MAINE STATE LEGISLATURE

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115th MAINE LEGISLATURE

FIRST REGULAR SESSION-1991

Legislative Document

No. 215

H.P. 145

House of Representatives, January 30, 1991

Reference to the Committee on Labor suggested and ordered printed.

EDWIN H. PERT, Clerk

Presented by Representative McHENRY of Madawaska. Cosponsored by Representative PINEAU of Jay.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND NINETY-ONE

An Act Concerning Employee Benefits for Workers' Compensation Recipients.



Be it enact	ed by	the P	eople '	of the	State	of	Maine	as	follows:
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	Be it enacted by the People of the State of Maine as follows:
2	Sec. 1. 24 MRSA §2330, sub-§10, as enacted by PL 1983, c. 91,
4	§1, is repealed.
6	Sec. 2. 24 MRSA §2330, sub-§11, as amended by PL 1989, c. 447, §1, is further amended to read:
8	
10	11. Continued group coverage; certain circumstances. Notwithstanding this section, if the termination of an individual's group insurance coverage is a result of the member
12	or employee being temporarily laid off exlesingemployment because-ofan-injury-or-disease-that-the-employee-claims-to-be
14	eempensable-under-Title-39, the insurer shall allow the member or employee to elect, within the time period prescribed by paragraph
16	B, to continue coverage under the group policy at no higher level than the level of benefits or coverage received by the employee
18	immediately before termination and at the member's or employee's expense or, at the member's or employee's option, to convert to a
20	policy of individual coverage without evidence of insurability in accordance with this section.
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24	A. For the purposes of this subsection, the term "member or employee" includes only these-persons a person who have has been a member or employee for at least 6 months.
26	been a member of emproyee for at least o months.
28	B-l. The member or employee shall-have has 31 days from the termination of coverage in which to elect and make the
30	initial payment under this subsection.
30	C. An insurer is not required to continue coverage under a
32	group policy if the member or employee meets the conditions set out in subsection 3, paragraph A.
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36	D. The payment amount for continued group coverage under this subsection may not exceed 102% of the group rate in
38	effect for a group member, including an employer's contribution, if any.
40	E. At the option of the member or employee, the continued group coverage may cover the member or employee, the member
42	or employee and any dependents or only the dependents of the

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3-month period.

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Except as provided in paragraph G, coverage provided under this section shall-continue continues and may not be terminated until one year from the last day of work.

member or employee; -previded-that if, in the latter 2 cases, the dependents have been covered for a period of at least 3

months under the group policy, unless the dependents were

not eligible for coverage until after the beginning of the

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2	G. Coverage provided under this section may be terminated sooner than provided under paragraph F if:
4	(1) The member or employee fails to make timely
6	payment of a required premium amount; or
8	(2) The member or employee becomes eligible for coverage under another group policy #-0 *
10	(3) The - Workers' Compensation - Commission determines
12	that-the-injury-or-disease-which-entitled-the-employee tecontinueeeverageunderthissectionisnet eempensable-under-Title-39+
14	n de la companya de La companya de la co
16	H. At the expiration of any continued group coverage obtained under this subsection, the member or employee has the same conversion privileges as otherwise granted under
18	this section.
20	I. This subsection shall may not be construed to:
22	(1) Prevent members or employees from negotiating for or receiving greater continued coverage of group
24	insurance than is provided in this subsection;
26	(2) Require coverage beyond the time limits set in paragraph F; or
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30	(3) Permit an employee to increase the level of benefits or coverage that the employee received immediately before the termination of the employee's
32	coverage.
34	J. This subsection does not apply to any group policy subject to the United States Consolidated Omnibus Budget
36	Reconciliation Act, Public Law 99-272, Title X, Private Health Insurance Coverage, Sections 10001 to 10003.
38	Sec. 3. 24-A MRSA §2809-A, sub-§10, as enacted by PL 1983, c.
40	91, §2, is repealed.
42	<pre>Sec. 4. 24-A MRSA §2809-A, sub-§11, as amended by PL 1989, c. 447, §2, is further amended to read:</pre>
44	11. Continued group coverage; certain circumstances.
46	Notwithstanding this section, if the termination of an individual's group insurance coverage is a result of the member
48	or employee being temporarily laid off of-lesing-employment because-of-an-injury-or-disease-that-the-employee-claims-to-be
50	eempensable-under-Title-39, the insurer shall allow the member or
52	employee to elect, within the time period prescribed by paragraph B, to continue coverage under the group policy at no higher level

