Florida Senate - 2000

CS for SB 1992

By the Committee on Banking and Insurance; and Senator King

	311-2108-00
1	A bill to be entitled
2	An act relating to workers' compensation;
3	amending s. 440.02, F.S.; revising a monetary
4	limit in a definition; excluding work done by
5	state prisoners and county inmates from the
6	definition of employment; amending s. 440.09,
7	F.S.; excluding employees covered under the
8	Defense Base Act from payment of benefits;
9	amending s. 440.12, F.S.; providing for
10	electronic payment of compensation payments;
11	amending s. 440.13, F.S.; revising requirements
12	for submission of certain medical reports and
13	bills; granting rehabilitation providers access
14	to medical records; amending s. 440.134, F.S.;
15	revising a definition; requiring certain
16	insurers to provide medically necessary
17	remedial treatment, care, and attendance under
18	certain circumstances; requiring insurers'
19	workers' compensation managed care arrangements
20	to grant or deny requests for medical care
21	within a time certain; requiring insurers'
22	workers' compensation managed care arrangements
23	to notify injured workers of the outcome of
24	grievances within a time certain; providing a
25	presumption of resolution of a grievance absent
26	timely notice; amending s. 440.185, F.S.;
27	authorizing the division to contract with a
28	private entity for collection of certain policy
29	information; providing application; amending s.
30	440.192, F.S.; revising requirements and
31	procedures for filing petitions for benefits;
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1	permitting judges to dismiss portions of a
2	petition; specifying that dismissal of
3	petitions is without prejudice; amending s.
4	440.20, F.S.; providing for payment of
5	compensation by direct deposit under certain
б	circumstances; authorizing not holding a
7	hearing under certain circumstances; revising
8	the period for payment; revising lump-sum
9	settlement requirements; amending s. 440.22,
10	F.S.; excluding child support and alimony
11	claims from general exemption of workers'
12	compensation benefits from claims of creditors;
13	amending s. 440.271, F.S.; requiring the First
14	District Court of Appeal to establish a
15	specialized division to hear workers'
16	compensation cases; amending s. 440.38, F.S.;
17	providing for the type of qualifying security
18	deposit necessary to become a self-insured
19	employer; providing requirements, procedures,
20	and criteria; correcting cross references;
21	amending s. 440.45, F.S.; requiring the
22	judicial nominating commission to consider
23	whether judges of compensation claims have met
24	certain requirements; providing procedures;
25	authorizing the Governor to appoint certain
26	judges of compensation claims; requiring the
27	Office of Judges of Compensation Claims to
28	adopt certain additional rules; requiring the
29	Office of the Judges of Compensation Claims to
30	submit draft rules to the Legislature by
31	November 1, 2000; requiring review by the
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2 procedures; amending s. 61.14, F.S.; requiring 3 judges of compensation claims to consider the 4 interests of the worker and the worker's family 5 when approving settlements of workers' 6 compensation claims; requiring appropriate 7 recovery of any child-support arrearage from 8 those settlements; amending s. 61.30, F.S.;	
 4 interests of the worker and the worker's family 5 when approving settlements of workers' 6 compensation claims; requiring appropriate 7 recovery of any child-support arrearage from 	
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 6 compensation claims; requiring appropriate 7 recovery of any child-support arrearage from 	
7 recovery of any child-support arrearage from	
8 those settlements; amending s. 61.30, F.S.;	
9 providing that gross income includes all	
10 workers' compensation benefits and settlements;	
11 amending ss. 489.114, 489.510, F.S.; providing	
12 an exception to certain workers' compensation	
13 coverage evidence requirements; amending ss.	
14 489.115, 489.515, F.S.; revising certification	
15 and registration requirements for initial	
16 licensure; amending s. 627.311, F.S.; providing	
17 for use of policyholder surplus for purposes of	
18 funding certain deficits; amending s. 627.914,	
19 F.S.; revising the requirements for reports of	
20 information by workers' compensation insurers;	
21 deleting a reporting requirement for the	
22 Division of Workers' Compensation; providing an	
23 appropriation; repealing s. 440.45(3), F.S.,	
24 relating to judges of compensation claims	
25 serving as docketing judges; providing	
26 effective dates.	
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28 Be It Enacted by the Legislature of the State of Florida:	
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1 Section 1. Subsection (4) and paragraph (c) of 2 subsection (16) of section 440.02, Florida Statutes, are 3 amended to read: 440.02 Definitions.--When used in this chapter, unless 4 5 the context clearly requires otherwise, the following terms б shall have the following meanings: 7 "Casual" as used in this section shall be taken to (4) 8 refer only to employments when the work contemplated is to be 9 completed in not exceeding 10 working days, without regard to 10 the number of persons employed, and when the total labor cost 11 of such work is less than\$1,000\$100. 12 (16) 13 (C) "Employment" does not include service performed by 14 or as: 1. Domestic servants in private homes. 15 Agricultural labor performed on a farm in the 16 2. 17 employ of a bona fide farmer, or association of farmers, who 18 employs 5 or fewer regular employees and who employs fewer 19 than 12 other employees at one time for seasonal agricultural 20 labor that is completed in less than 30 days, provided such seasonal employment does not exceed 45 days in the same 21 22 calendar year. The term "farm" includes stock, dairy, poultry, fruit, fur-bearing animals, fish, and truck farms, ranches, 23 24 nurseries, and orchards. The term "agricultural labor" 25 includes field foremen, timekeepers, checkers, and other farm labor supervisory personnel. 26 27 3. Professional athletes, such as professional boxers, 28 wrestlers, baseball, football, basketball, hockey, polo, 29 tennis, jai alai, and similar players, and motorsports teams competing in a motor racing event as defined in s. 549.08. 30 31

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1 4. Labor under a sentence of a court to perform 2 community services as provided in s. 316.193. 3 5. State prisoners or county inmates except those 4 performing services for private employers or those enumerated 5 in s. 948.03(8)(a). б Section 2. Subsection (2) of section 440.09, Florida 7 Statutes, is amended to read: 8 440.09 Coverage.--9 (2) Benefits are not payable in respect of the 10 disability or death of any employee covered by the Federal 11 Employer's Liability Act, the Longshoremen's and Harbor Worker's Compensation Act, the Defense Base Act, or the Jones 12 13 Act. Section 3. Subsection (1) of section 440.12, Florida 14 15 Statutes, is amended to read: 16 440.12 Time for commencement and limits on weekly rate 17 of compensation. --18 (1) No compensation shall be allowed for the first 7 19 days of the disability, except benefits provided for in s. 20 440.13. However, if the injury results in disability of more than 21 days, compensation shall be allowed from the 21 22 commencement of the disability. All weekly compensation payments, except for the first payment, shall be paid by check 23 24 or, if authorized by the employee, deposited directly into the 25 employee's account at a financial institution. For purposes of this subsection, the term "financial institution," means a 26 27 financial institution as defined in s. 655.005(1)(h). 28 Section 4. Paragraphs (b) and (c) of subsection (4) of 29 section 440.13, Florida Statutes, are amended to read: 30 440.13 Medical services and supplies; penalty for 31 violations; limitations.--

