LEGISLATIVE ACTIVITY—LEGISLATIVE SESSION UPDATES

This report includes 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 is included in the first report published each month. This report is issued on a weekly basis throughout the legislative season and provides updates on the content of these bills if and when they progress through the legislative process. This report covers 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 22, 2019.

<table>
<thead>
<tr>
<th>States</th>
<th>Bills Enacted</th>
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<tbody>
<tr>
<td>Nebraska</td>
<td>LB 139 was:</td>
</tr>
<tr>
<td></td>
<td>- Passed by the legislature on March 15, 2019.*</td>
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<tr>
<td></td>
<td>- Included in NCCI’s March 22, 2019 Legislative Activity Report (RLA-2019-10)</td>
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<td>- Enacted on March 21, 2019, with a projected effective date of September 7, 2019</td>
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<td></td>
<td>LB 139 amends section 48-2117 of the Contractor Registration Act to read:</td>
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<td>48-2117. Data base of contractors; removal.</td>
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<tr>
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<td>(1) The Department of Labor, in conjunction with the Department of Revenue,</td>
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<td>shall create a data base of contractors who are registered under the</td>
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<td>Contractor Registration Act and the Nebraska Revenue Act of 1967.</td>
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<td>(2) The data base shall be accessible on the web site of the Department of</td>
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<td>Labor.</td>
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<td>(3) The data base shall include, but not be limited to, the following</td>
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<td>information with respect to each registered contractor:</td>
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<td>(a) Whether the contractor carries workers’ compensation insurance in</td>
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<td>accordance with the Nebraska Workers’ Compensation Act;</td>
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<td>(b) Whether the contractor is self-insured in accordance with the Nebraska</td>
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<td>Workers’ Compensation Act; or</td>
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<td>(c) Whether the contractor is a sole proprietor with no employees and does</td>
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<td>not carry workers’ compensation insurance pursuant to the Nebraska Workers’</td>
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<td>Compensation Act.</td>
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<td>(4) The information described in subdivision (3)(c) of this section, as it</td>
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<td>is listed in the data base, creates a presumption of no coverage that may</td>
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<td>be rebutted by an insurer acknowledging coverage for a claimed covered event.</td>
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<td>(5) The information required under subsection (3) of this section and the</td>
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<td>presumption provided in subsection (4) of this section are solely for the</td>
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<td>purpose of establishing premiums for workers’ compensation insurance and</td>
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<td>shall not affect liability under the Nebraska Workers’ Compensation Act or</td>
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<td>compliance efforts pursuant to section 48-145.01.</td>
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<td>(6) (2) Any contractor that fails to comply with the requirements of the</td>
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<td>Contractor Registration Act or Nebraska Revenue Act of 1967 shall be</td>
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<td></td>
<td>removed from the data base.</td>
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<td>*Note: Nebraska has only one chamber in its legislature. After the</td>
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<td>legislature passes a bill, it goes to the governor for consideration.</td>
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<tr>
<td>Virginia</td>
<td>HB 1804 was:</td>
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<tr>
<td></td>
<td>- Passed by the first chamber on February 5, 2019</td>
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<td></td>
<td>- Included in NCCI’s February 15, 2019 Legislative Activity Report (RLA-2019-05)</td>
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<td></td>
<td>- Passed by the second chamber on February 15, 2019</td>
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<td></td>
<td>- Included in NCCI’s February 22, 2019 Legislative Activity Report (RLA-2019-06)</td>
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<td></td>
<td>- Enacted on March 18, 2019, and will not become effective unless reenacted</td>
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<td>by the 2020 Session of the General Assembly</td>
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§ 65.2-402. Presumption as to death or disability from respiratory disease, hypertension or heart disease, cancer.

C. Leukemia or pancreatic, prostate, rectal, throat, ovarian- or breast, colon, brain, or testicular cancer causing the death of, or any health condition or impairment resulting in total or partial disability of, any volunteer or salaried firefighter, Department of Emergency Management hazardous materials officer, commercial vehicle enforcement officer or motor carrier safety trooper employed by the Department of State Police, or full-time sworn member of the enforcement division of the Department of Motor Vehicles having completed 12 years of continuous service who has a contact with a toxic substance encountered in the line of duty shall be presumed to be an occupational disease, suffered in the line of duty, that is covered by this title, unless such presumption is overcome by a preponderance of competent evidence to the contrary. For the purposes of this section, a “toxic substance” is one which is a known or suspected carcinogen, as defined by the International Agency for Research on Cancer, and which causes, or is suspected to cause, leukemia or pancreatic, prostate, rectal, throat, ovarian- or breast, colon, brain, or testicular cancer.