	than the level of benefits or coverage received by the employee
2	immediately before termination and at the member's or employee's expense or, at the member's or employee's option, to convert to a
4	policy of individual coverage without evidence of insurability in accordance with this section.
6	A. For the purposes of this subsection, the term "member or
8	employee" includes only these-persons a person who have has been a member or employee for at least 6 months.
10	B-1. The member or employee shall-have has 31 days from the
12	termination of coverage in which to elect and make the initial payment under this subsection.
14	C. An insurer is not required to continue coverage under a
16	group policy if the member or employee meets the conditions set out in subsection 3, paragraph A.
18	D. The payment amount for continued group coverage under
20	this subsection may not exceed 102% of the group rate in effect for a group member, including an employer's
22	contribution, if any.
24	E. At the option of the member or employee, the continued group coverage may cover the member or employee, the member
26	or employee and any dependents or only the dependents of the member or employeeprovided-that if, in the latter 2 cases,
28	the dependents have been covered for a period of at least 3 months under the group policy, unless the dependents were
30	not eligible for coverage until after the beginning of the 3-month period.
32	F Frank of provided in personal C governoe provided
34	F. Except as provided in paragraph G, coverage provided under this section shall-continue continues and may not be terminated until one year from the last day of work.
36	
38	G. Coverage provided under this section may be terminated sooner than provided under paragraph F if:
40	(1) The member or employee fails to make timely payment of a required premium amount; or
42	(2) The member or employee becomes eligible for
44	coverage under another group policy+-er.
46	(3)The-Workers'CompensationCommissiondetermines that-the-injury-or-disease-which-entitle-the-employee
48	tocontinuecoverageunderthissectionisnot compensable-under-Title-39+
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5 2	H. At the expiration of any continued group coverage

2	the same conversion privileges as otherwise granted under this section.
4	I. This subsection shall may not be construed to:
6 8	(1) Prevent members or employees from negotiating for or receiving greater continued coverage of group insurance than is provided in this subsection;
10	(2) Require coverage beyond the time limit set in paragraph F; or
12	(3) Permit an employee to increase the level of
14	benefits or coverage that the employee received immediately before the termination of the employee's
16	coverage.
18	J. This subsection does not apply to any group policy subject to the United States Consolidated Omnibus Budget
20	Reconciliation Act, Public Law 99-272, Title X, Private Health Insurance Coverage, Sections 10001 to 10003.
22	Sec. 5. 39 MRSA §52-C is enacted to read:
24	§52-C. Continued employee benefits
26	1. Definitions. As used in this section, unless the
28	context otherwise indicates, the following terms have the following meanings.
30	A. "Accident and health expense coverage" means coverage
32	provided by an employer through an insurance contract or policy or directly by the employer for any expenses of
34	bodily injury, sickness, disablement or death by accident or accidental means, including any of the following:
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38	(1) Medical, surgical, dental, nursing and hospital care and treatment;
40	(2) Drugs;
42	(3) Diagnosis or treatment of mental conditions or substance abuse; and
44	(4) Programmy and shild save
46	(4) Pregnancy and child care.
48	B. "Compensable injury" means a personal injury arising out of and in the course of the employee's employment or
50	disability by occupational disease within the meaning of

