Legislative Activity Report

National Council on Compensation Insurance

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March 25, 2016 RLA-2016-11

Report Contact: Legislative_Activity@ncci.com State Issues Contacts: Please refer to the list of State Relations Executives at the end of this report.

LEGISLATIVE ACTIVITY—LEGISLATIVE SESSION UPDATES

This report contains descriptions and/or excerpts of relevant bills that passed the first chamber, passed the second chamber, or were enacted during the specific periods. In addition, a recap of significant legislative and judicial activity impacting the workers compensation system will be included in the first report published each month. This report is issued on a weekly basis throughout the legislative season, and it provides updates on the content of these bills if and when they progress through the legislative process. This report includes bills from states where NCCI provides ratemaking services (see state list under Contact Information) and the US Congress.

BILLS ENACTED

The following workers compensation-related bills were enacted within the one-week period ending March 18, 2016.

Arizona

SB 1323 was:

- Passed by the first chamber on February 11, 2016
- Included in NCCI's February 19, 2016 ***Legislative Activity Report*** (RLA-2016-06)
- Passed by the second chamber on March 10, 2016
- Included in NCCI's March 18, 2016 ***Legislative Activity Report*** (RLA-2016-10)
- Enacted on March 14, 2016, with a projected effective date of July 23, 2016

SB 1323 amends ***section 23-941.02. Vexatious litigants; designation; definitions*** of the Arizona Revised Statutes as follows:

23-941.02. Vexatious litigants; designation; definitions

A. In a workers' compensation case before the commission, on the motion of a party, the chief administrative law judge or an administrative law judge designated by the chief administrative law judge may designate a pro se litigant a vexatious litigant. The pro se litigant shall respond within thirty days after the motion. The chief administrative law judge, or administrative law judge if designated by the chief administrative law judge, shall issue an order within thirty days after the pro se litigant's response is received or the time for response has elapsed. The vexatious litigant designation applies only to the claim at issue before the administrative law judge.

B. A pro se litigant who is designated a vexatious litigant may not file a new request for hearing, pleading, motion or other document without prior leave of the administrative law judge.

C. A pro se litigant is a vexatious litigant if the commission finds the pro se litigant engaged in vexatious conduct. A designation of vexatious litigant is suspended during the period in which the litigant is represented by legal counsel.

D. For the purposes of this section:

1. "vexatious conduct" includes any of the following:

(a) repeated filing of requests for hearing, pleadings, motions or other documents solely or primarily for the purpose of harassment.

(b) unreasonably expanding or delaying commission proceedings.

(c) bringing or defending claims without substantial justification.

(d) engaging in abuse of discovery or conduct in discovery that has resulted in the imposition of sanctions against the pro se litigant.

(e) a pattern of making unreasonable, repetitive and excessive requests for information.

(f) repeated filing of documents or requests for relief that have been the subject of previous rulings by the commission in the same claim.

2. "without substantial justification" has the same meaning prescribed in section 12-349.

Utah

SB 146 was:

- Passed by the first chamber on March 1, 2016
- Included in NCCI's March 11, 2016 ***Legislative Activity Report*** (RLA-2016-09)
- Passed by the second chamber on March 8, 2016
- Included in NCCI's March 18, 2016 ***Legislative Activity Report*** (RLA-2016-10)
- Enacted on March 17, 2016, with a projected effective date of May 9, 2016*

SB 146 amends ***section 34A-2-413. Permanent total disability—Amount of payments—Rehabilitation*** of the Utah Code Annotated, in part, as follows:

34A-2-413. Permanent total disability—Amount of payments—Rehabilitation

…

(1) (a) In the case of a permanent total disability resulting from an industrial accident or occupational disease, the employee shall receive compensation as outlined in this section.

(b) To establish entitlement to permanent total disability compensation, the employee shall prove by a preponderance of evidence that:

(i) the employee sustained a significant impairment or combination of impairments as a result of the industrial accident or occupational disease that gives rise to the permanent total disability entitlement;

(ii) the employee has a permanent, total disability; and

(iii) the industrial accident or occupational disease is the direct cause of the employee's permanent total disability.