HB 1804 also includes the following language:

That the provisions of this act shall not become effective unless reenacted by the 2020 Session of the General Assembly.

That the 2020 Session of the General Assembly, in considering and enacting any legislation relating to workers’ compensation and the presumption of compensability for certain cancers, shall consider any research, findings, and recommendations of the Joint Legislative Audit and Review Commission from the Commission’s review of the Virginia Workers’ Compensation program.

HB 2022 was:

- Passed by the first chamber on February 5, 2019
- Included in NCCI’s February 15, 2019 Legislative Activity Report (RLA-2019-05)
- Passed by the second chamber on February 15, 2019
- Included in NCCI’s February 22, 2019 Legislative Activity Report (RLA-2019-06)
- Enacted on March 18, 2019, with a projected effective date of July 1, 2019

HB 2022 amends and reenacts section 65.2-602. Tolling of statute of limitations of the Virginia Workers’ Compensation Act to read:

§ 65.2-602. Tolling of statute of limitations.

In any case where an employer has received notice of an accident resulting in compensable injury to an employee as required by § 65.2-600, and, whether or not an award has been entered, such employer nevertheless has paid compensation or wages to such employee during incapacity for work, as defined in § 65.2-500 or § 65.2-502, resulting from such injury or the employer has failed to file the report of said accident with the Virginia Workers’ Compensation Commission as required by § 65.2-900, and such conduct of the employer has operated to prejudice the rights of such employee with respect to the filing of a claim prior to expiration of a statute of limitations otherwise applicable, such statute shall be tolled for the duration of such payment or, as the case may be, until the employer files the first report of accident required by § 65.2-900 or otherwise has under a workers’ compensation plan or insurance policy furnished or caused to be furnished medical service to such employee as required by § 65.2-603, the statute of limitations applicable to the filing of a claim shall be tolled until the last day for which such payment of compensation or wages or furnishment of medical services as described above is provided and that occurs more than six months after the date of accident. However, no such payment of wages or workers’ compensation benefits or furnishment of medical service as described above occurring after the expiration of the statute of limitations shall apply to this provision. In the case where the employer has failed to file a first report, the statute of limitations shall be tolled during the duration thereof until the employer filed the first report of accident as required by § 65.2-900. In the event that more than one of the above tolling provisions applies, whichever of those causes the longer period of tolling shall apply. For purposes of this section, such rights of an employee shall be deemed not prejudiced if his employer has filed the first report of accident as required by § 65.2-900 or he has received after the accident a workers’ compensation guide described in § 65.2-201 or a notice in substantially the following form:

NOTICE TO EMPLOYEE:

BECAUSE OF THE ACCIDENT OR INJURY YOU HAVE REPORTED, YOU MAY HAVE A WORKERS’ COMPENSATION CLAIM. HOWEVER, SUCH CLAIM MAY BE LOST IF YOU DO NOT FILE IT WITH THE VIRGINIA WORKERS’ COMPENSATION COMMISSION WITHIN THE TIME LIMIT PROVIDED BY LAW. YOU MAY FIND OUT WHAT TIME LIMIT APPLIES TO YOUR INJURY BY CONTACTING THE COMMISSION.

THE FACT THAT YOUR EMPLOYER MAY BE COVERING YOUR MEDICAL EXPENSES OR CONTINUING TO PAY YOUR SALARY OR WAGES DOES NOT STOP THE TIME FROM RUNNING.

Such notice shall also include the address and telephone number which the employee may use to contact the Commission.
SB 1729 was:
- Passed by the first chamber on January 25, 2019
- Included in NCCI’s February 1, 2019 Legislative Activity Report (RLA-2019-03)
- Passed by the second chamber on February 13, 2019
- Included in NCCI’s February 22, 2019 Legislative Activity Report (RLA-2019-06)
- Enacted on March 21, 2019, with an effective date of July 1, 2019

SB 1729 amends and reenacts section 65.2-605.1. Prompt payment; limitation on claims of the Virginia Workers’ Compensation Act as follows:

§ 65.2-605.1. Prompt payment; limitation on claims.

