SENATE BILL NO. 428

INTRODUCED BY THAYER, NATHE, THOMAS, NOBLE, MEYER, DRISCOLL, PAVLOVICH, GRADY, MAZUREK, WILLIAMS, SMITH, SQUIRES, GLASER, RAPP-SVRCEK, RUSSELL, AKLESTAD, DEVLIN, RASMUSSEN, GRINDE, MARKS

BY REQUEST OF THE GOVERNOR

IN THE SENATE

IN	THE SENATE
FEBRUARY 15, 1989	INTRODUCED AND REFERRED TO COMMITTEE ON BUSINESS & INDUSTRY.
	FIRST READING.
FEBRUARY 17, 1989	COMMITTEE RECOMMEND BILL DO PASS AS AMENDED. REPORT ADOPTED.
FEBRUARY 20, 1989	PRINTING REPORT.
	SECOND READING, DO PASS.
	ENGROSSING REPORT.
FEBRUARY 21, 1989	THIRD READING, PASSED. AYES, 46; NOES, 4.
	TRANSMITTED TO HOUSE.
IN	THE HOUSE
FEBRUARY 21, 1989	INTRODUCED AND REFERRED TO COMMITTEE ON LABOR & EMPLOYMENT RELATIONS.
FEBRUARY 28, 1989	FIRST READING.
MARCH 22, 1989	COMMITTEE RECOMMEND BILL BE CONCURRED IN AS AMENDED. REPORT ADOPTED.
MARCH 28, 1989	SECOND READING, CONCURRED IN AS AMENDED.
MARCH 29, 1989	THIRD READING, CONCURRED IN. AYES, 85; NOES, 11.

RETURNED TO SENATE WITH AMENDMENTS.

IN THE SENATE

APRIL 4, 1989

RECEIVED FROM HOUSE.

SECOND READING, AMENDMENTS

CONCURRED IN.

APRIL 6, 1989

THIRD READING, AMENDMENTS

CONCURRED IN.

SENT TO ENROLLING.

REPORTED CORRECTLY ENROLLED.

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1	BILL NO. 428
2 A	INTRODUCED BY WALL WATHE Thomas
Jay J	AN REQUEST OF THE GOVERNOR
4	heard of the Chart Merson land man Mark
5	A BILL FOR AN ACT ENTITLED: "AN ACT CREATING THE STATE
6	COMPENSATION MUTUAL INSURANCE FUND TO INSURE EMPLOYERS FOR
7	WORKERS' COMPENSATION AND OCCUPATIONAL DISEASE LIABILITY;
8	PROVIDING FOR A BOARD OF DIRECTORS; ESTABLISHING THE POWERS
9	AND DUTIES OF THE BOARD AND THE CHIEF EXECUTIVE OFFICER OF
10	THE STATE COMPENSATION MUTUAL INSURANCE FUND; TRANSFERRING
11	THE OFFICE OF WORKERS' COMPENSATION JUDGE TO THE DEPARTMENT
12	OF LABOR; AMENDING SECTIONS 2-15-1014, 2-15-1702, 2-18-103,
13	33-17-502, 33-18-212, 39-71-116, 39-71-201, 39-71-203,
14	39-71-206, 39-71-306 THROUGH 39-71-308, 39-71-403,
15	39-71-421, 39-71-604, 39-71-704, 39-71-901, 39-71-908,
16	39-71-910, 39-71-911, 39-71-913, 39-71-2303, 39-71-2307,
17	39-71-2308, 39-71-2321 THROUGH 39-71-2323, 39-71-2325,
18	39-71-2327, 39-71-2501, 39-72-201, AND 39-72-310, MCA;
19	REPEALING SECTIONS 39-71-2301, 39-71-2302, 39-71-2304
20	THROUGH 39-21-2306, AND 39-71-2324, MCA; AND PROVIDING
21	EFFECTIVE DATES."
22	
23	STATEMENT OF INTENT
24	A statement of intent is required for this bill because
25	[section 8] grants rulemaking authority to the newly created

state fund to adopt or repeal rules or amend existing rules 1 to implement the new state compensation mutual insurance fund. The chief purposes of creating the state fund as a 3 mutual insurer and placing it in a department other than the 5 department of labor are: 6 7

- remove the inherent conflict between the interests of the workers' compensation division regulating all workers' compensation insurers in this state, including the state compensation insurance fund, and the interests of the state fund as a workers' compensation insurer; and
 - (2) to ensure the solvency of the new state fund.

The legislature recognizes that the fund actuary has determined that at June 30, 1988, a full funding deficiency of \$157.3 million existed for the present state compensation insurance fund. The legislature intends that the new state compensation mutual insurance fund adopt rules in a manner that will assure the solvency of the new fund. Rates must be set on an actuarially sound basis as required by state law. To further ensure the solvency of the state fund, it is not the workers' compensation insurer of last resort, as the state fund presently is. The new state fund would not be bound to insure all employers who apply to it for workers' compensation coverage, except for state agencies. It could refuse to insure an employer it considered a poor risk.

As the primary means of ensuring the solvency of the state fund, it must institute safety programs and set rates in a manner that awards employers who provide a safe working environment and penalizes employers who do not.

The legislature further intends that the new state fund institute programs to automate the processing of claims and payment of benefits. The state fund may contract out to the private sector certain claims administration and servicing functions if the state fund determines it to be cost-effective.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. Section 1. Intent and purpose of plan. It is the intent and purpose of the state fund to allow employers the option to insure their liability for workers' compensation and occupational disease coverage with a nonprofit, independent public corporation. The state fund is a domestic mutual insurer. It is not required to insure any employer in this state requesting coverage, and it may refuse coverage for an employer, e cept a state agency, that the state fund determines to be a bad risk. The state fund must be neither more nor less than self-supporting. Premium rates must be set at a level sufficient to fund the insurance program, including the costs of administration, benefits, and adequate reserves. For the purpose of keeping

the state fund solvent, it must implement safety programs to reward an employer with a good safety record and penalize an employer with a poor safety record.

NEW SECTION. Section 2. Definitions. Unless the context requires otherwise, in [sections 1, 2, and 4 through 12] the following definitions apply:

- (1) "Board" means the board of directors of the state compensation mutual insurance fund provided for in [section 3].
- 10 (2) "Department" means the department of
 11 administration provided for in 2-15-1001.
 - (3) "Executive director" means the chief executive officer of the state compensation mutual insurance fund.
 - (4) "State fund" means the state compensation mutual insurance fund provided for in [section 4]. It is also known as compensation plan No. 3 or plan No. 3.

NEW SECTION. Section 3. Board of directors of the state compensation mutual insurance fund. (1) There is a board of directors of the state compensation mutual insurance fund.

- (2) The board is allocated to the department for administrative purposes only as prescribed in 2-15-121. However, the board may employ its own staff.
- (3) The board may provide for its own office space and the office space of the state fund.

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(4) The board consists of five members appointed by the governor. The executive director of the state fund is an ex officio nonvoting member.

