	Amendment No. (for drafter's use only)
	CHAMBER ACTION
	Senate House
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11	Representative Ross offered the following:
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13	Amendment (with directory and title amendments)
14	Remove line(s) 3849-3886, and insert:
15	Section 21. Section 440.185, Florida Statutes, is amended
16	to read:
17	440.185 Notice of injury or death; medical bills; reports;
18	penalties for violations
19	(1) An employee who suffers an injury arising out of and
20	in the course of employment shall advise his or her employer of
21	the injury within 30 days after the date of or initial
22	manifestation of the injury. Failure to so advise the employer
23	shall bar a petition under this chapter unless:
24	(a) The employer or the employer's agent had actual
25	knowledge of the injury;
26	(b) The cause of the injury could not be identified
27	without a medical opinion and the employee advised the employer
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28 within 30 days after obtaining a medical opinion indicating that 29 the injury arose out of and in the course of employment; 30 (c) The employer did not put its employees on notice of

31 the requirements of this section by posting notice pursuant to 32 s. 440.055; or

33 (d) Exceptional circumstances, outside the scope of
 34 paragraph (a) or paragraph (b) justify such failure.

36 In the event of death arising out of and in the course of 37 employment, the requirements of this subsection shall be 38 satisfied by the employee's agent or estate. Documents prepared 39 by counsel in connection with litigation, including, but not 40 limited to, notices of appearance, petitions, motions, or 41 complaints, shall not constitute notice for purposes of this 42 section.

43 (2)(a) Within 7 days after actual knowledge of injury or 44 death, the employer shall report such injury or death to its 45 carrier, in a format prescribed by the department, and shall 46 provide a copy of such report to the employee or the employee's 47 estate. The report of injury shall contain the following 48 information:

49 1.(a) The name, address, and business of the employer; 50 2.(b) The name, social security number, street, mailing 51 address, telephone number, and occupation of the employee; 52 3.(c) The cause and nature of the injury or death; 53 4.(d) The year, month, day, and hour when, and the 54 particular locality where, the injury or death occurred; and 55 5.(e) Such other information as the department may require 56 by rule.

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57 (b) The department shall provide by rule for a carrier
58 reporting system to identify the types of indemnity claims for
59 which the carrier shall file first report of injury or death
60 information with the department and time periods for reporting.
61 The carrier shall, within 14 days after the employer's receipt
62 of the form reporting the injury, file the information required
63 by this subsection with the department.

64 (c) However, the department may by rule provide for a 65 different reporting system for those types of injuries which it 66 determines should be reported in a different manner and for 67 those cases which involve minor injuries requiring professional 68 medical attention in which the employee does not lose more than 69 7 days of work as a result of the injury and is able to return 70 to the job immediately after treatment and resume regular work.

(3) In addition to the requirements of subsection (2), the employer shall notify the department <u>and the carrier</u> within 24 hours by telephone, <u>facsimile</u>, or <u>electronically</u> telegraph of any injury resulting in death. However, this special notice shall not be required when death results subsequent to the submission to the department <u>and the carrier</u> of a previous report of the injury pursuant to subsection (2).

78 (4) Within 3 days after the employer or the employee 79 informs the carrier of an injury the carrier shall mail to the 80 injured worker an informational brochure approved by the 81 department which sets forth in clear and understandable language 82 an explanation of the rights, benefits, procedures for obtaining 83 benefits and assistance, criminal penalties, and obligations of 84 injured workers and their employers under the Florida Workers' 85 Compensation Law. Annually, the carrier or its third-party

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86 administrator shall mail to the employer an informational 87 brochure approved by the department which sets forth in clear and understandable language an explanation of the rights, 88 89 benefits, procedures for obtaining benefits and assistance, 90 criminal penalties, and obligations of injured workers and their 91 employers under the Florida Workers' Compensation Law. All such 92 informational brochures shall contain a notice that clearly 93 states in substance the following: "Any person who, knowingly 94 and with intent to injure, defraud, or deceive any employer or 95 employee, insurance company, or self-insured program, files a 96 statement of claim containing any false or misleading 97 information commits a felony of the third degree."

98 (5)(a) Within 30 calendar days after the date the bill was 99 paid, the carrier shall provide to the department, in a format 100 and in the means prescribed by the department by rule, each paid 101 medical, dental, and hospital bill received from a health care provider or facility, the employer, or the employee with regard 102 103 to the treatment, care, and attendance of the injured employee, 104 including any bill for examination, diagnosis, or disability 105 evaluation.

106 (b) The department may require additional reports from the 107 carrier, employer, employee, or health care provider or 108 facility, in a format prescribed by the department and in a 109 manner and time prescribed by rule, with regard respect to an 110 employee's such injury or claim and of the condition of such 111 employee, including copies of medical reports on initial 112 payment, funeral expenses, claim costs, changes in claim data, 113 denials, and wage statements, shall be filed by the employer or

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114 carrier to the department at such times and in such manner as
115 the department may prescribe by rule.