...G. No health care provider shall submit, nor shall the Commission adjudicate, any claim to the Commission seeking additional payment for medical services rendered to a claimant before July 1, 2014, if the health care provider has previously accepted payment for the same medical services pursuant to the Longshore and Harbor Workers’ Compensation Act, 33 U.S.C. Section 901 et seq.

H. The Commission, by January 1, 2016, shall establish a schedule pursuant to which employers, employers’ workers’ compensation insurance carriers, and providers of workers’ compensation medical services shall be required, by a date determined by the Commission that is no earlier than July 1, 2016, and no later than December 31, 2018, to adopt and implement infrastructure under which (i) providers of workers’ compensation medical services (providers) shall submit their billing, claims, case management, health records, and all supporting documentation electronically to employers or employers’ workers’ compensation insurance carriers, as applicable (payers) and (ii) payers shall return actual payment, claim status, and remittance information electronically to providers that submit their billing and required supporting documentation electronically. The Commission shall establish standards and methods for such electronic submissions and transactions that are consistent with International Association of Industrial Accident Boards and Commission Medical Billing and Payment guidelines. The Commission shall determine the date by which payers and providers shall be required to adopt and implement the infrastructure, which determinations shall be based on the volume and complexity of workers’ compensation cases in which the payer or provider is involved, the resources of the payer or provider, and such other criteria as the Commission determines to be appropriate.

BILLS PASSING SECOND CHAMBER
The following workers compensation-related bills passed the second chamber within the one-week period ending March 22, 2019.

Indiana

HB 1182 was:
- Passed by the first chamber on February 11, 2019
- Included in NCCI’s February 22, 2019 Legislative Activity Report (RLA-2019-06)
- Amended and passed by the second chamber on March 19, 2019

HB 1182 amends sections 22-3-3-21, 22-3-7-15, and 36-8-12-10; and adds new section 36-8-12-10.3 to the Indiana Code to read as follows:

IC 22-3-3-21 Burial expenses
Sec. 21. In cases of the death of an employee from an injury by an accident arising out of and in the course of the employee’s employment under circumstances that the employee would have been entitled to compensation if death had not resulted, the employer shall pay the burial expenses of such employee, not exceeding seven ten thousand five hundred dollars ($7,500). ($10,000).

IC 22-3-7-15 Death benefits; burial expenses
Sec. 15. In cases of the death of an employee from an occupational disease arising out of and in the course of the employee’s employment under circumstances that the employee would have been entitled to compensation if death had not resulted, the employer shall pay the burial expenses of such employee, not exceeding seven ten thousand five hundred dollars ($7,500). ($10,000).

IC 36-8-12-10 Volunteers; medical treatment and burial expense coverage; determinations; premium expenses
Sec. 10. (a) A:
(1) volunteer firefighter, a member of the emergency medical services personnel, or an emergency medical technician working in a volunteer capacity for a volunteer fire department or ambulance company is covered; and
(2) volunteer working for a hazardous materials response team may be covered; by the medical treatment and burial expense provisions of the worker’s compensation law (IC 22-3-2 through IC 22-3-6) and the worker’s occupational diseases law (IC 22-3-7).
(b) Subject to section 10.3 of this chapter, if compensability of the injury is an issue, the administrative procedures of IC 22-3-2 through IC 22-3-6 and IC 22-3-7 shall be used to determine the issue.

... 

IC 36-8-12-10.3
Sec. 10.3. (a) This section applies to an employee of a private employer who:
(1) is a volunteer firefighter or volunteer member; and
(2) has notified the employee’s employer in writing that the employee is a volunteer firefighter or volunteer member, regardless of whether the employer rejected the notification under section 10.7(c) of this chapter.

(b) An employee described in subsection (a) who leaves the employee’s duty station to respond to a fire or emergency call after the employee has reported to work shall, for worker’s compensation purposes, be considered an employee of the unit while in the performance of the duties of a volunteer firefighter or volunteer member.

(c) The employee described in subsection (a) shall, for worker’s compensation purposes, be considered as having entered in and acted in the regular course and scope of the employment with the unit when the employee responds to the fire or emergency call as a volunteer firefighter or volunteer member, regardless of whether the employee responds by traveling:
(1) to a fire station or other place where firefighting equipment that the company or unit is to use is located; or
(2) to perform any activities that the employee may be directed to do by the chief of the fire department or, in the absence of the chief, the ranking officer.

