



State or Federal 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

#### Florida

**HB 1007** was:

- Passed by the first chamber on May 2, 2017
- Amended and passed by the second chamber on May 5, 2017
- Enacted on June 26, 2017, with an effective date of September 1, 2017 for the amendments to the subsection listed below

**HB 1007** amends numerous sections of Florida insurance law related to fraud including, but not limited to, the following subsection:

**626.9891 Insurer anti-fraud investigative units; reporting requirements; penalties for noncompliance.—**

...

(6) In addition to providing information required under subsections (2), (4), and (5), each insurer writing workers' compensation insurance shall also report the following information to the department, on or before March 1, 2019, and annually thereafter August 1 of each year, on its experience in implementing and maintaining an anti-fraud investigative unit or an anti-fraud plan. The report must include, at a minimum:

(a) The estimated dollar amount of losses attributable to workers' compensation fraud delineated by the type of fraud, including claimant, employer, provider, agent, or other type.

(b) The estimated dollar amount of recoveries attributable to workers' compensation fraud delineated by the type of fraud, including claimant, employer, provider, agent, or other type.

(c) The number of cases referred to the Division of Investigative and Forensic Services, delineated by the type of fraud, including claimant, employer, provider, agent, or other type.

~~(a) The dollar amount of recoveries and losses attributable to workers' compensation fraud delineated by the type of fraud: claimant, employer, provider, agent, or other.~~

~~(b) The number of referrals to the Bureau of Workers' Compensation Fraud for the prior year.~~

~~(c) A description of the organization of the anti-fraud investigative unit, if applicable, including the position titles and descriptions of staffing.~~

~~(d) The rationale for the level of staffing and resources being provided for the anti-fraud investigative unit, which may include objective criteria such as number of policies written, number of claims received on an annual basis, volume of suspected fraudulent claims currently being detected, other factors, and an assessment of optimal caseload that can be handled by an investigator on an annual basis.~~

~~(e) The inservice education and training provided to underwriting and claims personnel to assist in identifying and evaluating instances of suspected fraudulent activity in underwriting or claims activities.~~

~~(f) A description of a public awareness program focused on the costs and frequency of insurance fraud and methods by which the public can prevent it.~~

...

**Note: HB 1007** was not included in any previous version of NCCI's *Legislative Activity Report*.

**HB 1107** was:

- Passed by the first chamber on April 20, 2017
- Included in NCCI's April 28, 2017 *Legislative Activity Report* (RLA-2017-16)
- Amended and passed by the second chamber on May 2, 2017
- Included in NCCI's May 12, 2017 *Legislative Activity Report* (RLA-2017-18)
- Enacted on June 26, 2017, with an effective date of July 1, 2017

**HB 1107** creates **section 440.1851 Personal identifying information of an injured or deceased employee; public records exemption** of the Florida Statutes as follows:

**440.1851 Personal identifying information of an injured or deceased employee; public records exemption.—**

(1) The personal identifying information of an injured or deceased employee which is contained in reports, notices, records, or supporting documentation held by the department pursuant to this chapter is confidential and exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution.

(a) As used in this section, the term “personal identifying information” means the injured or deceased employee’s name, date of birth, home address or mailing address, e-mail address, or telephone number.

(b) The department may disclose information made confidential and exempt under this section only:

1. To the injured employee, to the spouse or a dependent of the deceased employee, to the spouse or a dependent of the injured employee if authorized by the injured employee, or to the legal representative of the deceased employee’s estate;

2. To a party litigant, or his or her authorized representative, in matters pending before the Office of the Judges of Compensation Claims;

3. To a carrier or an employer for the purpose of investigating the compensability of a claim or for the purpose of administering its anti-fraud investigative unit established pursuant to s. 626.9891;

4. In an aggregate reporting format that does not reveal the personal identifying information of any employee;

5. Pursuant to a court order or subpoena;

6. To an agency for administering its anti-fraud investigative function or in the furtherance of the agency’s official duties and responsibilities; or

7. To a federal governmental entity in the furtherance of the entity’s official duties and responsibilities.

A carrier, employer, agency, or governmental entity receiving personal identifying information from the department shall maintain the confidential and exempt status of the information.

(c) This public records exemption applies to personal identifying information held by the department before, on, or after the effective date of this exemption.

(2) A person who willfully and knowingly discloses personal identifying information made confidential and exempt under this section to an unauthorized person or entity commits a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.

(3) This section is subject to the Open Government Sunset Review Act in accordance with s. 119.15 and shall stand repealed on October 2, 2022, unless reviewed and saved from repeal through reenactment by the Legislature.

**HB 1107** also includes the following language:

The Legislature finds that it is a public necessity to make confidential and exempt from s. 119.07(1), Florida Statutes, and s. 24(a), Article I of the State Constitution the personal identifying information of an injured or deceased employee which is contained in reports, notices, records, or supporting documentation held by the Department of Financial Services pursuant to chapter 440, Florida Statutes. Such information is of a sensitive, personal nature, and disclosure of such information about an injured or deceased employee is an invasion of that employee’s privacy or the privacy of his or her family. Because of Florida’s workers’ compensation system, an employee’s personal identifying information becomes public record once the Department of Financial Services is notified that the employee has been injured or has died in a work-related incident. Public records requests for this information have resulted in unwanted solicitation of injured workers and their families. Further, the release of such information could lead to discrimination against the employee by coworkers, potential employers, and others because of perceived social stigma related to injuries or disabilities. The harm caused to such an employee or his or her family by the release of this information outweighs any public benefit derived from its release.

*NCCI is unable to quantify the potential workers compensation system cost impact from the enactment of **HB 1107**, although it may exert downward pressure on Florida workers compensation system costs over time.*

**SB 8-A** was:

- Passed by the first chamber on June 9, 2017
- Amended and passed by the second chamber on June 9, 2017

- Enacted and effective on June 23, 2017

**SB 8-A**, in part, amends **section 381.986 Compassionate use of low-THC and medical cannabis** in the Florida Statutes to, in part, include the following language:

**381.986 Medical use of marijuana.—**

...

