF I	MAINE
IN THE YEAR OF NINETEEN HUNDRED AT	
AN ACT to Reform the Compensation Act to As Maine Work	ssure Coverage for
Emergency preamble. Where ture do not become effective journment unless enacted as e	
Whereas, there is a stall employers in the State prion coverage; and	
Whereas, most, if not all iers writing such workers' o the State are withdrawing fro	compensation insurance in

Whereas, comprehensive legislative reform is urgently needed as it is the only possibility for saving the private insurance market for workers' compensation, without which employers cannot operate; and

Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

12 Be it enacted by the People of the State of Maine as 13 follows:

Sec. 1. 26 MRSA §42, as amended by PL 1977, c. 615, is further amended to read:

§42. Powers and duties

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17 The bureau shall collect, assort and arrange sta-18 tistical details relating to all departments of labor 19 and industrial pursuits in the State; to trade unions 20 and other labor organizations and their effect 21 labor and capital; to the number and character of in-22 dustrial accidents and their effect upon the injured, 23 dependent relatives and upon the general public; to other matters relating to the commercial, in-24 25 dustrial, social, educational, moral and sanitary 26 conditions prevailing within the State, including the of firms, companies or corporations, where lo-27 28 cated, the kind of goods produced or manufactured, 29 time operated each year, the number of employees 30 classified according to age and sex and the daily and 31 average wages paid each employee; and the exploita-32 tion of such other subjects as will tend to promote οf 33 the permanent prosperity of the industries 34 State. The director is authorized and empowered, sub-35 ject to the approval of the Governor, to accept from 36 any other agency of government, individual, group corporation such funds as may be available in carry-37 38 ing out this section, and meet such requirements with 39 respect to the administration of such funds, not 40 consistent with this section, as are required as con-41 ditions precedent to receiving such funds. An ac-42 counting of such funds and a report of the use

which they were put shall be included in the biennial 2 report to the Governor. Each agency of government shall cooperate fully with the bureau's efforts 3 compile labor and industrial statistics. The director 4 5 cause to be enforced all laws regulating the employment of minors and women; all laws established б for the protection of health, lives and limbs of op-7 8 erators in workshops and factories, on railroads 9 other places; all laws regulating the payment of wages, and all laws enacted for the protection of the 10 11 working classes. He shall, on or before the first day 12 of July, biennially, report to the Governor, and may 13 make such suggestions and recommendations as he may 14 deem necessary for the information of the Legisla-15 may from time to time cause to be printed Не 16 and distributed bulletins upon any subject that shall 17 be of public interest and benefit to the State; and 18 may conduct a program of research, education and pro-19 motion to reduce industrial accidents. The director may review various data, such as worker compensation 20 records, as well as other applicable information re-21 22 lating to any public or private employer's safety ex-23 perience. When any individual public or private employer's safety experience is such that causes the director to question seriously the safe working envi-24 25 26 ronment of that employer, the director may offer such 27 safety education and consultation programs to that employer that may be beneficial in providing a safer 28 work environment. If the employer refuses such 29 30 sistance, or is in serious noncompliance which may 31 lead to injuries or serious threats to worker 32 continue, then the director may communicate his con-33 cerns to appropriate agencies such as the States Occupational Safety and Health Administration. 34

Sec. 2. 26 MRSA §42-A, sub-§2, ¶A, as enacted by PL 1985, c. 372, Pt. A, §6, is amended to read:

A. The development and application of a state-wide safety education and training program to familiarize employers, supervisors, employees and union leaders with techniques of accident investigation and prevention including education and training assistance to employers and employees under sections 1715 and 1720 of the Chemical Substance Identification Program;

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1	Sec. 3. 26 MRSA §51 is enacted to read:
2	§51. Commission on Safety in the Maine Workplace
3 4 5 6 7 8 9	l. Purpose; members. There is established a Commission on Safety in the Maine Workplace which will consist of knowledgeable citizens who will examine safety attitudes, programs and procedures in Maine's workplaces; identify initiatives to reduce the frequency, severity and cost of work-related accidents and illnesses; and promote and improve best-practice safety programs.
11 12 13	A. The Governor shall appoint the members of the commission, which shall consist of not more than 12 members, including:
14 15 16	(1) Three members with expertise and pro- fessional qualifications in the field of oc- cupational safety and health;
17 18 19 20	(2) Two members representing workers and 2 members representing private employers, all of whom must be knowledgeable in the area of workplace safety; and
21 22 23	(3) Other members such as the Governor deems necessary and appropriate to carry out the purpose of this section.
24 25 26 27 28 29 30	B. The Governor shall appoint the chairman of the commission and the Commissioner of Labor shall serve as vice-chairman. The commission shall actively seek information and involvement from organized labor, the professional safety community, the various state and federal agencies concerned with safety, and interested private citizens, groups and organizations.
32 33 34 35	2. Duties. The commission shall conduct studies and hold public meetings as necessary to develop findings and recommendations respecting each of the following issues:

A. Evaluation of the effectiveness of current worker safety efforts, practices and programs in

	1 2	the State and the attitudes of employers and workers toward safety;
	3 4 5 6 7	B. Identification of the best-practice safety programs in the State and elsewhere, whose wide-spread adoption would reduce the incidence, severity and cost of workplace accidents and illnesses;
	8 9 10 11	C. Identification of emerging occupational safe- ty and health issues that will be of importance in the future and assessment of their policy im- plications;
	12 13 14 15 16	D. Determination of existing statistical information on accidents and illnesses and reliability and adequateness to monitor trends and to support effective safety rehabilitation and compensation programs; and
	17 18	E. Review the decision of occupational safety loan requests as provided for in section 63.
	19 20	3. Recommendations. The commission shall make recommendations on a continuing basis to include:
<i>.</i>	21 22 23 24 25 26 27	A. Specific recommendations for action by the Governor, the Legislature, educators, the safety profession, employers and workers which will reduce the frequency, severity and costs of work-related accidents and illnesses and which will enhance, promote and improve safety in Maine's workplaces; and
	28 29 30 31 32	B. Recommendations for actions that will improve employer, worker and public attitudes toward safety in the workplace and that will create a continuing public-private, employer-employee partnership in the area of job safety.
\	33 34 35 36 37	The Department of Labor shall provide administrative, clerical and technical support to the commission and act as its fiscal agent unless otherwise provided for. All agencies of the State shall cooperate fully with the commission.