1 (4) NOTICE OF TREATMENT TO CARRIER; FILING WITH DIVISION.--2 3 (b) Upon the request of the Division of Workers' Compensation, each medical report or bill obtained or received 4 5 by the employer, the carrier, or the injured employee, or the б attorney for the employer, carrier, or injured employee, with 7 respect to the remedial treatment, or care, and attendance of 8 the injured employee, including any report of an examination, 9 diagnosis, or disability evaluation, must be filed with the 10 Division of Workers' Compensation pursuant to rules adopted by 11 the division. The health care provider shall also furnish to the injured employee or to his or her attorney, on demand, a 12 13 copy of his or her office chart, records, and reports, and may 14 charge the injured employee an amount authorized by the division for the copies. Each such health care provider shall 15 provide to the division any additional information about the 16 17 remedial treatment, care, and attendance that the division 18 reasonably requests. 19 (c) It is the policy for the administration of the 20 workers' compensation system that there be reasonable access 21 to medical information by all parties to facilitate the self-executing features of the law. Notwithstanding the 22 limitations in s. 455.667 and subject to the limitations in s. 23 24 381.004, upon the request of the employer, the carrier, an 25 authorized qualified rehabilitation provider, or the attorney for the employer or carrier either of them, the medical 26 records of an injured employee must be furnished to those 27 28 persons and the medical condition of the injured employee must 29 be discussed with those persons, if the records and the discussions are restricted to conditions relating to the 30 31 workplace injury. Any such discussions may be held before or

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1 after the filing of a claim without the knowledge, consent, or 2 presence of any other party or his or her agent or 3 representative. A health care provider who willfully refuses to provide medical records or to discuss the medical condition 4 5 of the injured employee, after a reasonable request is made б for such information pursuant to this subsection, shall be 7 subject by the division to one or more of the penalties set 8 forth in paragraph (8)(b). 9 Section 5. Paragraph (d) of subsection (1), paragraph 10 (b) of subsection (2), and paragraphs (c) and (d) of 11 subsection (15) of section 440.134, Florida Statutes, are amended to read: 12 440.134 Workers' compensation managed care 13 14 arrangement. --(1) As used in this section, the term: 15 "Grievance" means a written complaint filed by an 16 (d) 17 injured worker expressing dissatisfaction with the insurer's 18 workers' compensation managed care arrangement's refusal to 19 provide medical care provided by an insurer's workers' 20 compensation managed care arrangement health care providers, 21 expressed in writing by an injured worker. 22 (2) Effective January 1, 1997, the employer shall, 23 (b) 24 subject to the limitations specified elsewhere in this 25 chapter, furnish to the employee solely through managed care arrangements such medically necessary remedial treatment, 26 27 care, and attendance for such period as the nature of the 28 injury or the process of recovery requires pursuant to s. 29 440.13(2)(a) and (b). An employer that has secured coverage 30 under s. 440.38(1)(b) as an individual self-insurer or under 31 440.38(6) shall furnish such medically necessary remedial 7

1 treatment, care, and attendance for such a period as the nature of the injury or the process of recovery requires, 2 3 pursuant to s. 440.13(2)(a) and (b), through managed care 4 arrangements or without managed care arrangements. An 5 employer that has secured coverage under s. 440.38(1)(b) as an б individual self-insurer or under s. 440.38(6) is exempt from 7 the application and approval requirements of s. 440.134(2)(a) 8 and the filing requirements of subsections (5) and (12), and 9 paragraph (15)(g). 10 (15)11 (c) At the time the workers' compensation managed care arrangement is implemented, the insurer must provide detailed 12 13 information to workers and health care providers describing 14 how a grievance may be registered with the insurer. Within 30 days after the date a request for medical care is received by 15 the insurer or the insurer's workers' compensation managed 16 care arrangement, whichever date is earlier, the insurer shall 17 grant or deny the request. If the insurer denies the request, 18 19 the insurer shall notify the injured worker in writing of his 20 or her right to file a grievance. (d) Grievances must be considered in a timely manner 21 and must be transmitted to appropriate decisionmakers who have 22 the authority to fully investigate the issue and take 23 corrective action. If the insurer does not notify the injured 24 25 worker of the outcome of the grievance in writing within 30 days from the receipt of the grievance, the grievance shall be 26 presumed to be resolved against the injured worker and the 27 28 grievance procedures shall be presumed to be exhausted for 29 purposes of s. 440.192(3). 30 Section 6. Subsection (7) of section 440.185, Florida 31 Statutes, is amended to read: 8

1 440.185 Notice of injury or death; reports; penalties 2 for violations. --3 (7) Every carrier shall file with the division within 21 days after the issuance of a policy or contract of 4 5 insurance such policy information as the division may require, б including notice of whether the policy is a minimum premium 7 policy. Notice of cancellation or expiration of a policy as 8 set out in s. 440.42(2) shall be mailed to the division in accordance with rules promulgated by the division under 9 10 chapter 120. The division may contract with a private entity 11 for the collection of policy information required to be filed by carriers pursuant to this subsection and the receipt of 12 notices of cancellation or expiration of a policy required to 13 14 be filed by carriers pursuant to s. 440.42(2). The submission of policy information or notices of cancellation or expiration 15 to the contracted private entity satisfies the filing 16 17 requirements of this subsection and s. 440.42(2). Section 7. Subsections (1), (2), and (5) of section 18 19 440.192, Florida Statutes, are amended to read: 440.192 Procedure for resolving benefit disputes.--20 (1) Subject to s. 440.191, any employee who has not 21 received a benefit to which the employee believes she or he is 22 entitled under this chapter shall file by certified mail, or 23 24 by electronic means approved by the Chief Judge, with the 25 appropriate local Office of the Judges of Compensation Claims a petition for benefits that meets the requirements of this 26 27 section. The division shall inform employees of the location 28 of the appropriate Office of the Judges of Compensation Claims 29 for purposes of filing a petition for benefits. The employee 30 shall also serve copies of the petition for benefits by 31 certified mail, or by electronic means approved by the Chief 9

1 Judge, upon the employer, the employer's carrier, and the division in Tallahassee a petition for benefits that meets the 2 3 requirements of this section. The division shall refer the petition to the Office of the Judges of Compensation Claims. 4 5 (2) Upon receipt, the judge The Office of the Judges б of compensation claims shall review each petition and shall 7 dismiss each petition or any portion of such petition, upon 8 the judge's its own motion or upon the motion of any party, 9 that does not on its face specifically identify or itemize the 10 following: 11 (a) Name, address, telephone number, and social security number of the employee. 12 Name, address, and telephone number of the 13 (b) 14 employer. A detailed description of the injury and cause of 15 (C) the injury, including the location of the occurrence. 16 17 (d) A detailed description of the employee's job, work 18 responsibilities, and work the employee was performing when 19 the injury occurred. 20 The time period for which compensation was not (e) 21 timely provided. (f) Date of maximum medical improvement, character of 22 23 disability, and specific statement of all benefits or 24 compensation that the employee is seeking. 25 (g) All travel costs to which the employee believes she or he is entitled, including dates of travel and purpose 26 27 of travel, means of transportation, and mileage. 28 (h) Specific listing of all medical charges alleged 29 unpaid, including the name and address of the medical provider, the amounts due, and the specific dates of 30 31 treatment.