(15) APPLICABILITY.—This section does not limit the ability of an employer to establish, continue, or enforce a drug-free workplace program or policy. This section does not require an employer to accommodate the medical use of marijuana in any workplace or any employee working while under the influence of marijuana. This section does not create a cause of action against an employer for wrongful discharge or discrimination. Marijuana, as defined in this section, is not reimbursable under chapter 440.

...

**Note: SB 8-A** was not included in any previous version of NCCI’s **Legislative Activity Report**.

## New Hampshire

**SB 24** was:

- Passed by the first chamber on February 23, 2017
- Included in NCCI’s March 3, 2017 **Legislative Activity Report** (RLA-2017-08)
- Passed by the second chamber on June 1, 2017
- Included in NCCI’s June 9, 2017 **Legislative Activity Report** (RLA-2017-22)
- Enacted on June 28, 2017, with an effective date of August 27, 2017

**SB 24** amends **section 400-A:37 Examinations** of the New Hampshire Statutes as follows:

**400-A:37 Examinations.**

...

(e) In order to assist in the performance of the commissioner’s duties, the commissioner:

...

(4) May disclose the content of an examination report, preliminary examination report or results, or any matter relating thereto relative to workers’ compensation audits, to the department of labor, and all such information disclosed and in the possession or control of the department of labor shall be confidential by law and privileged, shall not be subject to disclosure under RSA 91-A, shall not be subject to subpoena, and shall not be subject to discovery or admissible in evidence in any private civil action. The commissioner of the department of labor shall agree in writing to hold such information confidential and in a manner consistent with this subparagraph.

...

## Rhode Island

**HB 6224 Substitute A** was:

- Passed by the first chamber on June 26, 2017
- Passed by the second chamber on June 29, 2017
- Enacted on June 30, 2017, with an effective date of June 29, 2017

**HB 6224 Substitute A/SB 917 Substitute A**, in part, amend sections **28-33-18.3. Continuation of benefits -- Partial incapacity, 28-53-2. Establishment -- Sources – Administration**, and **28-53-7. Payments to employees of uninsured employers** of the Rhode Island Workers Compensation Act as follows:

**§ 28-33-18.3 Continuation of benefits – Partial incapacity.**

(a) (1) For all injuries occurring on or after September 1, 1990, in those cases where the employee has received a notice of intention to terminate partial-incapacity benefits pursuant to § 28-33-18, the employee, or his or her duly authorized representative, may file with the workers' compensation court a petition for continuation of benefits on forms prescribed by the workers' compensation court. In any proceeding before the workers' compensation court on a petition for continuation of partial-incapacity benefits, where the employee demonstrates by a fair preponderance of the evidence that his or her partial incapacity poses a material hindrance to obtaining employment suitable to his or her limitation, partial-incapacity benefits shall continue. ~~For injuries on and after July 1, 2023, "material hindrance" is defined to include only compensable injuries causing a greater than sixty-five percent (65%) degree of functional impairment and/or disability.~~ Any period of time for which the employee has received benefits for total incapacity shall not be included in the calculation of the three hundred and twelve-week (312) period.

(2) ~~The provisions of this subsection apply to all injuries from Sept. 1, 1990, to July 1, 2023.~~

...

**§ 28-53-2. Establishment – Sources – Administration.**

(a) There shall be established within the department of labor and training a special restricted receipt account to be known as the Rhode Island uninsured employers fund. The fund shall be capitalized from excise taxes assessed against uninsured employers pursuant to the provisions of § 28-53-9 of this chapter and from general revenues appropriated by the legislature. Beginning in state fiscal year ending ~~June 30, 2017~~ June 30, 2018, the legislature may appropriate up to two million dollars (\$2,000,000) in general revenue funds annually for deposit into the Rhode Island uninsured employers fund.

...

**§ 28-53-7. Payments to employees of uninsured employers.**

(a) Where it is determined that the employee was injured in the course of employment while working for an employer who fails to maintain a policy of workers' compensation insurance as required by § 28-36-1 et seq., the uninsured employers fund shall pay the benefits to which the injured employee would be entitled pursuant to chapters 29 to 38 of this title subject to the limitations set forth herein.

(b) The workers' compensation court shall hear all petitions for payment from the fund pursuant to § 28-30-1 et seq.; provided, however, that the uninsured employers fund and the employer shall be named as parties to any petition seeking payment of benefits from the fund.

(c) Where an employee is deemed to be entitled to benefits from the uninsured employers fund, the fund shall pay benefits for disability and medical expenses as provided pursuant to chapters 29 to 38 of this title except that the employee shall not be entitled to receive benefits for loss of function and disfigurement pursuant to the provisions of § 28-33-19.

(d) The fund shall pay cost, counsel, and witness fees, as provided in § 28-35-32, to any employee who successfully prosecutes any petitions for compensation; petitions for medical expenses; petitions to amend a pretrial order or memorandum of agreement; and all other employee petitions; and to employees who successfully defend, in whole or in part, proceedings seeking to reduce or terminate any and all workers' compensation benefits; provided, however, that the attorney's fees awarded to counsel who represent the employee in petitions for lump-sum commutation filed pursuant to § 28-33-25, or in the settlement of disputed cases pursuant to § 28-33-25.1, shall be limited to the maximum amount paid to counsel who serve as court-appointed attorneys in workers' compensation proceedings as established by rule or order of the Rhode Island supreme court.

(e) In the event that the uninsured employer makes payment of any monies to the employee to compensate the employee for lost wages or medical expenses, the fund shall be entitled to a credit for all such monies received by, or on behalf of, the employee against any future benefits payable directly to the employee.

(f) This section shall apply to injuries that occur on or after ~~July 1, 2017~~ July 1, 2018.

**Note: HB 6224 Substitute A** is identical to **SB 917 Substitute A** and was not included in any previous version of NCCI's *Legislative Activity Report*.

