2026 Legislative and Regulatory Trends Report

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OVERVIEW OF 2026 LEGISLATIVE AND REGULATORY ACTIVITY

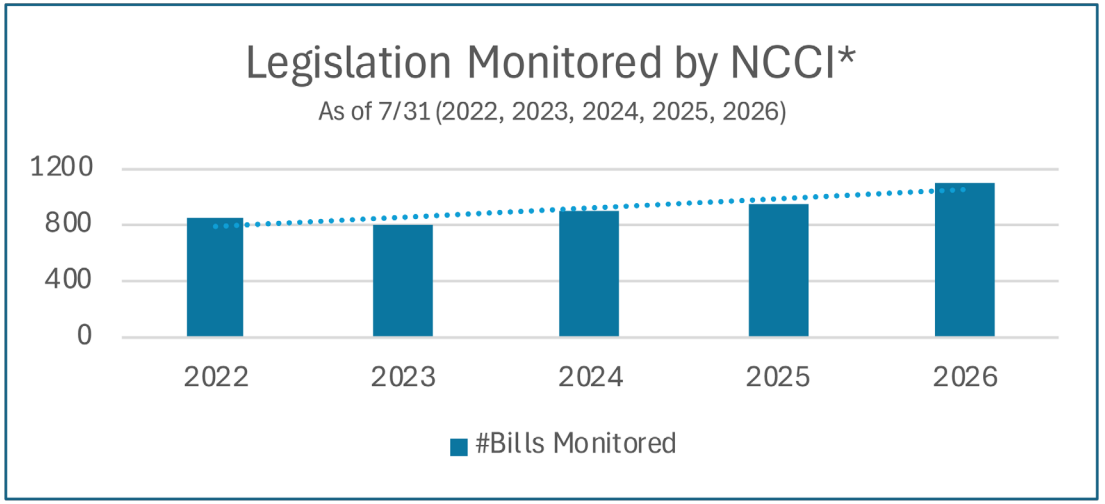
The ***2026 Legislative and Regulatory Trends Report (Report)*** highlights some of the legislative activity that is shaping the workers compensation landscape this year.

NCCI reviews several thousand bills and regulations each year to identify themes that may impact the workers compensation system. From this review, NCCI identifies approximately 1,300 bills and regulations to monitor during each legislative season. So far, 2026 is on track to produce similar results. As of July 31, 2026, NCCI is monitoring **1,102** state and federal bills that may impact stakeholders, including **589** bills in states where NCCI provides services as a licensed rating and advisory organization. NCCI is also monitoring **210** proposed workers compensation-related regulations. Also, as of July 31, 2026, **167** bills were enacted, and **90** regulations were adopted across all jurisdictions.

This chart shows the number of bills monitored by NCCI between 2022 and 2026. The volume of bills fluctuates each year due to several factors including the type of legislative sessions (e.g., full, budget-only, or biennial). However, over the timeframe shown in the chart, we have seen an overall increase in the number of bills monitored.

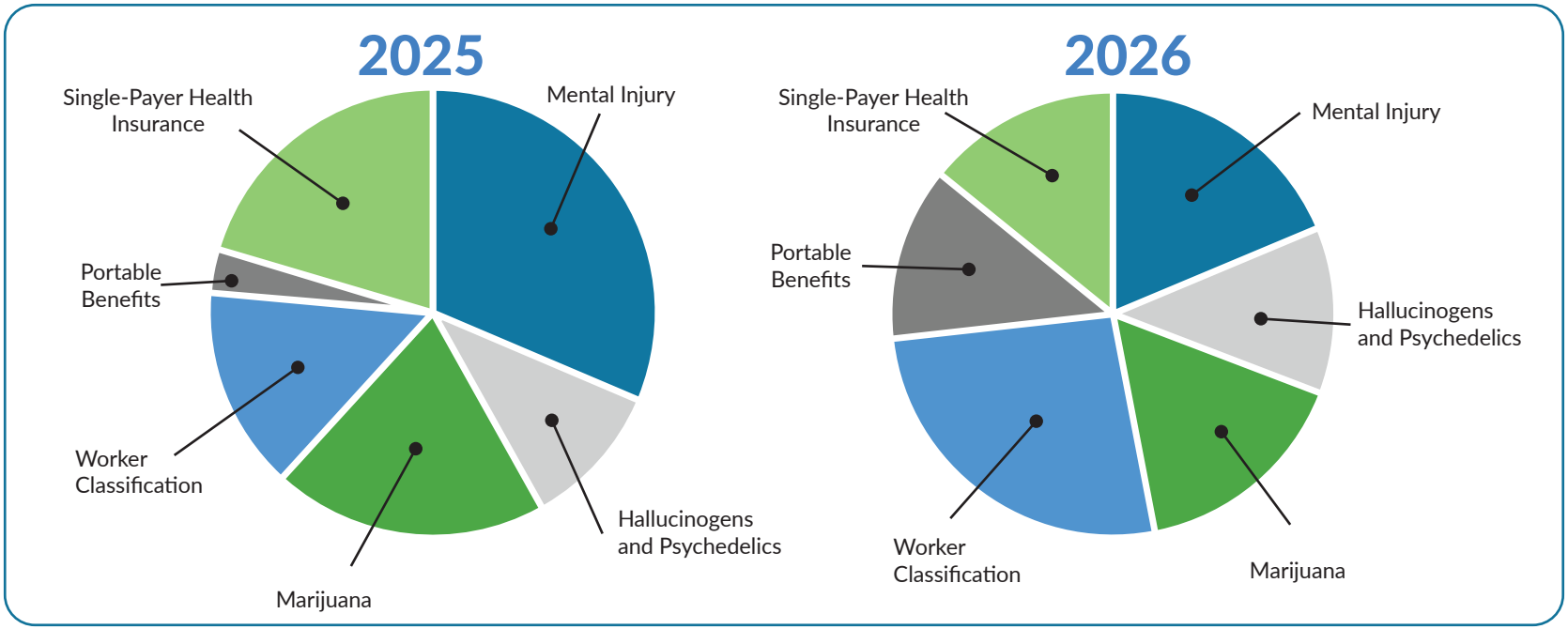
The first part of the ***Report*** is a comprehensive resource that includes developments on certain broad topics of interest, such as:

- Workplace-related mental injuries
- Worker classification, including independent contractors/gig economy
- Portable benefits
- Single-payer health insurance
- Marijuana legalization and reimbursement
- Hallucinogens/psychedelics
- Issues spotlight



*Includes bills for topics that may have an indirect impact on workers compensation.

While the topics of interest identified in 2026 are mainly consistent with topics from prior years, the distribution of the number of bills for each issue varies year to year, offering valuable insight. This year, we saw a shift in the bill mix, with a noticeable increase in worker classification-related bills, primarily driven by numerous portable benefits for independent-contractor legislation across states. Because this new activity represented a significant share of worker classification-related bills, we have highlighted portable benefit bills in this year's report. Additionally, the report includes a spotlight section where we highlight topics that gained traction this year.



Note: Includes bills for topics that may have an indirect impact on workers compensation.

The second part of the ***Report*** also provides legislative activity for the broad topics of interest, but it is presented by geographical region, including the Midwestern, Northeastern, Southeastern, and Western regions. It also includes other bills of interest for each region. The information in the ***Report*** aligns with the legislative cycle to include the latest countrywide, regional, and individual state actions and trends as of July 31, 2026.

For easy access to individual sections of the ***Report***, the Table of Contents contains links that navigate directly to the applicable content page.

The ***Report*** also includes links to the **Enacted Legislation Interactive Dashboard**, **Loss Cost/Rate Filing Interactive Dashboard**, and **Legislative Activity Online Resource** on pages 30, 31, and 32. These pages also include information about each dashboard's functionality.

MENTAL INJURY-RELATED LEGISLATION

Legislation establishing workers compensation coverage or creating a presumption of compensability for post-traumatic stress disorder (PTSD), or other psychological injuries, continues to be a topic debated in state legislatures. These presumptions—that certain diseases or injuries are presumed to have been contracted or sustained in the course of employment—have the potential to impact the number of compensable claims within the workers compensation system. While the majority of mental injury bills continue to be related to first responders, most of the mental injury-related legislation in 2026 so far has centered on who can qualify for the coverage, what conditions qualify for coverage, and which medical professionals are authorized to diagnose qualifying conditions.

Virginia (HB 1313) provides that claims for PTSD, anxiety disorder, or depressive disorder unaccompanied by a physical injury and incurred by a law-enforcement officer or firefighter are compensable. This bill was enacted. **Wisconsin** (AB 651/SB 676) revises the standard that an emergency medical responder, emergency medical services practitioner, or volunteer firefighter must use for the diagnosis of PTSD and limits the number of times it may be diagnosed in their lifetime. The Assembly Bill has been enacted.

Connecticut considered, but did not advance, legislation (HB 5279) that would have added witnessing a serious physical injury to a person that does not result in death or permanent disfigurement as a qualifying event eligible for coverage for a post-traumatic stress injury.

Several states considered legislation to establish coverage for PTSD and/or other psychological injuries for certain first responders, including **Arizona** (HB 2204), **Kentucky** (HB 26), and **New Mexico** (HB 132).

Several states considered legislation to expand mental injury/PTSD coverage to additional workers, including **Idaho** (S 1425) for coroners or medicolegal death investigators, **Vermont** (S 306) for public safety and emergency services dispatchers, **Washington** (HB 1002) for county coroners, examiners, and investigative personnel, **Washington** (SB 5043, SB 5882) for local correctional facility workers, and **West Virginia** (HB 5472) for mine rescue teams.

Several states considered bills to add practitioners who are authorized to diagnose certain mental disorders, including **Maryland** (HB 1325/SB 522), **Minnesota** (HF 4598/SF 3720), and **New York** (A 5894). While the Maryland bill did not advance, the New York bill has passed both chambers. The Minnesota bill (SF 3720) was enacted, adding psychiatric mental health nurse practitioners to those that are authorized to diagnose workers compensation-related PTSD.

Other bills of interest include:

- **Michigan** (HB 5952, HB 5953) creates an alternative benefit system through a post-traumatic stress injury fund. Eligible individuals may claim benefits from this fund rather than their employers when diagnosed with work-related PTSD after experiencing qualifying traumatic events. These bills are pending.
- **Missouri** (SB 1385) provides that a mental injury resulting from work-related stress does not arise out of and in the course of the employment, unless it is demonstrated that the stress was work related and extraordinary and unusual. This bill did not advance.
- **New Hampshire** (SB 423) reestablishes the commission to study the incidence of PTSD in first responders. This bill was enacted.
- **New York** (S 10360) relates to recognizing suicide as a "line of duty" death for the purposes of certain death benefits for certain first responders, while two bills (A 949, S 998) relate to permitting telemedicine for mental and behavioral health issues. New York A 949 has passed both chambers, while S 10360 is pending.
- **Virginia** (HB 29) increases the temporary total incapacity benefits and/or temporary partial incapacity benefits for any law-enforcement officer or firefighter to a maximum of 104 weeks from the date of diagnosis for PTSD, anxiety disorder, or depressive disorder. This bill was enacted.
- **Washington** (HB 2405/SB 6293) establishes a pilot program for PTSD treatment and research. The House bill was enacted.