116 (c) In carrying out its responsibilities under this 117 chapter, The department or agency may by rule require from the carrier, employer, employee, or health care provider or 118 119 facility, the provision of information and documentation in 120 response to a request for information with regard to the 121 employee's injury or claim, including copies of provide for the 122 obtaining of any medical reports and records relating to medical 123 treatment provided pursuant to this chapter, notwithstanding the 124 provisions of ss. 90.503 and 395.3025(4).

125 (d) Failure to respond to requests for information in the 126 manner and time prescribed by department rule shall subject the 127 carrier, employer, employee, or health care provider or facility 128 to an administrative penalty not to exceed \$100 per failure to 129 respond.

(6) In the absence of a stipulation by the parties, reports provided for in subsection (2), subsection (4), or subsection (5) shall not be evidence of any fact stated in such report in any proceeding relating thereto, except for medical reports which, if otherwise qualified, may be admitted at the discretion of the judge of compensation claims.

136 (7) Every <u>insurer</u> carrier shall file with the department
137 within <u>30</u> 21 days after the <u>following: effectuation</u> issuance of
138 <u>coverage</u>, the effective date of a policy reinstatement, or
139 <u>policy endorsement</u>, a <u>policy or contract of insurance</u> such
140 policy information as the department requires, <u>by rule</u>,
141 including notice of whether the policy is a minimum premium
142 policy. <u>The department may require by rule that the insurer</u>

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143 identify large deductible policies. Information regarding a notice of cancellation, notice of nonrenewal, or expiration of a 144 145 policy pursuant to as set out in s. 440.42(3) shall be filed 146 with mailed to the department in accordance with rules adopted 147 by the department under chapter 120. Third-party vendors that 148 submit The department may contract with a private entity for the 149 collection of policy information required to be filed by 150 insurers carriers under this subsection, and the receipt of 151 notices of cancellation, notices of nonrenewal, or expiration of a policy required to be filed by insurers carriers under s. 152 153 440.42(3) shall be approved by the department. The insurer shall 154 notify the department if the insurer's third-party vendor for 155 the submission of policy information has changed or the 156 insurer's third-party vendor status has changed in accordance 157 with the means and timeframe set forth in department rule. The submission by a third-party vendor of information required to be 158 159 filed by an insurer shall not alter the time requirements set 160 forth in this chapter or department rule. The timely filing of required information shall be determined by the date the 161 162 department receives the required information either directly 163 from the insurer or from the third-party vendor. The submission 164 of policy information or notices of cancellation or expiration 165 to the contracted private entity satisfies the filing 166 requirements of this subsection and s. 440.42(3). 167 (8)(a) When a claimant, employer, or carrier has the 168 right, or is required, to submit mail a report or notice with

169 required copies within the times prescribed in subsection (2),

subsection (4), or subsection (5), <u>submission of paper documents</u>
must be completed and shall be in compliance with the rules

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172 adopted by the department and shall be deemed timely filed such 173 mailing will be completed and in compliance with this section if 174 it is postmarked and mailed prepaid to the appropriate recipient 175 prior to the expiration of the time periods prescribed in this 176 section.

177 (b) Submission of information in department-approved
178 electronic format shall be completed and deemed timely filed if
179 the electronic transaction is acknowledged by the department as
180 having passed edits in accordance with rules adopted by the
181 department and is sent within the timeframes set forth in this
182 chapter and department rule.

183 (c) Submission by a third-party vendor of information
 184 required to be filed by an insurer shall not alter the time
 185 requirements set forth in law or department rule.

186 (9)(a) For each electronic transaction, Any employer or 187 carrier who fails or refuses to timely send any form, report, bill, or notice, other than the first report of injury, required 188 189 by this section to be filed with the department, the department 190 shall impose an administrative be subject to a civil penalty not 191 to exceed \$500 for each such failure to timely file with the 192 department in accordance with this chapter and department rule 193 or refusal.

(b) For every first report of injury required under
 subsection (2), the department shall impose an administrative
 penalty for failure to file the first report of injury in
 accordance with this section and department rule.

198(c)However, any employer who fails to notify the carrier199of the injury on the prescribed form or by letter within the 7200days required in subsection (2) shall be liable for the civil

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201 penalty, which shall be paid by the employer and not the 202 carrier. Failure by the employer to meet its obligations under 203 subsection (2) shall not relieve the carrier from liability for 204 the civil penalty if it fails to comply with subsections (4), 205 and (5) and (8) and department rule.

(10) The department may by rule prescribe forms and procedures governing the submission of the change in claims administration report and the risk class code and standard industry code report for all lost time and denied lost-time cases. The department may by rule define terms that are necessary for the effective administration of this section.

(11) Any information in a report of injury or illness 212 213 filed pursuant to this section that would identify an ill or 214 injured employee is confidential and exempt from the provisions 215 of s. 119.07(1) and s. 24(a), Art. I of the State Constitution. 216 This subsection is subject to the Open Government Sunset Review Act of 1995 in accordance with s. 119.15, and shall stand 217 repealed on October 2, 2003, unless reviewed and saved from 218 219 repeal through reenactment by the Legislature.

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223 paid as compensation for death; amending s. 440.185, F.S.; 224 revising provisions relating to notice of injury or death; 225 clarifying reporting requirements; providing penalties for 226 noncompliance with specified filing requirements;