Sec. 4. 26 MRSA §61, sub-§2, as amended by PL 1985, c. 819, Pt. C, §5, is further amended to read:

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- 3 Source of funds. The commissioner shall an-4 nually assess a levy based on actual annual workers' 5 compensation paid losses, excluding medical payments, 6 paid in the previous calendar year by employers under 7 Title 39, the Workers' Compensation Act. As-soon-as 8 practicable-after--July--1,--1985,--the--commissioner 9 shall--assess--upon--and--collect-from-each-insurance 1.0 carrier-licensed-to-do-workers--compensation-business 11 in-the-State,-and-from-each-self-insured-employer-au-12 thorized-to-make-workers'-compensation--payments--di-13 rectly----to---their---employees,---excluding---group 14 self-insurers,-an-amount-equal-to-1/4-of--1%--of--the 15 total--workers---compensation--benefits,-exclusive-of 16 medical-payments,-paid-by-the--insurance--carrier--or 17 self-insured--employer--during--the-previous-calendar 18 year. As soon as practicable after July-1,-1986,-and 19 July 1st of each year thereafter, the commissioner shall assess upon and collect from each carrier, 20 21 group and individual self-insured employer 22 equal to that proportion of the current fiscal year's 23 appropriation, exclusive of any federal funds, for 24 the safety education and training division which the 25 total workers' compensation benefits, exclusive of 26 medical payments, paid by each carrier, each group, each individual self-insured employer, bears to 27 the total of the benefits paid by all carriers, and 28 29 group and individual self-insured employers, during 30 the previous calendar year, except that the total 31 amount levied annually may not exceed 1/4-of 1% of 32 the total of the compensation benefits paid by 33 carriers, and group and individual self-insured em-34 ployers during the previous calendar year.
- 35 Sec. 5. 26 MRSA §63, sub-§1, ¶¶D and E, as en-36 acted by PL 1985, c. 372, Pt. A, §7, are amended to 37 read:
 - D. A majority vote of the loan-review-panel Commission on Safety in the Maine Workplace is necessary to recommend approval of a loan which shall then be transmitted to the department for final disposition in accordance with the policies adopted by the department;

	1 2 3 4 5 6 7 8 9	E. Loan applications shall be reviewed by both the loan-review-panel commission and the department for feasibility, such as, for the general reasonableness and safety need for the proposal, whether the applicant has sufficient capital, whether an adequate safety analysis or other counseling requirement has been completed, whether the applicant is credit worthy within the scope of this program and whether the collateral offered to secure the loan is adequate;
	11 12 13	Sec. 6. 26 MRSA §63, sub-§2, as enacted by PI 1985, c. 372, Pt. A, §7, is repealed and the following enacted in its place:
	14 15 16	2. Commission on Safety in the Maine Workplace. The commission shall review loan proposals under this section.
	17 18 19	A. The commission shall meet at least twice yearly at the State Capital or any other place designated by the chairman.
)	20 21 22 23 24	B. The appointed members of the board shall be compensated according to Title 5, chapter 379. The commission chairman shall approve and countersign all vouchers for expenditures under this section.
	25 26	Sec. 7. 26 MRSA §1720, as amended by PL 1985, c. 170, §1, is further amended to read:
	27	§1720. Chemical Information and Training Program
	28 29 30 31	1. Assistance to employers. The director shall, upon request, provide assistance to employers in the development and conduct of training programs for employees and local public safety personnel.
)	32 33 34 35 36 37 38 39	2:Chemical-Information-and-TrainingAssistance Fund:The-director-shall-establish-by-rule-a-segre-gated;-nonlapsing-Chemical-InformationandTraining AssistanceFundwhichshallbefinancedby-fees levied-on-employers-subject-to-thischapter:Revenues-paid-into-the-fund;-including-interest;-shall-be usedexclusivelyforcarryingout-the-purposes-of this-chapter;-including-but-not-limited-to;-informa-

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28 29	The-fee-is-payable	-prior-to-July-	ist-of-each-calendar
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Sec. 8. 26 MRSA \$1724, as amended by PL 1985, c.

- 1 170, §2, is further amended to read: 2 §1724. Report to Legislature 3 Each year by March 15th the director shall report 4 the Legislature on the Bureau of Labor Standard's Standards' experience under this chapter, including progress in implementation, the status of the train-5 including 6 7 ing assistance program, evidence of improved safety 8 and any recommendation-on-fee-structure records, 9 recommendations. Any-amount-of-these-fees--collected 10 in-a-year-that-exceeds-the-allocation-from-the-Train-11 ing-Assistance-Pund-for-that-year-shall-be-applied-so 12 as--to--reduce--fees--levied--on-employers-under-this 13 chapter-in-the-succeeding-year-Sec. 9. 14 39 MRSA §2, sub-§§14 and 15 are enacted 15 to read: 16 Maximum medical improvement. "Maximum medical improvement" means the date after which further recovery and further restoration of function can no 17 18 19 longer be reasonably anticipated, based upon 20 able medical probability. 21 15. Permanent impairment. "Permanent impairment" means any anatomic or functional abnormality or loss 22 23 existing after the date of maximum medical improvement which results from the injury. 24 25 §22-C, as amended by PL 1987, Sec. 10. 39 MRSA 26 c. 206, §1, is repealed. 27 Sec. 11. 39 MRSA §22-D, as amended by $_{
 m PL}$ 1987, 28 c. 206, §2, is repealed. 39 MRSA §51-B, sub-§4, as amended by PL 29 Sec. 12. 30 1985, c. 729, §1, is further amended to read: 31 Compensation for impairment; compensation for
 - medical expenses. Compensation for impairment under sections-56-and-56-A section 56-B shall not be payable prior to the date on which the injured employee reaches the stage of maximum medical improvement. It shall become due and payable within 90 days after the employer has notice that maximum medical improvement been attained. For-the-purpose-of-this-subsec-

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tion,-"maximum-medical-improvement"--means--the--date 1 2 after--which-further-recovery-and-further-restoration 3 of-function-can-no-longer-be-reasonably--anticipated, 4 based--upon-reasonable-medical-probability. Compensa-5 tion for medical expenses, aids and other services 6 is due and payable within 90 days section 52 7 from the date a request is made for payment of these 8 expenses.