(c) To establish that an employee has a permanent, total disability the employee shall prove by a preponderance of the evidence that:

(i) the employee is not gainfully employed;

(ii) the employee has an impairment or combination of impairments that <u>reasonably</u> limit the employee's ability to do basic work activities;

…

***** Effective 91 days from adjournment sine die (April 23, 2016).

West Virginia

HB 4228 was:

- Passed by the first chamber on February 15, 2016
- Amended and passed by the second chamber on March 1, 2016
- Enacted on March 15, 2016, with an effective date of July 1, 2016

HB 4228 creates new ***Article 29. Transportation Network Companies*** in ***Chapter 17. Roads and Highways*** of the Code of West Virginia which, in part, includes ***section 17-29-11. Limitation on transportation network companies.*** to read:

§17-29-11. Limitation on transportation network companies.

<u>(a) Drivers are independent contractors and not employees of the transportation network company if all of the following conditions are met:</u>

<u>(1) The transportation network company does not prescribe specific hours during which a transportation network company Driver must be logged into the transportation network company's digital network;</u>

<u>(2) The transportation network company imposes no restrictions on the transportation network company driver's ability to utilize digital networks from other Transportation Network Companies;</u>

<u>(3) The transportation network company does not assign a transportation network company driver a particular territory in which to operate;</u>

<u>(4) The transportation network company does not restrict a transportation network company driver from engaging in any other occupation or business; and</u>

<u>(5) The transportation network company and transportation network company driver agree in writing that the driver is an independent contractor of the transportation network company.</u>

<u>(b) A transportation network company operating under this article is not required to provide workers' compensation coverage to a transportation network company driver that is classified as an independent contractor pursuant to this section</u>.

Note: HB 4228 was not included in any previous version of NCCI's ***Legislative Activity Report.***

BILLS PASSING SECOND CHAMBER

The following workers compensation-related bills passed the second chamber within the one-week period ending March 18, 2016.

Idaho

HB 501 was:

- Passed by the first chamber on March 2, 2016
- Included in NCCI's March 11, 2016 ***Legislative Activity Report*** (RLA-2016-09)
- Passed by the second chamber on March 16, 2016

HB 501 amends ***section 72-301. Security for payment of compensation*** of the Idaho Code as follows:

§ 72-301. Security for payment of compensation

…

(2) No insurer shall be permitted to transact worker's compensation insurance covering the liability of employers under this law unless it shall have been authorized to do business under the laws of this state and until it shall have received the approval of the commission. To the end that the workers secured under this law shall be adequately protected, the commission shall require such insurer to deposit and maintain in a custodial account with the state treasurer money or acceptable security instruments ~~of the United States~~ in an amount equal to the total amounts of all outstanding and unpaid compensation awards against such insurer. Acceptable security instruments are bonds, treasury bills, interest-bearing notes or other obligations of the United States for which the full faith and credit of the United States is pledged for the payment of principal and interest. Acceptable security instruments also include municipal bonds issued by the state of Idaho, its subdivisions, counties, cities, towns, villages and school districts. The insurer shall have the responsibility to monitor the ratings for its bonds. Bonds held by worker's compensation insurers in support of insurance obligations must have been assigned a credit rating grade not less than "single A minus" by one (1) or more credit rating providers registered with the United States securities and exchange commission as a nationally recognized statistical rating organization (NRSRO) . If the credit rating assigned to the bond by the NRSRO is downgraded below "single A minus," the worker's compensation insurer shall within thirty (30) days of the downgrade replace the bond with one (1) that meets the credit quality requirement specified in this section. In lieu of such money or security instruments, the commission may allow or require such insurer to file or maintain with the state treasurer a surety bond of some company or companies authorized to do business in this state for and in the amounts equaling the total unpaid compensation awards against such insurer.

…

HB 554 was:

- Passed by the first chamber on March 11, 2016
- Included in NCCI's March 18, 2016 ***Legislative Activity Report*** (RLA-2016-10)
- Passed by the second chamber on March 17, 2016

HB 554 amends ***sections 72-102. Definitions*** and ***72-438. Occupational Diseases*** of the Idaho Code as follows:

72-102. Definitions. Words and terms used in the worker's compensation law, unless the context otherwise requires, are defined in the subsections which follow:

…

(12) "Employee" is synonymous with "workman" and means any person who has entered into the employment of, or who works under contract of service or apprenticeship with, an employer. It does not include any person engaged in any of the excepted employments enumerated in section 72-212, Idaho Code, unless an election as provided in section 72-213, Idaho Code, has been filed. It does, however, include a volunteer firefighter for purposes of section 72-438 (12) and (14), Idaho Code. Any reference to an employee who has been injured shall, where the employee is dead, include a reference to his dependents as herein defined, if the context so requires, or, where the employee is a minor or incompetent, to his committee or guardian or next friend.