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- (5) At least three of the five members shall represent state fund policyholders and may be employees of state fund policyholders. At least three members of the board shall represent private, for-profit enterprises. A member of the board may not:
- 9 (a) represent or be an employee of an insurance company that is licensed to transact workers' compensation 10 insurance under compensation plan No. 2; or 11
- 12 (b) be an employee of a self-insured employer under compensation plan No. 1. 13
 - (6) A member is appointed for a term of 4 years. The terms of board members must be staggered. A member of the board may serve no more than two 4-year terms. A member shall hold office until a successor is appointed and qualified.
 - (7) The board is designated as a quasi-judicial board for the purposes of 2-15-124, except that the requirement that at least one member be an attorney does not apply.
 - NEW SECTION. Section 4. State compensation mutual insurance fund created. There is a state compensation mutual insurance fund known as the state fund that is a nonprofit, independent public corporation established for the purpose

- of allowing an option for employers to insure their 1 liability for workers' compensation and occupational disease coverage under this chapter. The state fund exists as a 3 domestic mutual insurer as defined in 33-3-102.
 - NEW SECTION. Section 5. Management of state fund -powers and duties of the board. (1) The management and control of the state fund is vested solely in the board.
- (2) The board is vested with full power, authority, and jurisdiction over the state fund. The board may perform all acts necessary or convenient in the exercise of any power, authority, or jurisdiction over the state fund, either in the administration of the state fund or in 12 connection with the insurance business to be carried on 13 under the provisions of [sections 1, 2, and 4 through 12], 14 as fully and completely as the governing body of a private 15 mutual insurance carrier, in order to fulfill the objectives 16 and intent of [sections 1, 2, and 4 through 12]. 17
- NEW SECTION. Section 6. Personal liability excluded. The members of the board, the executive director, and employees of the state fund are not liable personally, 20 either jointly or severally, for any debt or obligation 21 created or incurred by the state fund. 22
- of executive NEW SECTION. Section 7. Appointment 23 director -- management staff. The board shall appoint an 24 executive director of the state fund who has general 25

- responsibility for the operations of the state fund. The
 executive director must have executive level experience,
 with knowledge of the insurance industry. The executive
 director must receive compensation as set by the board and
 serve at the pleasure of the board. The executive director
 may hire the management staff of the state fund, each of
 whom serves at the pleasure of the executive director.
 - <u>NEW SECTION.</u> **Section 8.** Powers of the state fund --rulemaking. For the purposes of carrying out its functions, the state fund may:
 - (1) insure any employer for workers' compensation and occupational disease liability as the coverage is required by the laws of this state and, in connection with the coverage, provide employers' liability insurance. The state fund may charge a minimum yearly premium to cover its administrative costs for coverage of a small employer.
 - (2) sue and be sued;

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- 18 (3) adopt, amend, and repeal rules relating to the 19 conduct of its business;
- 20 (4) enter into contracts relating to the
 21 administration of the state fund, including claims;
 22 management, servicing, and payment;
 - (5) collect and disburse money received;
- 24 (6) adopt classifications and charge premiums for the 25 classifications so that the state fund will be neither more

- nor less than self-supporting. The state fund must belong
 to the national council on compensation insurance and shall
 use the classifications of employment adopted by the
 national council.
 - (7) pay the amounts determined due under a policy of insurance issued by the state fund;
 - (8) hire personnel;

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- (9) declare dividends if there is an excess of assets over liabilities. However, dividends may not be paid until the unfunded liability of the state fund is eliminated.
- (10) perform all functions and exercise all powers of a domestic mutual insurer that are necessary, appropriate, or convenient for the administration of the state fund.
- NEW SECTION. Section 9. Property of the state fund --14 investment required. All premiums and other money paid to 15 the state fund, all property and securities acquired through 16 the use of money belonging to the state fund, and all 17 interest and dividends earned upon money belonging to the 18 state fund are the sole property of the state fund and must 19 be used exclusively for the operations and obligations of 20 the state fund. The money collected by the state fund may 21 not be used for any other purpose. However, state fund money 22 must be invested by the board of investments provided for in 23 2-15-1808. 24
- 25 NEW SECTION. Section 10. State fund a mutual

- 1 insurance carrier. (1) The state fund is a domestic mutual 2 insurer controlled by the laws relating to the regulation of
- domestic mutual insurers in this state. However, the
- 4 formation, incorporation, bylaws, and bonding requirements
- 5 set forth in Title 33, chapter 3, do not apply to the state
 - fund.

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- 7 (2) The commissioner of insurance may not terminate 8 the operations of the state fund based on insolvency due to
- 9 the unfunded liability that is recognized to exist on the
- 10 date of passage of [sections 1, 2, and 4 through 12] and
- 11 recognized in [section 12].
- 12 (3) The state fund is subject to the premium tax 13 liability for insurers as provided in 33-2-705.
- NEW SECTION. Section 11. Assets and liabilities of 14
- 15 prior state fund. All assets and funds held by the state
- 16 compensation insurance fund established in 39-71-2301
- 17 through 39-71-2308 and 39-71-2321 through 39-71-2327 must be
- 18 transferred to the state fund, and the state fund shall
- 19 assume liability for all outstanding claims and indebtedness
- 20 of the previously existing state fund.
- 21 NEW SECTION. Section 12. Unfunded liability. (1) It
- 22 is recognized at the date of creation of the state fund that
- 23 there exists an unfunded liability that is being assumed by
- 24 newly created state fund for the prior state
- 25 compensation insurance fund's liability for industrial

- injuries and occupational diseases that occurred prior to
- July 1, 1987. To assist the state fund in alleviating the
- unfunded liability, the premium taxes collected by the state 3
- from the following sources must be transferred to the newly
- created state fund:
 - (a) the state fund:
- (b) excess or reinsurance policies on self-insurers 7
- writing coverage on a self-insurer's workers' compensation
- 9 program under compensation plan No. 1; and
 - (c) private insurance carriers writing workers'
- compensation insurance under compensation plan No. 2. 11
- (2) The premium taxes must be transferred to the state 12
- fund for payment of the unfunded liability. The premium tax 13
- payments must continue until the unfunded liability has been 14
- paid, at which time the premium taxes must be paid to the 15
- general fund. 16

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- NEW SECTION. Section 13. Assigned risk plan. (1) The 17
- commissioner of insurance shall promulgate and administer a 18
- plan o equitably apportion among the state fund, plan 19
- No. 3, and private insurers, plan No. 2, the coverage 20
- required by this chapter for employers who are unable to 21
- procure coverage through ordinary methods. 22
- (2) All plan No. 2 insurers and the state fund shall 23
- subscribe to and participate in the assigned risk plan. 24
 - (3) If an insurer refuses to accept its equitable

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- apportionment under the assigned risk plan, the commissioner of insurance may suspend or revoke the insurer's authority to issue workers' compensation coverage contracts in this state.
- Section 14. Section 39-71-116, MCA, is amended to 5 6 read:
 - *39-71-116. Definitions. Unless the context otherwise requires, words and phrases employed in this chapter have the following meanings:
 - (1) "Average weekly wage" means the mean weekly earnings of all employees under covered employment, as defined and established annually by the Montana department of labor and industry. It is established at the nearest whole dollar number and must be adopted by the division of workers'-compensation prior to July 1 of each year.
 - (2) "Beneficiary" means:

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- (a) a surviving spouse living with or legally entitled to be supported by the deceased at the time of injury:
 - (b) an unmarried child under the age of 18 years;
- 20 (c) an unmarried child under the age of 22 years who 21 is a full-time student in an accredited school or is 22 enrolled in an accredited apprenticeship program:
- 23 (d) an invalid child over the age of 18 years who is 24 dependent upon the decedent for support at the time of 25 injury;

- (e) a parent who is dependent upon the decedent for support at the time of the injury (however, such a parent is a beneficiary only when no beneficiary, as defined in subsections (2)(a) through (2)(d) of this section, exists); and
- (f) a brother or sister under the age of 18 years if dependent upon the decedent for support at the time of the injury (however, such a brother or sister is a beneficiary only until the age of 18 years and only when no beneficiary, as defined in subsections (2)(a) through (2)(e) of this section, exists).
- 12 (3) "Casual employment" means employment not in the usual course of trade, business, profession, or occupation of the employer.
- (4) "Child" includes a posthumous child, a dependent 15 stepchild, and a child legally adopted prior to the injury. 16
- (5) "Days" means calendar days, unless otherwise 17 18 specified.
- 19 (6) "Department" means the department of labor and 20 industry.
- (/) "Division" 21 means the division of workers' 22 compensation insurance compliance of the department of labor 23 and industry provided for in 2-15-1702.
- 24 (8) "Fiscal year" means the period of time between 25 July 1 and the succeeding June 30.

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(9) "Insurer" means an employer bound by compensation plan No. 1, an insurance company transacting business under compensation plan No. 2, the state compensation-insurance fund under compensation plan No. 3, or the uninsured employers' fund provided for in part 5 of this chapter.

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- (10) "Invalid" means one who is physically or mentallyincapacitated.
 - (11) "Maximum healing" means the status reached when a worker is as far restored medically as the permanent character of the work-related injury will permit.
 - (12) "Order" means any decision, rule, direction, requirement, or standard of the division or any other determination arrived at or decision made by the division.
 - (13) "Payroll", "annual payroll", or "annual payroll for the preceding year" means the average annual payroll of the employer for the preceding calendar year or, if the employer shall not have operated a sufficient or any length of time during such calendar year, 12 times the average monthly payroll for the current year; provided, that an estimate may be made by the division for any employer starting in business where no average payrolls are available, such estimate to be adjusted by additional payment by the employer or refund by the division, as the case may actually be, on December 31 of such current year.
 - (14) "Permanent partial disability" means a condition,

- 1 after a worker has reached maximum healing, in which a
 2 worker:
 - (a) has a medically determined physical restriction as a result of an injury as defined in 39-71-119; and
 - (b) is able to return to work in the worker's job pool pursuant to one of the options set forth in 39-71-1012 but suffers impairment or partial wage loss, or both.
- 8 (15) "Permanent total disability" means a condition
 9 resulting from injury as defined in this chapter, after a
 10 worker reaches maximum healing, in which a worker is unable
 11 to return to work in the worker's job pool after exhausting
 12 all options set forth in 39-71-1012.
- 13 (16) The term "physician" includes "surgeon" and in 14 either case means one authorized by law to practice his 15 profession in this state.
- 16 (17) The "plant of the employer" includes the place of
 17 business of a third person while the employer has access to
 18 or control over such place of business for the purpose of
 19 carrying on his usual trade, business, or occupation.
- 20 (18) "Public corporation" means the state or any county, municipal corporation, school district, only, city under commission form of government or special charter, town, or village.
- 24 (19) "Reasonably safe place to work" means that the 25 place of employment has been made as free from danger to the

life or safety of the employee as the nature of the employment will reasonably permit.

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- (20) "Reasonably safe tools and appliances" are such tools and appliances as are adapted to and are reasonably safe for use for the particular purpose for which they are furnished.
- (21) "Temporary total disability" means a condition resulting from an injury as defined in this chapter that results in total loss of wages and exists until the injured worker reaches maximum healing.
- 11 (22) "Year", unless otherwise specified, means calendar
 12 year."
- 13 Section 15. Section 39-71-201, MCA, is amended to 14 read:
 - compensation administration fund. (1) A workers' compensation administration fund is established out of which all costs of administering the Workers' Compensation and Occupational Disease Acts and the various occupational safety acts the division must administer are to be paid upon lawful appropriation. The following moneys money collected by the division shall must be deposited in the state treasury to the credit of the workers' compensation administrative fund and shall must be used for the administrative expenses of the division:
 - (a) all fees and penalties provided in 39-71-205 and

39-71-304;

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- (b) all fees paid for inspection of boilers and issuance of licenses to operating engineers as required by law;
- (c) all fees paid from an assessment on each plan No. 5 1 employer, plan No. 2 insurer, and plan No. 3, the state insurance fund. The assessments shall must be levied against the preceding calendar year's gross annual payroll of the plan No. 1 employers and the gross annual direct premiums collected in Montana on the policies of the plan 10 No. 2 insurers, insuring employers covered under the 11 chapter, during the preceding calendar year. However, no 1.2 assessment of the plan No. 1 employer or plan No. 2 insurer 13 shall may be less than \$200. The assessments shall must be 14 sufficient to fund the direct costs identified to the three 15 plans and an equitable portion of the indirect costs based 16 on the ratio of the preceding fiscal year's indirect costs 17 distributed to the plans, using proper accounting and cost 18 allocation procedures. Plan No. 3 shall must be assessed an 19 amount sufficient to fund its direct costs and an equitable 20 portion of the indirect costs as referred to above. Other 21 sources of revenue, including unexpended funds from the 22 preceding fiscal year, shall must be used to reduce the 23 costs before levying the assessments. 24
 - (2) The administration fund shall must be debited with

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- expenses incurred by the division in the general 1 administration of the provisions of this chapter, including 2 the salaries of its members, officers, and employees and the 3 travel expenses of the members, officers, and employees, as Λ 5 provided for in 2-18-501 through 2-18-503, as amended, 6 incurred while on the business of the division either within 7 or without the state.
- (3) Disbursements from the administration money shall 8 must be made after being approved by the division upon claim 9 therefor." 10
- 11 Section 16. Section 39-71-203, MCA, is amended to read: 12
- "39-71-203. Powers of division -- rules ---staffing. 13 (1) The division is hereby vested with full power, 14 authority, and jurisdiction to do and perform any and all 15 things; -- whether -- herein -- specifically -- designated --- or --- in 16 addition -- thereto; that are necessary or convenient in the 17
- exercise of any power, authority, or jurisdiction conferred 18
- 19 upon it under this chapter.
- (2) The division may adopt rules to carry out the 20 21 provisions of this chapter.
- 22 (3)--The-division-shall-employ-sufficient-personnel--to allow--it--th -meet-the-claims-processing-goals-contained-in 23 39-71-604:-The-division-shall--implement--staffing--patterns 24 that-are-supported-by-indicators-of-workload---The-open-file 25