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Sec. 13. 39 MRSA §51-B, sub-§7, as amended by PL 1983, c. 682, §5, is further amended to read:

11 Notice of controversy. If the employer, prior to making payments under subsection 3, controverts 12 13 claim to compensation, he shall file with the 14 commission, within 14 days after an event which gives 15 rise to an obligation to make payments under subsec-16 3, a notice of controversy in a form prescribed by the commission. If the employer, prior to making 17 payments under subsection 4, controverts the claim to 18 19 compensation, he shall file with the commission, 20 within 90 days after an event which gives rise to 21 obligation to make payments under subsection 4, a no-22 tice of controversy in a form prescribed by the com-23 mission. The notice shall indicate the name of 24 claimant, name of the employer, date of the alleged 25 injury or death and the grounds upon which the claim compensation is controverted. The employer shall 26 27 promptly furnish the employee with a copy of the 28 tice.

29 at the end of the 14-day period in subsection 3 or the 90-day period in subsection 4, the employer has not filed the notice required by this subsection, 30 31 32 shall begin payments as required under those subsections. 33 In the case of compensation for incapacity under subsection 3, he may cease payments 34 and 35 the commission a notice of controversy, only as 36 provided in this subsection, no later than 44 an event which gives rise to an obligation to 37 make payments under subsection 3. Failure If the 38 39 ployer has received written notice of an event which 40 gives rise to an obligation to make payments, failure to file the required notice of controversy prior to 41 42 expiration of the 44-day period, calculated from 43 the employer's receipt of the written notice 44 of compensation under subsection 3, constitutes

acceptance by the employer of the compensability of the injury or death. Failure If the employer has received written notice of an event which gives rise to an obligation to make payments, failure to file the required notice of controversy prior to the expiration of the 90-day period under subsection 4 calculated from the employer's receipt of the written notice constitutes acceptance by the employer of the extent of impairment claimed or the reasonableness of the medical services claimed.

If, at the end of the 44-day period the employer has not filed a notice of controversy, or if, pursuant to a proceeding before the commission, the employer is required to make payments, the payments may not be decreased or suspended, except as provided in section 100.

Sec. 14. 39 MRSA §52, as amended by PL 1985, c. 729, §2, is further amended by adding after the 4th paragraph a new paragraph to read:

No employer shall be liable under this Title charges for health care services to an injured employee in excess of those established pursuant to Title 24-A, section 2370, except upon petition to commission as provided in this section. Charges in excess of those established pursuant to Title section 2370 shall be allowed against the employer if the provider satisfactorily demonstrates to an independent medical examiner that his services were extraordinary or that he incurred extraordinary costs in treating the employee as compared to those reasonably contemplated for the service provided. The examiner shall be appointed from the list of examiners maintained by the chairman. An injured employee shall not be liable for any portion of the cost of medical services under this chapter.

Sec. 15. 39 MRSA §52-A, sub-§1, as enacted by PL
1981, c. 514, §2, is amended to read:

1. Certificate of authorization. Any employee who makes any claim for compensation, enters into any agreement for compensation or is receiving compensation shall, upon request by the employer or an independent medical examiner, execute a certificate, in a

- form prescribed by the commission, authorizing the employer or examiner to obtain, after payment of a reasonable fee, in writing, from any physician, osteropath, chiropractor or any other health care provider any written information which is or has been obtained in connection with the examination of treatment of the employee and which relates to any injury or disease for which compensation is claimed.
- 9 If any employee fails, after request, to execute such 10 a certificate, the employer may petition the edmmiss sion-for-the-following-relief within 20 days:
- A. As to any employee who is making a claim for compensation, an-order-suspending any action on the employee's claim shall be suspended, without interest under section 72, until the certificate is executed; and
- B. As to any employee who is receiving compensation or who has entered into an agreement for the payment of compensation, an-order-suspending--the payment of compensation until the certificate is executed.
- Sec. 16. 39 MRSA \$53-A, as amended by PL 1987, c. 156, §1, is repealed and the following enacted in its place:
- 25 §53-A. Maximum benefit levels
- The maximum weekly benefit payable under section 54-A, 55-A or 58-A is \$447.92. Beginning July 1st in the year in which this maximum benefit level is equal to or less than 133 1/3% of the state average weekly wage as determined by the Maine Unemployment Insurance Commission, it shall be adjusted annually so that it equals 133 1/3% of the state average weekly wage as of each July 1st.
- 34 Sec. $\overline{17}$. 39 MRSA §54-A, as amended by PL 1985, 35 c. 601, §2, is further amended to read:
- 36 §54-A. Compensation for total incapacity
- 37 While the incapacity for work resulting from the 38 injury is total, the employer shall pay the injured

employee a weekly compensation equal to 2/3 his average gross weekly wages, earnings or salary, but not more than the maximum benefit under section 53-A, nor less than \$25 weekly. This Beginning on the 2nd anniversary of the injury, this weekly compensation shall be adjusted annually so-that-it-continues-to-bear-the same-percentage-relationship--to--the--state--average weekly--wage7--as--computed-by-the-Maine-Unemployment Insurance-Commission, as-it-did-at-the--time--of--the injury, but in no case may the annual adjustment exceed the lesser of 5% or the actual percentage increase in the state average weekly wage for the previous year.

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resulted in permanent total incapacity: The total and irrevocable loss of sight of both eyes; the loss of 17 18 both hands at or above the wrist; the loss of 19 feet at or above the ankle; the loss of one hand and 20 one foot; an injury to the spine resulting in permanent and complete paralysis of the arms or legs; or 21 22 injury to the skull resulting in incurable 23 inbecility or insanity. In the event of such permanent total incapacity, the employer shall pay the em-24 25 ployee a weekly compensation equal to 2/3 his average 26 gross weekly wages, earnings or salary, but not than the maximum benefit under section 53-A, nor less 27 28 than \$25 weekly. This Beginning on the 2nd anniversa-29 of the injury, this weekly compensation shall be 30 adjusted annually so-that-it-continues--to--bear--the 31 same--percentage--relationship--to--the-state-average 32 weekly-wage,-as-computed-by--the--Maine--Unemployment 33 Insurance--Commission,--as--it-did-at-the-time-of-the injury, but in no case may the annual adjustment ex-34 35 ceed the lesser of 5% or the actual percentage in-36 crease in the state average weekly wage for the pre-37 If the totally incapacitated employee vious year. 38 dies, as a result of this injury, leaving dependents 39 who were dependent upon his earnings at the time of

In the following cases it shall, for the

of this Act, be conclusively presumed that the injury

The annual adjustment required by this section shall be made on the 2nd and each succeeding anniversary date of the injury, except that where the effect of the maximum under section 53-A is to reduce the

his injury, then payments shall be made to the depen-

dents in accordance with section 58-A.

amount of compensation to which the claimant would otherwise be entitled, the adjustment shall be made annually on July 1st.