## Vermont

**SB 56** was:

- Passed by the first chamber on March 1, 2017
- Amended and passed by the second chamber on April 14, 2017
- Included in NCCI's May 5, 2017 *Legislative Activity Report* (RLA-2017-17)
- Enacted on June 15, 2017, with an effective date of July 1, 2017

**SB 56**, in part, requires the following reports and studies:

**Workers Compensation; Industries and Occupations with High Risk, High Premiums, and Few Policy Holders; Study; Report**

(a) The Commissioner of Financial Regulation, in consultation with the Commissioner of Labor, the National Council on Compensation Insurance, and other interested stakeholders, shall identify and study industries and occupations in Vermont that experience a high risk of workplace and on-the job injuries and whose workers' compensation insurance is characterized by high premiums and few policy holders in the insurance pool. The industries and occupations addressed in the study shall include, among others, logging and log hauling, as well as arborists, roofers, and occupations in saw mills and wood manufacturing operations. In particular, the Commissioner shall:

- (1) examine difference in the potential for loss, premium rates, and experience and participation in the workers' compensation marketplace between the industries and occupations identified, and the average for all industries and occupations in Vermont;
- (2) study potential methods for reducing workers' compensation premium rates and costs for high-risk industries and occupations, including risk pooling between multiple high-risk industries or occupations, creating self-insured trusts; creating voluntary safety certification programs, and programs or best practices employed by other states; and
- (3) model the potential impact on workers' compensation premiums and costs from each of the methods identified pursuant to subdivision (2) of this subsection.

(b) On or before January 15, 2018, the Commissioner of Financial Regulation shall submit a written report to the House Committee on Commerce and Economic Development and the Senate Committee on Finance regarding his or her findings and any recommendations for legislative action to reduce the workers' compensation premium rates and costs for the industries

identified in the study.

**Short-Term Workers Compensation Policies; Study; Report**

The Commissioner of Financial Regulation, in consultation with the Commissioner of Labor, shall examine potential measures to encourage the creation of affordable seasonal and short-term workers' compensation policies and measures to reduce the cost of workers' compensation insurance coverage for small employers in seasonal occupations. On or before January 15, 2018, the Commissioner shall report to the House Committee on Commerce and Economic Development and the Senate Committee on Finance regarding his or her finding and any recommendations for legislative action.

**Regional Assigned Risk Pool; Study; Report**

The Commissioner of Financial Regulation shall examine potential mechanisms for joining with neighboring states to create a regional assigned risk pool for workers' compensation insurance and whether the creation of a regional assigned risk pool could reduce the cost of administering Vermont's assigned risk pool. On or before January 15, 2018, the Commissioner shall submit a written report to the House Committee on Commerce and Economic Development and the Senate Committee on Finance with his or her findings and any recommendations for legislative action related to the implementation of a regional assigned risk pool for workers' compensation insurance.

**Administration of Assigned Risk Pool; Study; Report**

The Commissioner of Financial Regulation shall examine whether any premium savings or reductions in costs could be realized if the assigned risk pool for workers' compensation was administered directly by the Department of Financial Regulation rather than through a third-party. On or before January 15, 2018, the Commissioner shall submit a written report to the House Committee on Commerce and Economic Development and the Senate Committee on Finance with his or her findings and any recommendations for legislative action.

**Emergency Personnel Post-Traumatic Stress Disorder; Study of Experience and Costs; Report**

(a) The Commissioner of Labor, in consultation with the Secretary of Administration, the Commissioner of Financial Regulation, the Vermont League of Cities and Towns, and the National Council on Compensation Insurance, shall examine claims for workers' compensation made pursuant to 21 V.S.A. § 601(11)(I) and (J) between July 1, 2017 and January 1, 2020, including:

(1) the number of claims made;

(2) the cost of the workers compensation benefits provided for those claims; and

(3) any changes in administrative and premium costs associated with those claims.

(b) On or before January 15 of each year from 2018 through 2020, the Commissioner shall report to the House Committees on Appropriations, on Commerce and Economic Development, and on Health Care, and the Senate Committees on Appropriations, on Finance, and on Health and Welfare regarding its findings and any recommendations for legislative changes.

**SB 56**, in part, also amends *section 601 Definitions* of Title 21 of the Vermont Statutes Annotated as follows:

**§ 601 Definitions**

Unless the context otherwise requires, words and phrases used in this chapter shall be construed as follows:

...

(11) "Personal injury by accident arising out of and in the course of employment" includes an injury caused by the willful act of a third person directed against an employee because of that employment.

...

(I)(i) In the case of police officers, rescue or ambulance workers, or firefighters, post-traumatic stress disorder that is diagnosed by a mental health professional shall be presumed to have been incurred during service in the line of duty and shall be compensable, unless it is shown by a preponderance of the evidence that the post-traumatic stress disorder was caused by nonservice connected risk factors or nonservice-connected exposure.

(ii) A police officer, rescue or ambulance worker, or firefighter who is diagnosed with post-traumatic stress disorder within three years of the last active date of employment as a police officer, rescue or ambulance worker, or firefighter shall be eligible for benefits under this subdivision (11).

(iii) As used in this subdivision (11)(I):

(I) "Firefighter" means a firefighter as defined in 20 V.S.A. § 3151(3) and (4).

(II) "Mental health professional" means a person with professional training, experience, and demonstrated competence in the treatment and diagnosis of mental conditions, who is certified or licensed to provide mental health care services and for whom diagnoses of mental conditions are within his or her scope of practice, including a physician, nurse with recognized psychiatric specialties, psychologist, clinical social worker, mental health counselor, or alcohol or drug abuse counselor.

(III) "Police officer" means a law enforcement officer who has been certified by the Vermont Criminal Justice Training Council pursuant to 20 V.S.A. chapter 151.

(IV) "Rescue or ambulance worker" means ambulance service, emergency medical personnel, first responder service, and volunteer personnel as defined in 24 V.S.A. § 2651.

(J)(i) A mental condition resulting from a work-related event or work-related stress shall be considered a personal injury by accident arising out of and in the course of employment and be compensable if it is demonstrated by the preponderance of the evidence that:

(I) the work-related event or work-related stress was extraordinary and unusual in comparison to pressures and tensions experienced by the average employee across all occupations; and

(II) the work-related event or work-related stress, and not some other event or source of stress, was the predominant cause of the mental condition.

(ii) A mental condition shall not be considered a personal injury by accident arising out of and in the course of employment if it results from any disciplinary action, work evaluation, job transfer, layoff, demotion, termination, or similar action taken in good faith by the employer.

## BILLS PASSING SECOND CHAMBER

The following workers compensation-related bills were passed by the second chamber within the one-week period ending June 30, 2017.