- 1 is the -workload--indicator--for-elaims-processing, and the number of open claims per-claims-examiner-may--not--be--less 3 than--300,--The--claims--support--staff;-including-the-file; medical-may.-and-new-claims-units;-may-not-exceed--two--PTEs per--claims--examiner---The--administrative-and-underwriting 6 staffing-must-be-based--on--the--number--of--premium--paying 7 policyholders---and--may--not--exceed--1-4--PTEs--per--1-000 8 policyholders:
 - f41--The-division-administrator-shall-submit-a--revised operation--plan-to-the-budget-office-for-review-and-approvat and-to-the-legislative-finance-committee-for-review-whenever increases-or-decreases-of-staff-are-necessary--to--implement the-provisions-of-subsection-(3).
 - f5;--Punds-from-the-state-special-revenue-fund-shall-be used-to-implement-subsection-(3)+"
- Section 17. Section 39-71-206, MCA, is amended to 16 17 read:
 - *39-71-206. Legal advisers adviser of division and state fund. (1) The attorney general shall-be is the legal adviser of the division and the state fund and shall represent it either entity in all proceedings whenever-so if requested by the division or state fund any-member-thereof.
- 12)--The-division-may--in-the-investigation-and-defense of-eases-under-plan-No--3-of-the Workers1-Compensation--Act; employ--such--other--attorney--or-legal adviser-as-it-deems 25

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necessary-and--pay--for--the--same--out--of--the--industrial insurance-account-in-the-expendable-trust-fund."

Section 18. Section 39-71-306, MCA, is amended to 3 read:

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*39-71-306. Plan-one-employers-and-plan--two--insurers Insurers to file duplicate receipts paid for injuries and statements of medical expenditures. Every employer -- coming under--the--provisions--of-compensation-plan-Nor-1-and-every insurer-coming-under-the-provisions-of-compensation-plan-No-2 insurer shall, on or before the 15th day of each and every month, file with the division:

- (1) duplicate receipts for all payments made during the previous month to injured workers or their beneficiaries or dependents; and
- (2) statements showing the amounts expended during the previous month for medical, surgical, and hospital services for injured workers and for the burial of deceased workers."
- Section 19. Section 39-71-307, MCA, is amended to read:

"39-71-307. Employers and insurers to lile reports of accidents. (1) Every employer of-labor and every insurer is hereby required to file with the division, under such division rules as-the-division-may-from-time to-time-make, a full and complete report of every accident to an employee arising out of or in the course of him employment and

resulting in loss of life or injury to such--person the 1 employee. Such The reports shall must be furnished to the 2 division in such the form and such detail as the division shall--from-time-to-time-prescribe prescribes and shall-make 4 must provide specific answers to all questions required by 5 the division under its rules.; except; in-case-he However, 6 if an employee is unable to answer any--such--questions; -- a 7 qood-and-sufficient-reason-shall-be-given-for-such-failure a question, he shall state the reason he is unable to answer. 9

(2) Every insurance---company insurer transacting business under this chapter shall, at the time and in the manner prescribed by the division, make and file with the division such the reports of accidents as the division may require requires."

Section 20. Section 39-71-308, MCA, is amended to 15 read: 16

*39-71-308. Neglect or refusal of public corporation to file payroll reports -- arbitrary assessment by division. Whenever-any If a public corporation insured by the state compensation--insurance fund neglects or refuses to file prescribed payroll reports of its employees, the division may levy an arbitrary assessment upon such the public corporation in an amount of \$75 for each such assessment.7 which--assessments-shall The assessment must be collected in the manner provided in this chapter for the collection of

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assessments."

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Section 21. Section 39-71-403, MCA, is amended to read:

election of plan by other public corporations. (1) Where If a state agency is the employer, the terms, conditions, and provisions of compensation plan No. 3, state fund, shall—be are exclusive, compulsory, and obligatory upon both employer and employee. Any sums necessary to be paid under the provisions of this chapter by any state agency shall—be are considered to be ordinary and necessary expense of the agency, and the agency shall make appropriation of and pay such the sums into the state compensation—insurance fund at the time and in the manner provided for in this chapter, notwithstanding that the state agency may have failed to anticipate such ordinary and necessary expense in any budget, estimate of expenses, appropriations, ordinances, or otherwise.

(2) A public corporation, other than a state agency, may elect coverage under compensation plan No. 1, employer; plan No. 2, insurer; or plan No. 3, state insurance fund; separately or jointly with any other public corporation, other than a state agency. A public corporation electing compensation plan No. 1 may purchase reinsurance. A public corporation electing compensation plan No. 1 is subject to

the same provisions as a private employer electing compensation plan No. 1.

- (3) A public corporation, other than a state agency, that elects plan No. 1 may establish a fund sufficient to pay the compensation and benefits provided for in this chapter and chapter 72 and to discharge all liabilities that reasonably incur during the fiscal year for which the election is effective. Proceeds from the fund must be used only to pay claims covered by this chapter and chapter 72 and for actual and necessary expenses required for the efficient administration of the fund.
- (4) All money in the fund established under subsection (3) not needed to meet immediate expenditures must be invested by the governing body of the public corporation, and all proceeds of the investment shall be credited to the fund."
- **Section 22.** Section 39-71-421, MCA, is amended to 18 read:
 - programs. The state compensation insurance fund, pian Nor 3, and private Private insurers, plan No. 2, may provide financial incentives to an employer who implements a formal safety program. The insurance carrier An insurer may provide to an employer a premium discount that reflects the degree of risk diminished by the implemented safety

program."

2 Section 23. Section 39-71-604, MCA, is amended to read:

"39-71-604. Application for compensation. (1) Where If a worker is entitled to benefits under this chapter, the worker shall file with the insurer or the division all reasonable information needed by the insurer to determine compensability. It is the duty of the worker's attending physician to lend all necessary assistance in making application for compensation and such proof of other matters as may be required by the rules of the division without charge to the worker. The filing of forms or other documentation by the attending physician does not constitute a claim for compensation.

- (2) Where If death results from an injury, the parties entitled to compensation or someone in their behalf shall file a claim with the insurer or the division. The claim must be accompanied with proof of death and proof of relationship, showing the parties entitled to compensation, certificate of the attending physician, if any, and such other proof as may be required by the division.
- #3}--The-goal-of-the-division-is-to-process-all--claims
 for--compensation-within-14-days-after-initial-acceptance-of
 liability-for-a-claim;"
- Section 24. Section 39-71-704, MCA, is amended to

read:

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2 "39-71-704. Payment of medical, hospital, and related
3 services -- fee schedules and hospital rates. (1) In
4 addition to the compensation provided by this chapter and as
5 an additional benefit separate and apart from compensation,
6 the following shall must be furnished:

- (a) After the happening of the injury, the insurer shall furnish, without limitation as to length of time or dollar amount, reasonable services by a physician or surgeon, reasonable hospital services and medicines when needed, and such other treatment as may be approved by the division for the injuries sustained.
- (b) The insurer shall replace or repair prescription eyeglasses, prescription contact lenses, prescription hearing aids, and dentures that are damaged or lost as a result of an injury, as defined in 39-71-119, arising out of and in the course of employment.
- (2) A relative value fee schedule for medical, chiropractic, and paramedical services provided for in this chapter, excluding hospital services, shall must be established annually by the workers' compensation division and become effective in January of each year. The maximum fee schedule must be adopted as a relative value fee schedule of medical, chiropractic, and paramedical services, with unit values to indicate the relative relationship

within each grouping of specialties. Medical fees must be 1 based on the median fees as billed to the state compensation 2 3 insurance fund during the year preceding the adoption of the schedule. The division shall adopt rules establishing 4 relative unit values, groups of specialties, the procedures 5 insurers must use to pay for services under the schedule, 6 7 and the method of determining the median of billed medical fees. These rules shall must be modeled on the 1974 revision 8 of the 1969 California Relative Value Studies. 9

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- (3) Beginning January 1, 1988, the division shall establish rates for hospital services necessary for the treatment of injured workers. Approved rates must be in effect for a period of 12 months from the date of approval. The division may coordinate this ratesetting function with other public agencies that have similar responsibilities.
- (4) Notwithstanding subsection (2), beginning January 1, 1988, and ending January 1, 1990, the maximum fees payable by insurers must be limited to the relative value fee schedule established in January 1987. Notwithstanding subsection (3), the hospital rates payable by insurers must be limited to those set in January 1988, until December 31, 1989."
- 23 **Section 25.** Section 39-71-901, MCA, is amended to read:
- 25 "39-71-901. Definitions. As used in this part, the

following definitions apply:

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- 2 (1) "Vocationally handicapped" means a person who has
 3 a medically certifiable permanent impairment which is a
 4 substantial obstacle to obtaining employment or to obtaining
 5 reemployment if the employee should become unemployed,
 6 considering such factors as the person's age, education,
 7 training, experience, and employment rejection.
 - (2) "Certificate" means documentation issued by the division of-workers'-compensation to an individual who is vocationally handicapped.
- 11 (3) "Fund" means the subsequent injury fund."
- Section 26. Section 39-71-908, MCA, is amended to read:
 - "39-71-908. Notification of fund of its potential liability under part review by fund. Not less than 90 or more than 150 days before the expiration of 104 weeks after the date of injury, the employer,—carrier,—or—the—industrial insurance—fund,—as—the—case—may—be; insurer shall notify the fund whether it is likely that compensation may be payable beyond a period of 104 weeks after the date of the injury. The fund thereafter may review, at reasonable times, such information as the employer,——carrier,——or——industrial insurance—fund insurer has regarding the accident and the
- 25 Section 27. Section 39-71-910, MCA, is amended to

nature and extent of the injury and disability."

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read:

"39-71-910. Procedure for resolving disputes as to liability under part. (1) If an employee was employed or retained in employment under the provisions of this part and a dispute or controversy arises as to payment of benefits or the liability therefor, the division shall hold a hearing and resolve all disputes. On motion made in writing by the employery-carriery-or-industrial-insurance-fund insurer, the administrator shall join the fund as a party defendant.

- (2) The division, within 5 days of the entry of an order joining the fund as a party defendant, shall give the fund written notice thereof not less than 20 days before the date of hearing and shall include the name names of the employee and the employer insurer and the date of the alleged injury or disability. The fund named as a defendant shall-have has 10 days after the date of notification to file objections to being named as a party defendant. On the date of the hearing at which the liability of the parties is determined, the hearing examiner first shall hear arguments and take evidence concerning the joinder as party defendant. If the fund has filed timely objection and if argument and evidence warrant, the hearing examiner shall grant a motion to dismiss.
- 24 (3) At the time of the hearing, the employer insurer
 25 and fund may appear, cross-examine witnesses, give evidence,

and defend both on the issue of liability of the employer

insurer to the employee and on the issue of the liability of

the fund.

(4) The hearing examiner shall make findings of fact and conclusions of law determining the respective liability of the employer insurer and the fund."

7 Section 28. Section 39-71-911, MCA, is amended to 8 read:

"39-71-911. Obligation to make payments on behalf of fund not an independent liability. The obligation imposed by this part on the employer, carrier, or industrial insurance fund insurer to make payments on behalf of the fund does not impose an independent liability on the employer, carrier, or industrial insurance fund insurer."

Section 29. Section 39-71-913, MCA, is amended to 16 read:

17 "39-71-913. Payments by fund directly to persons
18 entitled. If the employer, --carrier, --or --the--industrial
19 insurance--fund insurer does not make the payments on behalf
20 of the fund, the fund may make the payments directly to the
21 persons entitled to the payments."

Section 30. Section 39-71-2303, MCA, is amended to 23 read:

*39-71-2303. Manner of electing -- contract or policy
 of insurance -- payment of premium. The division state fund

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1 shall prescribe the procedure by which employers an employer 2 may elect to be bound by compensation plan No. 3, the 3 effective time of such the election, and the manner in which 4 such the election is terminated for reasons other than default in payment of premiums. Every employer electing to 6 be bound by compensation plan No. 3 shall must receive from 7 the division state fund a contract or policy of insurance in 8 a form approved by the division. The premium thereon--shall must be paid by the employer to the division state fund at 9 10 such times as the division--shall--prescribe state fund 11 prescribes and shall must be paid over by the division state 12 fund to the state treasurer to the credit of the industrial 13 insurance-expendable-trust state mutual insurance fund."

14 **Section 31.** Section 39-71-2307, MCA, is amended to 15 read:

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"39-71-2307. Cancellation of coverage under plan for default — thirty days' notice required. The division—is hereby-authorized—in—its—discretion—to state fund may cancel an employer's right to operate under plan No. 3 of the Workers' Compensation Act for failure to pay the premiums due. When the division—makes—an—order—canceling state fund cancels an employer's right for failure to pay premiums, the division it shall notify the employer of its intent to cancel the employer at least 30 days before the cancellation becomes effective. After the cancellation date, the employer

shall—have has the same status as an employer who is not enrolled under the Workers' Compensation Act."

3 Section 32. Section 39-71-2308, MCA, is amended to 4 read:

"39-71-2308. Collection in case of default. (1) If any an employer under plan No. 3 shall-default defaults in any payment to the division state fund, the state fund may collect the sum due may-be-collected-by-an-action-at-law in a civil action in the name of the state.7-and-such-right-of action-shall-be The right of action is cumulative.

(2) When If an employer's right to operate has been canceled by the division state fund for failure to pay premiums and when-the-division-in-its-discretion the state fund finds that the property and assets of the employer are not sufficient to pay the premiums, the division state fund may compromise the claim for premiums and accept a payment of an amount less than the total amount due."

18 **Section 33.** Section 39-71-2321, MCA, is amended to 19 read:

"39-71-2321. What to be deposited in industrial insurance expendable trust fund. All premiums, penalties, recoveries by subrogation, interest earned upon money belonging to the <u>state</u> fund, and securities acquired by or through use of money shall <u>must</u> be deposited in the industrial-insurance-expendable-trust state fund."

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Section 34. Section 39-71-2322, MCA, is amended to read:

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"39-71-2322. Money in industrial-insurance state fund held in trust — disposition of funds upon repeal of chapter. The moneys money coming into the industrial insurance—expendable—trust state fund shall must be held in trust for the purpose for which such-moneys—were the money was collected.7—and—if—this—chapter—shall—be—hereafter If this chapter is repealed, such-moneys—shall—be the money is subject to such the disposition as—may—be provided by the legislature repealing this chapter. In default—of—such the absence of a legislative provision, distribution thereof shall must be in accordance with the justice of the matter, due regard being had to obligations of compensation incurred and existing."