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Notwithstanding this Act, any employee whose degree of permanent impairment is found, pursuant to section 56-B, to be equal to or less than 75%, shall not be eligible for benefits under this section.

This section applies only to employees injured on and after the effective date of this section.

- Sheltered workshops. The \$25 weekly minimum compensation limitation under this section does not apply to a handicapped individual who is employed by a sheltered workshop and who claims compensation unsection. "Sheltered workshop" means a fathis cility, certified by the United States Department Labor regulations covering employment of handicapped clients, engaged in production or service operation the primary purpose of providing gainful employment for those who cannot be readily absorbed in the competitive labor market, or of providing interim employment during such time as employment opportunities for them in the competitive labor market do not exist.
- Sec. 18. 39 MRSA §55-A, as enacted by PL 1985, c. 372, Pt. A, §19, is repealed and the following enacted in its place:

§55-A. Compensation for partial incapacity

While the incapacity for work resulting from the injury is partial, the employer shall pay the injured employee a weekly compensation equal to 2/3 the difference, due to the injury, between his average gross weekly wages, earnings or salary before the injury and the weekly wages, earnings or salary which he is able to earn after the injury, but not more than the maximum benefit under section 53-A. Payments shall not continue subsequent to maximum medical improvement for longer than the number of weeks shown in the following schedule:

Percent of Permanent Impairment Number of Weeks

	1 2 3 4	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	5 6 7 8 9 10 11 12 13 14	Notwithstanding this section, benefits under this section shall be reduced by a factor determined by dividing the number of days the employee has been employed by any employer during the 12 months immediately preceding the injury by 250, except when the employee is a full-time nonseasonal employee. For purposes of this section, an employee will be considered as "full-time" if regularly employed for 32 or more hours a week and "nonseasonal" if the employee's anticipated total tenure with the employer is 6 months or more.
	16 17	This section applies only to employees injured on or after the effective date of this section.
	18 19	<pre>Sec. 19. 39 MRSA §56, as amended by PL 1985, c. 372, Pt. A, §20, is repealed.</pre>
	20 21	<pre>Sec. 20. 39 MRSA \$56-A, as amended by PL 1985, c. 372, Pt. A, §21, is repealed.</pre>
1	22	Sec. 21. 39 MRSA §56-B is enacted to read:
	23	§56-B. Permanent impairment and injury
	24 25 26 27 28 29	1. Weekly benefit. In the case of permanent impairment or injury, there shall be paid to the employee a weekly benefit equal to 2/3 of the state average weekly wage as computed by the Maine Unemployment Insurance Commission for the number of weeks shown in the following schedule:
	30 31	A. Zero weeks for each percent of permanent impairment to the body as a whole from 0 to 14%;
	32 33 34	B. Three and 1/2 weeks for each percent of permanent impairment to the body as a whole from 15% to 50%;
	35 36 37	C. Four and 1/2 weeks for each percent of permanent impairment to the body as a whole from 51% to 85%; and

D. Eight weeks for each percent of permanent impairment to the body as a whole greater than 85%.

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- Schedules. In order to reduce litigation and establish more certainty and uniformity in the rating of permanent impairment, the commission shall establish and the independent medical examiner, acting in accordance with section 92-A, shall use schedule for determining the existence and degree of permanent impairment based upon medically or scientifically demonstrable findings. The schedule shall be based on generally accepted medical standards for determining impairment and may incorporate all or part of any one more generally accepted schedules used for such purpose, such as the American Medical Association's Guides to the Evaluation of Permanent Impairment. Pending the adoption by rule of a permanent ule, Guides to Evaluation of Permanent Impairment, 2nd edition, copyright 1984, by the American Medical Association, shall be the temporary schedule and shall be used for the purposes of this subsection.
- Disfigurement. The commission may award proper and equitable compensation for serious facial or head disfigurement not to exceed 2/3 of the state average weekly wage, as computed by the Maine Unemployment Insurance Commission, multiplied by 50, including a disfigurement continuous in length which the facial area and also extends into partially in the neck region. The commission, if in its the earning capacity of an employee has been or may in the future be impaired, may award compensation for any serious disfigurement in the region above the sterno clavicular articulations anterior to and including the region of the sterno cleido mastoid muson either side, but no award for the total disfigurement as set forth may, in the aggregate, exceed 2/3 of the state average weekly wage, as computed by the Maine Unemployment Insurance Commission, multiplied by 50. Notwithstanding this section, 2 or more serious disfigurements, not continuous in length, resulting from the same injury, if partially in the faarea and partially in the neck region as described in this subsection, shall be deemed to facial disfigurement.
 - 4. Filing of petition. A petition for determina-

3	mum medical improvement, except that a petition for
4	the determination of a hearing impairment due to ar
5	injury shall be filed with the commission within 2
6	years from the date of injury.
7	5. Reduction of benefits. In the event that an
8	employee sustains an impairment or injury that quali-
9	fies for benefits under this section and the employee
10	has received or is receiving total or partial inca-
11	pacity benefits with respect to the same injury under
12	section 54-A or 55-A, then benefits payable under
13	this section shall be reduced by the full amount of
14	all total and partial incapacity benefits paid since
15	the date of injury.
	And the state of t
16	Sec. 22. 39 MRSA §71, as amended by PL 1983, c.
17	479, §13, is repealed.
18	Sec. 23. 39 MRSA §71-A is enacted to read:
19	§71-A. Lump sum payments
20	1. Commutation. Subject to the conditions and
21	limitations of this section, the employer and employ-
22	ee may by agreement discharge any liability for com-
23	pensation, in whole or in part, by the payment by the
24	insurer of an amount to be approved by the commis-
25	sion. Either the employer, the employee or the
26	employee's dependents may petition the commission for
27	an order commuting all payments for future benefits
28	to a lump sum.
29	2. Medical expenses; prohibition. In no event
30	may a lump sum payment be allowed in exchange for the
31	release of an employers' liability for future medical
32	expenses.

tion of the percentage of impairment shall be filed with the commission no earlier than the date of maxi-

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those rights;

3. Review. Prior to approval of any lump sum settlement, the commissioner shall review the following factors with the employee:

A. The employee's rights under this Title and the effect a lump sum settlement would have upon

- B. The purpose for which the settlement is requested;
- The employee's post-injury earnings and prospects, considering all means of support, includ-ing the projected income and financial security resulting from proposed employment, self-employment, business venture or investment 8. the prudence of consulting with a financial or other expert to review the likelihood of success of such projects; and
 - D. Any other information, including the age of the employee and of the employee's dependents, which would bear upon whether the settlement is in the best interest of the claimant.