WORKER CLASSIFICATION

The question of whether a worker is an employee or an independent contractor continues to be a focus of public policymakers at both the state and federal levels. Classification as an employee or an independent contractor may have implications for issues such as taxes, benefits including workers compensation, and other employment-related matters. Whether a worker is classified as an employee or an independent contractor can vary from state to state.

Independent Contractors

States continue to consider legislative proposals to provide criteria for determining whether a worker is classified as an employee of a company or an independent contractor. **Louisiana** (HB 185) expands the definition of independent contractor to also include employees of independent contractors. This bill has been enacted. **Oklahoma** enacted a bill (SB 1944) that expands exemption criteria for certain independent contractors in agriculture, ranching, or horticulture. Additionally, **Virginia** enacted a bill (HB 1046) requiring contractors that are a party to certain public works contracts to provide detailed written notices to each independent contractor containing certain information.

Georgia considered legislation (HB 1493) that addresses criteria for determining whether a worker is an employee or an independent contractor, while **Minnesota** (SF 4934) considered changes to the criteria for independent contractor determination, from requiring that all criteria be met to using a "totality of the circumstances" test. **West Virginia** (SB 1073) considered making the distinction between an independent contractor and employee consistent with the Internal Revenue Service's classifications. These bills did not pass.

New Jersey (A 1184/S 863) would revise the ABC test used to determine whether a worker is an employee or an independent contractor. **New Jersey** (ACR 73/SCR 62) would declare the Department of Labor and Workforce Development's new rules concerning the employment status test for independent contractors inconsistent with legislative intent. The New Jersey bills and resolutions are pending.

Other states considered legislation that would classify certain workers as independent contractors under certain circumstances, including certain sports officials in **Alaska** (SB 217), newspaper distributors (SB 1358) and athletic coaches (SB 527) in **California**, printed news deliverers (SB 26-091) in **Colorado**, and amateur sports officials (A 4735, S 4045) and golf caddies (S 987) in **New Jersey**. In contrast, **Hawaii** considered legislation (HB 2587/SB 3292) to establish conditions under which delivery drivers are deemed employees of the

business operating the delivery program. **Rhode Island** considered legislation (S 2318) to designate that workers furnished by a workers' cooperative corporation would be considered independent contractors. The New Jersey bill is pending. The Rhode Island bill passed the Senate and is pending.

On a **federal** level, the US Department of Labor is proposing an updated rule that would replace the current elements for determining employee or independent contractor status under the Fair Labor Standards Act currently set forth in 29 CFR part 795. Final promulgation of that rule is pending.

Gig Workers

Gig workers, including transportation network company drivers and marketplace contractors, continued to be the focus of legislation in several states during the 2026 legislative sessions.

Alaska (HB 214/SB 35), in part, adds a delivery network company courier who provides delivery services or is otherwise logged on to the digital network of a delivery network company to the list of persons not covered by the workers compensation law. **New York** (A 10222/S 9813) relates to classifying delivery network company drivers as employees under the workers compensation law, while **Ohio** (HB 840) in part, provides that the definition of employee includes a transportation network company driver while the driver is engaged in passenger platform time or dispatch platform time with respect to the transportation network company. The New York and Ohio bills are still pending.

NCCI identified several bills related to healthcare worker platforms. Generally, a healthcare worker platform is a business entity that operates an online-enabled application or platform through which a healthcare worker can accept one or more shifts to perform healthcare services to patients at a healthcare facility. Most of the legislation provides that, under specific circumstances, healthcare workers who perform shifts at healthcare facilities are not employees of healthcare worker platforms, healthcare facility operators, or healthcare facilities for the purposes of workers compensation insurance. These include **Georgia** (HB 991), **Massachusetts** (H 5506), **Ohio** (SB 423), and **Wisconsin** (AB 794/SB 768). The Massachusetts bill is pending and the Ohio bill has passed the Senate and is pending. Additionally, **Rhode Island** enacted bills (H 7030/S 2107) establishing a regulatory framework for healthcare worker platforms. The bills define a healthcare worker platform and include worker classification criteria similar to those used for independent contractor and gig economy models.

Additionally, at the **federal** level, Congress is considering **US** HR 6646, the "Empowering App-Based Workers Act," which promotes transparency and accountability in covered digital labor platform work. This bill addresses, in part, forms of employer control exercised by algorithmic management and may have implications for the classification of app-based workers as independent contractors and, in turn, their access to workers compensation benefits.

PORTABLE BENEFITS

This legislative season, NCCI has identified several states that introduced legislation to establish portable benefit plans for independent contractors. Portable benefits are employee benefits—such as workers compensation, health insurance, retirement plans, and paid leave—that are attached to the worker rather than a specific employer, allowing coverage to follow the worker from job to job. These portable benefit plans generally allow a hiring party to voluntarily contribute funds to a benefit plan, run by a third party, with the worker as the beneficiary. While portable benefits may be designed primarily for independent contractors, there are other nontraditional workers who may also want to use them, such as part-time and project-based workers. Each bill related to portable benefits may be unique, but many bills contain similar language specifically mentioning workers compensation and specifying that contributions to a portable benefit plan would not be used to determine employment classification.

States including **Idaho** (H 645), **Kentucky** (HB 732), **Louisiana** (HB 301), **Mississippi** (HB 866, HB 1072), **New Jersey** (S 1753), **North Carolina** (HB 1083, SB 445), **Rhode Island** (H 7365), and **West Virginia** (HB 4009, HB 4014, HB 5145, SB 402) all considered legislation to create portable benefit plans that specifically reference workers compensation. Additionally, **Hawaii** (HB 1545/SB 2088) and **Illinois** (HB 5422) considered creating a portable benefit pilot program. The Idaho, Louisiana, and West Virginia (HB 4009) bills have been enacted. The North Carolina HB 1083 passed the House and is pending in the Senate. North Carolina SB 445 passed the Senate and is pending in the House. The New Jersey bill is pending.

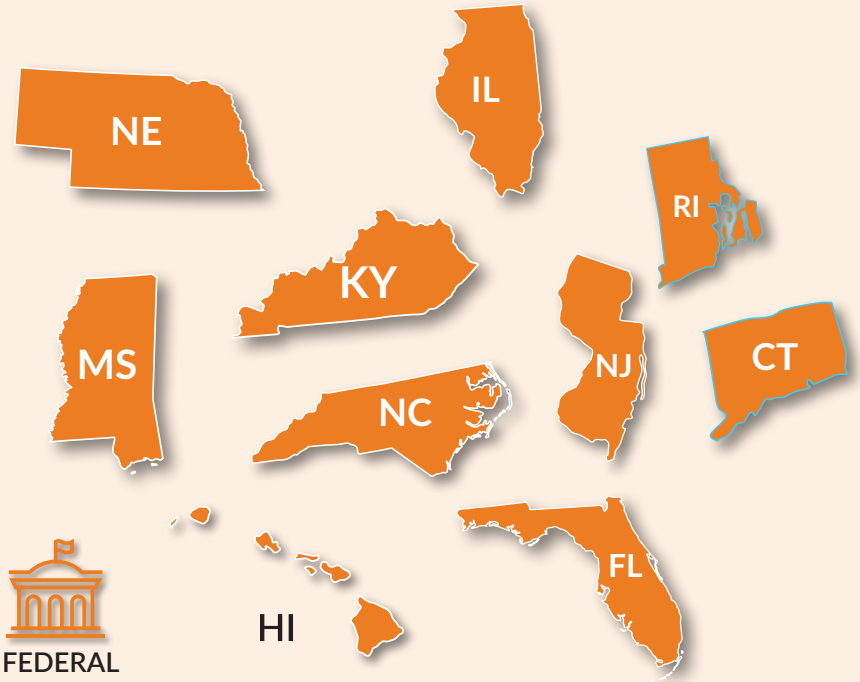
Other states considering similar legislation, but without a workers compensation-specific component, are **Connecticut** (HB 5041), **Florida** (SB 604), **Georgia** (HB 987), **Kansas** (HB 2602), **New Hampshire** (HB 1245), and **Wyoming** (SF 41). Additionally, **Nebraska** proposed a resolution (LR 414) to study the issue. The Georgia, Kansas, New Hampshire, and Wyoming bills have been enacted.

Recent **federal** legislative activity related to a portable benefit plan with a workers compensation component includes:

- **US** HR 1320, the "Modern Worker Security Act," which would ensure that the provision of portable benefits to an individual is not considered in determining whether such individual is an employee of a person. This bill is pending.

2026 PORTABLE BENEFITS LEGISLATION

CONSIDERED
PORTABLE BENEFITS LEGISLATION



- Connecticut
- Federal
- Florida
- Hawaii
- Illinois
- Kentucky
- Mississippi
- Nebraska
- New Jersey
- North Carolina
- Rhode Island

ENACTED
PORTABLE BENEFITS LEGISLATION

- Georgia
- Idaho*
- Kansas
- Louisiana*
- New Hampshire
- West Virginia*
- Wyoming

*Enacted portable benefits-related bills with a workers compensation component.

As of 7/31/26

SINGLE-PAYER HEALTH INSURANCE LEGISLATION

Single-payer health insurance is an ongoing topic of interest and related proposals often raise questions for workers compensation stakeholders, including what is the impact to the state workers compensation system if a state enacts single-payer health insurance legislation. As a result, legislation that specifically references workers compensation is of particular importance. To date, no state has fully implemented such an approach; however, several jurisdictions are studying the issue.

Most of the workers compensation-related bills contain similar language directing the board of the single-payer healthcare program to develop a proposal addressing healthcare items and services currently covered under the workers compensation system, including whether and how to:

- Continue funding for those healthcare services currently covered by the workers compensation system
- Incorporate an element of experience rating

In 2026, **10** states—**California** (AB 1900), **Florida** (SB 740), **Georgia** (HB 1480), **Hawaii** (HB 2143/SB 3305), **Massachusetts** (H 1405, H 5590), **Missouri** (HB 3255), **New Jersey** (A 4445, S 426), **Rhode Island** (H 7823/S 2567, H 8126/S 2573), **Utah** (SB 300), and **Washington** (SB 5947)—considered legislation to establish a single-payer health insurance system. The California, Florida, Georgia, Massachusetts (H 1405), Rhode Island, and Utah bills include a workers compensation component. The California, Massachusetts, and New Jersey bills are pending.

Several states considered legislation to study or plan legislation regarding the issue of a single-payer/universal healthcare system: **Florida** (SB 348), **Hawaii** (HB 1789/SB 3243), **Maryland** (HB 1316, HB 1367), and **Washington** (SB 5948). Among these, Maryland HB 1367 was enacted, creating a commission to envision and make recommendations regarding establishing a comprehensive healthcare system in the state, including the study of the role of workers compensation in such a system. The other bills did not advance.