1 (i) The type or nature of treatment care or attendance 2 sought and the justification for such treatment. 3 Specific explanation of any other disputed issue (j) 4 that a judge of compensation claims will be called to rule 5 upon. б 7 The dismissal of any petition or any portion of such petition 8 under this section shall be without prejudice and shall not 9 require a hearing. 10 (5) All motions to dismiss must state with 11 particularity the basis for the motion. The judge of compensation claims shall enter an order upon such motions 12 13 without hearing, unless good cause for hearing is shown. When 14 any petition or portion of such petition is dismissed for lack of specificity under this subsection, the claimant must be 15 allowed 20 days after the date of the order of dismissal in 16 17 which to file an amended petition. Any grounds for dismissal for lack of specificity under this section not asserted within 18 19 30 days after receipt of the petition for benefits are thereby 20 waived. Section 8. Paragraph (a) of subsection (1), subsection 21 (6), and paragraph (a) of subsection (11) of section 440.20, 22 Florida Statutes, are amended and paragraph (d) is added to 23 24 subsection (11), to read: 25 440.20 Time for payment of compensation; penalties for 26 late payment. --27 (1)(a) Unless it denies compensability or entitlement 28 to benefits, the carrier shall pay compensation directly to 29 the employee as required by ss. 440.14, 440.15, and 440.16, in 30 accordance with the obligations set forth in such sections. If 31 authorized by the employee, the carrier's obligation to pay 11

1 compensation directly to the employee is satisfied when the carrier directly deposits, by electronic transfer or other 2 3 means, compensation into the employee's account at a financial 4 institution. For purposes of this paragraph, the term, 5 'financial institution," means a financial institution as б defined in s. 655.005(1)(h). Compensation by direct deposit shall be deemed paid on the date the funds become available 7 8 for withdrawal by the employee.

If any installment of compensation for death or 9 (6) 10 dependency benefits, disability, permanent impairment, or wage 11 loss payable without an award is not paid within 7 days after it becomes due, as provided in subsection (2), subsection (3), 12 13 or subsection (4), there shall be added to such unpaid 14 installment a punitive penalty of an amount equal to 20 percent of the unpaid installment or \$5, which shall be paid 15 at the same time as, but in addition to, such installment of 16 17 compensation, unless notice is filed under subsection (4) or unless such nonpayment results from conditions over which the 18 19 employer or carrier had no control. When any installment of 20 compensation payable without an award has not been paid within 21 7 days after it became due and the claimant concludes the prosecution of the claim before a judge of compensation claims 22 without having specifically claimed additional compensation in 23 24 the nature of a penalty under this section, the claimant will 25 be deemed to have acknowledged that, owing to conditions over which the employer or carrier had no control, such installment 26 27 could not be paid within the period prescribed for payment and 28 to have waived the right to claim such penalty. However, 29 during the course of a hearing, the judge of compensation claims shall on her or his own motion raise the question of 30 31 whether such penalty should be awarded or excused. The

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1 division may assess without a hearing the punitive penalty 2 against either the employer or the insurance carrier, 3 depending upon who was at fault in causing the delay. The insurance policy cannot provide that this sum will be paid by 4 5 the carrier if the division or the judge of compensation 6 claims determines that the punitive penalty should be made by 7 the employer rather than the carrier. Any additional 8 installment of compensation paid by the carrier pursuant to 9 this section shall be paid directly to the employee by check 10 or, if authorized by the employee, by direct deposit into the 11 employee's account at a financial institution. For purposes of this subsection, the term, "financial institution," means a 12 13 financial institution as defined in s. 655.005(1)(h). 14 (11)(a) Upon joint petition of all interested parties, a lump-sum payment in exchange for the employer's or carrier's 15 release from liability for future medical expenses, as well as 16 17 future payments of compensation expenses and any other benefits provided under this chapter, shall be allowed at any 18 19 time in any case in which the employer or carrier has filed a 20 written notice of denial within 120 days after the employer receives notice date of the injury, and the judge of 21 compensation claims at a hearing to consider the settlement 22 proposal finds a justiciable controversy as to legal or 23 24 medical compensability of the claimed injury or the alleged 25 accident. A judge of compensation claims shall not be required to hold a hearing if the claimant is represented by an 26 27 attorney and all parties stipulate that a hearing is 28 unnecessary. The employer or carrier may not pay any 29 attorney's fees on behalf of the claimant for any settlement under this section unless expressly authorized elsewhere in 30 31 this chapter. Upon the joint petition of all interested 13

1 parties and after giving due consideration to the interests of all interested parties, the judge of compensation claims may 2 3 enter a compensation order approving and authorizing the 4 discharge of the liability of the employer for compensation 5 and remedial treatment, care, and attendance, as well as 6 rehabilitation expenses, by the payment of a lump sum. Such a 7 compensation order so entered upon joint petition of all 8 interested parties is not subject to modification or review 9 under s. 440.28. If the settlement proposal together with 10 supporting evidence is not approved by the judge of 11 compensation claims, it shall be considered void. Upon approval of a lump-sum settlement under this subsection, the 12 13 judge of compensation claims shall send a report to the Chief 14 Judge of the amount of the settlement and a statement of the nature of the controversy. The Chief Judge shall keep a record 15 of all such reports filed by each judge of compensation claims 16 17 and shall submit to the Legislature a summary of all such reports filed under this subsection annually by September 15. 18 19 (d) When reviewing any settlement of lump-sum payment pursuant to this subsection, judges of compensation claims 20 21 shall consider the interests of the worker and the worker's 22 family when approving the settlement, which must consider and provide for appropriate recovery of child-support arrearage. 23 24 Section 9. Section 440.22, Florida Statutes, is 25 amended to read: 440.22 Assignment and exemption from claims of 26 27 creditors.--No assignment, release, or commutation of 28 compensation or benefits due or payable under this chapter 29 except as provided by this chapter shall be valid, and such 30 compensation and benefits shall be exempt from all claims of 31 creditors, and from levy, execution and attachments or other 14