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 The Office of Employee Assistants shall initiate the review within 14 days of its receipt of a request for a settlement review. The office shall send a report on the review to the commission within 5 days of its completion. The office shall not approve any settlement for any employee who fails to attend a scheduled review without good cause. Nothing in this subsection may be deemed to create any additional liability on the part of the State.

- 4. Approval. The commission shall not approve any lump sum settlement unless, after receiving a report from the Office of Employee Assistants, the commission deems that settlement to be in the employee's best interest in light of the factors reviewed with the employee under subsection 3.
- Sec. 24. 39 MRSA §81, as enacted by PL 1985, c. 372, Pt. A, §29, is amended by adding after the first paragraph a new paragraph to read:

In order to minimize disputes over rehabilitation issues while insuring that rehabilitation services appropriate to the employee's needs are provided, determinations of suitability for rehabilitation services, development of rehabilitation plans and monitoring of rehabilitation services rendered by providers pursuant to approved plans shall be the responsibility of the Office of Employment Rehabilitation.

1. Office of Employment Rehabilitation; appoint-

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ment. An Office of Employment Rehabilitation shall be maintained under the direction of a rehabilitation administrator, in this subchapter referred to as the "administrator." The chairman may appoint and remove the administrator and a sufficient number of assistant administrators to carry out this subchapter, with the concurrence of the commission. The administrator shall report to and be directed by the chairman, shall supervise the assistant administrators and shall carry out the duties assigned to the administrator in this Act.

Sec. 26. 39 MRSA $\S82$, sub- $\S3$, $\S9E$ & F, as enacted by PL 1985, c. 372, Pt. A, $\S29$, are amended to read:

The-commission-shall-not-provide-direct-rehabilitation-services. The administrator and his staff shall evaluate the suitability of injured employees for rehabilitation, develop rehabilitation plans when appropriate, monitor the provision of services to employees under rehabilita-tion plans and review and modify these plans as necessary. Rehabilitation services under this subchapter plans developed and approved by the administrator shall be provided by private and public rehabilitation counselors, governmental agencies, in-house rehabilitation counselors and others approved by the administrator as qualified to provide rehabilitation services under the commission's rules. The administrator shall consider a rehabilitation counselor's rate of successfully placing rehabilitated employees in jobs relative to the placement rates of other counselors in the State, taking into account variables such as geographical area and the difficulty of case load, as fundamental in deciding whether to approve the counselor as qualified. The administrator shall compile annually a list of approved providers of rehabilitation services, except that in-house rehabilitation counselors shall not pear on the list, and shall make this list available to the parties.

1 F. The administrator shall develop fee schedules 2 for providers of rehabilitation services, listing 3 the maximum allowable fees for testing,-evalua-4 tions-of-suitability,-development-of--rehabilita-5 tion-plans-and-other rehabilitation services.

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- (1) In setting a fee, the administrator shall take into account the usual fee charged to provide that service in the State and the reasonable and necessary costs of providing the service.
 - (2) The administrator may grant prior approval of a fee higher than the maximum in the rate schedule in exceptional circumstances.
 - (3) Fee schedules developed under this paragraph do not apply to services provided by in-house providers of rehabilitation services.
- 2. Evaluation of suitability. An evaluation of the suitability of rehabilitation for the employee shall be submitted-to-the-administrator made by an assistant administrator within 30 days after the administrator makes an order of evaluation under section 85, subsection 1.
 - A. The evaluation of suitability shall be done by a provider of rehabilitation services selected by the employee from the list of approved providers maintained by the administrator.
 - B. If the employer objects to the employee's selection, he may request within 10 business days after notification of that selection that the administrator schedule a meeting within 10 business days between the employer, the employee and the administrator for the purpose of discussing which provider may be mutually acceptable.
 - C. The employee shall have the final decision on which approved provider shall be utilized.

	1 2	Sec. 28. 39 MRSA §83, sub-§3, as enacted by PL 1985, c. 372, Pt. A, §29, is amended to read:
	3 4 5 6 7	3. <u>Development of plan</u> . A rehabilitation plan shall be developed by an <u>assistant administrator</u> and submitted to the administrator within 60 days after the administrator makes an order of plan development under section 85, subsection 2.
	8 9 10 11	AThe-plan-shall-be-developed-by-a-providerof rehabilitationservices-selected-by-the-employee from-the-list-of-approved-providers-maintained-by the-administrator.
	12 13 14	B. In developing any plan, consideration shall be given to the employee's qualifications, including, but not limited to:
	15	(1) His work history;
	16	(2) His interests;
	17	(3) His aptitude;
	18	(4) His education;
	19	(5) His skills;
	20	(6) His work life expectancy;
	21	(7) The locality of employment; and
	22	(8) The likelihood of reemployment.
	23 24 25 26	C. A plan shall include a job placement strategy and a specific program of proposed actions de- signed and likely to achieve job placement for the employee.
	27 28 29 30	(1) The plan development shall consider and the plan may include a provision for trial work periods not to exceed 3 months with the employer or subsequent employer.
)	31 32	(2) The administrator may approve trial work periods as part of a plan.