MARIJUANA LEGALIZATION LEGISLATION

States continue to consider legalizing medical marijuana. The question of whether workers compensation insurers are required to reimburse, allowed to reimburse, or prohibited from reimbursing a workers compensation claimant for medical marijuana to treat a work-related injury or illness can impact workers compensation stakeholders and the workers compensation system.

State proposals to legalize recreational marijuana are also of interest to workers compensation stakeholders. This could have broader implications on workplace safety, drug-free workplace policies, and drug-testing issues.

Georgia (SB 220), **Kansas** (HB 2678), and **Wisconsin** (SB 534) considered legislation to legalize medical marijuana. While the Kansas and Wisconsin bills did not pass, the Georgia bill has been enacted. In part, it renames low tetrahydrocannabinol (THC) oil as medical cannabis.

Wisconsin considered but did not pass legalizing the adult use of recreational marijuana as well as the use of medical marijuana (AB 1061, SB 1045).

States including **Florida** (SB 1398), **Hawaii** (HB 1625, SB 2421), **Iowa** (HF 2206), and **New Hampshire** (HB 186, HB 1235) considered legislation to legalize recreational marijuana. **Louisiana** (HB 373) considered but did not advance an adult-use cannabis pilot program starting January 1, 2027, and terminating on July 1, 2030. None of these bills have been enacted.

States are considering legislation to legalize recreational marijuana by state constitutional amendment, including **Hawaii** (HB 1624/SB 2420) and **New Hampshire** (CACR 19). These bills and resolution did not advance. **Idaho** will consider a state constitutional amendment (HJR 4) in the 2026 November election to provide that only the Idaho State Legislature has the authority to legalize marijuana, narcotics, or other psychoactive substances, while removing the ability of citizens to initiate state statutes that would legalize these substances.

In contrast, **Massachusetts** will consider a ballot measure (Question 8) that if approved would, in part, change the type and amount of marijuana that may legally be possessed in Massachusetts by repealing the laws that legalize, regulate, and tax the retail sale of adult recreational-use marijuana.

Additionally, at the **federal** level, Congress is considering a bill (**US** S 3576) that establishes a Commission on the Federal Regulation of Cannabis to study a prompt and plausible pathway to the federal regulation of cannabis. This bill is still pending.

On December 18, 2025, the Trump administration released Executive Order 14370, which states that the attorney general shall take all necessary steps to complete the rulemaking process related to rescheduling marijuana to Schedule III of the Controlled Substances Act (CSA).

On April 23, 2026, the Justice Department and the Drug Enforcement Administration announced an order placing both US Food and Drug Administration (FDA)-approved products containing marijuana and marijuana products regulated by a state medical marijuana license in Schedule III of the CSA, as well as the initiation of an expedited administrative hearing process to consider the broader rescheduling of marijuana from Schedule I to Schedule III.

Additionally, Congress is considering:

- **US** HR 9471/S 4942, which provides protections for insurers doing business with a state-sanctioned marijuana business or service provider.
- **US** S 5022, which would, in part, decriminalize and deschedule cannabis and provide that for the purposes of the CSA, marijuana and THC in cannabis do not meet the requirements for inclusion in any schedule.
- **US** S 5049, which provides a safe harbor for insurers engaging in the business of insurance in connection with a cannabis-related legitimate business.

MARIJUANA REIMBURSEMENT LEGISLATION

State legislatures continue to debate the issue of reimbursement for marijuana as a workers compensation treatment.

- While medical marijuana is legal in **Oklahoma**, the state enacted legislation (HB 3127) to maintain that reimbursement for medical marijuana is not required while implementing a zero-tolerance policy for safety-sensitive positions.
- While medical marijuana is legal in **South Dakota**, the state considered legislation (SB 181) to repeal its medical cannabis chapter upon federal rescheduling of cannabis, including repealing the section that specifies that nothing in the chapter requires reimbursement. This bill did not advance.
- While marijuana is legal in **New Jersey**, the state is considering legislation (A 1023/S 3984) that certain insurers, including workers compensation insurers, be required to provide coverage for costs associated with the medical use of cannabis under certain circumstances; however, insurers would not be required to provide coverage upon intervention by the federal government to enforce the CSA.

While medical marijuana is legal in **Utah**, the state considered a bill (HB 281) to create a rebuttable presumption regarding cannabis use that would reduce a workers compensation award under certain circumstances. This bill did not advance.

Additionally, at the **federal** level, Congress is considering:

- **US** HR 9260, which states that no funds "may be used by the Department of Labor, including the Office of Workers' Compensation Programs, to authorize, provide, reimburse, or otherwise recognize marijuana or any cannabis-derived substance as a compensable medical treatment or benefit under any Federal workers' compensation program, including the Federal Employees' Compensation Act, regardless of any change in the scheduling of marijuana under the Controlled Substances Act. Nothing in this section shall be construed to require or permit reimbursement for marijuana under any Federal workers' compensation program."

HALLUCINOGENS AND PSYCHEDELICS LEGISLATION

NCCI is monitoring a trend regarding the legalization of certain substances, including lysergic acid diethylamide (LSD), mescaline, psilocybin, peyote, and certain other natural plant or fungus-based hallucinogens. **Colorado**, **New Mexico**, and **Oregon** have legalized psilocybin in prior years.

During the 2024–2025 legislative session, **New Jersey** enacted a bill (S 2283) to establish safe, legal, and affordable psilocybin service centers to provide residents of New Jersey who are 21 years of age or older with opportunities for supported psilocybin experiences to alleviate distress, provide preventative behavioral healthcare, and foster wellness and personal growth. No reimbursement by a government medical assistance program or private health insurer is required.

Several states enacted bills during the 2026 legislative session related to psychedelics:

- **Colorado** (HB 26-1325) establishes the ibogaine research pilot program to research the safety and effectiveness of using ibogaine to treat mental health conditions and substance use disorders.
- **Tennessee** (SB 2149) allows qualified state research institutions to conduct drug development clinical trials with ibogaine for the purpose of obtaining approval from the FDA for ibogaine as a medication to treat opioid use disorder, co-occurring substance use disorder, and other neurological or mental health conditions.
- **Utah** (HB 390) authorizes the Huntsman Mental Health Institute to conduct a clinical study on the safety and feasibility of psychedelic-assisted therapy for veterans with treatment-resistant PTSD.

Illinois introduced legislation (HB 1143) to legalize adult possession of psilocybin products, while stating that reimbursement is not required. This bill is still pending.

Arizona considered but did not pass legislation (SB 1538, SB 1542), which would have required workers compensation coverage for midomafetamine (MDMA) therapy for certain first responders diagnosed with PTSD under certain conditions, including approval from the FDA before implementation. **Iowa** (HF 978) and **West Virginia** (HB 5588) establish a regulated framework for the medical use of psilocybin to treat PTSD and do not require an insurer, a TPA, or an employer to pay for or reimburse an employee. These bills failed to advance.

Other states introduced bills to legalize or provide access to psychedelics for certain medical conditions and therapeutic use, including **Massachusetts** (H 4986), **Minnesota** (HF 2906, HF 4577, SF 3971, SF 4485), **Missouri** (HB 1717, HB 3068), **New Hampshire** (HB 1796), **New York** (A 2142, S 5303) and **Washington** (SB 5921). The Massachusetts and New York bills are still pending.

Additional states considered or are considering legislation to provide a pilot program for psychedelic-assisted therapy, including **Illinois** (HB 2992) and **Massachusetts** (H 2203). The Illinois bill indicates that reimbursement is not required. The Illinois and Massachusetts bills are pending.

Illinois (SB 2772) establishes an advisory board to advise and make recommendations to the Department of Financial and Professional Regulation regarding the provision of psilocybin and psilocybin services, while **New Hampshire** (HB 1809) establishes a medical psilocybin advisory board to assess the advantages and disadvantages of the use of psilocybin for therapeutic purposes. The Illinois bill is still pending, while the New Hampshire bill passed the House but did not advance.

Additionally, at the **federal** level, on April 18, 2026, the Trump administration released Executive Order 14401, which states that the FDA and Drug Enforcement Administration shall facilitate and establish a pathway for eligible patients to access psychedelic drugs, including ibogaine compounds.

While most of the legislation in this area to date has not been directly related to workers compensation, NCCI is monitoring these proposals for potential impacts.

2026 ISSUES SPOTLIGHT

NCCI continues to monitor emerging topics of interest that may directly or indirectly impact workers compensation. As NCCI stays on the pulse of legislative and regulatory activity, new and emerging topics provide insights on potential future changes to workers compensation. Several emerging topics are highlighted below.

WORKERS COMPENSATION ALTERNATIVES

Several states considered bills that included language related to benefits outside of the workers compensation system. NCCI monitors these bills for potential indirect impacts. Although some of these bills are limited to certain benefits for first responders, others are broader in scope. Examples include:

- **Florida** (HB 813/SB 984) requires that the payment of the $75,000 firefighter cancer death benefit to a firefighter's beneficiary be made available for one year after employment, provided the former firefighter otherwise met the criteria at the time of termination of employment and was not subsequently employed as a firefighter. The Senate bill was enacted.
- **Louisiana** considered, but did not pass, a bill (SB 358) to allow an independent contractor to obtain occupational accident coverage approved by the Commissioner of Insurance, and passed a resolution (SR 132) to study the feasibility of requiring employers to provide occupational accident insurance to independent contractors.
- **Massachusetts** enacted a bill (S 1898) proposing that special police officers may be required by the chief of police, as a condition of employment, to purchase an insurance policy that indemnifies the town of Plainville against workers compensation costs in the event that the special police officer is injured while performing the duties of a special police officer.
- **Michigan** (HB 5952, HB 5953) creates an alternative benefit system through a post-traumatic stress injury fund. Eligible individuals may claim benefits from this fund rather than their employers when diagnosed with work-related PTSD after experiencing qualifying traumatic events. These bills are still pending.
- **Missouri** (HB 2566) would remove the sunset provisions from the Line of Duty Compensation Act under which death benefits to the survivors of certain public safety officers and emergency responders killed in the line of duty are paid from the Line of Duty

2026 ISSUES SPOTLIGHT *continued*

Compensation Fund in the state treasury. This bill failed to advance.

- **Mississippi** (SB 2030) provides that cancer benefits under the Mississippi First Responders Health and Safety Act shall be applicable to active first responders and certain retired first responders. This bill did not advance.
- **Nebraska** enacted a bill (LB 921) to, in part, adopt the Health Care Staffing Agency Registration Act, which allows the healthcare staffing agency to satisfy its insurance requirements with proof of a certificate evidencing occupational accident coverage for all workers employed by the healthcare staffing agency in the state. **Massachusetts** is considering a bill (H 5506) with similar language. This bill is still pending.

WORKPLACE SAFETY

As public policymakers become more focused on the impact of workplace safety on workers compensation systems, there has been an increased emphasis on legislation to foster safer workplaces. Two areas with heightened activity are temperature-related injuries and workplace violence.

Temperature-Related Injuries

With the increasing awareness of the potential impacts of climate on the workplace, NCCI is monitoring legislation concerning temperature-related injuries. Examples of temperature-related bills are provided below.