Section 35. Section 39-71-2323, MCA, is amended to read:

"39-71-2323. Surplus in industrial-----insurance expendable--trust state fund -- payment of dividends. If at the end of any fiscal year there exists in the industrial insurance--expendable--trust state fund an excess of assets over liabilities and a reasonable surplus, such liabilities to include necessary reserves, which excess may be divided safely, then the division state fund may declare a dividend in such the manner as the rules of the division-may state

fund prescribe to those employers who have paid premiums into the industrial-insurance-expendable-trust state fund in excess of liabilities chargeable to them in the fund for that year. In determining the amount or proportion of the balance to which the employer is entitled as dividends, the division state fund shall give consideration to the prior paid premiums and accident experience of each individual employer during the dividend year."

Section 36. Section 39-71-2325, MCA, is amended to read:

"39-71-2325. Bivision State fund to keep accounts of segregations. The division state fund shall keep an accurate account of all such the segregations of the industrial insurance—expendable-trust state fund and shall divert from the fund any sums necessary to meet monthly payments, pending the conversion into cash of any security, and in such case shall repay the same out of the cash realized from the security."

Section 37. Section 39-71-2327, MCA, is amended to read:

"39-71-2327. Earnings of industrial----insurance expendable-trust state fund to be credited to fund --improper use a felony. All earnings made by the industrial insurance-expendable-trust state fund by reason of interest paid for the deposit thereof or otherwise shall must be

- 1 credited to and become a part of the fund, and the making of 2 profit, either directly or indirectly, by any person out of 3 the use of the fund shall-constitute is a felony, and-on conviction-thereof-shall--subject--the--person--making--such 4 5 profit--to-imprisonment-in-the-state-penitentiary-for-a-term 6 not-exceeding-2-years-or-a-fine-not-exceeding-\$5,000-or-both 7 such-fine-and-imprisonment: A person convicted of an offense under this section is punishable by imprisonment in the 8 9 state prison for a term not to exceed 2 years or a fine of 10 not more than \$5,000, or both."
- 11 **Section 38.** Section 39-72-201, MCA, is amended to 12 read:
- 13 "39-72-201. Administration of chapter. This chapter
 14 shall—be <u>is</u> administered by the division of—workers*
 15 compensation."
- Section 39. Section 39-72-310, MCA, is amended to read:

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"39-72-310. Occupational disease coverage under workers' compensation plans. (1) Every employer enrolled under compensation plan No. 1 (Title-397--chapter--717--part 21), every insurer writing-workers'-compensation-coverage under compensation plan No. 2 (Title-397--chapter--717--part 22), and the state compensation--insurance fund under compensation plan No. 3 (Title-397-chapter-717--part-23), all provided for under the Workers' Compensation Act, are

- l considered to also provide full coverage for claims under
- this chapter. Any policy of insurance for workers'
- compensation coverage under the Workers' Compensation Act
- 4 written by a private insurance carrier or the state
- 5 compensation--insurance fund is considered to provide full
 - occupational disease coverage under the provisions of this
 - chapter.

- 8 (2) Except as provided in this chapter, the division 9 shall apply the appropriate provisions of Title 39, chapter
 - 71, parts 21, 22, and 23, to the administration of The
- 11 Occupational Disease Act of Montana in the same manner as
- 12 they are applied to the administration of the Workers'
- 13 Compensation Act.
- 14 (3) Under compensation plan No. 3, any premiums and
- 15 other receipts held by the division state fund for
- 16 occupational disease insurance coverage shall must be
- 17 transferred and-become part-of to the workers' compensation
- 18 industrial insurance account, and payments for occupational
- 19 disease claims by the state fund shall must be paid out of
- 20 the industrial insurance account."
- Section 40. Section 2-18-103, MCA, is amended to read:
- 22 "2-18-103. Officers and employees excepted. Parts 1
- 23 and 2 do not apply to the following positions in state
- 24 government:
- 25 (1) elected officials;

2	(3) Officers and emproyees of the registrative branch;
3	(4) judges and employees of the judicial branch;
4	(5) members of boards and commissions appointed by the
5	governor, appointed by the legislature, or appointed by
6	other elected state officials;
7	(6) officers or members of the militia;
8	(7) agency heads appointed by the governor;
9	(B) academic and professional administrative personnel
10	with individual contracts under the authority of the board
11	of regents of higher education;
1 2	(9) academic and professional administrative personnel
13	and live-in houseparents who have entered into individual
14	contracts with the state school for the deaf and blind under
15	the authority of the state board of public education;
16	(10) teachers under the authority of the department of
17	institutions;
18	(11) investment officer, assistant investment officer,

(2) county assessors and their chief deputy;

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2	Section 41. Section 33-17-502, MCA, is amended to
3	read:
4	*33-17-502. Prohibition on holding out as consultant
5	receiving fee. (1) Any person not licensed as an
6	insurance consultant in this state who identifies or holds
7	himself out to be an insurance consultant without having
8	been licensed as an insurance consultant under this part or
9	any person who uses any other designation or title which is
10	likely to mislead the public and holds himself out in any
11	manner as having particular insurance qualifications other
12	than those for which he may be otherwise licensed or
13	otherwise qualified is quilty of a misdemeanor and upon
14	conviction shall be fined \$1,500.
-	• •
15	(2) Any person not licensed as an insurance consultant
16	with respect to the relevant kinds of insurance who receives
17	any fee for examining, appraising, reviewing, or evaluating

with regard to any of the above without first having been
licensed by the commissioner as an insurance consultant is
guilty of a misdemeanor and upon conviction shall be fined

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compensation mutual insurance fund."

- \$1,500.(3) Nothing in this part applies to:
- 25 (a) licensed attorneys at law in this state acting in

executive director, and three professional staff positions

(12) four professional staff positions under the board

(13) assistant director for security of the Montana

(14) executive director and employees of the state

of the board of investments:

state lottery; and

of oil and gas conservation; and

any insurance policy, annuity or pension contract, plan, or

program or who shall make recommendations or give advice

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read:

their professional capacity;