(d) The employee described in subsection (a) shall, for worker’s compensation purposes, be considered an employee of the unit until the employee returns to the location from which the employee was originally called to active duty, or until the employee engages in an activity beyond the scope of the performance of the duties of the volunteer firefighter or volunteer member, whichever occurs first.

Maryland

HB 595 was:
• Passed by the first chamber on March 15, 2019
• Included in NCCI’s March 22, 2019 Legislative Activity Report (RLA-2019-10)
• Passed by the second chamber on March 22, 2019

HB 595 amends section 9-503 of the Annotated Code of Maryland to read:
§ 9-503. Occupational disease—Presumption—Firefighters, fire fighting instructors, rescue squad members, advanced life support unit members, and police officers

... 

(c) Cancer.—A paid firefighter, paid firefighting instructor, paid rescue squad member, paid advanced life support unit member, or a sworn member of the Office of the State Fire Marshal employed by an airport authority, a county, a fire control district, a municipality, or the State or a volunteer firefighter, volunteer fire fighting instructor, volunteer rescue squad member, or volunteer advanced life support unit member who is a covered employee under § 9-234 of this title is presumed to be suffering from an occupational disease that was suffered in the line of duty and is compensable under this title if the individual:
(1) has leukemia or prostate, rectal, throat, multiple myeloma, non-Hodgkin’s lymphoma, brain, testicular, bladder, kidney or renal cell, or breast cancer that is caused by contact with a toxic substance that the individual has encountered in the line of duty;

Note: HB 595 is identical to SB 160.

HB 604 was:
• Passed by the first chamber on March 16, 2019
• Amended and passed by the second chamber on March 22, 2019

HB 604 amends section 9-503 of the Annotated Code of Maryland to read:
§ 9-503. Occupational disease—Presumption—Firefighters, fire fighting instructors, rescue squad members, advanced life support unit members, and police officers

... 

(c) Cancer.—A paid firefighter, paid fire fighting instructor, paid rescue squad member, paid advanced life support unit member, or a sworn member of the Office of the State Fire Marshal employed by an airport authority, a county, a fire control district, a municipality, or the State or a volunteer firefighter, volunteer fire fighting instructor, volunteer rescue squad member, or volunteer advanced life support unit member who is a covered employee under § 9-234 of this title is presumed to be suffering from an occupational disease that was suffered in the line of duty and is compensable under this title if the individual:
(1) the individual has leukemia or prostate, rectal, throat, multiple myeloma, non-Hodgkin’s lymphoma, brain, testicular, or breast cancer that is caused by contact with a toxic substance that the individual has encountered in the line of duty;
(2) the individual has completed at least 10 years of cumulative service within the state as a firefighter, a fire fighting
instructor, a rescue squad member, or an advanced life support unit member or in a combination of those jobs in the department
where the individual currently is employed or serves;
(3) is unable to perform the normal duties of a firefighter, fire fighting instructor, rescue squad member, or advanced life support
unit member in the department where the individual currently is employed or serves because of the cancer or leukemia disability;
and
(4) in the case of a volunteer firefighter, volunteer fire fighting instructor, volunteer rescue squad member, or volunteer advanced
life support unit member, the individual has met a suitable standard of physical examination before becoming a firefighter, fire
fighting instructor, rescue squad member, or advanced life support unit member.

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**Oregon**

**HB 2087** was:
- Passed by the first chamber on February 26, 2019
- Included in NCCI's March 8, 2019 Legislative Activity Report (RLA-2019-08)
- Passed by the second chamber on March 19, 2019