### North Carolina

**HB 26** was:

- Passed by the first chamber on February 16, 2017
- Included in NCCI's February 24, 2017 *Legislative Activity Report* (RLA-2017-07)
- Amended and passed by the second chamber on June 28, 2017

**HB 26** amends *sections 97-82 Memorandum of agreement between employer and employee to be submitted to Commission on prescribed forms for approval; direct payment as award, and 97-90 Legal and medical fees to be approved by Commission; misdemeanor to receive fees unapproved by Commission, or to solicit employment in adjusting claims; agreement for fee or compensation* of the North Carolina General Statutes as follows:

**§ 97-82. Memorandum of agreement between employer and employee to be submitted to Commission on prescribed forms for approval; direct payment as award.**

...

(b) If approved by the Commission, a memorandum of agreement shall for all purposes be enforceable by the court's decree as hereinafter specified. Payment pursuant to G.S. 97-18(b), or payment pursuant to G.S. 97-18(d) when compensability and liability are not contested prior to expiration of the period for payment without prejudice, shall constitute an award of the Commission on the question of compensability of and the insurer's liability for the injury as reflected on a form prescribed by the Commission pursuant to G.S. 97-18(b) or G.S. 97-18(d) for which payment was made. An award of the Commission arising out of G.S. 97-18(b) or G.S. 97-18(d) shall not create a presumption that medical treatment for an injury or condition not identified in the form prescribed by the Commission pursuant to G.S. 97-18(b) or G.S. 97-18(d) is causally related to the compensable injury. An employee may request a hearing pursuant to G.S. 97-84 to prove that an injury or condition is causally related to the compensable injury. Compensation paid in these circumstances shall constitute payment of compensation pursuant to an award under this Article.

**§ 97-90 Legal and medical fees to be approved by Commission; misdemeanor to receive fees unapproved by Commission, or to solicit employment in adjusting claims; agreement for fee or compensation.**

...

(f) ~~The~~ If a dispute arises between an employee's current and past attorney or attorneys regarding the division of a fee as approved by the Commission pursuant to this section, the Commission shall hear and determine any dispute between an employee's current and past attorney or attorneys regarding the division of a fee as approved by the Commission pursuant to this section. any dispute after the Commission has approved the settlement agreement. The Commission shall give notice to each of the employee's current and past attorneys of record of the total amount of the approved fee prior to determining how the fee shall be divided between those attorneys. An attorney who is a ~~an~~ interested party to an action under this subsection shall have the same rights of appeal as outlined in subsection (c) of this section.

In addition, **HB 26** includes the following clause:

Except as otherwise provided, this act is effective when it becomes law and applies to claims pending on or after that date.

**SB 407** was:

- Passed by the first chamber on April 26, 2017
- Amended and passed by the second chamber on June 29, 2017

SECTION 1.

**SB 407** creates new **Article 82** in **Chapter 143** of the North Carolina General Statutes to read:

**Article 82.**  
**Employee Fair Classification Act.**

**§ 143-761. Title.**

This Article shall be known and may be cited as the "Employee Fair Classification Act."

**§ 143-762. Definitions; scope.**

(a) The following definitions apply in this Article:

(1) Chairman. – The Chairman of the Industrial Commission.

(2) Employ. – As defined by G.S. 95-25.2(3). For the purposes of this Article, an entity or individual shall not be deemed to be an employer of an individual hired or otherwise engaged by or through the entity or individual's independent contractor.

(3) Employee. – Any individual that is defined as an employee by either G.S. 95-25.2(4), 96-1(10), 97-2(2), or 105-163.1(4). The term does not mean an individual who is an independent contractor.

(4) Employee Classification Section or Section. – The Employee Classification Section within the Industrial Commission.

(5) Employee misclassification. – Avoiding tax liabilities and other obligations imposed by Chapter 95, 96, 97, 105, or 143 of the General Statutes by misclassifying an employee as an independent contractor.

(6) Employer. – Any individual or entity that employs one or more employees as defined by G.S. 97-2(3).

(7) Public notice statement. – Notice as set forth in G.S. 143-764(a)(5).

(b) Nothing in this Article shall be construed or is intended to change the definition of "employer" or "employee" under any other provision of law.

**§ 143-763. Establishment of Employee Classification Section.**

(a) The Employee Classification Section is established within the Industrial Commission.

(b) The Chairman shall appoint a director of the Section to serve at the Chairman's pleasure with such authority as the Chairman deems necessary to direct and oversee the Section in carrying out the purposes of this Article.

(c) The Chairman may employ clerical staff, investigators, and other staff within the Section as is necessary for the Section to perform its duties under this Article.

(d) The Office of the State Chief Information Officer shall ensure that the Section is provided with all necessary access to the Government Data Analytics Center and all other information technology services.

(e) The Secretary of Revenue, the Commissioner of Labor, the Chairman, and the Assistant Secretary of Commerce for the Division of Employment Security shall each designate an employee of their respective agencies to serve as liaisons to the Section.

**§ 143-764. Section powers and duties.**

(a) The Section shall have the following duties:

(1) Be available during business hours to receive reports of employee misclassification by telephonic, written, or electronic communication.

(2) Investigate reports of employee misclassification and coordinate with and assist all relevant State agencies in recovering any back taxes, wages, benefits, penalties, or other monies owed as a result of an employer engaging in employee misclassification.

(3) Coordinate with relevant State agencies and District Attorneys' offices in the prosecution of employers and individuals who fail to pay civil assessments or penalties assessed as a result of the employer's or individual's involvement in employee misclassification.

(4) Provide all relevant information pertaining to each instance of reported employee misclassification to the North Carolina Department of Labor, the Division of Employment Security within the North Carolina Department of Commerce, the North Carolina Department of Revenue, and the North Carolina Industrial Commission to facilitate investigation of potential violations of Chapter 95, 96, 97, 105, or 143 of the General Statutes.

(5) Create a publicly available notice that includes the definition of employee misclassification.

(6) Develop methods and strategies for information sharing between State agencies in order to proactively identify possible instances of employee misclassification.

(7) Develop methods and strategies to educate employers, employees, and the public about proper classification of employees and the prevention of employee misclassification.