remedy for recovery or collection of a debt, which exemption 1 may not be waived. However, the exemption of workers' 2 3 compensation claims from creditors does not extend to claims based on an award of child support or alimony. 4 5 Section 10. Section 440.271, Florida Statutes, is б amended to read: 7 440.271 Appeal of order of judge of compensation 8 claims. -- Review of any order of a judge of compensation claims 9 entered pursuant to this chapter shall be by appeal to the 10 District Court of Appeal, First District. To promote 11 consistency and uniformity in the application of this chapter, the District Court of Appeal, First District, shall establish 12 a specialized division to hear all appeals of orders of judges 13 14 of compensation claims. The court may structure the division to hear workers' compensation cases exclusively or in addition 15 to other appeals. Appeals shall be filed in accordance with 16 17 rules of procedure prescribed by the Supreme Court for review of such orders. The division shall be given notice of any 18 19 proceedings pertaining to s. 440.25, regarding indigency, or 20 s. 440.49, regarding the Special Disability Trust Fund, and 21 shall have the right to intervene in any proceedings. Section 11. Subsection (1) of section 440.38, Florida 22 Statutes, is amended to read: 23 440.38 Security for compensation; insurance carriers 24 25 and self-insurers.--(1) Every employer shall secure the payment of 26 27 compensation under this chapter: 28 (a) By insuring and keeping insured the payment of 29 such compensation with any stock company or mutual company or 30 association or exchange, authorized to do business in the 31 state; 15

1 (b) By furnishing satisfactory proof to the division 2 of her or his financial ability to pay such compensation and 3 receiving an authorization from the division to pay such compensation directly in accordance with the following 4 5 provisions: 6 1. The division may, as a condition to such 7 authorization, require an such employer to deposit with in a 8 depository designated by the division a qualifying security 9 deposit. The division shall determine the type and amount of 10 the qualifying security deposit and shall either an indemnity 11 bond or securities, at the option of the employer, of a kind and in an amount determined by the division and subject to 12 such conditions as the division may prescribe conditions for 13 the qualifying security deposit, which shall include 14 authorization for to the division to call the qualifying 15 security deposit in the case of default to sell any such 16 17 securities sufficient to pay compensation awards or to bring 18 suit upon such bonds, to procure prompt payment of 19 compensation under this chapter. In addition, the division 20 shall require, as a condition to authorization to self-insure, proof that the employer has provided for competent personnel 21 with whom to deliver benefits and to provide a safe working 22 environment. Further, the division shall require such 23 24 employer to carry reinsurance at levels that will ensure the actuarial soundness of such employer in accordance with rules 25 promulgated by the division. The division may by rule require 26 27 that, in the event of an individual self-insurer's insolvency, 28 such qualifying security deposits indemnity bonds, securities, 29 and reinsurance policies are shall be payable to the Florida 30 Self-Insurers Guaranty Association, Incorporated, created 31 pursuant to s. 440.385. Any employer securing compensation in 16

accordance with the provisions of this paragraph shall be
 known as a self-insurer and shall be classed as a carrier of
 her or his own insurance.

If the employer fails to maintain the foregoing 4 2. 5 requirements, the division shall revoke the employer's 6 authority to self-insure, unless the employer provides to the 7 division the certified opinion of an independent actuary who 8 is a member of the American Society of Actuaries as to the actuarial present value of the employer's determined and 9 10 estimated future compensation payments based on cash reserves, 11 using a 4-percent discount rate, and a qualifying security deposit equal to 1.5 times the value so certified. The 12 13 employer shall thereafter annually provide such a certified 14 opinion until such time as the employer meets the requirements of subparagraph 1. The qualifying security deposit shall be 15 adjusted at the time of each such annual report. Upon the 16 17 failure of the employer to timely provide such opinion or to 18 timely provide a security deposit in an amount equal to 1.5 19 times the value certified in the latest opinion, the division 20 shall then revoke such employer's authorization to 21 self-insure, and such failure shall be deemed to constitute an immediate serious danger to the public health, safety, or 22 welfare sufficient to justify the summary suspension of the 23 24 employer's authorization to self-insure pursuant to s. 120.68. 25 3. Upon the suspension or revocation of the employer's authorization to self-insure, the employer shall provide to 26 27 the division and to the Florida Self-Insurers Guaranty 28 Association, Incorporated, created pursuant to s. 440.385 the 29 certified opinion of an independent actuary who is a member of the American Society of Actuaries of the actuarial present 30 31 value of the determined and estimated future compensation

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1 payments of the employer for claims incurred while the member 2 exercised the privilege of self-insurance, using a discount 3 rate of 4 percent. The employer shall provide such an opinion at 6-month intervals thereafter until such time as the latest 4 5 opinion shows no remaining value of claims. With each such б opinion, the employer shall deposit with the division a 7 qualifying security deposit in an amount equal to the value 8 certified by the actuary. The association has a cause of action against an employer, and against any successor of the 9 10 employer, who fails to timely provide such opinion or who 11 fails to timely maintain the required security deposit with the division. The association shall recover a judgment in the 12 amount of the actuarial present value of the determined and 13 estimated future compensation payments of the employer for 14 claims incurred while the employer exercised the privilege of 15 self-insurance, together with attorney's fees. For purposes 16 17 of this section, the successor of an employer means any person, business entity, or group of persons or business 18 19 entities, which holds or acquires legal or beneficial title to 20 the majority of the assets or the majority of the shares of 21 the employer.

4. A qualifying security deposit shall consist, at theoption of the employer, of:

a. Surety bonds, in a form and containing such terms
as prescribed by the division, issued by a corporation surety
authorized to transact surety business by the Department of
Insurance, and whose policyholders' and financial ratings, as
reported in A.M. Best's Insurance Reports, Property-Liability,
are not less than "A" and "V", respectively.