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- 2 (b) an actuary or a certified public accountant who
 3 provides information, recommendations, advice, or services;
 4 in his professional capacity if neither he nor his employer
 5 receives any compensation directly or indirectly on account
 6 of any insurance, bond, annuity or pension contract that
 7 results in whole or part from that information,
 8 recommendation, advice, or services; or
- 9 (c) a duly licensed casualty insurance agent who
 10 accepts a fee from an insured for placement through the
 11 state compensation <u>mutual</u> insurance fund as provided in
 12 33-18-212."
- 13 **Section 42.** Section 33-18-212, MCA, is amended to 14 read:
 - "33-18-212. Illegal dealing in premiums -- improper charges for insurance. (1) No A person shall may not willfully collect any sum as premium or charge for insurance, which insurance is not then provided or is not in due course to be provided (subject to acceptance of the risk by the insurer) by an insurance policy issued by an insurer as authorized by this code.
- 22 (2) No A person shall may not willfully collect as
 23 premium or charge for insurance any sum in excess of or less
 24 than the premium or charge applicable to such insurance and,
 25 as specified in the policy, in accordance with the
- applicable classifications and rates as filed with and 2 approved by the commissioner; or in cases where classifications, premiums, or rates are not required by this code to be so filed and approved, such premiums and charges shall may not be in excess of or less than those specified in the policy and as fixed by the insurer. This provision 7 shall may not be deemed to prohibit the charging and 8 collection, by surplus lines agents licensed under chapter 9 2, part 3, of the amount of applicable state and federal 10 taxes in addition to the premium required by the insurer. It shall may not be deemed considered to prohibit the charging 11 12 and collection, by a life insurer, of amounts actually to be 13 expended for medical examination of an applicant for life insurance or for reinstatement of a life insurance policy. 14 15 The provision of this subsection does not prohibit the 16 collection from an insured of a placement fee, not to exceed 7 1/2% of the annual premium, for placement through the 17 18 state compensation mutual insurance fund by a duly licensed 19 casualty insurance agent. This placement fee is not a 20 premium as defined in 33-15-102.

of

(3) Each violation of this section shall--be

Section 43. Section 2-15-1702, MCA, is amended to

workers'

compensation

punishable under 33-1-104."

"2-15-1702. Division

- insurance compliance head. (1) There is a division of workers' compensation insurance compliance within the department. The division head is an administrator appointed by the governor as are directors in accordance with 2-15-111.
- 6 (2) The division is allocated to the department for 7 administrative purposes only as prescribed in 2-15-121. 8 However, the division may hire its own personnel, and 9 2-15-121(2)(d) does not apply."
- Section 14. Section 2-15-1014, MCA, is amended to read:

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- "2-15-1014. Office of workers' compensation judge -allocation -- appointment -- salary. (1) There is the office
 of workers' compensation judge. The office is allocated to
 the department of administration labor for administrative
 purposes only as prescribed in 2-15-121.
- (2) The governor shall appoint the workers' compensation judge for a term of 6 years in the same manner provided by Title 3, chapter 1, part 10, for the appointment of supreme or district court judges. A vacancy shall must be filled in the same manner as the original appointment.
- (3) To be eligible for workers' compensation judge, a person must:
- (a) have the qualifications necessary for district
 court judges found in Article VII, section 9, of the Montana

1 constitution;

- 2 (b) devote full time to the duties of workers'
 3 compensation judge and not engage in the private practice of
 4 law.
- 5 (4) The workers' compensation judge is entitled to the 6 same salary and other emoluments as that of a district judge 7 but shall must be accorded retirement benefits under the 8 public employees' retirement system."
- 9 Section 45. Section 39-71-2501, MCA, is amended to 10 read:
- 11 "39-71-2501. (Temporary) Definitions. As used in this
 12 part, the following definitions apply:
- 13 (1) "Board" means the board of examiners created in 2-15-1007.
- 15 (2) "Department" means the department of labor and 16 industry provided for in 2-15-1701.
 - (3) "Employer" has the meaning set forth in 39-71-117.
- 18 (4) "Payroll" means the payroll of an employer for 19 each of the calendar quarters ending March 31, June 30, 20 September 30, and December 31, for all employments covered 21 under 39-71-401.
- 22 (5) "State fund" means the state compensation 23 insurance fund referred to in-39-71-2381.
- 24 (6) "Tax" means the workers' compensation payroll tax 25 provided for in 39-71-2503.

- 1 (7) "Tax account" means the workers' compensation tax 2 account created by 39-71-2504. (Terminates June 30,
- 3 1991--sec. 10, Ch. 664, L. 1987.)"
- 4 NEW SECTION. Section 46. Repealer. Sections
- 5 39-71-2301, 39-71-2302, 39-71-2304 through 39-71-2306, and
- 6 39-71-2324, MCA, are repealed.
- 7 NEW SECTION. Section 47. Extension of authority. Any
- 8 existing authority to make rules on the subject of the
- 9 provisions of [this act] is extended to the provisions of
- 10 (this act).
- 11 NEW SECTION. Section 48. Codification instruction.
- 12 (1) [Sections 1, 2, and 4 through 12] are intended to be
- 13 codified as an integral part of Title 39, chapter 71, part
- 14 23, and the provisions of Title 39, chapter 71, part 23,
- apply to [sections 1, 2, and 4 through 12].
- 16 (2) [Section 3] is intended to be codified as an
- 17 integral part of Title 2, chapter 15, part 10, and the
- 18 provisions of Title 2, chapter 15, part 10, apply to
- 19 [section 3].
- 20 (3) [Section 13] is intended to be codified as an
- 21 integral part of Title 39, chapter 71, and the provisions of
- 22 Title 39, chapter 71, apply to [section 13].
- NEW SECTION. Section 49. Reorganization procedure.
- 24 The provisions of sections 2-15-131 through 2-15-137 govern
- 25 the creation of the state compensation mutual insurance fund

- 1 and the transfer of the various functions contained in [this
- 2 act] from the state workers' compensation fund to the state
- 3 compensation mutual insurance fund.
- 4 NEW SECTION. Section 50. Implementation. (1) The
- 5 governor shall by executive order implement the provisions
 - of [this act].

- 7 (2) The governor may by executive order assign to the
- state compensation mutual insurance fund, in a manner
- 9 consistent with [this act], functions allocated to the
- workers' compensation state fund provided for in Title 39,
- 11 chapter 71, part 23, by the 51st legislature and not
- 12 transferred by [this act].
- 13 NEW SECTION. Section 51. Effective dates. (1)
- 14 (Sections 3, 7, 50, and this section) are effective on
- 15 passage and approval.
- 16 (2) [Sections 1, 2, 4 through 6, and 8 through 49] are
- 17 effective upon signing of the executive order under [section
- 18 50] or on October 1, 1989, whichever occurs earlier.

-End-

STATE OF MONTANA - FISCAL NOTE

Form BD-15

In compliance with a written request, there is hereby submitted a Revised Fiscal Note for SB428, as introduced.

DESCRIPTION OF PROPOSED LEGISLATION:

"An act creating the State Compensation Mutual Insurance Fund to insure employers for Workers Compensation and Occupational Disease liability; providing for a Board of Directors; establishing the powers and duties of the Board and the Chief Executive Officer of the State Compensation Mutual Insurance Fund; transferring the Office of Workers' Compensation Judge to the Department of Labor; amending Sections 2-15-1014, 2-15-1702, 2-18-103, 33-17-502, 33-18-212, 39-71-116, 39-71-201, 39-71-203, 39-71-206, 39-71-306 through 39-71-308, 39-71-403, 39-71-421,39-71-604, 39-71-704, 39-71-901, 39-71-908, 39-71-910, 39-71-911, 39-71-913, 39-71-2303, 39-71-2307, 39-71-230871-2321 through 39-71-2323, 39-71-2325, 39-71-2327, 39-71-2501, 39-72-201, and 39-72-310, MCA; repealing Sections 39-71-2301, 39-71-2302, 39-71-2304 through 39-71-2306, and 39-71-2324, MCA; and providing effective dates."