(b) No later than October 1 of each year, the Section shall publish annually to the Office of the Governor and to the Joint Legislative Commission on Governmental Operations a report of the administration of this Article, together with any recommendations as the Section deems advisable. This report shall include, at a minimum, the number of reports of employee misclassification received, the number and amount of back taxes, wages, benefits, penalties, or other monies assessed, the amount of back taxes, wages, benefits, penalties, or other monies collected, and the number of cases referred to each State agency.

(c) The Section may adopt rules in accordance with Article 2A of Chapter 150B of the General Statutes for the purpose of carrying out the provisions of this Article and establishing the processes and procedures to be used under this Article.

**§ 143-765. Occupational licensing boards and commissions; notice requirement; applicant certification and disclosure.**

(a) Every State occupational licensing board or commission that is authorized to issue any license, permit, or certification shall include on every application for licensure, permit, or certification, or application for renewal of the same, the following:

(1) Certification by the applicant that the applicant has read and understands the public notice statement.

(2) Disclosure by the applicant of any investigations for employee misclassification and the result of the investigations for a time period determined by the occupational licensing board or commission.

(b) An occupational licensing board or commission shall deny the license, permit, or certification application of any applicant who fails to comply with the certification and disclosure requirements of this section.

**§ 143-766. Confidentiality; access to records.**

(a) The records of the Section are not public records under G.S. 132-1.

(b) The Section shall exchange information as required by this Article.

(c) The Section may share information with other State and federal agencies as permitted or required by law.

**§ 143-767. Exchange of information among coordinating agencies.**

The North Carolina Department of Revenue, the North Carolina Department of Labor, the Division of Employment Security within the North Carolina Department of Commerce, and the North Carolina Industrial Commission shall disclose all reports and investigations of employee misclassification to the Section. The Section shall distribute the information to the other agencies to allow each agency to conduct an investigation.

In addition, **SB 407** amends *sections 105-259. Secrecy required of officials; penalty for violation* and *95-25.15. Investigations and inspection of records; notice of law* of the North Carolina General Statutes as follows:

SECTION 2.

**§ 105-259. Secrecy required of officials; penalty for violation.**

...

(53) To furnish to the North Carolina Department of Labor, the Division of Employment Security within the North Carolina Department of Commerce, the North Carolina Industrial Commission, and the Employee Classification Section within the Industrial Commission employee misclassification information pursuant to Article 82 of Chapter 143 of the General Statutes.

SECTION 3.

**§ 95-25.15. Investigations and inspection of records; notice of law.**

...

(c) A poster summarizing the major provisions of this Article shall be displayed in every establishment subject to this Article. This poster shall also include notice indicating the following in plain language:

(1) Any worker who is defined as an employee by either G.S. 95-25.2(4), 143-761(2), 96-1(10), 97-2(2), or 105-163.1(4) shall be treated as an employee unless the individual is an independent contractor.

(2) Any employee who believes that the employee has been misclassified as an independent contractor by the employee's employer may report the suspected misclassification to the Employee Classification Section within the Industrial Commission.

(3) The physical location, mailing address, telephone number, and e-mail address where alleged incidents of employee misclassification may be reported to the Employee Classification Section within the Industrial Commission.

**SB 407** also includes the following language:

SECTION 4.(a)

The Industrial Commission shall adopt rules and guidelines, consistent with G.S. 97-25.4, for the utilization of opioids, related prescriptions, and pain management treatment.

SECTION 4.(b)

The Industrial Commission is exempt from the fiscal note requirement of G.S. 150B-21.4 in developing and implementing the rules and guidelines for opioids, related prescriptions, and pain management treatment.

**SB 489** was:

- Passed by the first chamber on April 26, 2017
- Included in NCCI's May 5, 2017 **Legislative Activity Report** (RLA-2017-17)
- Passed by the second chamber on June 27, 2017

**SB 489** amends sections **58-36-105. Certain workers' compensation insurance policy cancellations prohibited** (relating to the North Carolina Rating Bureau), **58-2-255. Electronic insurance communications and records**, and **97-84. Determination of disputes by Commission or deputy** of the North Carolina General Statutes as follows:

**§ 58-36-105. Certain workers' compensation insurance policy cancellations prohibited**

...

(b) Any cancellation permitted by subsection (a) of this section is not effective unless written notice of cancellation has been given to the insured not less than 15 days before the proposed effective date of cancellation. The notice may be given by registered or certified mail, return receipt requested, to the insured and any other person designated in the policy to receive notice of cancellation at their addresses shown in the policy or, if not indicated in the policy, at their last known addresses. The notice shall state the precise reason for cancellation. Whenever notice of intention to cancel is given by registered or certified mail, no cancellation by the insurer shall be effective unless and until such method is employed and completed. Notice of intent to cancel given by registered or certified mail shall be conclusively presumed completed three days after the notice is sent if, on the same day that the notice is sent by registered or certified mail, the insurer also provides notice by first-class mail and by electronic means if available as defined in G.S. 58-2-255(a) to the insured and any other person designated in the policy to receive notice. Any such supplemental notice given by electronic means shall be effective for the limited purpose of establishing this conclusive presumption. Notice of cancellation, termination, or nonrenewal may also be given by any method permitted for service of process pursuant to Rule 4 of the North Carolina Rules of Civil Procedure. Failure to send this notice, as provided in this section, to any other person designated in the policy to receive notice of cancellation invalidates the cancellation only as to that other person's interest.

...

**§ 58-2-255. Electronic insurance communications and records.**

...

(b) ~~When any insurance law of this State, except for cancellation, termination, or nonrenewal of workers' compensation policies pursuant to G.S. 58-36-105(b), State~~ requires a communication to be provided to a party in writing, signed by a party, provided by means of a specific delivery method, or retained by an insurer, those requirements are satisfied if the insurer complies with Article 40 of Chapter 66 of the General Statutes.

...