2	found in 29 United States Code, Section 1002, subsection 1.
4	2. Benefits continued. In order to maintain, as nearly as
	possible, the income of employees who suffer compensable
6	injuries, any employer who provides, to employees in positions
	comparable to the injured employee's former position, accident
8	and health expense or life insurance coverage or makes payments
	or contributions for those purposes at the regular hourly or
10	weekly rate for employees to an employee welfare benefit fund
10	shall provide to the injured employee or the employee's surviving
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14	spouse equivalent coverage or welfare benefit fund payments or
	contributions while the employee or surviving spouse is eligible
14	to receive or is receiving compensation under this Act.
16	If an employer offers additional or extended coverage to working employees at the working employee's expense, the injured employee
18	or surviving spouse may obtain that coverage in the same manner
	and at the same cost as a working employee. If the injured
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20	employee or surviving spouse fails to make timely payments of any
	additional cost, the employer may terminate the additional or
22	extended coverage.
24	3. Methods of coverage. An employer may provide equivalent
	accident and health expense coverage, life insurance coverage or
26	welfare fund payments or contributions by:
28	A. Insuring the employer's full liability under this
28	A. Insuring the employer's full liability under this section with any insurer authorized to write those risks in
	section with any insurer authorized to write those risks in
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30	section with any insurer authorized to write those risks in this State;
	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of
30 32	section with any insurer authorized to write those risks in this State;
30	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees;
30 32	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of
30 32	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees;
30 32 34	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees;
30 32 34	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or
30 32 34 36	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods.
30 32 34 36 38	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of
30 32 34 36	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any
30 32 34 36 38 40	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those
30 32 34 36 38	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those hours of contributions established by the trustees of the
30 32 34 36 38 40	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those hours of contributions established by the trustees of the employee welfare benefit fund as necessary to maintain
30 32 34 36 38 40	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those hours of contributions established by the trustees of the employee welfare benefit fund as necessary to maintain continuation of the coverage when that amount is less than the
30 32 34 36 38 40 42	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those hours of contributions established by the trustees of the employee welfare benefit fund as necessary to maintain continuation of the coverage when that amount is less than the amount of regular hourly or weekly contributions for full-time
30 32 34 36 38 40	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those hours of contributions established by the trustees of the employee welfare benefit fund as necessary to maintain continuation of the coverage when that amount is less than the
30 32 34 36 38 40 42 44	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those hours of contributions established by the trustees of the employee welfare benefit fund as necessary to maintain continuation of the coverage when that amount is less than the amount of regular hourly or weekly contributions for full-time employees.
30 32 34 36 38 40 42	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those hours of contributions established by the trustees of the employee welfare benefit fund as necessary to maintain continuation of the coverage when that amount is less than the amount of regular hourly or weekly contributions for full-time employees. 5. Benefits obtained from other sources. This section does
30 32 34 36 38 40 42 44	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those hours of contributions established by the trustees of the employee welfare benefit fund as necessary to maintain continuation of the coverage when that amount is less than the amount of regular hourly or weekly contributions for full-time employees. 5. Benefits obtained from other sources. This section does not apply during any time in which an injured employee or
30 32 34 36 38 40 42 44	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those hours of contributions established by the trustees of the employee welfare benefit fund as necessary to maintain continuation of the coverage when that amount is less than the amount of regular hourly or weekly contributions for full-time employees. 5. Benefits obtained from other sources. This section does
30 32 34 36 38 40 42 44 46 48	section with any insurer authorized to write those risks in this State; B. Creating an injured employee's plan as an extension of any existing plan for working employees; C. Self-insuring; or D. Any combination of these methods. 4. Employee welfare benefit fund payments. In the case of an employee welfare benefit fund, an employer may provide any equivalent coverage by making payments or contributions for those hours of contributions established by the trustees of the employee welfare benefit fund as necessary to maintain continuation of the coverage when that amount is less than the amount of regular hourly or weekly contributions for full-time employees. 5. Benefits obtained from other sources. This section does not apply during any time in which an injured employee or

C. "Employee welfare benefit fund" has the same meaning as

the employee's new employer or the employer of the employee's spouse.

6. Multiple compensable injuries. If an employee suffers multiple compensable injuries for which apportionment is required under section 104-B, the most recent employer is solely responsible for complying with this section.

Sec. 6. Application. This Act applies only to covered events occurring or services provided on or after the effective date of this section.

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STATEMENT OF FACT

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The purpose of this bill is to address the problem created when injured workers are dismissed from employment and lose the employment benefits previously provided by the employer. A particular problem exists when an injured employee loses health insurance coverage and must obtain similar coverage at the employee's expense after the employee's earnings have been reduced.

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The bill requires an employer who provides health and accident insurance or life insurance to the employees who work in positions similar to that in which the injured employee worked to continue providing that same level of coverage to the injured employee. If an employee is killed on the job, the employee's surviving spouse may claim these benefits. If the employer offers additional or extended coverage to employees at the employee's expense, such as health insurance coverage for the employee's family, the injured employee or the surviving spouse can obtain these additional benefits at their own expense. employer may satisfy the continued coverage requirement by purchasing insurance, creating an extension of existing employee plans to include injured employees, self-insuring or by any combination of these methods. The continued coverage provided by the bill does not apply if the injured employee is covered by an equivalent plan offered by the injured employee's new employer or the employer of the injured employee's spouse. Finally, if the employee has suffered multiple injuries, only the last employer is responsible for providing continued coverage under the bill.

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