Sec. 29. 39 MRSA §85, sub-§§2 and 3, as enacted
by PL 1985, c. 372, Pt. A, §29, are amended to read:

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- 2. Order of plan development. When the administrator finds that rehabilitation is suitable for the employee following the submission of an evaluation of suitability under section 83, subsection 2, he shall order the parties-to-develop development of a rehabilitation plan.
- 3. Order of plan review or modification. Upon request-of-a--party--or--the--administrator,--reports Reports of an employee's progress under a rehabilitation plan shall be made by the provider of rehabilitation services to all the parties and the administrator. The administrator, upon request of any party or on--his-own-motion of the assistant administrator assigned to the case, may order the suspension, termination or modification of a plan upon a showing of good cause, including, but not limited to:
- A. A changed physical condition which does not allow the employee to continue pursuing the rehabilitation plan;
- 22 B. The employee's performance level indicates he cannot complete the plan successfully;
- C. An employee does not cooperate with a plan;
- D. A change in the economic conditions that existed when plan implementation began renders the plan unfeasible; or
- 28 E. The employer and employee agree on the pro-29 posed plan suspension, termination or modifica-30 tion.
- 31 Sec. 30. 39 MRSA §86, first ¶, as enacted by PI 1985, c. 372, Pt. A, §29, is amended to read:
 - The following priorities shall be used in evaluating alternative rehabilitation plans. No higher numbered priority may be utilized unless all lower numbered priorities have been determined by-the-rehabilitation-counselor to be unlikely to result in a suitable job placement for the employee. If a lower

1 number priority is clearly inappropriate for the em-2 ployee, the next higher numbered priority shall be utilized as follows: 3 4 39 MRSA §90, sub-§2, as enacted Sec. 31. by PL5 1985, c. 372, Pt. A, §29, is amended to read: 6 Sunset. This subchapter is repealed, effec-7 tive July 1, ± 988 1989, except that the chairman 8 by rule provide for a transition period of employment 9 for the administrator of up to 3 years and for the 10 disposition according to this subchapter οf 11 arising out of injuries suffered during the period in 12 this subchapter is effective. The money in 13 the Employment Rehabilitation Fund shall 14 that fund until all obligations against that fund un-15 this subchapter have been paid, and thereafter 16 the balance remaining shall be paid to the Second In-17 jury Fund. 18 Sec. 32. 39 MRSA §92, sub-§9, ¶E, as enacted 19 PL 1985, c. 372, Pt. A, §31, is amended to read: 20 chairman Whenever the determines 21 fraud, attempted fraud or violation of this 22 rules may have occurred, he shall report in 23 writing all information concerning it to the At-24 torney General or his delegate for appropriate action, including a civil action for recovery 25 26 funds and criminal prosecution by the Attorney 27 General. 28 The chairman may also, after hearing, modify 29 benefit award and assess a civil penalty in an 30 amount not to exceed \$1,000. These remedies 31 in addition to any remedies available pursuant to 32 section 100 and shall be enforceable by the Superior Court as provided for by section 103-E. Civ-33 34 il penalties assessed under this section shall be 35 payable to the General Fund. 36 Sec. 33. 39 §92, MRSA sub-§10 is enacted to

Independent medical examiners. The chairman

shall establish and maintain a list of physicians and

surgeons willing and able to serve as independent

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read:

medical examiners, classified by specialty. chairman shall adopt rules relating to necessary qualifications for independent medical examiners, grounds for removal from the list and fees for ser-vices to be rendered by the examiners. The indepen-dent medical examiners shall make all necessary determinations of physical or medical condition as re-quired pursuant to section 92-A. The independent medical examiners shall also determine pursuant to section 52, the propriety of any requests for medical fees in excess of the maximum reimbursement levels established pursuant to Title 24-A, section 2370.

Sec. 34. 39 MRSA §92-A is enacted to read:

§92-A. Independent medical examiners, procedures and standards

- 1. Appointment. Whenever the degree of an injured employee's impairment or suitability for return to work is at issue in a petition for review, the commission shall appoint an independent medical examiner to make these determinations. The examiner shall be appointed from the list maintained by the chairman. The examiner appointed in any particular case shall not be the claimant's personal physician and shall not have treated the claimant with respect to the injury for which benefits are being paid. The examiner appointed shall be the next individual in a preestablished rotation within the list for the appropriate specialty, if any, and geographical area.
- 2. Examination. Upon appointment, the independent medical examiner shall examine the injured employee and any relevant medical records to determine whether the employee has reached maximum medical improvement, the employee's degree of medical improvement or medical suitability for work as appropriate in the particular case. The fee for the examination shall be paid by the commission. The commission shall assess each fee against the employer and shall have the ability to institute appropriate legal action to recover any unpaid funds.
- 40 3. Report. Upon completion of his examination of the employee and review of any relevant medical records, the examiner shall report his finding to the

- 4. Notice of report. The commission shall mail the examiner's report to the employer and the employee within 5 business days from its receipt of the report. Post office certificate of mailings to the employer and employee and their last known addresses shall be conclusive proof of receipt on the 3rd calendar day after mailing.
- 5. Request for 2nd report. The employer and employee shall have 20 days from receipt of the notice of the independent medical examiner's findings from the commission to request a review of his findings by a 2nd independent medical examiner. If a request for a review of the report is not filed, the findings of the independent medical examiner shall be considered as binding upon the parties and the commission. If a request for review is filed, it shall specify whether, and in what respects, a review of the examiner's factual findings relating to the employee's condition, the examiner's conclusions, or both is sought.
- 6. Second report; limitations. Upon receipt of a request for review of the medical examiner's findings, the chairman shall designate a 2nd independent medical examiner from the list. The 2nd independent medical examiner shall review the report of the first examiner, the medical records available to the first examiner and may, if the findings of the first examiner relating to the employee's medical condition are at issue, reexamine the claimant. Upon completion of his review, the 2nd examiner shall advise the commission as to whether the first examiner's conclusions were clearly erroneous and if so, in what respects. If, and only if, the first medical examiner's report is found to be clearly erroneous, the 2nd medical examiner's report shall contain his conclusions and findings as to whether the employee has reached maxi-

- mum medical improvement, the percentage of impairment to the body as a whole determined in accordance with section 71-A and the extent to which the employee's medical condition allows the employee to return to work, as required by the particular case.
- The findings of the 2nd independent medical examiner shall be binding upon the commission and the parties.
- 8 If the 2nd examiner does not find one or more conclusions of the first examiner to be clearly erroneous, 9 10 the party requesting the review shall be responsible for all costs of the 2nd independent medical examin-11 12 In those cases in which one or more of the con-13 clusions of the first examiner were determined to be clearly erroneous, the costs of the 2nd examiner's review shall be paid by the commission. The commis-14 15 16 sion shall assess each fee against the employer and 17 shall have the ability to institute appropriate legal 18 action to recover any unpaid funds.
- 21 2. Standard for review. The basis for granting relief under this section is as follows.
- 23 On the-first a petition for review brought by 24 a party to an action, the commissioner shall de-25 appropriate relief, if any, under termine the 26 this section paragraph bу determining 27 employee's present degree of incapacity. 28 purposes of a first petition brought under section, evidence of the employee's medical condition at the time of an earlier determination or 29 30 31 approved agreement is relevant only if it 32 prove the present degree of incapacity. a party has sought and obtained a determination 33 34 under this section, a subsequent petition for review by that party may not be considered prior to 35 one year after the date of the last annual deter-36 mination, except as provided in paragraph B. 37
 - B. Once-a-party-has-sought-and-obtained-a-determination-under-this-section On any petition for review which is not filed pursuant to paragraph A, it is the burden of that the petitioning party