**§ 97-84. Determination of disputes by Commission or deputy**

The Commission or any of its members or deputies shall hear the parties at issue and their representatives and witnesses, and shall determine the dispute in a summary manner. ~~The Commission shall decide the case~~ shall be decided and ~~issue findings of fact issued~~ based upon the preponderance of the evidence in view of the entire record. The award, together with a statement of the findings of fact, rulings of law, and other matters pertinent to the questions at issue shall be filed with the record of the proceedings, within 180 days of the close of the hearing record unless time is extended for good cause by the Commission, and a copy of the award shall immediately be sent to the parties in dispute. ~~The parties may be heard by a deputy, in which event the hearing shall be conducted in the same way and manner prescribed for hearings which are conducted by a member of the Industrial Commission, and said deputy shall proceed to a complete determination of the matters in dispute, file his written opinion within 180 days of the close of the hearing record unless time is extended for good cause by the Commission, and the deputy shall cause to be issued an award pursuant to such determination. If the deputy or member of the Commission that heard the parties at issue and their representatives and witnesses is unable to determine the matters in dispute and issue an award, the Commission may assign another deputy or member to decide the case and issue an award.~~

**SB 615** was:

- Passed by the first chamber on June 12, 2017
- Included in NCCI's June 23, 2017 **Legislative Activity Report** (RLA-2017-24)
- Amended and passed by the second chamber on June 28, 2017

**SB 615**, in part, amends **section 97-2. Definitions** of the Workers Compensation Act in the North Carolina General Statutes as follows:

**§ 97-2. Definitions.**

When used in this Article, unless the context otherwise requires:

...

(2) Employee.—The term “employee” means every person engaged in an employment under any appointment or contract of hire or apprenticeship, express or implied, oral or written, including aliens, and also minors, whether lawfully or unlawfully employed, but excluding persons whose employment is both casual and not in the course of the trade, business, profession, or occupation of his employer, and as relating to those so employed by the State, the term “employee” shall include all officers and employees of the State, including such as are elected by the people, or by the General Assembly, or appointed by the Governor to serve on a per diem, part-time or fee basis, either with or without the confirmation of the Senate; as relating to municipal corporations and political subdivisions of the State, the term “employee” shall include all officers and employees thereof, including such as are elected by the people.

...

“Employee” shall not include any person elected or appointed and empowered as an executive officer, director, or committee member under the charter, articles, or bylaws of a nonprofit corporation subject to Chapter 47A, 47C, 47F, 55A, or 59B of the General Statutes, or any organization exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, who performs only voluntary service for the nonprofit corporation, provided that the person receives no remuneration for the voluntary service other than reasonable reimbursement for expenses incurred in connection with the voluntary service. When a nonprofit corporation as described herein employs one or more persons who do receive remuneration other than reasonable reimbursement for expenses, then any volunteer officers, directors, or committee members excluded from the definition of “employee” by operation of this paragraph shall be counted as employees for the sole purpose of determining the number of persons regularly employed in the same business or establishment pursuant to G.S. 97-2(1). Other than for the limited purpose of determining the number of persons regularly employed in the same business or establishment, such volunteer nonprofit officers, directors, or committee members shall not be “employees” under the Act. Nothing herein shall prohibit a nonprofit corporation as described herein from voluntarily electing to provide for workers’ compensation benefits in the manner provided in G.S. 97-93 for volunteer officers, directors, or committee members excluded from the definition of “employee” by operation of this paragraph. This paragraph shall not apply to any volunteer firefighter, volunteer member of an organized rescue squad, an authorized pickup firefighter emergency worker when that individual is engaged in emergency fire suppression activities for the North Carolina Forest Service, a duly appointed and sworn member of an auxiliary police department organized pursuant to G.S. 160A-282, or a senior member of the State Civil Air Patrol functioning under Subpart C of Part 5 of Article 13 of Chapter 143B of the General Statutes, even if such person is elected or appointed and empowered as an executive officer, director, or committee member under the charter, articles, or bylaws of a nonprofit corporation as described herein.

Any sole proprietor or partner of a business or any member of a limited liability company may elect to be included as an employee under the workers’ compensation coverage of such business if he or she is actively engaged in the operation of the business and if the insurer is notified of his election to be so included. Any such sole proprietor or partner or member of a limited liability company shall, upon such election, be entitled to employee benefits and be subject to employee responsibilities prescribed in this Article.

“Employee” shall include an authorized pickup firefighter emergency worker of the North Carolina Forest Service of the Department of Agriculture and Consumer Services when that individual is engaged in emergency fire suppression activities for the North Carolina Forest Service. As used in this section, “authorized pickup firefighter emergency worker” means an individual who has completed required fire suppression emergency response training as a wildland firefighter required by the North Carolina Forest Service and who is available as needed by the North Carolina Forest Service for emergency fire suppression activities, including immediate dispatch to wildfires, snow events, hurricanes, earthquakes, floods, or other emergencies, and standby for initial attack on fires during periods of high fire danger.

...

## Rhode Island

**HB 5934** was:

- Passed by the first chamber on May 4, 2017
- Included in NCCI’s May 12, 2017 *Legislative Activity Report* (RLA-2017-18)
- Passed by the second chamber on June 30, 2017

**HB 5934**, in part, deletes *section 27-9-51 Excess profits for workers’ compensation and employer’s liability insurance prohibited*, as follows:

~~**27-9-51. Excess profits for workers’ compensation and employer’s liability insurance prohibited.**~~

~~(a) Each insurance group shall file with the department prior to July 1 of each year, on a form prescribed by the department, the following data for workers’ compensation and employers’ liability insurance:~~

- ~~(1) The calendar year earned premium;~~
- ~~(2) Accident year incurred losses and loss adjustment expenses;~~
- ~~(3) The administrative and selling expenses incurred in Rhode Island or allocated to Rhode Island for the calendar year; and~~
- ~~(4) Policyholder dividends applicable to the calendar year.~~

(b) (1) Excess profit has been realized if the underwriting gain is greater than the anticipated underwriting profit plus five percent (5%) of earned premiums for the three (3) most recent calendar years;

(2) As used in this section with respect to any three (3) year period, "anticipated underwriting profit" means the sum of the dollar amounts obtained by multiplying, for each rate filing of the insurance group in effect during that period, the earned premiums applicable to the rate filing during that period by the percentage factor included in the rate filing for profit and contingencies, the percentage factor having been determined with due recognition to investment income from funds generated by Rhode Island business. Separate calculations need not be made for consecutive rate filings containing the same percentage factor for profits and contingencies.