30 b. Certificates of deposit with financial

31 institutions, the deposits of which are insured through the

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1 Federal Deposit Insurance Corporation or the Federal Savings 2 and Loan Insurance Corporation. 3 b.c. Irrevocable letters of credit in favor of the 4 division issued by financial institutions located within this 5 state, the deposits of which are insured through the Federal б Deposit Insurance Corporation described in sub-subparagraph b. 7 d. Direct obligations of the United States Treasury 8 backed by the full faith and credit of the United States. 9 e. Securities issued by this state and backed by the full faith and credit of this state. 10 11 5. The qualifying security deposit shall be held by the division, or by a depository authorized by the division, 12 exclusively for the benefit of workers' compensation 13 claimants. The security shall not be subject to assignment, 14 execution, attachment, or any legal process whatsoever, except 15 as necessary to guarantee the payment of compensation under 16 17 this chapter. No surety bond may be terminated, and no letter of credit other qualifying security may be allowed to expire 18 19 lapse, without 90 days' prior notice to the division and 20 deposit by the self-insuring employer of some other qualifying 21 security deposit of equal value within 10 business days after such notice. Failure to provide such notice or failure to 22 timely provide qualifying replacement security after such 23 24 notice shall constitute grounds for the division to call or 25 sue upon the surety bond, or to act with respect to other pledged security in any manner necessary to preserve its value 26 for the purposes intended by this section, including the 27 28 exercise its of rights under a letter of credit. Current 29 self-insured employers must comply with this section on or 30 before December 31, 2000, or upon maturity of existing security deposits, whichever occurs later, the sale of any 31 19

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security at then prevailing market rates, or the withdrawal of 2 any funds represented by any certificate of deposit forming 3 part of the qualifying security deposit;

4 (c) By entering into a contract with a public utility 5 under an approved utility-provided self-insurance program as б 7 The division shall adopt rules to implement this 1983. paragraph; 8

9 (d) By entering into an interlocal agreement with 10 other local governmental entities to create a local government 11 pool pursuant to s. 624.4622 440.575;

In accordance with s. 440.135, an employer, other 12 (e) 13 than a local government unit, may elect coverage under the Workers' Compensation Law and retain the benefit of the 14 exclusiveness of liability provided in s. 440.11 by obtaining 15 a 24-hour health insurance policy from an authorized property 16 17 and casualty insurance carrier or an authorized life and 18 health insurance carrier, or by participating in a fully or 19 partially self-insured 24-hour health plan that is established 20 or maintained by or for two or more employers, so long as the law of this state is not preempted by the Employee Retirement 21 Income Security Act of 1974, Pub. L. No. 93-406, or any 22 amendment to that law, which policy or plan must provide, for 23 24 at least occupational injuries and illnesses, medical benefits 25 that are comparable to those required by this chapter. A local government unit, as a single employer, in accordance with s. 26 440.135, may participate in the 24-hour health insurance 27 28 coverage plan referenced in this paragraph. Disputes and 29 remedies arising under policies issued under this section are governed by the terms and conditions of the policies and under 30 31 the applicable provisions of the Florida Insurance Code and

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1 rules adopted under the insurance code and other applicable 2 laws of this state. The 24-hour health insurance policy may 3 provide for health care by a health maintenance organization 4 or a preferred provider organization. The premium for such 5 24-hour health insurance policy shall be paid entirely by the 6 employer. The 24-hour health insurance policy may use 7 deductibles and coinsurance provisions that require the 8 employee to pay a portion of the actual medical care received 9 by the employee. If an employer obtains a 24-hour health 10 insurance policy or self-insured plan to secure payment of 11 compensation as to medical benefits, the employer must also obtain an insurance policy or policies that provide indemnity 12 benefits as follows: 13

14 1. If indemnity benefits are provided only for
 15 occupational-related disability, such benefits must be
 16 comparable to those required by this chapter.

If indemnity benefits are provided for both
 occupational-related and nonoccupational-related disability,
 such benefits must be comparable to those required by this
 chapter, except that they must be based on 60 percent of the
 average weekly wages.

The employer shall provide for each of its 22 3. employees life insurance with a death benefit of \$100,000. 23 24 4. Policies providing coverage under this subsection must use prescribed and acceptable underwriting standards, 25 forms, and policies approved by the Department of Insurance. 26 27 If any insurance policy that provides coverage under this 28 section is canceled, terminated, or nonrenewed for any reason, 29 the cancellation, termination, or nonrenewal is ineffective 30 until the self-insured employer or insurance carrier or 31 carriers notify the division and the Department of Insurance

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1 of the cancellation, termination, or nonrenewal, and until the 2 division has actually received the notification. The division 3 must be notified of replacement coverage under a workers' 4 compensation and employer's liability insurance policy or plan 5 by the employer prior to the effective date of the б cancellation, termination, or nonrenewal; or 7 (f) By entering into a contract with an individual 8 self-insurer under an approved individual self-insurer-provided self-insurance program as set forth in 9 10 s. 624.46225 440.571. The division may adopt rules to 11 implement this subsection. Section 12. Subsections (2) and (5) of section 440.45, 12 Florida Statutes, are amended to read: 13 440.45 Office of the Judges of Compensation Claims .--14 15 (2)(a) The Governor shall appoint full-time judges of compensation claims to conduct proceedings as required by this 16 17 chapter or other law. No person may be nominated to serve as a judge of compensation claims unless he or she has been a 18 19 member of The Florida Bar in good standing and is knowledgeable in the practice of law of workers' compensation. 20 21 No judge of compensation claims shall engage in the private 22 practice of law during a term of office. (b) Except as provided in paragraph (c), the Governor 23 24 shall appoint a judge of compensation claims from a list of 25 three persons nominated by a statewide nominating commission. The statewide nominating commission shall be composed of the 26 27 following: 28 1. Five members, at least one of whom must be a member 29 of a minority group as defined in s. 288.703(3), one of each who resides in each of the territorial jurisdictions of the 30 31 district courts of appeal, appointed by the Board of Governors 2.2 **CODING:**Words stricken are deletions; words underlined are additions.

1 of The Florida Bar from among The Florida Bar members who are engaged in the practice of law. On July 1, 1999, the term of 2 3 office of each person appointed by the Board of Governors of 4 The Florida Bar to the commission expires. The Board of 5 Governors shall appoint members who reside in the odd-numbered б district court of appeal jurisdictions to 4-year terms each, 7 beginning July 1, 1999, and members who reside in the even-numbered district court of appeal jurisdictions to 2-year 8 terms each, beginning July 1, 1999. Thereafter, each member 9 10 shall be appointed for a 4-year term;

11 2. Five electors, at least one of whom must be a member of a minority group as defined in s. 288.703(3), one of 12 each who resides in each of the territorial jurisdictions of 13 the district courts of appeal, appointed by the Governor. On 14 July 1, 1999, the term of office of each person appointed by 15 the Governor to the commission expires. The Governor shall 16 appoint members who reside in the odd-numbered district court 17 of appeal jurisdictions to 2-year terms each, beginning July 18 19 1, 1999, and members who reside in the even-numbered district court of appeal jurisdictions to 4-year terms each, beginning 20 July 1, 1999. Thereafter, each member shall be appointed for a 21 22 4-year term; and

3. Five electors, at least one of whom must be a 23 24 member of a minority group as defined in s. 288.703(3), one of 25 each who resides in the territorial jurisdictions of the district courts of appeal, selected and appointed by a 26 majority vote of the other 10 members of the commission. On 27 28 October 1, 1999, the term of office of each person appointed 29 to the commission by its other members expires. A majority of the other members of the commission shall appoint members who 30 31 reside in the odd-numbered district court of appeal