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	1 2 3 4 5 6	in-allproceedingson-his-subsequent-petitions under-this-section to prove by-comparativemedical-evidence that the employee's earning incapacity attributable to the work-related injury has changed since that the most recent previous determination.
	7 8	Sec. 36. 39 MRSA §100, sub-§3, as amended by PL 1981, c. 698, §196, is further amended to read:
	9 10	3. <u>Petition procedure.</u> Sections <u>92-A and</u> 96-A to 99 apply to petitions brought under this section.
	11 12 13	Sec. 37. 39 MRSA \$100, sub-\$4, as amended by PL 1985, c. 372, Pt. A, \$38, is repealed and the following enacted in its place:
	14 15 16 17 18	4. Payments pending hearing. If the employee is receiving payments at the time a petition is filed, the payments may be decreased or suspended pending the hearing upon the petition, in the following circumstances:
	19 20	A. The employer and the employee file an agree- ment with the commission;
	21 22	B. The employer or his insurance carrier files a certificate with the commission stating that:
	23 24 25	(1) The employee has left the State for reasons other than returning to his permanent residence at the time of injury;
	26 27	(2) The employee's whereabouts are unknown; or
	28	(3) The employee has resumed work;
٠	29 30	C. The employee refuses to submit to an examination; or
	31 32	D. In the case of benefits pursuant to sections 54-A and 55-A;
)	33 34 35	(1) If an independent medical examiner certifies that the employee is not permanently impaired and that the employee is able to

Τ	return to work; or
2	(2) If an employee who is receiving or has
3	received benefits for permanent impairment
4	under section 56-B is offered a job, bene-
5	fits payable under section 54-A or 55-A
6	shall be reduced to 2/3 of the difference
7	shall be reduced to 2/3 of the difference between his preinjury wage, as determined
8	under sections 54-A and 55-A, and the gross
9	weekly wage, earnings or salary of a job of-
LÕ	fered if:
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11	(a) The employer in good faith offers
L 2	the employee any job for which the em-
L3	ployee is reasonably suited by reason
L 4	of education, training and experience;
L 5	and
	I approximation
L6	(b) The independent medical examiner
L 7	certifies that the employee is physi-
L 8	cally able to do the job offered.
L 9	Benefits shall not be suspended or terminated
20	pending hearing under this paragraph unless the
21	employer has provided the employee with written
22	notice that benefits may be decreased or sus-
23	pended together with a summary of the reasons for
24	the proposed decrease or suspension and the em-
25	ployee is given 20 days, after that notice, to
26	submit to the commission any additional informa-
27	tion which is relevant to his continued
28	entitlement to benefits.
	d. 20 20 Mpd. d200 1 d5 1 1 pr
29	Sec. 38. 39 MRSA \$100, sub-\$5, as enacted by PL
30	1981, c. 514, §4, is repealed and the following en-
31	acted in its place:
32	5. Medical examination. Upon the request of the
33	petitioner, the commission shall, within 14 days of
34	receipt of the petition, order the employee to submit
35	to examination, as provided under section 92-A, by an
36	independent medical examiner designated by the com-
37	mission from the geographical area where the employee
38	resides. The fee for the examination shall be paid
39	by the employer.
	by the employer:

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Sec. 40. 39 MRSA \$108, as repealed and replaced by PL 1979, c. 713, \$2, is repealed.

Sec. 41. 39 MRSA §108-A is enacted to read.

§108-A. Reports

of Insurance.

- 1. Annual report. The Director of the Bureau of Labor shall provide an annual report relating to the number and character of occupational injuries and illnesses and their effect, as required under Title 26, section 42.
- A. The chairman of the commission shall further assist the Director of the Bureau of Labor to assure that necessary information regarding the administrative processes, costs and other factors related to the Workers' Compensation Act and the Occupational Disease Law are included in the report. The Superintendent of Insurance shall assist the Director of the Bureau of Labor by providing the following information on an annual basis: A tabulation of premium and loss data, on an accrual accounting basis, regarding those insurance companies authorized by the Bureau of Insurance to write workers' compensation in the State, together with similar data for self-insurance worker compensation plans regulated by the Bureau
 - B. The chairman of the commission, the Director of the Bureau of Labor and the Superintendent of Insurance shall provide such further occasional reports through their joint or individual efforts as they deem necessary to the improved function and administration of the Workers' Compensation Act and the Occupational Disease Law.
 - 2. Meeting. The Director of the Bureau of Labor Standards, the Superintendent of Insurance and the

1 chairman of the Workers' Compensation Commission 2 at least 3 times a year with appropriate shall meet staff and other state agencies to review the areas of data collection pertaining to the workers' compensa-3 4 5 tion system as well as interpret and coordinate ap-6 propriate data collection programs. The director shall chair this group. The group shall submit an 7 8 annual report to the Governor and the Legislature to the results of their data collection, as well as a 9 profile the workers' compensation program in the 10 of 11 State.