**HB 2087** amends section 656.745 of the Oregon Workers' Compensation Law to read:
656.745 Civil penalty for inducing failure to report claims; failure to pay assessments; failure to comply with
statutes, rules or orders; amount; procedure.
(1) (a) The Director of the Department of Consumer and Business Services shall assess a civil penalty against an employer or
insurer who that intentionally or repeatedly induces claimants for compensation to fail to report accidental injuries, causes
employees to collect accidental injury claims as off-the-job injury claims, persuades claimants to accept less than the compensation
due or makes it necessary for claimants to resort to proceedings against the employer to secure compensation due.
(b) The director may not assess under this subsection more than $2,000 for each violation or more than $40,000 in the aggregate
for violations during a calendar year. Each violation, or each day during which a violation continues, constitutes a separate
violation.
(2) (a) The director may assess a civil penalty against an employer, self-insured employer, insurer, managed care organization or
service company that:
(a) (A) Fails to pay assessments or other payments due to the director under this chapter and is in default; or
(b) (B) Fails to comply with statutes, rules or orders of the director regarding reports or other requirements necessary to carry out
the purposes of this chapter.
(b) The director may not assess under this subsection a civil penalty against a self-insured employer, insurer or service company
that exceeds $4,000 for each violation or $180,000 in the aggregate for violations during a calendar year. Each violation, or each
day during which a violation continues, constitutes a separate violation.
(c) The director may not assess under this subsection a civil penalty against an employer, except a self-insured employer, or
managed care organization that exceeds $2,000 for each violation or $40,000 in the aggregate for violations during a calendar year.
Each violation, or each day during which a violation continues, constitutes a separate violation.
(3) Except as specified in ORS 656.780, the director may assess a penalty under subsection (2) of this section against a service
company only for claims processing performance deficiencies revealed in annual audits associated with claims processing
performance. The director may assess only one penalty for each separate violation by an employer, insurer or service company for
deficiencies revealed in annual audits associated with claims processing performance.
(4) A civil penalty shall be not more than $2,000 for each violation or $10,000 in the aggregate for all violations within any three-
month period. Each violation, or each day a violation continues, shall be considered a separate violation.
(5) (4) ORS 656.735 (4) to (6) and 656.740 also apply to orders and penalties assessed under this section.

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**HB 2406** was:
- Passed by the first chamber on February 26, 2019
- Included in NCCI's March 8, 2019 Legislative Activity Report (RLA-2019-08)
- Passed by the second chamber on March 19, 2019

**HB 2406** amends section 656.033 of the Oregon Workers’ Compensation Law to read:
656.033 Coverage for participants in work experience or school directed professional training programs.
(1) All persons participating as trainees in a work experience program or school directed professional education project of a school
district as defined in ORS 332.002 in which such persons are enrolled, including persons with mental retardation in training
programs, are considered as workers of the district subject to this chapter for purposes of this section. Trainees placed in a work
experience program with their resident school district as the training employer shall be subject workers under this section when
the training and supervision are performed by noninstructional personnel. All persons participating as trainees in a work
experience program or a school directed professional education project of a school district, as defined in ORS 332.002, in which
such persons are enrolled, including persons with intellectual disabilities in training programs, are workers of the district subject to this chapter for purposes of this section. Trainees placed in a work experience program with the trainees’ resident school district as the training employer are subject workers under this section if the training and supervision are performed by noninstructional personnel.

(3) The premium cost for coverage under this section shall be based on an assumed hourly wage which is approved by the Director of the Department of Consumer and Business Services. Such assumed wage is to be used only for calculation purposes under this chapter and without regard to ORS chapter 652 or ORS 653.010 to 653.565 and 653.991. A self-insured district shall submit such assumed wage rates to the director. If the director finds that the rates are unreasonable, the director may fix appropriate rates to be used for purposes of this section.

(4) The school district shall furnish the insurer, or in the case of self-insurers, the director, with an estimate of the total number of persons enrolled in the school district’s work experience program or school directed professional education project and shall notify the insurer or director of any significant changes therein in the program or project. Persons covered under this section are entitled to the benefits of this chapter. However, such persons are not entitled to benefits under ORS 656.210 or 656.212. The persons are entitled to such benefits if injured as provided in ORS 656.156 and 656.202 while performing any duties arising out of and in the course of their participation in the work experience program or school directed professional education project, provided the duties being performed are among those:

(5) The filing of claims for benefits under this section is the exclusive remedy of a trainee or a beneficiary of the trainee for injuries compensable under this chapter against the state’s political subdivisions, the school district board, its members, officers and employees of the school district board, or any employer, regardless of negligence.

(6) The provisions of this section do not apply to any trainee who has earned wages for such employment.

(7) As used in this section, “school directed professional education project” means an on-campus or off-campus project supervised by school personnel and which is an assigned activity of a local professional education program approved pursuant to operating procedures of the State Board of Education. A school directed professional education project must be of a practicum experience nature, performed outside of a classroom environment and extending beyond initial instruction or demonstration activities. Such projects are limited to logging, silvicultural thinning, slash burning, fire fighting, stream enhancement, woodcutting, reforestation, tree surgery, construction, printing and manufacturing involving formed metals.