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1 jurisdictions to 2-year terms each, beginning October 1, 1999, 2 and members who reside in the even-numbered district court of 3 appeal jurisdictions to 4-year terms each, beginning October 4 1, 1999. Thereafter, each member shall be appointed for a 5 4-year term. 6 7 A vacancy occurring on the commission shall be filled by the original appointing authority for the unexpired balance of the 8 9 term. No attorney who appears before any judge of compensation 10 claims more than four times a year is eligible to serve on the 11 statewide nominating commission. The meetings and determinations of the nominating commission as to the judges 12 13 of compensation claims shall be open to the public. 14 (c) Each judge of compensation claims shall be 15 appointed for a term of 4 years, but during the term of office may be removed by the Governor for cause. Prior to the 16 17 expiration of a judge's term of office, the statewide nominating commission shall review the judge's conduct and 18 19 determine whether the judge's performance is satisfactory. Effective January 1, 2001, in determining whether a judge's 20 performance is satisfactory, the commission shall consider the 21 22 extent to which the judge has met the requirements of this chapter, including, but not limited to, the requirements of 23 24 ss. 440.192(2), 440.25(1), 440.25(4)(a)-(f), 440.34(2), and 25 440.442. If the commission finds that judges generally are unable to meet a particular statutory requirement for reasons 26 27 beyond their control, the commission shall request the 28 Legislature to review that particular requirement. If the 29 judge's performance is deemed satisfactory, the commission shall report its finding to the Governor no later than 6 30

31 months prior to the expiration of the judge's term of office.

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1 The Governor shall review the commission's report and may 2 reappoint the judge for an additional 4-year term. If the 3 Governor does not reappoint the judge, the Governor shall inform the commission. The judge shall remain in office until 4 5 the Governor has appointed a successor judge in accordance б with paragraphs (a) and (b). If a vacancy occurs during a 7 judge's unexpired term, the statewide nominating commission 8 does not find the judge's performance is satisfactory, or the 9 Governor does not reappoint the judge, the Governor shall 10 appoint a successor judge for a term of 4 years in accordance 11 with paragraph (b). (d) 12 The Governor may appoint any attorney with 5 years of experience in the practice of law in this state to serve as 13 14 a judge of compensation claims pro hac vice in the absence or disqualification of any full-time judge of compensation claims 15 or to serve temporarily as an additional judge of compensation 16 claims in any area of the state in which the Governor 17 determines that a need exists for such additional judge. 18 19 However, no attorney so appointed by the Governor shall serve for a period to exceed 60 successive days. 20 The Office of the Judges of Compensation Claims 21 (5) shall promulgate rules to effect the purposes of this section 22 by November 1, 2000. Such rules shall not be subject to rule 23 24 challenges under s. 120.56(2) or to drawout proceedings under 25 s. 120.54(3)(c)(2).Such rules shall include procedural rules applicable to workers' compensation claim resolution and 26 27 uniform criteria for measuring the performance of the office, 28 including, but not limited to, the number of cases assigned 29 and disposed, the age of pending and disposed cases, 30 timeliness of decisionmaking, extraordinary fee awards, and 31 the data necessary for the judicial nominating commission to 25

1 review the performance of judges as required in paragraph (2)(c)and other performance indicators. Such rules shall 2 3 become effective only after they have been submitted to the President of the Senate and the Speaker of the House of 4 5 Representatives, for review by the Legislature, no later than б 30 days prior to the next regular session of the Legislature. 7 The Office of Judges of Compensation Claims shall conform the 8 rules to legislation enacted by the Legislature, or, if no action is taken by the Legislature, the rules of the Office of 9 10 Judges of Compensation Claims shall become effective. The 11 workers' compensation rules of procedure approved by the Supreme Court shall apply until the rules promulgated by the 12 Office of the Judges of Compensation Claims pursuant to this 13 section become effective. 14 Section 13. Subsection (8) of section 61.14, Florida 15 Statutes, is amended to read: 16 17 61.14 Enforcement and modification of support, 18 maintenance, or alimony agreements or orders .--19 (8)(a) When reviewing any settlement of lump-sum payment pursuant to s. 440.20(11)(a) and (b), judges of 20 21 compensation claims shall consider the interests of the worker 22 and the worker's family when approving the settlement, which must consider and provide for appropriate recovery of 23 24 child-support arrearage. (b) Notwithstanding the provisions of s. 440.22, any 25 compensation due or that may become due an employee under 26 27 chapter 440 is exempt from garnishment, attachment, execution, 28 and assignment of income, except for the purposes of enforcing 29 child or spousal support obligations. 30 Section 14. Paragraph (a) of subsection (2) of section 31 61.30, Florida Statutes, is amended to read: 26

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1
           61.30 Child support guidelines; retroactive child
    support.--
2
3
           (2) Income shall be determined on a monthly basis for
    the obligor and for the obligee as follows:
4
5
           (a) Gross income shall include, but is not limited to,
б
    the following items:
7
           1.
               Salary or wages.
8
           2.
               Bonuses, commissions, allowances, overtime, tips,
9
    and other similar payments.
10
           3.
               Business income from sources such as
11
    self-employment, partnership, close corporations, and
    independent contracts. "Business income" means gross receipts
12
13
   minus ordinary and necessary expenses required to produce
14
    income.
           4. Disability benefits.
15
               All worker's compensation benefits and settlements.
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           5.
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           6.
              Unemployment compensation.
           7.
              Pension, retirement, or annuity payments.
18
19
           8.
               Social security benefits.
20
               Spousal support received from a previous marriage
           9.
21
    or court ordered in the marriage before the court.
           10. Interest and dividends.
22
                Rental income, which is gross receipts minus
23
           11.
24
    ordinary and necessary expenses required to produce the
25
    income.
           12.
                Income from royalties, trusts, or estates.
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27
                Reimbursed expenses or in kind payments to the
           13.
28
    extent that they reduce living expenses.
29
           14. Gains derived from dealings in property, unless
30
    the gain is nonrecurring.
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1 Section 15. Section 489.114, Florida Statutes, is 2 amended to read: 3 489.114 Evidence of workers' compensation 4 coverage.--Except as provided in s. 489.115(5)(d), any person, 5 business organization, or qualifying agent engaged in the б business of contracting in this state and certified or 7 registered under this part shall, as a condition precedent to 8 the issuance or renewal of a certificate, registration, or 9 certificate of authority of the contractor, provide to the 10 Construction Industry Licensing Board, as provided by board 11 rule, evidence of workers' compensation coverage pursuant to chapter 440. In the event that the Division of Workers' 12 13 Compensation of the Department of Labor and Employment Security receives notice of the cancellation of a policy of 14 15 workers' compensation insurance insuring a person or entity governed by this section, the Division of Workers' 16 17 Compensation shall certify and identify all persons or 18 entities by certification or registration license number to 19 the department after verification is made by the Division of 20 Workers' Compensation that such cancellation has occurred or that persons or entities governed by this section are no 21 longer covered by workers' compensation insurance. 22 Such certification and verification by the Division of Workers' 23 24 Compensation shall result solely from records furnished to the 25 Division of Workers' Compensation by the persons or entities governed by this section. The department shall notify the 26 persons or entities governed by this section who have been 27 28 determined to be in noncompliance with chapter 440, and the 29 persons or entities notified shall provide certification of 30 compliance with chapter 440 to the department and pay an 31 administrative fine as provided by rule. The failure to