- **Arizona** (HB 2684) would require employers to develop a written heat-related illness mitigation program for when employees are exposed to temperatures above 80 degrees. This bill did not advance.
- **Colorado** (HB 26-1272) requires the Colorado Department of Labor and Employment to collect data on temperature-related injuries and develop a model plan for employers to use to prevent such injuries. This bill has been enacted.
- **Georgia** (HB 1071), in part, provides for protections for employees from occupational heat exposure and provides for an annual reporting by the Commissioner of Labor of the State of Georgia to the Legislature on heat illness workers compensation claims, and occupational deaths due to heat illness. This bill did not advance.

2026 ISSUES SPOTLIGHT *continued*

- **New Hampshire** (HB 1451) creates the Workplace Extreme Temperatures Protection Standards Act, which addresses protecting workers from extreme temperature-related injuries and fatalities in the workplace. It would also require employers to develop written plans and training programs to protect workers from heat and cold stress at extreme temperatures.

Workplace Violence

Another topic of interest is violence in the workplace. Many of the bills reviewed on this topic were related to the prevention of workplace violence through the adoption of programs and plans. There were two bills that noted workers compensation:

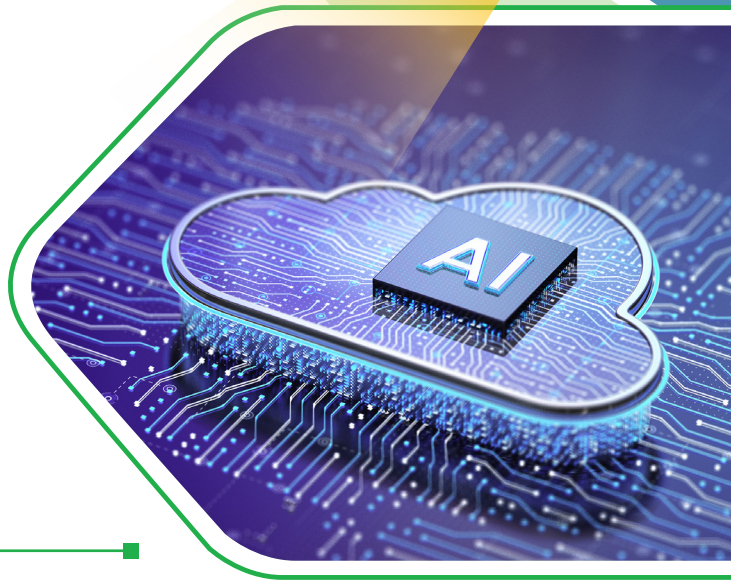
- **New York** (S 4140) provides that employees injured as a consequence of a sexual offense are entitled to workers compensation benefits. This bill is pending.
- **Rhode Island** (H 7121), in part, prohibits any type of psychological abuse in the workplace, inflicted by an employer upon an employee or by a co-employee upon an employee, that results in the violation of an employee's right to a physically and psychologically safe work environment; requires employers to annually report to designated agencies the number of employee complaints of abusive behavior, employee disciplines, workers compensation claims, absenteeism rates, stress leave rates, attrition rates, discrimination complaints, investigation rates, follow-up action rates, the workforce gender and racial makeup, and de-identified wage and salary data. This bill has been held for further study.

Recent **federal** legislative activity related to workplace violence includes:

- **US** HR 2531, which directs the Secretary of Labor to issue standards that require certain employers within the healthcare and social service industries to develop and implement a comprehensive workplace violence prevention plan.

2026 ISSUES SPOTLIGHT *continued*

ARTIFICIAL INTELLIGENCE



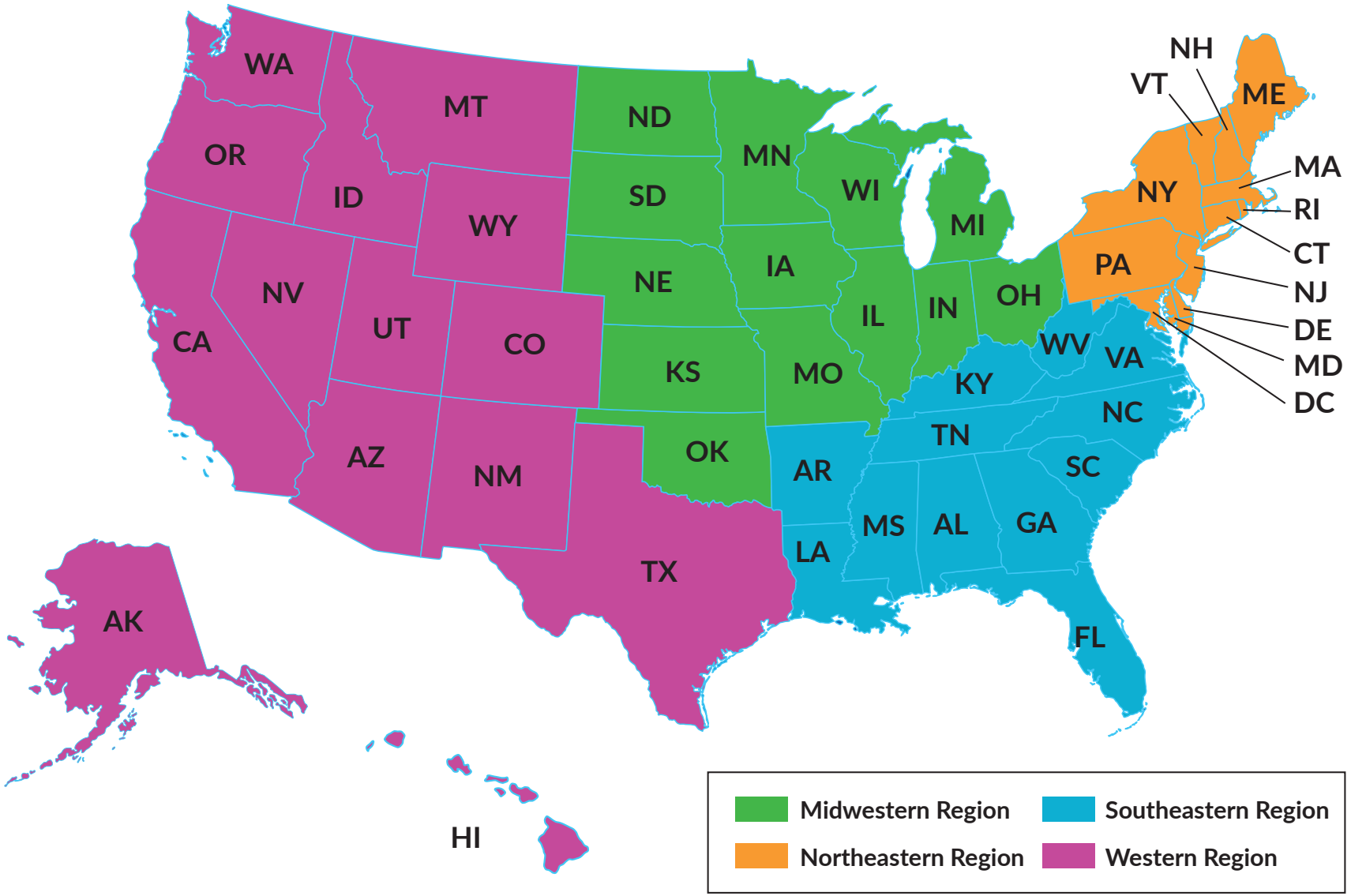
NCCI continues to monitor insurance-related artificial intelligence legislation, regulations, and regulatory guidance. Several of the bills address consequential decision-making and prohibit artificial intelligence from being used as the sole basis for determining whether to adjust, deny, or downcode a claim or portion of a claim. Several trends continue to emerge that impact the broader insurance sector. Themes that are trending include:

- Utilization review and management
- Transparency
- Claims impact assessments
- Prior authorization
- Discrimination
- Governance guidelines

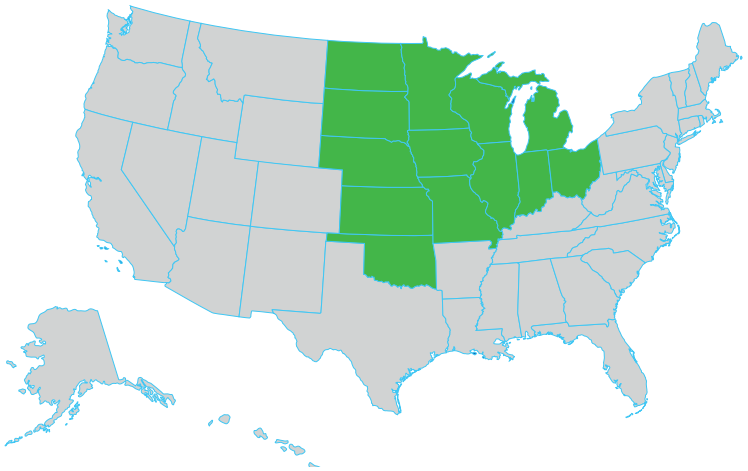
ZERO-ESTIMATED EXPOSURE POLICIES

In 2025, **Minnesota** enacted a bill (HF 3228) that, in part, requires insurers to include specific language in the application for a zero-estimated exposure policy that requires employers to attest to the accuracy of the information on the application, including the absence of employees and estimated exposure for the policy term of zero. We continued to see similar bills in 2026, including in **Arizona** (HB 2680, SB 1428, SB 1795), **Tennessee** (HB 1685/SB 1579), and **Utah** (HB 396). Arizona (SB 1428) and the Utah bill have been enacted.

STATES BY REGION



MIDWESTERN REGION



The Midwestern Region includes Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Dakota, and Wisconsin.

Highlights From the Midwestern Region

Several states in the Midwestern Region considered legislation addressing workers compensation for workplace-related mental injuries. **Wisconsin** (AB 651/SB 676) considered the standard that an emergency medical responder, emergency medical services practitioner, or volunteer firefighter must use for the diagnosis of PTSD and limits how many times it may be diagnosed in their lifetime. The Assembly Bill has been enacted. **Minnesota** enacted SF 3720, which, in part, adds psychiatric mental health nurse practitioners to the list of practitioners who are authorized to diagnose mental impairment. **Missouri** (SB 1385) provides that a mental injury resulting from work-related stress does not arise out of and in the course of the employment, unless it is demonstrated that the stress is work related and was extraordinary and unusual. This bill did not advance. **Michigan** (HB 5952, HB 5953) creates an alternative benefit system through a post-traumatic stress injury fund. Eligible individuals may claim benefits from this fund rather than their employers when diagnosed with work-related PTSD after experiencing qualifying traumatic events. The Michigan bills are still pending.

Oklahoma enacted a bill (SB 1944) that expands new exemption criteria for certain independent contractors in agriculture, ranching, or horticulture. **Minnesota** (SF 4934) considered but did not pass changes to the criteria for independent contractor determination, from requiring all criteria be met to using a "totality of the circumstances" test. **Ohio** (HB 840) in part, provides that the definition of employee includes a transportation network company driver while the driver is engaged in passenger platform time or dispatch platform time with respect to the transportation network company. Additionally, legislation related to healthcare worker platforms was considered in **Ohio** (SB 423) and **Wisconsin** (AB 794/SB 768). The Ohio bills are still pending.