(13) (a) "Employer" means any person who has expressly or impliedly hired or contracted the services of another. It includes contractors and subcontractors. It includes the owner or lessee of premises, or other person who is virtually the proprietor or operator of the business there carried on, but who, by reason of there being an independent contractor or for any other reason, is not the direct employer of the workers there employed. It also includes, for purposes of section 72-438(12) and (14), Idaho Code, a municipality, village, county or fire district that utilizes the services of volunteer firefighters. If the employer is secured, it means his surety so far as applicable.

(b) "Professional employer" means a professional employer as defined in chapter 24, title 44, Idaho Code.

(c) "Temporary employer" means the employer of temporary employees as defined in section 44-2403(7), Idaho Code.

(d) "Work site employer" means the client of the temporary or professional employer with whom a worker has been placed.

(14) "Farm labor contractor" means any person or his agent or subcontractor who, for a fee, recruits and employs ~~farm workers~~ farmworkers and performs any farm labor contracting activity.

…

(31) "United States," when used in a geographic sense, means the several states, the District of Columbia, the Commonwealth of Puerto Rico~~, the Canal Zone~~ and the territories of the United States.

(32) "Volunteer emergency responder" means a firefighter or peace officer, or publicly employed certified personnel ~~as that term is defined in section 56-1012, Idaho Code,~~ who is a bona fide member of a legally organized law enforcement agency, a legally organized fire department or a licensed emergency medical service provider organization who contributes services.

…

72-438. Occupational diseases. Compensation shall be payable for disability or death of an employee resulting from the following occupational diseases:

…

(2) Carbon monoxide poisoning or chlorine poisoning in any process or occupation involving direct exposure to carbon monoxide or chlorine in buildings, sheds, or ~~inclosed~~ enclosed places.

…

(6) Radium poisoning by or disability due to radioactive properties of substances or to ~~Roentgenray~~ roentgen ray (X-ray) in any occupation involving direct contact therewith, handling thereof, or exposure thereto.

…

(12) Cardiovascular or pulmonary or respiratory diseases of a ~~paid fireman~~ firefighter, employed by or volunteering for a municipality, village or fire district as a regular member of a lawfully established fire department, caused by overexertion in times of stress or danger or by proximate exposure or by cumulative exposure over a period of four (4) years or more to heat, smoke, chemical fumes or other toxic gases arising directly out of, and in the course of, his employment.

…

(14) Firefighter occupational diseases:

(a) As used in this subsection, "firefighter" means an employee whose primary duty is that of extinguishing or investigating fires as part of a fire district, fire department or fire brigade.

(b) If a firefighter is diagnosed with one (1) or more of the following diseases after the period of employment indicated in subparagraphs (i) through (xi) of this paragraph, and the disease was not revealed during an initial employment medical screening examination that was performed according to such standards and conditions as may be established at the sole discretion of the governing board having authority over a given fire district, fire department, or fire brigade, then the disease shall be presumed to be proximately caused by the firefighter's employment as a firefighter:

(i) Brain cancer after ten (10) years;

(ii) Bladder cancer after twelve (12) years;

(iii) Kidney cancer after fifteen (15) years;

(iv) Colorectal cancer after ten (10) years;

(v) Non-Hodgkin's lymphoma after fifteen (15) years;

(vi) Leukemia after five (5) years;

(vii) Mesothelioma after ten (10) years;

(viii) Testicular cancer after five (5) years if diagnosed before the age of forty (40) years with no evidence of anabolic steroids or human growth hormone use;

(ix) Breast cancer after five (5) years if diagnosed before the age of forty (40) years without a breast cancer 1 or breast cancer 2 genetic predisposition to breast cancer;

(x) Esophageal cancer after ten (10) years; and

(xi) Multiple myeloma after fifteen (15) years.

(c) The presumption created in this subsection may be overcome by substantial evidence to the contrary. If the presumption is overcome by substantial evidence, then the firefighter or the beneficiaries must prove that the firefighter's disease was caused by his or her duties of employment.

(d) The presumption created in this subsection shall not preclude a firefighter from demonstrating a causal connection between employment and disease or injury by a preponderance of evidence before the Idaho industrial commission.

(e) The presumption created in this subsection shall not apply to any specified disease diagnosed more than ten (10) years following the last date on which the firefighter actually worked as a firefighter as defined in paragraph (a) of this subsection. Nor shall the presumption apply if a firefighter or a firefighter's cohabitant has regularly and habitually used tobacco products for ten (10) or more years prior to the diagnosis.