(8) Notwithstanding subsection (1) of this section, a school district may elect to make trainees subject workers under this chapter for school directed professional education projects not enumerated in subsection (7) of this section by making written request to the district’s insurer, or in the case of a self-insured district, the director, with coverage to begin no sooner than the date the request is received by the insurer or director. The request for coverage shall include a description of the work to be performed under the project and an estimate of the number of participating trainees. The insurer or director shall accept a request that meets the criteria of this section.

Rhode Island

SB 242 was:
- Passed by the first chamber on February 13, 2019
- Included in NCCI’s February 22, 2019 Legislative Activity Report (RLA-2019-06)
- Amended and passed by the second chamber on March 19, 2019

SB 242 amends section 28-53-7. Payments to Employees of Uninsured Employers of the Rhode Island General Laws to provide that payments from the uninsured protection fund to employees of uninsured employers would apply to injuries that occur on or after September 1, 2019.

Note: SB 242 is identical to HB 5305.

BILLS PASSING FIRST CHAMBER
The following workers compensation-related bills passed the first chamber within the one-week period ending March 22, 2019.

Iowa

SF 507 adds a new subchapter to section 85.61 of the Code of Iowa to read:
85.61 Definitions.

In this chapter and chapters 86 and 87, unless the context otherwise requires, the following definitions of terms shall prevail:

7. The words “personal injury arising out of and in the course of the employment” shall include injuries to employees whose services are being performed on, in, or about the premises which are occupied, used, or controlled by the
employer, and also injuries to those who are engaged elsewhere in places where their employer’s business requires their presence and subjects them to dangers incident to the business.

... c. Personal injuries due to idiopathic or unexplained falls from a level surface onto the same level surface do not arise out of and in the course of employment and are not compensable under this chapter.

Maryland

SB 62 adds a new uncodified section to the Annotated Code of Maryland as follows:

Uninsured Employers’ Fund—Solvency and Suspension and Resumption of Assessments—Repeal Study
(a) On or before October 1, 2019, the Executive Director of the Uninsured Employers’ Fund shall report to the Senate Finance Committee, the House Economic Matters Committee, and the Joint Committee on Workers’ Compensation Benefit and Insurance Oversight, in accordance with § 2-1246 of the State Government Article, on:
(1) the solvency of the Uninsured Employers’ Fund, including the Fund’s solvency during the period from October 1, 2009, through September 30, 2019, both inclusive; and
(2) whether the General Assembly should increase or provide authority to increase the assessment required under § 9-1007 of the Labor and Employment Article.

(b) The report required under subsection (a) of this section shall include:
(1) a discussion and analysis of claims made against the Uninsured Employers’ Fund and payments made from the Fund, including types of claims and amounts paid, from October 1, 2009, through September 30, 2019, both inclusive; and
(2) a discussion and analysis of the Uninsured Employers’ Fund’s prospective liabilities, including Bethlehem Steel Corporation hearing loss claims.

SB 160 amends section 9-503 of the Annotated Code of Maryland to read:

§ 9-503. Occupational disease—Presumption—Firefighters, fire fighting instructors, rescue squad members, advanced life support unit members, and police officers

... (c) Cancer.—A paid firefighter, paid fire fighting instructor, paid rescue squad member, paid advanced life support unit member, or a sworn member of the Office of the State Fire Marshal employed by an airport authority, a county, a fire control district, a municipality, or the State or a volunteer firefighter, volunteer fire fighting instructor, volunteer rescue squad member, or volunteer advanced life support unit member who is a covered employee under § 9-234 of this title is presumed to be suffering from an occupational disease that was suffered in the line of duty and is compensable under this title if the individual:
(1) has leukemia or prostate, rectal, throat, multiple myeloma, non-Hodgkin’s lymphoma, brain, testicular, bladder, kidney or renal cell, or breast cancer that is caused by contact with a toxic substance that the individual has encountered in the line of duty;

Note: SB 160 is identical to HB 595.