Sec. 42. 39 MRSA §110, sub-§2, as amended by PL 1985, c. 431, §2, is further amended to read:

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- 14 2. Injuries on or after effective date of sec-15 If an employee prevails in any proceeding 16 volving a controversy under this Act, the commission 17 or commissioner may assess the employer costs 18 reasonable attorney's fee and witness fees whenever 19 the witness was necessary for the proper and expedi-20 tious disposition of the case. All attorney fees al-21 lowable under this section on lump-sum settlements 22 pursuant to section 71-A shall be based on either a 23 flat or hourly rate and may not be on contingency 24 basis.
- 25 employer may not be assessed costs of an attor-The 26 ney's fee attributable to services rendered prior to 27 one week after the informal conference under section 28 94-B or, if the informal conference is waived, 29 vices rendered prior to the date of that waiver, un-30 less a party adverse to the employee was so repre-31 sented at that stage.
- 32 attorney representing an employee who prevails in No 33 a proceeding involving a controversy under this 34 may receive any fee from that client for an appear-35 ance before the commission, including preparation for 36 that appearance, except as provided in section 37 subsection 7 and section 94-B, subsection 3. Any at-38 torney who violates this paragraph shall lose his fee 39 liable in a court suit to pay damages to his 40 client equal to 2 times the fee charged for that cli-41 ent.
- 42 This subsection applies only to employees injured on

- and after the effective date of this subsection.
- A. For the purposes of this subsection, "prevail" means to obtain or retain more compensation or benefits under the Act than were offered to the employee by the employer in writing before the proceeding was instituted. If no such offer was made, "prevail" means to obtain or retain compensation or benefits under the Act.
- 9 Any employee, employer or insurance carrier 10 involved in any proceeding involving a controver-11 sy under this Act shall report to the commission, 12 forms provided by the commission, any amounts 13 that he has paid for legal assistance in that 14 proceeding, including any amount paid for an 15 employee's legal fees under this subsection.
 - Sec. 43. 39 MRSA §110-A is enacted to read:
- 17 §110-A. Appearance by officer or employee of corporation or partnership

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- Notwithstanding Title 4, section 807, the appearance of an authorized officer, employee or representative of a party in any hearing, action or proceeding before the commission in which the party is participating or desires to participate is not deemed to be an unauthorized practice of law and is not subject to any criminal sanction. In order to facilitate the efficient processing of any proceeding, the commission may, in its discretion, require the appearance of counsel on behalf of the party.
- Sec. 44. Applicability. Sections 9, 12 to 18, 21, 23, 32 to 38 and 42, shall apply only as to injuries occurring on or after the effective date of this Act.
- Emergency clause. In view of the emergency cited in the preamble, this Act shall take effect when approved.

 Section 1 empowers the Department of Labor to offer safety and consultation programs to improve safety and report noncompliance to the United States Occupational Safety and Health Administration. Section 2 provides for education and training assistance to further safety.

Section 3 establishes a Commission on Safety the Maine Workplace with not more than 12 members apthe Governor. The commission shall hold by public hearings to evaluate the effectiveness of safety efforts, identify best-practice safety programs, identify emerging occupational safety trends in safety and review occupational safety loan requests. The commission shall make tinuing recommendations to further safety. The commission shall be supported by the staff of the Bureau of Labor. Section 4 provides that the commission is funded by a 1% assessment on the workers' compensation carriers of the State. Sections 5 to 8 complete the technical responsibilities of the commission and provide for an annual report to the Legislature.

Section 9 defines maximum medical improvement and permanent impairment. Sections 10 and 11 repeal obsolete provisions and section 12 accomplishes a technical change in the bill.

Section 13 requires written notice of a claim before the 44-day total bar to controvert a claim may be asserted. Section 14 limits an employer's liability for medical expenses and places the burden for exceptional charges on the provider. Section 15 allows an independent medical examiner to require authorization for a physical examination of a claimant. Section 16 extends the freeze on the maximum weekly benefit until it reaches 133% of the state average weekly wage and then mandates annual adjustment at that percentage.

Section 17 delays the escalator for total incapacity for 2 years from the date of injury and precludes any injured employee whose physical impairment is less than or equal to 75% from being deemed totally incapacitated.

Section 18 establishes a schedule of benefit duration limits as a function of whole-body degree of permanent impairment. If impairment is 25% or less, the limit is 400 weeks. If the impairment is 26% to 50%, the limit is 500 weeks, and if the impairment is 51% to 75%, the limit is 600 weeks. There is no limit on duration for those impaired in excess of 75%. The escalator is eliminated for partial impairments. Benefits are also limited for seasonal employees, and workers injured prior to the effective date of this bill are grandfathered. Sections 19 and 20 repeal obsolete language.

Section 21 establishes a whole-body schedule for impairment payments and mandates the use of recognized schedules for determination of degree of impairment. Disfigurement is included in impairment and impairment petitions are due at maximum medical improvement. There is an offset of impairment payments against other benefits received for the same injury. Section 22 repeals obsolete language.

Section 23 discourages lump sum payments and subjects them to approval of the Workers' Compensation Commission. Medical expenses cannot be paid in lump sums and discharged.

for determina-Section 24 places responsibility tion of suitability for rehabilitation in the Office of Employment Rehabilitation. Section gives Office of Employment Rehabilitation power to hire the sufficent personnel. Section 26 requires Office Employment Rehabilitation to develop appropriate rehabilitation plans, monitor services and modify plans as appropriate. Sections 27 to 30 complete technical changes consistent with sections 24 to Section 31 provides for a July 1, 1989 sunset for the vocational rehabilitation subsection.

Section 32 allows the chairman of the Office of Employment Rehabilitation to modify a benefit award or assess penalties in the event of a violation of this Act.

Sections 33 and 34 establish the independent medical examiners as medical doctors under the direction and payment of the Workers' Compensation Commission.

The independent medical examiners shall be appointed with consideration to specialization and location and shall be responsible for the determination of all medical issues relating to a claim. They will be appointed automatically on a rotating basis and shall examine any claimant for whom they are responsible. Claimants will still be free to seek treatment from any physician or health care provider. The independent medical examiner shall report to the Workers' Compensation Commission and that report is subject to a single review only if there is clear error.

allows annual review of benefit pay-Section ments for either party. Section 36 accomplishes technical change. Section 37 provides for suspension of payments pending a hearing under specific condiincluding mutual agreement, employee's deparfrom the State, employee's disappearance, employee's return to work and employee's refusal to submit to examination. Benefits may also be suspended if the independent medical examiner has certified the employee as fit for work and benefits may be reduced by the amount of a job offer if the job offered in good faith is suitable and the independent examiner has certified that the employee is able to do the work. Any benefit suspension requires notice to the employee.

Section 38 provides for employer-paid medical examinations. Section 39 eliminates payments for those in prison and section 40 repeals obsolete language. Section 41 provides for an annual report from the Department of Labor relating to injuries and illnesses, and further provides for cooperation among the Department of Labor, the Bureau of Insurance and the Workers' Compensation Commission, including at least 3 meetings a year and the coordination of data collection.

Section 42 prohibits contingent fees and section 43 allows nonlawyers to appear before the Workers' Compensation Commission. Section 44 accomplishes a technical change.