(f) The periods of employment described in paragraph (b) of this subsection refer to periods of employment within the state of Idaho.

Recognizing that additional toxic or harmful substances or matter are continually being discovered and used or misused, the above enumerated occupational diseases are not intended to be exclusive, but such additional diseases shall not include hazards ~~which~~ that are common to the public in general and ~~which~~ that are not within the meaning of section 72-102 (22) (a), Idaho Code, and the diseases enumerated in subsection (12) of this section pertaining to ~~paid firemen~~ firefighters shall not be subject to the limitations prescribed in section 72-439, Idaho Code.

Kansas

HB 2617 was:

- Passed by the first chamber on March 14, 2016
- Amended and passed by the second chamber on March 22, 2016

HB 2617 amends several sections of the Kansas workers compensation law, in part, as follows:

44-501. Compensation; disallowances; substance abuse testing; exceptions, pre-existing conditions; public service benefits protection act, coronary disease or cerebrovascular injury benefits for firefighters and law enforcement officers; liability

limited for construction design professional; benefits reduced for certain retirement benefits.
(a) (1) Compensation for an injury shall be disallowed if such injury to the employee results from:
(A) The employee's deliberate intention to cause such injury;
(B) the employee's willful failure to use a guard or protection against accident or injury which is required pursuant to any statute and provided for the employee;
(C) the employee's willful failure to use a reasonable and proper guard and protection voluntarily furnished the employee by the employer;
(D) the employee's reckless violation of their employer's workplace safety rules or regulations; or
(E) the employee's voluntary participation in fighting or horseplay with a co-employee for any reason, work related or otherwise.
(2) ~~Subparagraphs (B) and (C) of paragraph (1) of s~~Subsection (a)(1) (B) and (C) shall not apply when it was reasonable under the totality of the circumstances to not use such equipment, or if the employer approved the work engaged in at the time of an accident or injury to be performed without such equipment.
…
(3) Notwithstanding subsection (b)(2), the results of a chemical test performed on a sample collected by an employer shall not be admissible evidence to prove impairment unless the following conditions are met:
…
(E) the foundation evidence must establish, beyond a reasonable doubt, that the test results were from the sample taken from the employee ~~; and~~
~~(F) a split sample sufficient for testing shall be retained and made available to the employee within 48 hours of a positive test .~~
(4) In addition to the requirements set forth in paragraph (3), a split sample sufficient for testing shall be retained and made available to the employee within 48 hours of a positive test if the employer, using a facility on the employer's premises, collects the sample that is the subject of the chemical test.
…

44-510e. Compensation for temporary or permanent partial general disabilities; whole body injury; extent of disability; computation thereof; functional impairment defined; termination upon death from other causes; limitations; other remedies excluded.
…
(2)(C) An employee may be eligible to receive permanent partial general disability compensation in excess of the percentage of functional impairment ("work disability") if:
(i) The percentage of functional impairment determined to be caused solely by the injury exceeds 7½% to the body as a whole ~~or the overall functional impairment is equal to or exceeds 10% to the body as a whole in cases where there is preexisting functional impairment ; and~~ or
(ii) in cases where there is a preexisting functional impairment, the combined impairment for the current injury and the preexisting impairment must be equal to or greater than 10% whole person impairment; and
(iii) the employee sustained a post-injury wage loss, as defined in ~~subsection (a)(2)(E) of~~ K.S.A. 44-510e(a)(2)(E), and amendments thereto, of at least 10% which is directly attributable to the work injury and not to other causes or factors.
In such cases, the extent of work disability is determined by averaging together the percentage of post-injury task loss demonstrated by the employee to be caused by the injury and the percentage of post-injury wage loss demonstrated by the employee to be caused by the injury.
…

44-510i. Medical benefits; appointment of medical administrator; maximum medical fee schedule; advisory panel.
(a) Subject to the approval of the secretary, t~~T~~he director shall contract with or appoint~~, subject to the approval of the secretary,~~ a specialist in health services delivery, who shall be referred to as the medical administrator. The medical administrator shall be a person licensed to practice medicine and surgery in this state and, if appointed, shall be in the unclassified service under the Kansas civil service act.
…