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1 maintain workers' compensation coverage as required by law 2 shall be grounds for the board to revoke, suspend, or deny the 3 issuance or renewal of a certificate, registration, or 4 certificate of authority of the contractor under the 5 provisions of s. 489.129. Section 16. Paragraph (d) is added to subsection (5) б 7 of section 489.115, Florida Statutes, to read: 8 489.115 Certification and registration; endorsement; 9 reciprocity; renewals; continuing education .--10 (5) 11 (d) If qualifying for an exemption from workers' compensation coverage requirements under s. 440.05, an 12 applicant for initial issuance of a certificate or 13 14 registration shall submit as a prerequisite an affidavit attesting to the fact that the applicant will obtain an 15 exemption within 30 days after the date the initial 16 17 certificate or registration is issued by the board. 18 Section 17. Section 489.510, Florida Statutes, is 19 amended to read: 489.510 Evidence of workers' compensation 20 coverage.--Except as provided in s. 489.515(3)(b), any person, 21 business organization, or qualifying agent engaged in the 22 business of contracting in this state and certified or 23 24 registered under this part shall, as a condition precedent to the issuance or renewal of a certificate or registration of 25 the contractor, provide to the Electrical Contractors' 26 Licensing Board, as provided by board rule, evidence of 27 28 workers' compensation coverage pursuant to chapter 440. In 29 the event that the Division of Workers' Compensation of the Department of Labor and Employment Security receives notice of 30 31 the cancellation of a policy of workers' compensation

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1 insurance insuring a person or entity governed by this 2 section, the Division of Workers' Compensation shall certify 3 and identify all persons or entities by certification or registration license number to the department after 4 5 verification is made by the Division of Workers' Compensation б that such cancellation has occurred or that persons or 7 entities governed by this section are no longer covered by workers' compensation insurance. Such certification and 8 9 verification by the Division of Workers' Compensation shall 10 result solely from records furnished to the Division of 11 Workers' Compensation by the persons or entities governed by this section. The department shall notify the persons or 12 13 entities governed by this section who have been determined to be in noncompliance with chapter 440, and the persons or 14 entities notified shall provide certification of compliance 15 with chapter 440 to the department and pay an administrative 16 17 fine as provided by rule. The failure to maintain workers' compensation coverage as required by law shall be grounds for 18 19 the board to revoke, suspend, or deny the issuance or renewal 20 of a certificate or registration of the contractor under the provisions of s. 489.533. 21 Section 18. Subsection (3) of section 489.515, Florida 22 Statutes, is amended to read: 23 24 489.515 Issuance of certificates; registrations.--25 (3)(a) As a prerequisite to the initial issuance or the renewal of a certificate or registration, the applicant 26 27 shall submit an affidavit on a form provided by the board 28 attesting to the fact that the applicant has obtained both

29 workers' compensation insurance or an acceptable exemption

30 certificate issued by the department and public liability and

31 property damage insurance for the health, safety, and welfare

30

1 of the public in amounts determined by rule of the board. The 2 board shall by rule establish a procedure to verify the 3 accuracy of such affidavits based upon a random audit method. 4 (b) If qualifying for an exemption from workers' 5 compensation coverage requirements under s. 440.05, an б applicant for initial issuance of a certificate or 7 registration shall submit as a prerequisite an affidavit 8 attesting to the fact that the applicant will obtain an 9 exemption within 30 days after the date the initial 10 certificate or registration is issued by the board. 11 Section 19. Paragraphs (g) and (p) of subsection (4) of section 627.311, Florida Statutes, are amended to read: 12 13 627.311 Joint underwriters and joint reinsurers.--14 (4) Whenever a deficit exists, the plan shall, within 15 (q) 90 days, provide the department with a program to eliminate 16 17 the deficit within a reasonable time. The deficit may be 18 funded both through increased premiums charged to insureds of 19 the plan for subsequent years, through the use of policyholder surplus attributable to any year, and through assessments on 20 insureds in the plan if the plan uses assessable policies. 21 22 (p) Neither the plan nor any member of the board of governors is liable for monetary damages to any person for any 23 24 statement, vote, decision, or failure to act, regarding the 25 management or policies of the plan, unless: The member breached or failed to perform her or his 26 1. 27 duties as a member; and 28 2. The member's breach of, or failure to perform, 29 duties constitutes: A violation of the criminal law, unless the member 30 a. 31 had reasonable cause to believe her or his conduct was not 31 **CODING:**Words stricken are deletions; words underlined are additions.

1 unlawful. A judgment or other final adjudication against a 2 member in any criminal proceeding for violation of the 3 criminal law estops that member from contesting the fact that 4 her or his breach, or failure to perform, constitutes a 5 violation of the criminal law; but does not estop the member б from establishing that she or he had reasonable cause to 7 believe that her or his conduct was lawful or had no 8 reasonable cause to believe that her or his conduct was unlawful; 9 10 b. A transaction from which the member derived an 11 improper personal benefit, either directly or indirectly; or Recklessness or any act or omission that was 12 c. 13 committed in bad faith or with malicious purpose or in a manner exhibiting wanton and willful disregard of human 14 15 rights, safety, or property. For purposes of this sub-subparagraph, the term "recklessness" means the acting, or 16 17 omission to act, in conscious disregard of a risk: (I) Known, or so obvious that it should have been 18 19 known, to the member; and (II) Known to the member, or so obvious that it should 20 have been known, to be so great as to make it highly probable 21 that harm would follow from such act or omission. 22 Section 20. Effective July 1, 2000, section 627.914, 23 24 Florida Statutes, is amended to read: 25 627.914 Reports of information by workers' compensation insurers required .--26 27 (1) The department shall promulgate rules and 28 statistical plans which shall thereafter be used by each 29 insurer and self-insurance fund as defined in s. 624.461 in the recording and reporting of loss, expense, and claims 30 31 experience, in order that the experience of all insurers and 32