Kansas enacted legislation (HB 2602) to create a portable benefit plan that does not specifically reference workers compensation for independent contractors. **Illinois** considered legislation (HB 5422) to create a portable benefit pilot program while **Nebraska** proposed, but did not pass, a resolution (LR 414) to study the issue. The Illinois bill is still pending.

Missouri considered legislation (HB 3255) to establish a single-payer health insurance system. This bill did not advance.

While medical marijuana is legal in **Oklahoma**, the state enacted legislation (HB 3127) to maintain that reimbursement for medical marijuana is not required while implementing a zero-tolerance policy for safety-sensitive positions. **Kansas** (HB 2678) and **Wisconsin** (SB 534) considered legislation to legalize medical marijuana. **Wisconsin** (AB 1061, SB 1045) considered legalizing the adult use of recreational marijuana as well as the use of medical marijuana. **Iowa** (HF 2206) considered legislation to legalize recreational marijuana. None of these bills advanced. While medical marijuana is also legal in **South Dakota**, the state considered legislation (SB 181) to repeal its medical cannabis chapter upon federal rescheduling of cannabis, including repealing the section that specifies that nothing in the chapter requires reimbursement. These bills did not advance.

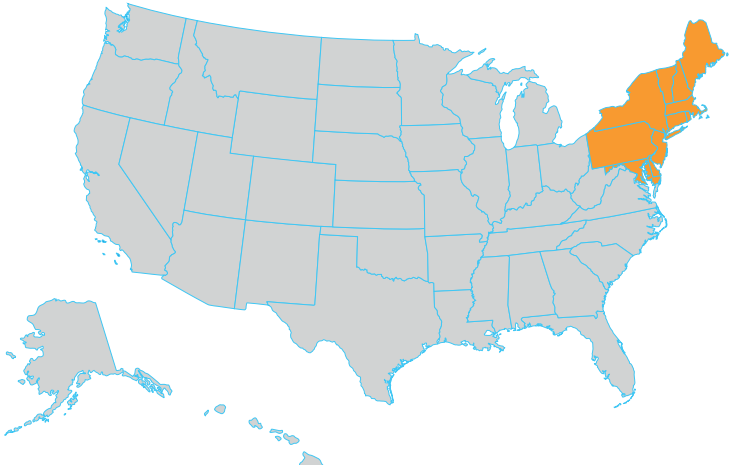
Illinois introduced legislation (HB 1143) to legalize adult possession of psilocybin products and to provide a pilot program for psychedelic-assisted therapy (HB 2992), while stating that reimbursement is not required. Additionally, the state considered a bill (SB 2772) to establish an advisory board to advise and make recommendations to the Department of Financial and Professional Regulation regarding the provision of psilocybin and psilocybin services. These bills are still pending. Other states introduced bills to legalize or provide access to psychedelics for certain medical conditions and therapeutic use, including **Iowa** (HF 978), **Minnesota** (HF 2906, HF 4577, SF 3971, SF 4485), and **Missouri** (HB 1717, HB 3068). The Iowa bill indicates that reimbursement is not required. These bills did not advance.

Other bills of interest in the Midwestern Region include:

- **Missouri** (bills that did not advance)
  - HB 2375—In part, modifies the definition of injury and prevailing factor for compensability.
  - HB 3032—In part, provides that construction industry employers must have five or more employees to be deemed an employer.
  - HB 3096—Establishes a rebuttable presumption for cancer and certain other occupational diseases contracted by firefighters or fire investigators.
  - SB 1052—Establishes a fee schedule for services performed under the workers compensation law.
- **Nebraska**
  - LB 455—In part, changes provisions relating to workers compensation insurance policies and deductibles with respect to the employer's experience modification. This bill was enacted.
  - LB 1056—In part, changes provisions relating to the right to select a physician, compensation schedules, maximum and minimum weekly income benefits, and calculation of wages; requires annual cost-of-living adjustments to benefits as prescribed; requires payment of benefits to a personal representative. This bill did not advance.

- **Oklahoma**
  - HB 4260—Creates a rebuttable presumption for acute myocardial infarction or stroke suffered by certain first responders. This bill passed the House but did not advance.
  - SB 1444—Relates to ratemaking standards, rate filings, improper rates, and the Property and Casualty Competitive Loss Cost Rating Act. This bill did not advance.

NORTHEASTERN REGION



The Northeastern Region includes Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont.

Highlights From the Northeastern Region

Several states in the Northeastern Region considered legislation addressing workers compensation for workplace-related mental injuries. **New Hampshire** enacted a bill (SB 423) to reestablish the commission to study the incidence of PTSD in first responders.

Connecticut (HB 5279) considered adding witnessing a serious physical injury to a person that does not result in death or permanent disfigurement as a qualifying event eligible for coverage for a post-traumatic stress injury. **Maryland** (HB 1325/SB 522) considered authorizing licensed certified social workers-clinical to provide evaluation services related to permanent impairments involving behavioral or mental disorders. **Vermont** (S 306) considered expanding mental injury/PTSD coverage to public safety and emergency services dispatchers. These bills did not advance.

New York (S 10360) relates to recognizing suicide as a "line of duty" death for the purposes of certain death benefits for certain first responders, while two bills (A 949, S 998) relate to permitting telemedicine services for mental and behavioral health issues. **New York** (A 5894) would define mental health practitioners with diagnostic authority. This bill has passed both chambers while the other New York bills are pending.

New Jersey (A 1184/S 863) revises the ABC test used to determine whether a worker is an employee or an independent contractor. **New Jersey** (ACR 73/SCR 62) declares the Department of Labor and Workforce Development's new rules concerning the employment status test for independent contractors inconsistent with legislative intent. The New Jersey initiatives are pending.

Other states considered legislation to classify certain workers as independent contractors under certain circumstances, including amateur sports officials (A 4735, S 4045) and golf caddies (S 987) in **New Jersey** and workers furnished by a workers' cooperative corporation (S 2318) in **Rhode Island**. **New York** (A 10222/S 9813) relates to classifying delivery network company drivers as employees under the workers compensation law. These bills are still pending.

Massachusetts is considering legislation (H 5506) that would establish requirements for healthcare worker platforms operating in long-term care facilities. It would allow healthcare workers to elect independent contractor status when accepting shifts through the platforms. This bill is pending. **Rhode Island** enacted bills (H 7030/S 2107) establishing a regulatory framework for healthcare worker platforms. The legislation defines a healthcare worker platform and includes worker classification criteria similar to those used for independent contractors and gig economy models.

States including **New Jersey** (S 1753) and **Rhode Island** (H 7365) considered legislation to create portable benefit plans that specifically reference workers compensation. Other states that considered similar legislation, but without a workers compensation-specific component, are **Connecticut** (HB 5041) and **New Hampshire** (HB 1245). The New Hampshire bill has been enacted. The New Jersey and Rhode Island bills are pending.

Massachusetts (H 1405, H 5590), **New Jersey** (A 4445, S 426), and **Rhode Island** (H 7823/S 2567, H 8126/S 2573) considered legislation to establish a single-payer health insurance system. The Massachusetts (H 1405) and Rhode Island bills include a workers compensation component. These bills are still pending. **Maryland** (HB 1316, HB 1367) would create a commission to envision and make recommendations regarding establishing a comprehensive healthcare system in the state, including the study of the role of workers compensation in such a system. Maryland HB 1367 was enacted.

New Hampshire considered legislation (HB 186, HB 1235) to legalize recreational marijuana. The state also considered legalizing recreational marijuana by state constitutional amendment (CACR 19), but none of these initiatives advanced. Additionally, while marijuana is legal in **New Jersey** (A 1023/S 3984), the state is considering legislation that certain insurers, including workers compensation insurers, be required to provide coverage for costs associated with the medical use of cannabis under certain circumstances; however, insurers would not be required to provide coverage upon intervention by the federal government to enforce the CSA. In the 2026 November election, **Massachusetts** (Question 8) will consider a measure that, if approved, would, in part, change the type and amount of marijuana that may legally be possessed in Massachusetts by repealing the laws that legalize, regulate, and tax the retail sale of adult recreational-use marijuana.

At the very end of the 2024–2025 legislative session, **New Jersey** enacted a bill (S 2283) that relates to the establishment of safe, legal, and affordable psilocybin service centers to provide residents of New Jersey who are 21 years of age or older with opportunities for supported psilocybin experiences to alleviate distress, provide preventative behavioral healthcare, and foster wellness and personal growth. No reimbursement by a government medical assistance program or private health insurer is required.

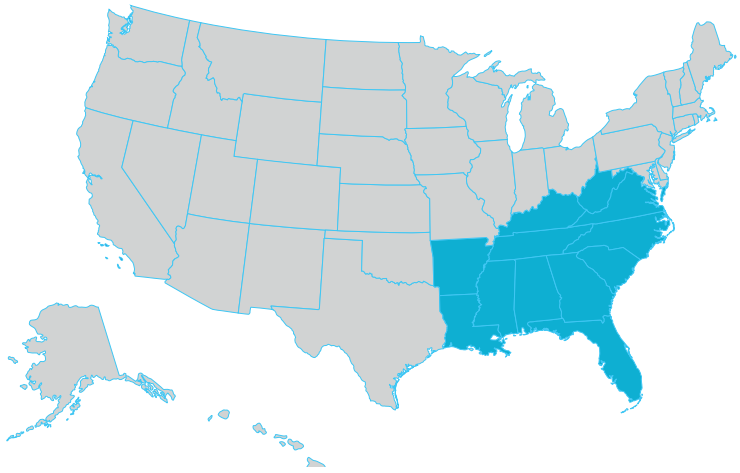
Other states introduced bills to legalize or provide access to psychedelics for certain medical conditions and therapeutic use, including **Massachusetts** (H 4986), **New Hampshire** (HB 1796), and **New York** (A 2142, S 5303). Additionally, **Massachusetts** (H 2203) is considering a pilot program for psychedelic-assisted therapy. These bills are still pending. **New Hampshire** (HB 1809) establishes a medical psilocybin advisory board to assess the advantages and disadvantages of the use of psilocybin for therapeutic purposes. This bill passed the House but did not advance.

Other bills of interest in the Northeastern Region include:

- **Maryland** HB 347—Establishes that certain first responders suffering from hypertension are presumed to have a compensable occupational disease. This bill was enacted.
- **New Hampshire** HB 1177—Defines remote work and provides that remote workers who sustain work-related injuries or illnesses shall be informed about the procedures for reporting and filing workers compensation claims. This bill did not advance.
- **Vermont** S 173—Creates the Vocational Rehabilitation Working Group to provide recommendations on how to improve the current vocational rehabilitation system. This bill was enacted.

SOUTHEASTERN REGION

The Southeastern Region includes Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Virginia, and West Virginia.