(c) Each insurance group shall also file a schedule of Rhode Island loss and loss adjustment experience for each of the three (3) most recent accident years. The incurred losses and loss adjustment expenses shall be valued as of December 31 of the accident year, developed to an ultimate basis, and two (2) twelve (12) month intervals after this, each developed to an ultimate basis so that a total of three (3) evaluations will be provided for each accident year. For reporting purposes unrelated to determining excessive profits, the loss and loss adjustment experience of each accident year shall continue to be reported until each accident year has been reported at eight (8) stages of development.

(d) Each insurance group's underwriting gain or loss for each calendar accident year shall be computed as follows: The sum of the accident year incurred losses and loss adjustment expenses as of December 31 of the year, developed to an ultimate basis, plus the administrative and selling expenses incurred in the calendar year, plus policyholder dividends applicable to the calendar year, shall be subtracted from the calendar year earned premium to determine the underwriting gain or loss.

(e) For the three (3) most recent calendar accident years, the underwriting gain or loss shall be compared to the anticipated underwriting profit.

(f) If the insurance group has realized an excess profit, the department shall order a return of the excess amounts after affording the insurance group an opportunity for a hearing and complying with the provisions of the Administrative Procedures Act, chapter 35 of title 42. The excess amounts shall be refunded in all instances unless the insurance group affirmatively demonstrates to the department that the refund of the excess amounts will render the insurance group insolvent under the provisions of this title.

(g) Any excess profit of an insurance group offering workers' compensation or employers' liability insurance shall be returned to policyholders in the form of a cash refund or be returned to policyholders in the form of a credit toward the future purchase of insurance. The excess amount shall be refunded on a pro rata basis in relation to the final compilation year earned premiums to the workers' compensation policyholders of record of the insurance group on December 31 of the final compilation year.

(h) (1) Cash refunds to policyholders may be rounded to the nearest dollar;

(2) Data in required reports to the department may be rounded to the nearest dollar;

(3) Rounding, if elected by the insurance group, shall be applied consistently.

(i) (1) Refunds shall be completed in one of the following ways:

(i) If the insurance group elects to make a cash refund, the refund shall be completed within sixty (60) days of the entry of a final order indicating that excess profits have been realized; or

(ii) If the insurance group elects to make refunds in the form of a credit to renewal policies, the credits shall be applied to policy renewal premium notices which are forwarded to insured more than sixty (60) calendar days after the entry of a final order indicating that excess profits have been realized. If an insurance group has made this election, but an insured after this cancels his or her policy or allows his or her policy to terminate, the insurance group shall make a cash refund not later than sixty (60) days after the termination of the coverage;

(2) Upon completion of the renewal credits or refund payments, the insurance group shall immediately certify to the department that the refunds have been made.

(j) Any refund or renewal credit made pursuant to this section, for the purposes of reporting under this section for subsequent years, shall be treated as a policyholder dividend applicable to the year in which it is incurred.

**SB 917 Substitute A was:**

- Passed by the first chamber on June 28, 2017
- Passed by the second chamber on June 29, 2017

**SB 917 Substitute A**, in part, amend sections **28-33-18.3. Continuation of benefits -- Partial incapacity, 28-53-2. Establishment -- Sources -- Administration**, and **28-53-7. Payments to employees of uninsured employers** of the Rhode Island Workers Compensation Act as follows:

**§ 28-33-18.3 Continuation of benefits – Partial incapacity.**

(a) (1) For all injuries occurring on or after September 1, 1990, in those cases where the employee has received a notice of intention to terminate partial-incapacity benefits pursuant to § 28-33-18, the employee, or his or her duly authorized representative, may file with the workers' compensation court a petition for continuation of benefits on forms prescribed by the workers' compensation court. In any proceeding before the workers' compensation court on a petition for continuation of partial-incapacity benefits, where the employee demonstrates by a fair preponderance of the evidence that his or her partial incapacity poses a material hindrance to obtaining employment suitable to his or her limitation, partial-incapacity benefits shall continue. For

~~injuries on and after July 1, 2023, "material hindrance" is defined to include only compensable injuries causing a greater than sixty-five percent (65%) degree of functional impairment and/or disability. Any period of time for which the employee has received benefits for total incapacity shall not be included in the calculation of the three hundred and twelve-week (312) period.~~

~~(2) The provisions of this subsection apply to all injuries from Sept. 1, 1990, to July 1, 2023.~~

...

#### **§ 28-53-2. Establishment – Sources – Administration.**

(a) There shall be established within the department of labor and training a special restricted receipt account to be known as the Rhode Island uninsured employers fund. The fund shall be capitalized from excise taxes assessed against uninsured employers pursuant to the provisions of § 28-53-9 of this chapter and from general revenues appropriated by the legislature. Beginning in state fiscal year ending ~~June 30, 2017~~ June 30, 2018, the legislature may appropriate up to two million dollars (\$2,000,000) in general revenue funds annually for deposit into the Rhode Island uninsured employers fund.

...

#### **§ 28-53-7. Payments to employees of uninsured employers.**

(a) Where it is determined that the employee was injured in the course of employment while working for an employer who fails to maintain a policy of workers' compensation insurance as required by § 28-36-1 et seq., the uninsured employers fund shall pay the benefits to which the injured employee would be entitled pursuant to chapters 29 to 38 of this title subject to the limitations set forth herein.

(b) The workers' compensation court shall hear all petitions for payment from the fund pursuant to § 28-30-1 et seq.; provided, however, that the uninsured employers fund and the employer shall be named as parties to any petition seeking payment of benefits from the fund.

(c) Where an employee is deemed to be entitled to benefits from the uninsured employers fund, the fund shall pay benefits for disability and medical expenses as provided pursuant to chapters 29 to 38 of this title except that the employee shall not be entitled to receive benefits for loss of function and disfigurement pursuant to the provisions of § 28-33-19.

(d) The fund shall pay cost, counsel, and witness fees, as provided in § 28-35-32, to any employee who successfully prosecutes any petitions for compensation; petitions for medical expenses; petitions to amend a pretrial order or memorandum of agreement; and all other employee petitions; and to employees who successfully defend, in whole or in part, proceedings seeking to reduce or terminate any and all workers' compensation benefits; provided, however, that the attorney's fees awarded to counsel who represent the employee in petitions for lump-sum commutation filed pursuant to § 28-33-25, or in the settlement of disputed cases pursuant to § 28-33-25.1, shall be limited to the maximum amount paid to counsel who serve as court-appointed attorneys in workers' compensation proceedings as established by rule or order of the Rhode Island supreme court.