1 self-insurance funds self-insurers may be made available at 2 least annually in such form and detail as may be necessary to 3 aid the department in determining whether Florida experience for workers' compensation insurance is sufficient for 4 5 establishing rates. 6 (2) Any insurer authorized to write a policy of 7 workers' compensation insurance shall transmit the following 8 information to the department each year with its annual 9 report, and such information shall be reported on a net basis 10 with respect to reinsurance for nationwide experience and on a 11 direct basis for Florida experience: (a) Premiums written; 12 (b) Premiums earned; 13 (c) Dividends paid or credited to policyholders; 14 15 (d) Losses paid; (e) Allocated loss adjustment expenses; 16 17 (f) The ratio of allocated loss adjustment expenses to 18 losses paid; 19 (g) Unallocated loss adjustment expenses; 20 (h) The ratio of unallocated loss adjustment expenses 21 to losses paid; (i) The total of losses paid and unallocated and 22 allocated loss adjustment expenses; 23 24 (j) The ratio of losses paid and unallocated and 25 allocated loss adjustment expenses to premiums earned; 26 (k) The number of claims outstanding as of December 31 27 of each year; 28 (1) The total amount of losses unpaid as of December 29 31 of each year; 30 (m) The total amount of allocated and unallocated loss 31 adjustment expenses unpaid as of December 31 of each year; and 33

1 (n) The total of losses paid and allocated loss adjustment expenses and unallocated loss adjustment expenses, 2 3 plus the total of losses unpaid as of December 31 of each year 4 and loss adjustment expenses unpaid as of December 31 of each 5 year. 6 (3) A report of the information required in subsection 7 (2) shall be filed no later than April 1 of each year and 8 shall include the information for the preceding year ending December 31. All reports shall be on a calendar-accident year 9 10 basis, and each calendar-accident year shall be reported at 11 eight stages of development. (2)(4) Each insurer and self-insurance fund authorized 12 13 to write a policy of workers' compensation insurance shall transmit the information for paragraphs (a), (b),(c),(d), 14 and (e) annually on both Florida experience and nationwide 15 experience separately: 16 17 (a) Payrolls by classification. Manual premiums by classification. 18 (b) 19 (C) Standard premiums by classification. 20 (d) Losses by classification and injury type. 21 (e) Expenses. 22 A report of this information shall be filed no later than July 23 24 April 1 of each year. All reports shall be filed in accordance with standard reporting procedures for insurers, 25 which procedures have received approval by the department, and 26 27 shall contain data for the most recent policy period 28 available. A statistical or rating organization may be used 29 by insurers and self-insurance funds to report the data required by this section. The statistical or rating 30 31 organization shall report each data element in the aggregate 34

1 only for insurers and self-insurance funds required to report 2 under this section who elect to have the rating organization 3 report on their behalf. Such insurers and self-insurance funds shall be named in the report. 4 5 (3)(5) Individual self-insurers as defined authorized б to transact workers' compensation insurance as provided in s. 440.02 shall report only Florida data as prescribed in 7 paragraphs (a) through (e) of subsection(2)(4)to the 8 9 Division of Workers' Compensation of the Department of Labor 10 and Employment Security. 11 (a) The Division of Workers' Compensation shall publish the dates and forms necessary to enable individual 12 13 self-insurers to comply with this section. (b) The Division of Workers' Compensation shall report 14 the information collected under this section to the Department 15 16 of Insurance in a manner prescribed by the department. 17 (b)(c) A statistical or rating organization may be used by individual self-insurers for the purposes of reporting 18 19 the data required by this section and calculating experience 20 ratings. (4) (4) (6) The department shall provide a summary of 21 information provided pursuant to subsection subsections (2) 22 and (4) in its annual report. 23 24 Section 21. There is appropriated to the Department of 25 Labor and Employment Security from the Workers' Compensation Administration Trust Fund \$1,400,000 for the purpose of hiring 26 27 additional mediators to carry out the functions of section 28 440.25(3), Florida Statutes. 29 Section 22. Subsection (3) of section 440.45, Florida 30 Statutes, is repealed. 31

<pre>Section 23. Except as otherwise provided in this act, this act shall take effect October 1, 2000. this act shall take effect October 1, 2000. Section 23. Except as otherwise provided in this act, this act shall take effect October 1, 2000. Section 23. Except as otherwise provided in this act, section 24. Except as otherwise provided in the section 24. Except as otherwise provided in the</pre>
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CS for SB 1992

1		STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN COMMITTEE SUBSTITUTE FOR
2		Senate Bill 1992
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4	1.	Clarifies that an employee can authorize the carrier to provide for the direct deposit of compensation benefits
5		to an account established by the employee at a financial institution, as defined in s. 655.055(1)(h), F.S., and
6		eliminates the option of the carrier establishing a direct deposit account for the employee.
7	2.	Authorizes Judges of Compensation Claims to specifically
8		consider the interest of the worker and the worker's family when approving a workers' compensation lump-sum
9		settlement, which must include recovery of any child support arrearage. The committee substitute clarifies
10		that the current exemption for creditors claims as to workers' compensation benefits does not apply to child
11		support claims. The committee substitute also clarifies in the child support guidelines, that workers'
12		compensation income which is considered in determining a person's child support obligation, includes all workers'
13		compensation benefits and settlements.
14	3.	Requires an individual obtaining a contractor's license under ch. 489, F.S., to attest in the affidavit that an
15	.5 exemption form wo obtained within 3 .6 obtaining the con	exemption form workers' compensation coverage would be
16		obtained within 30 instead of 10 days after the date of obtaining the contractor's license. This would conform
17		with the Division of Workers' Compensation requirement that an exemption must be approved or denied within 30 days.
18	4.	Requires the Office of Judges of Compensation Claims to
19		promulgate rules no later than November 1, 2000, and to submit the rules to the Legislature within 30 days prior
20		to the next regular session. Such rules would not be subject to rule challenge under ch. 120, F.S. The Office
21		of the Judges of Compensation Claims would be required
22		to conform the rules to legislation enacted by the Legislature, or, if no action was taken by the
23		Legislature, the Office of Judges of Compensation Claims rules would become effective.
24	5.	Specifies that an authorized qualified medical
25		rehabilitation provider may have access to medical information of an injured employee.
26	6.	Requires an authorization or denial of medical treatment
27		for the injured worker within 30 days after receipt of a request for medical services by the insurer or the
28		insurer's managed care arrangement, whichever is earlier.
29	7.	Clarifies that the tolling of time for determining
30		whether the outcome of the grievance is resolved against the injured worker, by the carrier not responding, begins 30 days from the receipt of the grievance.
31	8.	Provides a January 1, 2001, implementation date for the
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1		nominating commission to evaluate the judges'
2		nominating commission to evaluate the judges' performance, based upon the judges' ability to meet statutory deadlines and other statutory requirements.
3	9.	
4		Requires temporary judges of compensation claims appointed by the Governor to have at least 5 instead of 3 years experience in the practice of law.
5	10.	Makes technical and conforming changes.
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