Highlights From the Southeastern Region

Several states in the Southeastern Region considered workplace-related mental injury legislation this year. **Virginia** enacted two bills. The first (HB 29) increases the temporary total incapacity benefits and/or temporary partial incapacity benefits for any law-enforcement officer or firefighter to a maximum of 104 weeks from the date of diagnosis for PTSD, anxiety disorder, or depressive disorder. The second bill (HB 1313) provides that claims for PTSD, anxiety disorder, or depressive disorder unaccompanied by a physical injury incurred by a law-enforcement officer or firefighter is compensable. Several states considered legislation to establish coverage for PTSD and/or other psychological injuries for certain first responders, including **Kentucky** (HB 26) for police officers, firefighters, emergency medical services personnel, front-line staff members, or members of the National Guard. **West Virginia** considered legislation (HB 5472) to expand mental injury/PTSD coverage to mine rescue teams. These bills did not advance.

Louisiana (HB 185) enacted a bill to expand the definition of independent contractor to also include employees of independent contractors. **Georgia** considered legislation (HB 1493) addressing criteria for determining whether a worker is an employee or an independent contractor. **West Virginia** (SB 1073) considered making the distinction between an independent contractor and employee consistent with the Internal Revenue Service's classifications. **Georgia** introduced legislation (HB 991) to create exceptions for healthcare technology platform contractors from workers compensation classifications. The bill would have established conditions under which these contractors would be classified as independent contractors rather than employees. These bills did not pass.

States including **Kentucky** (HB 732), **Louisiana** (HB 301), **Mississippi** (HB 866, HB 1072), **North Carolina** (HB 1083, SB 445), and **West Virginia** (HB 4009, HB 4014, HB 5145, SB 402) all considered legislation to create portable benefit plans that specifically reference workers compensation. The Louisiana and West Virginia (HB 4009) bills have been enacted. North Carolina HB 1083 passed the House and is pending in the Senate. North Carolina SB 445 passed the Senate and is pending in the House. Other states that considered similar legislation, but without a workers compensation-specific component, include **Florida** (SB 604) and **Georgia** (HB 987). The Georgia bill has been enacted.

Florida (SB 740) and **Georgia** (HB 1480) considered legislation to establish a single-payer health insurance system. These bills include a workers compensation component. **Florida** considered legislation (SB 348) to establish a Task Force on Universal Health Care to, in part, recommend the design of the Health Care for All Florida Plan, a universal healthcare system administered by the Health Care for All Florida Board. These bills did not advance.

Florida considered, but did not pass, legislation (SB 1398) to legalize recreational marijuana. **Louisiana** (HB 373) would have provided for an adult-use cannabis pilot program starting January 1, 2027, and terminating on July 1, 2030. However, this bill did not advance. **Georgia** enacted a bill (SB 220) that, in part, renames low-THC oil as medical cannabis. **Tennessee** enacted a bill (SB 2149) to authorize drug development clinical trials for the purpose of obtaining approval from the FDA for ibogaine as a medication to treat opioid use disorder, co-occurring substance use disorder, and other neurological or mental health conditions. **West Virginia** (HB 5588) establishes a regulated framework for the medical use of psilocybin to treat PTSD and does not require an insurer, TPA, or employer to pay for or reimburse an employee. This bill failed to advance.

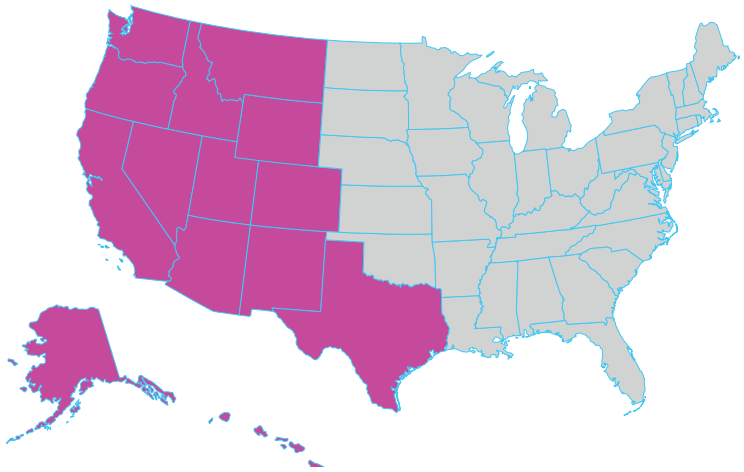
Other bills of interest in the Southeastern Region include:

- **Alabama** SB 332—In part, adds Parkinson's disease to the list of firefighter's occupational diseases. This bill passed the Senate but did not advance.
- **Florida** HB 1307—In part, provides that an employer that hires or employs an adult who is not authorized to work in the United States under federal law is personally and fully liable for all medical and treatment costs, disability benefits, and death benefits compensable under this chapter resulting from an injury sustained by the unauthorized alien during his or her employment. This bill did not advance.
- **Kentucky** (bills that did not advance)
  - HB 403—Creates a presumption that certain levels of delta-9-THC in an employee's blood are not the cause of the employee's injury, occupational disease, or death.

  - SB 108—In part, provides that an employee who suffers an adverse reaction to an immunization required as a condition of his or her employment may claim compensation under the workers compensation law and may maintain a civil cause of action.
  - SB 340—Establishes the Kentucky all-payer claims database.
- **Louisiana**
  - HB 357—In part, provides for the adoption of a medical fee reimbursement schedule. This bill passed the House but did not advance.
  - SB 408—In part, requires the assistant secretary of the office of workers compensation administration to establish and maintain the All Workers' Compensation Medical Claims Database; requires all workers compensation payors to submit medical and pharmacy claims data for all workers compensation claims to the assistant secretary of the office of workers compensation administration. This bill was enacted.
- **Mississippi** HB 635—Prohibits compensation when an injury is caused by an employee's willful breach of a safety rule under certain circumstances. This bill did not advance.
- **South Carolina** H 3163—Relates to compensable occupational diseases for firefighters; includes strokes; revises presumption entitlement criteria. This bill was enacted.
- **Tennessee** SB 1981—Relates to exclusive remedy, contesting extent of work injury, schedule of compensation, permanent partial disability, permanent total disability, and attorney's fees. This bill was enacted.
- **Virginia** HB 1046/SB 324—Relates to written notice requirements for public works contracts to specify that individuals hired by an independent contractor are employees of that independent contractor. These bills were enacted.
- **West Virginia** HB 4377—Relates to eligibility for workers compensation benefits by requiring a blood test after traumatic injury to determine intoxication. This bill did not advance.

WESTERN REGION

The Western Region includes Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Texas, Utah, Washington, and Wyoming.



Highlights From the Western Region

Several states considered legislation to establish coverage for PTSD and/or other psychological injuries for certain first responders, including **Arizona** (HB 2204) and **New Mexico** (HB 132). Several states considered legislation to expand mental injury/PTSD coverage to additional workers, including **Idaho** (S 1425) to coroners or medicolegal death investigators, **Washington** (HB 1002) for county coroners, examiners, and investigative personnel, and **Washington** (SB 5043, SB 5882) for local correctional facility workers. These bills did not advance. **Washington** (HB 2405/SB 6293) establishes a pilot program for PTSD treatment and research. The House bill was enacted.

Other states considered legislation to classify certain workers as independent contractors under certain circumstances, including certain sport officials in **Alaska** (SB 217), newspaper distributors (SB 1358) and athletic coaches (SB 527) in **California**, and printed news deliverers (SB 26-091) in **Colorado**. However, **Hawaii** considered legislation (HB 2587/SB 3292) to establish conditions under which delivery drivers are deemed employees of the business operating the delivery program. These bills did not advance. **Alaska** (HB 214/SB 35), in part, would have added a delivery network company courier who provides delivery services or is otherwise logged on to the digital network of a delivery network company to the list of persons not covered by the workers compensation law. These bills did not advance.

Idaho enacted legislation (H 645) to create portable benefit plans that specifically reference workers compensation, while **Wyoming** enacted similar legislation (SF 41), but without a workers compensation-specific component. Additionally, **Hawaii** considered but did not pass legislation (HB 1545/SB 2088) creating a portable benefit pilot program.

California (AB 1900), **Hawaii** (HB 2143/SB 3305), **Utah** (SB 300), and **Washington** (SB 5947) considered legislation to establish a single-payer health insurance system, including a workers compensation component. The Hawaii, Utah, and Washington bills did not pass, while the California bill is still pending. **Hawaii** (HB 1789/SB 3243) and **Washington** (SB 5948) considered, but did not pass, legislation to study or plan the issue of a single-payer/universal healthcare system.

Hawaii considered legislation (HB 1625/SB 2421) to legalize recreational marijuana. The state also considered legislation (HB 1624/SB 2420) to legalize recreational marijuana by state constitutional amendment. These bills did not advance. **Utah** considered a bill (HB 281) to create a rebuttable presumption regarding cannabis use that would reduce a workers compensation award under certain circumstances. This bill did not advance. **Idaho** will consider a state constitutional amendment (HJR 4) in the November 2026 election to provide that only the Idaho State Legislature has the authority to legalize marijuana, narcotics, or other psychoactive substances, while removing the ability of citizens to initiate state statutes that would legalize these substances.

Arizona considered but did not pass legislation (SB 1538, SB 1542) that would have required workers compensation coverage for midomafetamine (MDMA) therapy for certain first responders diagnosed with PTSD under certain conditions, including approval from the FDA before implementation. While Colorado legalized psilocybin in prior years, **Colorado** enacted a bill (HB 26-1325) in 2026 to establish the ibogaine research pilot program to research the safety and effectiveness of using ibogaine to treat mental health conditions and substance use disorders. **Utah** (HB 390) authorizes the Huntsman Mental Health Institute to conduct a clinical study on the safety and feasibility of psychedelic-assisted therapy for veterans with treatment-resistant PTSD. This bill was enacted. **Washington** (SB 5921) creates a medical use of psilocybin program under the supervision of the department of health. This bill failed to advance.

Other bills of interest in the Western Region include:

- **Alaska** HB 14—In part, relates to workers compensation coverage for disability from diseases for certain firefighters. This bill became law without the Governor's signature.