44-534. Proceedings; time limitations.
(a) Whenever the employer, worker, Kansas workers compensation fund or insurance carrier cannot agree upon the worker's right to compensation under the workers compensation act or upon any issue in regard to workers compensation benefits due the injured worker thereunder, the employer, worker, Kansas worker's compensation fund or insurance carrier may apply in writing to the director for a determination of the benefits or compensation due or claimed to be due. The application shall be filed in the form prescribed by the rules and regulations of the director, including requirements for electronic filing, and the application shall set forth the substantial and material facts in relation to the claim. Whenever an application is filed under this section, the matter shall be assigned to an administrative law judge. The director shall forthwith mail a certified copy of the application to the adverse party. The administrative law judge shall proceed, upon due and reasonable notice to the parties, which shall not be less than 20 days, to hear all evidence in relation thereto and to make findings concerning the amount of compensation, if any due to the worker.
…
(c) After implementation of rules and regulations by the director, if the workers compensation electronic filing system is inaccessible on the last day for filing, then the time for filing shall be extended to the first accessible day that is not a Saturday, Sunday or legal

holiday. As used in this subsection:
(1) "Last day" means:
(A) For electronic or facsimile filing, at midnight in the division's time zone on the final day for filing; and
(B) for filing by other means, at 5 p.m. in the division's time zone on the final day for filing; and
(2) "legal holiday" means any day declared a holiday by the president of the United States, the congress of the United States or the legislature of this state, or any day observed as a holiday by order of the governor. A half holiday shall be treated as other days and not as a holiday.

44-536a. Signing of pleadings, motions and other papers; liability for frivolous filings.
(a) Every pleading, motion and other ~~paper~~ document provided for by the workers compensation act of any party, who is represented by an attorney, shall be signed by at least one attorney of record in the attorney's individual name, and the attorney's address ~~and~~, telephone number, fax number, email address and supreme court registration number shall be stated. Signature by electronic means, when utilizing the workers compensation electronic filing system, satisfies the requirements for signing. A pleading, motion or other ~~paper~~ document provided for by the workers compensation act of any party who is not represented by an attorney shall be signed by the party in writing or electronically, when utilizing the workers compensation electronic filing system, and shall state the party's name, address, telephone number, fax number and email address, if applicable.
(b) Except when otherwise specifically provided by rule and regulation of the director, pleadings need not be verified or accompanied by an affidavit. The signature of a person constitutes a certificate by the person; (1) That the person has read the pleading; (2) that to the best of the person's knowledge, information and belief formed after reasonable inquiry, the pleading is well grounded in fact and is warranted by existing law or a good faith argument for the extension, modification or reversal of existing law; and (3) that the pleading is not imposed for any improper purpose, such as to harass or to cause unnecessary delay or needless increase in the cost of resolving disputed claims for benefits.
(c) If any pleading, motion or other ~~paper~~ document provided for by the workers compensation act is not signed, such pleading, motion or other ~~paper~~ document shall not be accepted and shall be void unless it is signed promptly after the omission is called to the attention of the pleader or movant.
(d) If a pleading, motion or other ~~paper~~ document provided for by the workers compensation act is signed in violation of this section, the administrative law judge, director or board, upon motion or upon its own initiative upon notice and after opportunity to be heard, shall impose upon the person who signed such pleading or a represented party, or both, an appropriate sanction, which may include an order to pay to the other party or parties the amount of the reasonable expenses incurred because of the filing of the pleading, motion or other ~~paper~~ document, including reasonable attorney fees.
...

Note: The version of **HB 2617** passed by the first chamber on March 14, 2016, did not contain any relevant workers compensation-related language, therefore, it was not included in any previous version of NCCI's ***Legislative Activity Report***.

BILLS PASSING FIRST CHAMBER

The following workers compensation-related bills passed the first chamber within the one-week period ending March 18, 2016.

Maine

LD 1553 makes various changes to the Maine Workers' Compensation Act of 1992 to:

- Modify the law after the Law Court's decision in *Workers' Compensation Board Abuse Investigation Unit v. Nate Holyoke Builders, Inc., et al.*, 2015 ME 99 and ensure employers that misclassify employees as independent contractors are subject to penalties under the Maine Workers' Compensation Act of 1992
- Increase the Workers' Compensation Board's assessment cap starting in fiscal year 2017–18 to $13,000,000
- Establish that appeals to the Law Court from the Workers' Compensation Board are from decisions of the Workers' Compensation Board's Appellate Division and not an individual administrative law judge
- Require the Workers' Compensation Board to study the current system for independent contractor predeterminations and report any recommended legislation to the joint standing committee of the legislature having jurisdiction over labor matters
- Require the Workers' Compensation Board to consider an employer's efforts to comply with the coverage requirements of the Maine Workers' Compensation Act of 1992 when imposing a monetary penalty
- Establish that criminal prosecution may be pursued only if the employer has committed a knowing violation
- Establish that revocation of authority to operate pursuant to the Maine Revised Statutes, Title 39-A, section 324, subsection 3, paragraph C may be pursued only if the employer has committed a knowing violation, has failed to pay a penalty assessed pursuant to that subsection, or continues to operate without required workers compensation insurance coverage after a penalty has been assessed pursuant to that subsection