(e) In the event that the uninsured employer makes payment of any monies to the employee to compensate the employee for lost wages or medical expenses, the fund shall be entitled to a credit for all such monies received by, or on behalf of, the employee against any future benefits payable directly to the employee.

(f) This section shall apply to injuries that occur on or after ~~July 1, 2017~~ July 1, 2018.

**Note: SB 917 Substitute A** is identical to **HB 6224 Substitute A** (which was enacted on June 30, 2017) and was not included in any previous version of NCCI's *Legislative Activity Report*.

## **BILLS PASSING FIRST CHAMBER**

The following workers compensation-related bill was passed by the first chamber within the one-week period ending June 30, 2017.

### **Illinois**

**HB 200** amends various sections of the Illinois Compiled Statutes to, in part, provide the following provisions :

- Exempt from public inspection certain information collected by the Illinois Workers' Compensation Commission from self-insureds and papers, documents, reports, or evidence relevant to a workers compensation fraud investigation conducted by the Department of Insurance
- Amend the Workers' Compensation and Employer's Liability Rates Article of the Illinois Insurance Code
- Provide that a rate is excessive if it is likely to produce a profit that is unreasonably high for the insurance provided or if expenses are unreasonably high in relation to the services rendered
- Repeal provisions regarding presumptions that a competitive market exists, determining whether a competitive market exists, and disapproval of rates under specified circumstances
- Amend the Criminal Code of 2012 regarding workers compensation fraud penalties
- Amend the Workers' Compensation Act to make changes concerning:
  - When a traveling employee's accidental injuries are considered to be "arising out of the employment"
  - Compensation awards for injuries to the shoulder and hip

- o Additional compensation in cases where there has been unreasonable or vexatious delay of authorization of medical treatment
- o A requirement that the Illinois Workers' Compensation Commission (i) investigate all procedures, treatments, and services covered under the Act for ambulatory surgical treatment centers and accredited ambulatory surgical treatment facilities and (ii) establish fee schedule amounts for procedures, treatments, and services for which fee schedule amounts have not been established
- o The assignment and reassignment of arbitrators to hearing sites
- o The creation of an evidence based drug formulary
- o Annual reports on the state of self-insurance for workers compensation in Illinois

## FEDERAL ISSUES

Issue	Update
<b>State Regulators' Workers Compensation Data Call</b>	NCCI has responded to the state regulators' 2017 Terrorism Risk Data Call Related to Workers Compensation for all states except California. The data was transmitted through the New York State Department of Financial Services (NYS DFS) portal and the states are utilizing the services of the National Association of Insurance Commissioners (NAIC) to aggregate and analyze the data. The NYS DFS provided NCCI with a directive which indicated that the states had designated it as the lead agency and authorized the transmittal of the data. As a result of NCCI and state independent bureau coordination with the NAIC, individual carriers will not be required to respond to the Data Call for workers compensation coverage.
<b>US Longshore and Harbor Workers Compensation Act Reform</b>	Legislation has been reintroduced that would clarify the federal Longshore and Harbor Workers Compensation Act requirements for certain activities related to recreational vessels. <b>HR 2354</b> would clarify that employers building, repairing, or dismantling recreational vessels of any length would be exempted from the federal Longshore Act workers compensation requirements (provided appropriate state act coverage was obtained). The U.S. Department of Labor's interpretations of an amendment to the Longshore Act included in the American Recovery and Reinvestment Act of 2009 were inconsistent with congressional intent, and as such, marine employers were not able to benefit from the statutory exemption.

## STATE LEGISLATIVE ACTIVITY

State	Update
<b>Illinois</b>	The governor remains intent on including workers compensation reforms in the negotiated budget package, calling a special session to address the budget issues, and with it, workers compensation reform. The state will enter its third fiscal year (July 1) without a budget unless the House Republicans, led by Jim Durkin, and the House Democrats, led by Speaker Michael Madigan, can reach an agreement. Two new workers compensation reform packages have been introduced in the special session. In a recent press conference Speaker Madigan announced that there would be no budget deal unless it included regulation of carrier premiums and profits, referring to the prior approval process.

## STATE COMMITTEE ACTIVITY

State	Update
<b>Virginia</b>	On June 13, the Workers' Compensation Commission met to review Medical Fee Schedules, ground rules, the dispute resolution process and supporting documents for final approval. The Commission posted the preliminary Medical Fee Schedule Dispute Resolution Process to its website on June 19, for a 30-day public comment period. The dispute resolution process would adjudicate disputes between "...a provider and payer over application of the medical fee schedule." The process does not allow providers or payers to dispute payment because of dissatisfaction with a reimbursement amount dictated by the fee schedule. The next meeting of the Medical Fee Schedule Advisory Panel will be September 27. At that meeting, the Panel and Commission will review medical fee schedule exclusions and remaining statutory requirements. The Medical Fee Schedule will be implemented on January 1, 2018.

## OTHER ITEMS OF INTEREST

State	Update
Missouri	<p>In <i>Gattenby v. Treasurer of the State of Missouri</i>, the Missouri Court of Appeals Western District held that subsection 287.220.3 of the Missouri Workers Compensation Law applies only where a claimant's preexisting and primary injuries occur after January 1, 2014, otherwise, subsection 287.220.2 would be the controlling subsection. Accordingly, since the claim in this case involved an injury or injuries that resulted in disability prior to January 1, 2014, the Court found that subsection 287.220.2 controlled, affirming the Labor and Industrial Relations Commission's decision to uphold an administrative law judges award of permanent total disability benefits. This case was appealed to the Supreme Court and on May 30, 2017 the Court declined to hear the case.</p> <p><i>In response to this decision, NCCI has filed for a -4.0% lost cost level change, effective August 1, 2017, for new and renewal policies.</i></p>

### 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, ID, MT, NV, OR	Peter Burton	610-964-8852
AL, GA, KY, LA, MS	Laura Hart Bryan	225-618-8168
AK, AZ, CO, NM, 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
IA, 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.