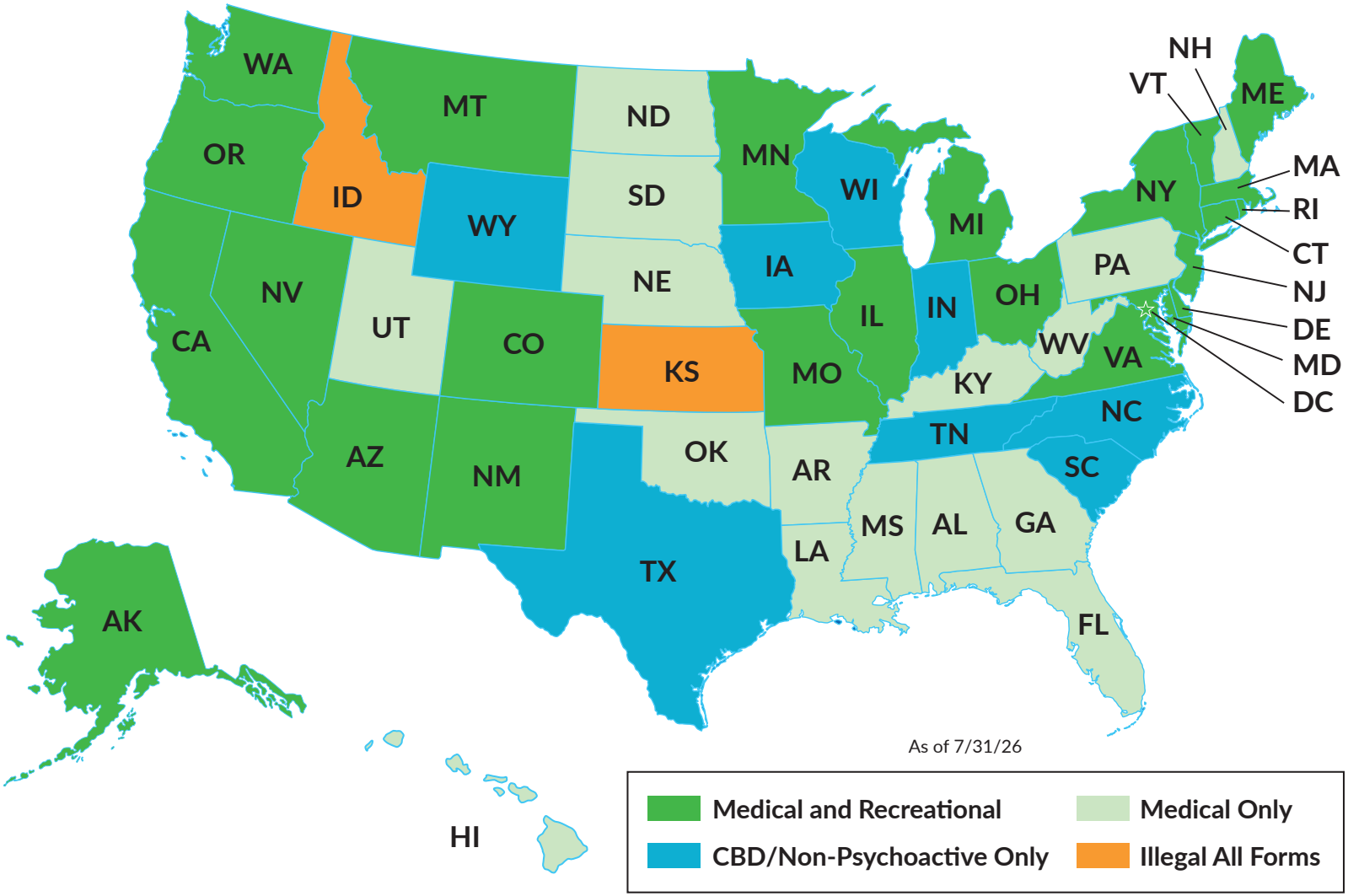
- **California** SB 795—In part, states that a professional athlete and their employer are exempt from the workers compensation system for any claim that involves occupational disease or cumulative injury made by the athlete, if the athlete did not perform any work in California or the athlete was temporarily within the state working for their employer. This bill has passed the Senate and is pending in the Assembly.
- **Colorado**
  - SB 26-093—Requires a signed declaration verifying workers compensation coverage for certain construction projects. This bill has been enacted.
  - SB 26-175—Relates to adjusting an employer's experience modification factor. This bill has been enacted.
  - SB 26-184—Provides that certain cancers contracted by firefighters are considered occupational diseases presumed to have been a result of the firefighter's employment. This bill was vetoed.
- **Hawaii**
  - HB 1648—Authorizes healthcare providers to dispense nonprescription drugs, over-the-counter drugs, and nonlegend drugs for workers compensation patients, under certain circumstances. This bill passed the House but did not advance.
  - HB 2387—Expands workers compensation medical benefits for firefighters to include coverage for certain cancers or diseases. This bill passed the House but did not advance.
- **New Mexico** HB 128—Adds additional types of covered cancers presumed to have been proximately caused by employment as a firefighter and shortens the required service period to five years. This bill was enacted.
- **Oregon** SB 1519—Modifies the calculation for temporary and permanent disability benefit compensation. This bill was enacted.
- **Utah** HB 571—In part, exempts an adult unauthorized alien from the definition of "employee" for purposes of the Workers Compensation Act. This bill did not advance.
- **Washington** SB 6136—Promotes transparency in certain industrial insurance rate increases. This bill was enacted.
- **Wyoming** HB 168—In part, provides that experience rating shall not be considered a reflection of an employer's safety record for purposes of employment. This bill did not advance.

CONCLUSION

In 2026, state and federal public policymakers are considering a wide range of bills and regulations that could impact elements of the workers compensation system. State legislatures and Congress are examining and proposing changes to such areas as mental injuries, independent contractors, single-payer health insurance frameworks, marijuana legalization and reimbursement, and hallucinogens/psychedelics. NCCI continues to actively monitor legislative and regulatory initiatives and provides up-to-date information on ncci.com.

ADDITIONAL RESOURCES

2026 Marijuana Legalization Status

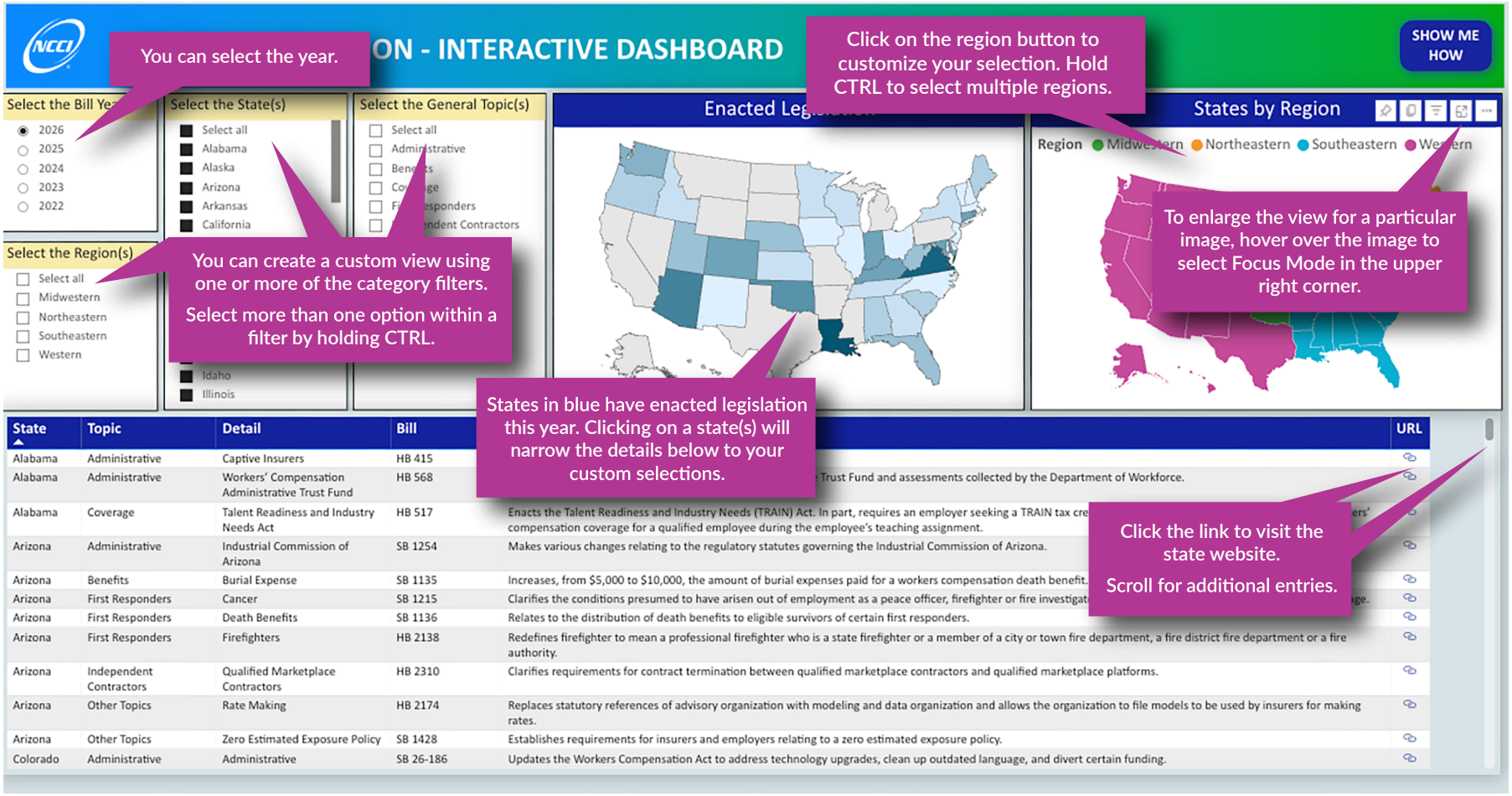


To go back to the report, click here.

INTERACTIVE DASHBOARDS

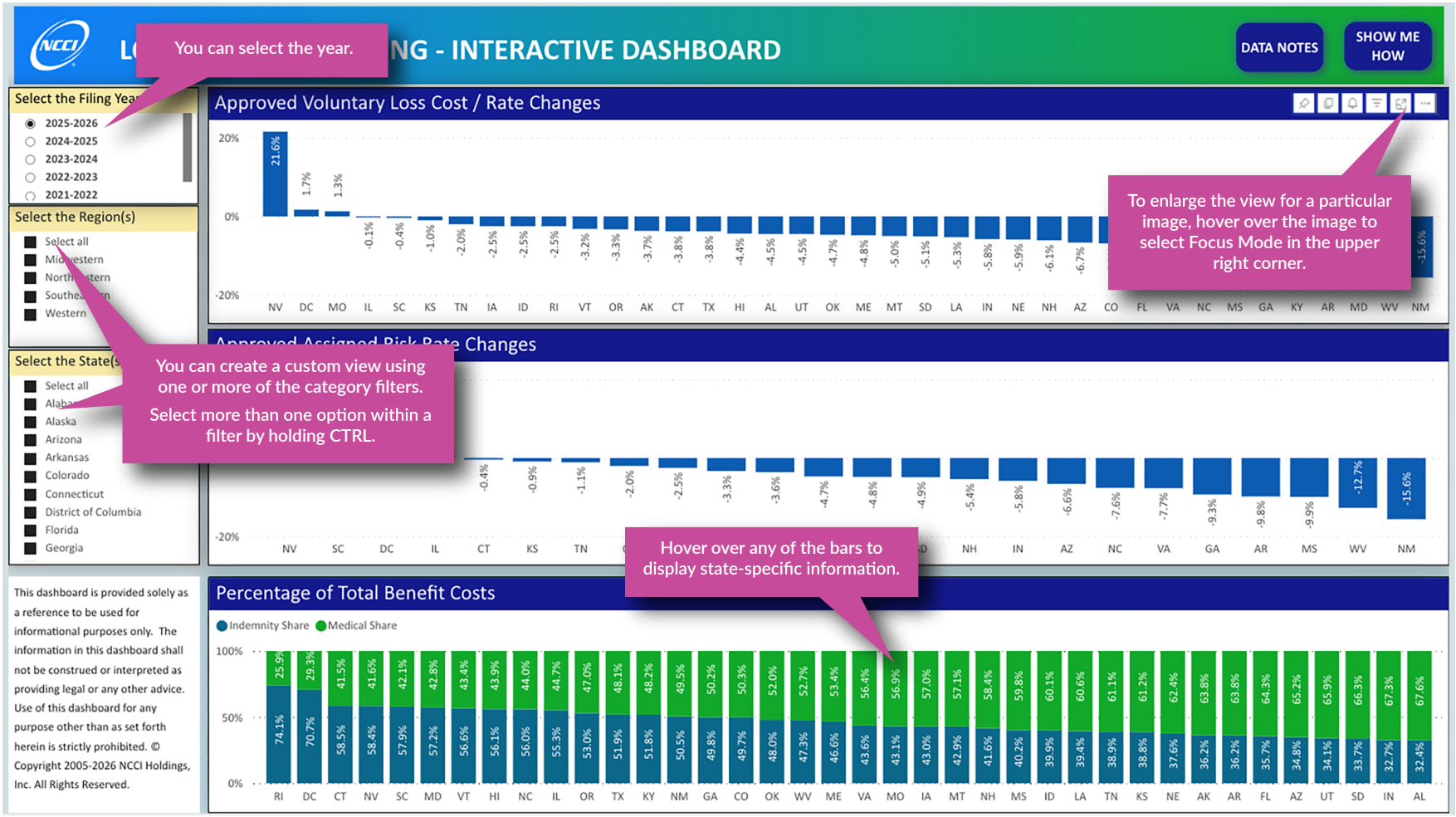
The ***2026 Legislative and Regulatory Trends Report*** page offers two interactive dashboards:

- **Enacted Legislation—Interactive Dashboard** provides interactive navigation for a countrywide view of enacted workers compensation-related legislation. You can easily sort information by year, state, region, and topic of interest.



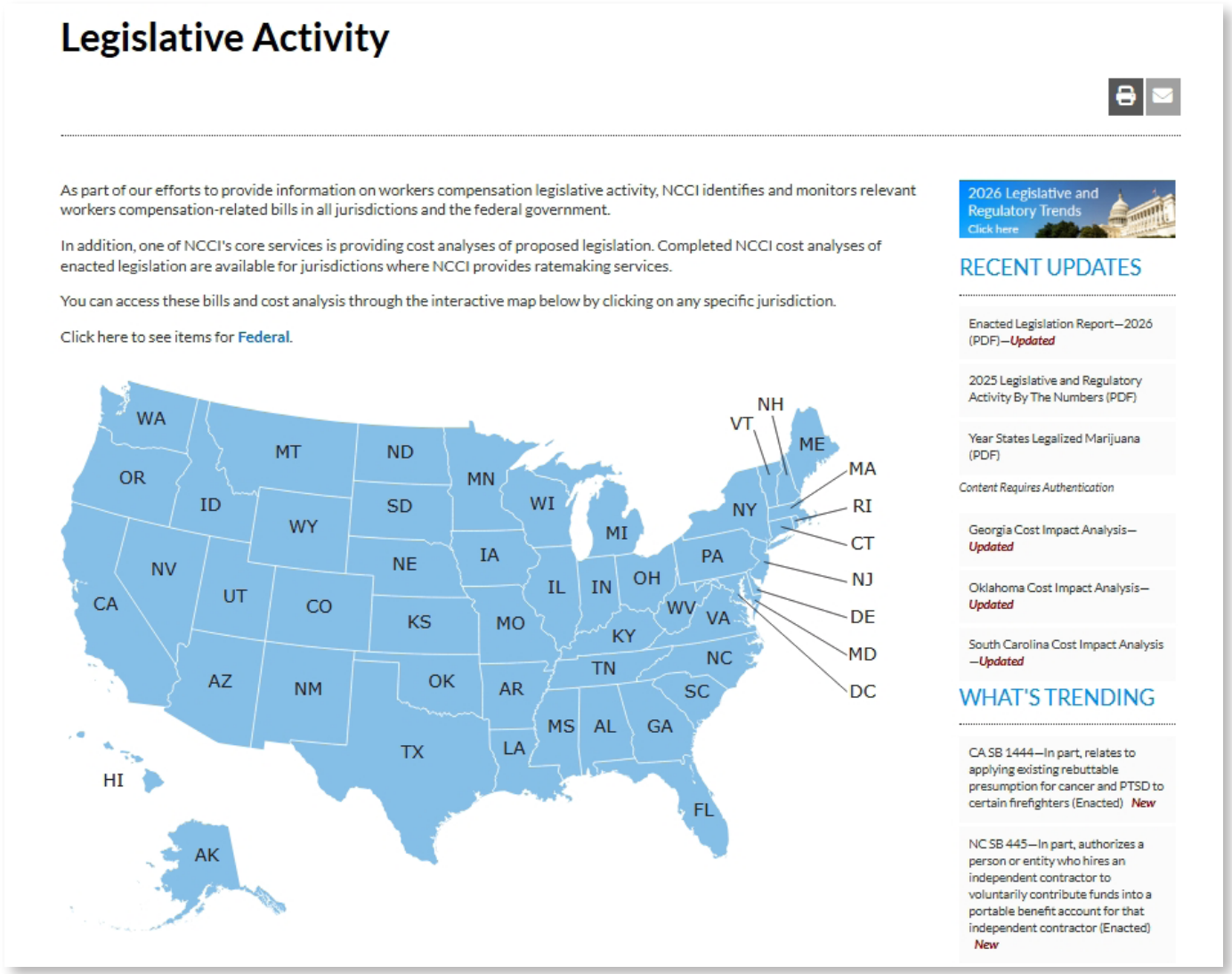
State	Topic	Detail	Bill		URL
Alabama	Administrative	Captive Insurers	HB 415		
Alabama	Administrative	Workers' Compensation Administrative Trust Fund	HB 568	Trust Fund and assessments collected by the Department of Workforce.	
Alabama	Coverage	Talent Readiness and Industry Needs Act	HB 517	Enacts the Talent Readiness and Industry Needs (TRAIN) Act. In part, requires an employer seeking a TRAIN tax cre… compensation coverage for a qualified employee during the employee's teaching assignment.	
Arizona	Administrative	Industrial Commission of Arizona	SB 1254	Makes various changes relating to the regulatory statutes governing the Industrial Commission of Arizona.	
Arizona	Benefits	Burial Expense	SB 1135	Increases, from $5,000 to $10,000, the amount of burial expenses paid for a workers compensation death benefit.	
Arizona	First Responders	Cancer	SB 1215	Clarifies the conditions presumed to have arisen out of employment as a peace officer, firefighter or fire investigat…	
Arizona	First Responders	Death Benefits	SB 1136	Relates to the distribution of death benefits to eligible survivors of certain first responders.	
Arizona	First Responders	Firefighters	HB 2138	Redefines firefighter to mean a professional firefighter who is a state firefighter or a member of a city or town fire department, a fire district fire department or a fire authority.	
Arizona	Independent Contractors	Qualified Marketplace Contractors	HB 2310	Clarifies requirements for contract termination between qualified marketplace contractors and qualified marketplace platforms.	
Arizona	Other Topics	Rate Making	HB 2174	Replaces statutory references of advisory organization with modeling and data organization and allows the organization to file models to be used by insurers for making rates.	
Arizona	Other Topics	Zero Estimated Exposure Policy	SB 1428	Establishes requirements for insurers and employers relating to a zero estimated exposure policy.	
Colorado	Administrative	Administrative	SB 26-186	Updates the Workers Compensation Act to address technology upgrades, clean up outdated language, and divert certain funding.	

- Loss Cost/Rate Filing—Interactive Dashboard allows you to navigate Loss Cost/Rate data and interact with workers compensation information in new and insightful ways.



LEGISLATIVE ACTIVITY ONLINE RESOURCE

Visit the Legislative Activity Online Resource for continuous updates on legislative developments.



Legislative Activity

As part of our efforts to provide information on workers compensation legislative activity, NCCI identifies and monitors relevant workers compensation-related bills in all jurisdictions and the federal government.

In addition, one of NCCI's core services is providing cost analyses of proposed legislation. Completed NCCI cost analyses of enacted legislation are available for jurisdictions where NCCI provides ratemaking services.

You can access these bills and cost analysis through the interactive map below by clicking on any specific jurisdiction.

Click here to see items for Federal.

2026 Legislative and Regulatory Trends
Click here

RECENT UPDATES

Enacted Legislation Report—2026 (PDF)—*Updated*

2025 Legislative and Regulatory Activity By The Numbers (PDF)

Year States Legalized Marijuana (PDF)

Content Requires Authentication

Georgia Cost Impact Analysis—*Updated*

Oklahoma Cost Impact Analysis—*Updated*

South Carolina Cost Impact Analysis —*Updated*

WHAT'S TRENDING

CA SB 1444—In part, relates to applying existing rebuttable presumption for cancer and PTSD to certain firefighters (Enacted) *New*

NC SB 445—In part, authorizes a person or entity who hires an independent contractor to voluntarily contribute funds into a portable benefit account for that independent contractor (Enacted) *New*

LEGISLATIVE ACTIVITY ONLINE RESOURCES—STATE EXAMPLE

Florida—Legislative Activity

Industry Information » Legislative Activity

NCCI's Legislative Activity Page is provided "As Is", solely as a reference tool to be used for informational purposes only. This page contains summaries of various workers compensation related bills as initially drafted, which are subject to change and frequently do. The end user is responsible for ensuring the accuracy of the information contained herein prior to use for any purpose. The information on this page shall not be construed or interpreted as providing legal or any other advice.

BILL STATUS

All Bill Types | All Bill Status | All Bill Years | Filter | Clear Filter

SB 1452 - Enacted
Last Modified: 6/30/2026
Relates to the Department of Financial Services; in part, revises the timeframe in which health care providers must petition the department to resolve utilization and reimbursement disputes; revises petition service requirements; revises the timeframe in which carriers must submit certain documentation to the department; revises the timeframe in which the panel determining the statewide schedule of maximum reimbursement allowances must submit certain recommendations to the Legislature.

HB 5003E - Enacted
Last Modified: 6/30/2026
Implements specified appropriations of the General Appropriations Act for 2026-2027 fiscal year. In part, relates to extending for 1 year the expiration of certain reimbursement allowances.

SB 984 - Enacted
Last Modified: 5/26/2026
Relates to firefighter cancer benefits; requires a former employer to provide death benefits to certain beneficiaries for a specified time period under certain circumstances.

COST IMPACT ANALYSIS

Content Requires Authentication

Florida Health Care Provider Fee Schedule (PDF)—Updated on 07/09/26

APPENDIX

These links provide related resources on ncci.com.

- Legislative Activity Online Resource
- Court Case Insights
- State Advisory Resources
- State Insight*
- Frequency and Severity Results by State
- Summary of Loss Cost/Rate Filing Information by State*
- Underwriting Results by State
- Residual Market Management Summary 2025
- Residual Market State Activity Reports
- Circulars*

*Content requires authentication.

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