Maryland

SB 505 amends ***section 11-329. Workers' compensation insurers*** of the Maryland Insurance Code as follows:
§ 11-329. Workers' compensation insurers
…
(f) Basis for premium adjustment.—

(1) Except as provided in ~~paragraph (2)~~ paragraphs (2) and (3) of this subsection, the uniform experience rating plan shall be the exclusive means of providing prospective premium adjustment based on measurement of the loss-producing characteristics of an individual insured.
(2) In addition to any premium adjustment allowed under paragraph (1) of this subsection and pursuant to a filing made by a rating organization and approved by the Commissioner, an insurer may file a rating plan with the Commissioner that provides for prospective premium adjustments up to 25% based upon characteristics of a risk that are not reflected in the uniform experience rating plan.
(3) (I) Except as provided in subparagraph (ii) of this paragraph, in addition to any premium adjustment allowed under paragraphs (1) and (2) of this subsection and pursuant to a filing made by a rating organization and approved by the commissioner, an insurer may file a rating plan with the commissioner that provides for a premium discount for appropriate classifications or subclassifications of a risk of up to 4% to an insured that has an alcohol- and drug-free workplace policy that may include one or more of the following programs:
1. An alcohol and drug testing program;
2. An employee education program on alcohol and drug abuse;
3. A supervisor education program on alcohol and drug abuse;
4. An employee assistance program that includes referrals of employees for appropriate diagnosis, treatment, and assistance;
5. A program requiring an employee who has caused or contributed to an accident while at work to undergo alcohol or drug testing; and
6. Any other program that the insurer deems effective to encourage an alcohol- and drug-free workplace.
(ii) an insurer is not required to provide a premium discount under this paragraph if the insured is required under federal or state law to test its employees for drugs or otherwise provide an alcohol- and a drug-free workplace.
(4) An insurer may file a rating plan that provides for retrospective premium adjustments based on an insured's past experience.

HB 1408 amends ***section 27-608 Premium increase for commercial insurance—Notice required*** of the Maryland Insurance Code by:

- Exempting a commercial or workers compensation insurer from being required to send notice to the named insured and insurance producer, if any, when the insurer intends to increase a renewal policy premium, if the renewal policy premium is increasing by 15% or less
- Repealing an exemption from the notice requirement for insurers if the renewal policy premium is greater than $1,000 and increasing by 3% or $300, whichever is less
- Specifying that an insurer may not be required to comply with the notice requirement if a separate notice containing specified information is sent
- Repealing a provision that considers the notice requirement to have been met when an insurer sends this separate notice

The proposed amendments apply to all policies of commercial insurance and workers compensation insurance issued, delivered, or renewed in the state on or after October 1, 2016.

Missouri

HB 2429 amends ***section 287.090 Exempt employers and occupations—election to accept—withdrawal—notification required of insurance companies*** of the Missouri Annotated Statutes to specify that unpaid volunteers of a tax-exempt veteran's organization are not subject to the Worker's Compensation Law.

Contact Information

If you have any questions about the legislation or proposals mentioned, please contact the appropriate NCCI state relations executive (listed below) or a representative of your local insurance trade association.

State	State Relations Executive	Phone Number
CT, ME, NH, RI, VT	Laura Backus Hall	802-454-1800
FL, IA	Chris Bailey	850-322-4047
AL, GA, KY, LA, MS	Cathy Booth	205-655-2699
AZ, CO, NM, NV, UT	Maggie Karpuk	818-707-8374
DC, MD, VA, WV	David Benedict	804-380-3005
HI	Carolyn Pearl	808-524-6239
IN, NC, SC, TN	Amy Quinn	803-356-0851
AR, IL, KS, TX	Terri Robinson	501-333-2835
AK, ID, MT, OR	Jessica Epley	503-892-8919
MO, NE, OK, SD	Carla Townsend	314-843-4001
Federal Issues	Tim Tucker	202-403-8526

This report is informational and is not intended to provide an interpretation of state and federal legislation.