SB 854 amends sections 9-506 and 9-660 of the Annotated Code of Maryland to read:

§ 9-506. Compensation prohibited

... (b) Drugs.—A covered employee or a dependent of a covered employee is not entitled to compensation or benefits under this title as a result of an accidental personal injury, compensable hernia, or occupational disease if:

(2) the drug was not administered or taken in accordance with:
(I) the prescription of a physician; or
(II) for medical cannabis, the written certification of a certifying provider or the written instructions of a physician.

§ 9-660. Provision of medical services and treatment
(a) In general.—In addition to the compensation provided under this subtitle, if a covered employee has suffered an accidental personal injury, compensable hernia, or occupational disease the employer or its insurer promptly shall provide to the covered employee, as the Commission may require:

(3) medicine, including medical cannabis;

Rhode Island

HB 5305 amends section 28-53-7. Payments to Employees of Uninsured Employers of the Rhode Island General Laws to provide that payments from the uninsured protection fund to employees of uninsured employers would apply to injuries that occur on or after September 1, 2019.
Note: HB 5305 is identical to SB 242.

Vermont

HB 351, in part, amends section 711 of Chapter 9: Employer’s Liability And Workers’ Compensation of Title 21: Labor of the Vermont Statutes Annotated to read:

§ 711. Workers’ Compensation Administration Fund

(a) The Workers’ Compensation Administration Fund is created pursuant to 32 V.S.A. chapter 7, subchapter 5 to be expended by the Commissioner for the administration of the workers’ compensation and for costs of the occupational disease safety and health programs that are not funded by federal OSHA grants and matching State General Fund appropriations. The Fund shall consist of contributions from employers made at a rate of 1.4 percent of the direct calendar year premium for workers’ compensation insurance, one percent of self-insured workers’ compensation losses, and one percent of workers’ compensation losses of corporations approved under this chapter. Disbursements from the Fund shall be on warrants drawn by the Commissioner of Finance and Management in anticipation of receipts authorized by this section.

HB 527, in part, includes the following language:

Workers’ Compensation Rate of Contribution

For fiscal year 2020, after consideration of the formula in 21 V.S.A. Section 711(b) and historical rate trends, the General Assembly determines that the rate of contribution for the direct calendar year premium for workers’ compensation insurance shall remain at the rate of 1.4 percent. The contribution rate for self-insured workers’ compensation losses and workers’ compensation losses of corporations approved under 21 V.S.A. chapter 9 shall remain at one percent.

SB 108, in part, creates new section 712 in Chapter 9: Employer’s Liability And Workers’ Compensation of Title 21: Labor of the Vermont Statutes Annotated to read:

§ 712. Complaint of misclassification; enforcement by attorney general

(a) In addition to any other remedies provided under this chapter, an individual may file a complaint with the Attorney General that an employer has committed a violation of section 687 or 708 of this chapter by claiming that it is not an employer as defined pursuant to subdivision 601(3) of this chapter or that an individual is not a worker or employee as defined pursuant to subdivision 601(14) of this chapter.

(b) The Attorney General may investigate the complaint and may enforce the provisions of section 687 or 708 of this chapter by restraining prohibited acts, seeking civil penalties, obtaining assurances of discontinuance, and conducting civil investigations in accordance with the procedures established in 9 V.S.A. Sections 2458-2461 as though a violation of section 687 or 708 of this chapter and any related violations of the provisions of this chapter were unfair acts in commerce. Any employer, employment agency, or labor organization complained against shall have the same rights and remedies as specified in 9 V.S.A. Sections 2458-2461. The Superior Courts may impose the same civil penalties and investigation costs and order other relief to the State of Vermont or an aggrieved employee for a violation of section 687 or 708 of this chapter and any related violations of the provisions of this chapter as they are authorized to impose or order under the provisions of 9 V.S.A. Sections 2458 and 2461 in an unfair act in commerce. In addition, the Superior Courts may order restitution of wages or other benefits on behalf of an employee and may order reinstatement and other appropriate relief on behalf of an employee.

(c) If, following the investigation, the Attorney General determines that an employer has committed a violation of section 687 or 708 of this chapter, the Attorney General shall notify the Commissioners of Labor, of Financial Regulation, and of Taxes of the determination, and those Commissioners shall review whether the employer is in compliance with the laws related to employee classification that are under their jurisdiction.

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.

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<th>State Relations Executive</th>
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This report is informational and is not intended to provide an interpretation of state and federal legislation.