

# **Workers' Comp Legislative Activity**

July 15, 2020 - September 1, 2020

## **CALIFORNIA**

**AB 1107** 

Actions: 08/20/2020 Hearing held in Senate Appropriations Committee; held under submission 08/19/2020 Hearing held in Senate Appropriations Committee; placed on suspense file 08/14/2020 Hearing Held; Passed; Referred to Senate Appropriations Committee 08/07/2020 Amended 07/14/2020 Hearing Cancelled 07/02/2020 Amended 07/01/2020 Referred to Senate Governmental Organization Committee 05/26/2020 Amended 04/22/2020 Amended 05/16/2019 Referred to Senate Labor, Public Employment, and Retirement Committee 05/02/2019 Passed Assembly 04/24/2019 Hearing held; passed Committee 04/22/2019 Amended 03/26/2019 Amended 03/25/2019 Referred to Assembly Insurance Committee 02/21/2019 Introduced

**Summary:** Summary for 03/26/2019 Version. This measure exempts medical treatment requested by a primary or secondary treating physician from the utilization review process and from dispute on the grounds of medical necessity if either:

- i. the employee suffers from a serious chronic condition; or
- ii. the requested treatment has been previously authorized by the employer and the employer fails to demonstrate a change in the employees circumstances or condition which would render the treatment no longer reasonably required to cure or relieve the employee from the effects of the industrial injury.

The measure also exempts medical treatment requested by a primary or secondary treating physician from the utilization review process and from dispute on the grounds of medical necessity if the employer has established a medical provider network pursuant to Section 4616 and the requesting physician is a member of the medical provider network.

Summary for 4/22/2019 Version. The measure makes a final determination of the Administrative Director of the Division of Workers Compensation conclusive evidence that

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medical treatment was unreasonably delayed or denied.

This measure now relates to requiring documents issued by the Governor's office to be made available in multiple languages.

**Outlook:** During the August 20 hearing, the Senate Appropriations Committee held this measure under submission.

This measure is unlikely to receive further consideration.

Bill Links: 8/7/2020 Version

7/2/2020 Version 5/26/2020 Version 4/22/2020 Version 4/22/2019 Version 3/26/2019 Version 2/21/2019 Version

#### **NEBRASKA**

**LB 487** 

Actions: 08/13/2020 Failed upon adjournment

05/31/2019 Carried over to 2020 Legislative Session

03/04/2019 Hearing held

01/24/2019 Referred to Business and Labor Committee

01/22/2019 Introduced

Summary: Summary for 1/22/2019 Version. This measure permits the Nebraska Workers' Compensation Court to adopt an evidence-based drug formulary consisting of prescription drugs listed in Schedules II, III, IV and V. The formulary will apply to prescription drugs that are prescribed and dispensed for outpatient use in connection with workers' compensation claims with a date of injury on or after January 1, 2018.

A prescription drug included in the formulary adopted by the compensation court and recommended may be prescribed and dispensed without obtaining prior authorization from

the workers' compensation insurer, risk management pool or self-insured employer.

A prescription drug not included in the formulary adopted by the compensation court or that is included but not recommended is presumed to be reasonable if prior authorization for such drugs is obtained from the workers' compensation insurer, risk management pool or self-insured employer.



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The measure requires the compensation court to consult with stakeholders regarding the adoption of a drug formulary. The stakeholders should include employers, insurers, private sector employee representatives, public sector employee representatives, treating physicians actively practicing medicine, pharmacists, and attorneys representing injured workers or employers.

Any party may request a finding by an independent medical examiner if the workers' compensation insurer, risk management pool or self-insured employer denies payment for a prescription drug that is not included in the formulary adopted by the compensation court or that is included but not recommended in such formulary or if prior authorization is denied.

The compensation court may adopt and promulgate rules and regulations necessary to implement this provision.

**Outlook:** This measure failed upon the adjournment of the Nebraska Legislature on August 13. The measure is ineligible for further consideration.

Bill Links: 1/22/2019 Version

## **PENNSYLVANIA**

**SR 345** 

Actions: 07/13/2020 Introduced; Referred to Senate Rules and Executive Nominations Committee.

**Summary:** Summary for 7/13/2020 Version. This measure states that the construction industry is encouraged to promote awareness of the dangers of opioids and prescription drug abuse with workers in the industry and facilitate discussions and events such as "Drug Take Back" events to combat the opioid and prescription drug abuse epidemic in Pennsylvania's construction industry. This resolution will be effective once it is adopted by the Senate.

**Outlook:** On July 13, this measure was introduced and referred to the Senate Rules and Executive Nominations Committee. This measure is eligible to be scheduled for a hearing.

Bill Links: 7/13/2020 Version





## **RHODE ISLAND**

SB 2915

Actions: 07/22/2020 Signed by Governor

07/16/2020 Passed House 07/13/2020 Passed Senate

07/03/2020 Introduced; Referred to Senate Labor Committee

**Summary:** Summary for 7/3/2020 Version. The measure is applicable to employees, uninsured employers, health care providers, and health insurance plans.

The measure stipulates the worker's compensation court will hear all petitions for payment from the fund, provided that any petition for the commencement of compensation benefits filed against the uninsured protection fund must be accompanied or preceded by a separate petition for the commencement of compensation benefits timely filed against the uninsured unless the petition to be filed against the uninsured employer is otherwise enjoined or prevented by law.

The measure stipulates in the case that the uninsured employer makes payment of any monies to the employee to compensate the employee in any way for the alleged work injury lost wages or medical expenses, the fund must be entitled to a credit for all amounts received by, or on behalf of, the employee, including, but not limited to, amounts paid to the employee by any other party for the employee's lost wages against any future benefits payable directly to the employee.

The measure amends the amount to \$30, in which a health care provider may charge the insurer or self-insured employer for the notification of compensable injury forms or notice of release forms for affidavits filed pursuant to the measure

The measure amends the number of weeks to 10 weeks from the date of injury, then every 10 weeks thereafter until maximum medical improvement, for any physician or health care provider must file an itemized bill and an affidavit with the insurer, the employee, the employee's attorney, and the medical advisory board.

The measure reduces the frequency to ten weeks for which an employee's medical provider must render a status report, concerning their anticipated medical treatment plans, an itemization of their work restrictions and capabilities, and if they have reached maximum medical improvement. The measure took effect on July 22, 2020.

Outlook: This measure has been signed by Governor Gina Raimondo (D). This measure went into

effect on July 22, 2020.

Bill Links: 7/3/2020 Version

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