NOTE: Agencies' assumptions and individual fiscal impact statements follow on subsequent pages.

FISCAL	IMPACT:

FISCAL INFACT:												
(Agencies Combined)				FY90						FY91		
GENERAL FUND:	Curre	nt	P	roposed			Curr	ent	P	roposed		
Revenue:	Law			Law	Dif	ference	La	W		Law	<u>Di f</u>	ference
Premium Tax -	_						- ·					
Private Carrier	s\$2,170,	000	\$	-0-	(\$2	,170,000)	\$2,388,	000	\$	-0-	(\$2	2,388,000)
Net Impact:					(\$2	,170,000)					(\$2	2,388,000)
STATE SPECIAL REVEN	UE:											
Revenue:												
Assessments -												
Workers Comp	\$9,525,	912	\$9,	716,759	\$	190,847	\$9,444,	727	\$9,	595,574	\$	150,847
Premium Tax -												
Private Carrier	\$	-0-	\$2,	170,000	\$2,	170,000	\$	-0-	\$ 2,	388,000	\$2,	,388,000
Premium Tax -												
State Fund	\$	-0-	\$2,	987,000	\$2,	987,000	\$	-0-	\$3,	435,000	\$3,	,435,000
Expenditures:												
Operating -												
State Fund	\$9,525,	912	\$9,	716,759	\$	190,847	\$9,444,	727	\$9,5	95,574	\$	150,847
Operating -												
State Auditor	\$	-0-	\$	25,756	\$	25 ,756	\$	-0-	\$	52,926	\$	52,926
Net Impact:												
(Contribution to U	nfunded	Liabili	ty)		\$ 5,	131,244					\$5 ,	,770,074

BUDGET DIRECTOR

OFFICE OF BUDGET AND PROGRAM PLANNING

Revised Fiscal Note for SB428, as introduced

Fiscal Request SB428, as introduced Form BD-15
Page 2

DIVISION OF WORKERS' COMPENSATION: ASSUMPTIONS:

- 1. Support and safety services for the State Compensation Mutual Insurance Fund (SCMIF) and the Division of Workers' Compensation Insurance Compliance (DWCIC) will continue on the same basis as currently provided.
- 2. The SCMIF and DWCIC will remain in the same facility, having full use of all equipment presently utilized.
- 3. The following coordinations will continue to occur between DWCIC and SCMIF:
 - a. Claims management Continued access to all claims files on demand; continued preparation of settlement summaries and of routine orders (i.e., all word processed documents) as is currently provided; continued access to all computer screens now available to Division staff.
 - b. Files and records management Continued access to all claims files on demand, avoiding the necessity to complete duplicates of Plan III files.
 - c. Continued processing of all Plan III extraterritorial certificates and corporate officer exemptions, with appropriate notice to DWCIC (could be computer notice).
 - d. Continued access to all Plan III coverages and cancellations as is currently available, including cooperation by SCMIF Policy Services Unit in providing all information currently provided to enable expeditious identification and pursuit of uninsured employers.
 - e. Continued access to all SCMIF medical and hospital information in formats and time frames determined by DWCIC in order to expedite the annual relative value fee schedule and any revised hospital rate regulation methods necessary to implement Section 39-71-704, MCA.
- 4. The Assigned Risk Pool will be managed entirely by the State Auditor (Insurance Commissioner) without any extra effort by DWCIC.
- 5. The State Auditor will provide estimates of revenue generated by the premium tax.
- 6. Public entities will not form new self-insurance groups.
- 7. Workload for Accident Cataloging and Uninsured Employers' Units will remain constant.
- 8. Printing costs will increase because of new information materials and new and revised forms.
- 9. Additional mailings will be required to provide adequate notice of various changes resulting from creation of the SCMIF.
- 10. There will not be a significant increase in complaints, disputes, and litigation caused by the separation of SCMIF from the Division.
- 11. Board will meet five days a month in FY90 and one day a month in FY91. Travel and expenses will amount to \$100/day/member.
- 12. Board will hire a secretary and internal auditor as staff positions, and will contract with an accounting firm to review the financial condition of the fund.
- 13. Chief Executive Officer will be paid \$80,000 annually.
- 14. All other staff positions presently employed by the State Compensation Insurance Fund will be retained by the State Compensation Mutual Insurance Fund at their present salaries.
- 15. Budget shown under current law is that approved by the Human Services Appropriations Sub-Committee.

Fiscal Note Request SB428, as introduced Form BD-15 Page 3

	DIVISION OF	WORKERS'	COMPENSATION:
--	-------------	----------	---------------

FISCAL IMPACT:			•	FY90						FY91		
	Cu	ırrent		oposed			C	Current	Pr	oposed		
Revenue:		Law		Law	Difference			Law	Difference			
Assessments	\$9,52	5,912	\$9,7	16,759	\$	190,847	\$9,4	44,727	\$9,5	95,574	\$	150,847
Expenditures:	\$9,52	5,912	\$9,7	16,759	\$	190,847	\$9,4	444,727	\$9,5	95,574	\$	150,847
Fund Impact:												
State Special												
Revenue	\$	-0-	\$	-0-	\$	-0-	\$	-0-	\$	-0-	\$	-0-
DEDADUMENT OF ADA	ATMT CTD/	TTON.										

DEPARTMENT OF ADMINISTRATION:

ASSUMPTIONS:

- Assume the Workers' Compensation Court would move from the Department of Administration to the Department of 1. Labor and Industry. The budget approved to date by the General Government Subcommittee will also move.
- The Department of Administration cannot calculate the fiscal impact of moving the Board of Directors of the 2. State Compensation Mutual Insurance Fund.

FISCAL IMPACTS:		F	<u> Y90</u>			F	Y91	
	Current		posed		Current	Pro	posed	
Expenditures:	Law		Law	<u>Difference</u>	Law		Law	Difference
Personal Services	\$231,247	\$	-0-	(\$231,247)	\$231,722	\$	-0-	\$ 231,722
Operating Expenses	74,887		-0-	(74,887)	71,214		-0-	(71,214)
FTE level	8.0		0	(8.0)	8.0		0	(8.0)
Fund Impact:								
State Special								
Revenue	\$306,134	\$	-0-	(\$306,134)	\$302,936	\$	-0-	(\$ 302,936)
STATE AUDITORS OFFICE	<u>E</u> :							

ASSUMPTIONS:

- That one grade 12, step 2 employee in the State Auditor's Office will be required to coordinate the assigned 1. risk pool required under Section 13 of the bill. Annual cost: \$21,400.
- That the premium tax rate will remain at 2.75%. 2.
- That workers' compensation premiums written by private insurers in calendar year 1987 were \$57,206,000; that 3. workers' compensation premiums earned by the state fund for FY88 were \$85,865,000.
- That private insurers' premiums will increase in calendar years 1988, 1989, and 1990 at rates of 20%, 15%, 4. and 10% respectively.
- That the state fund premiums will increase in FY89, FY90, and FY91 at rates of 10%, 15%, and 15%, 5. respectively.
- That the general fund will reallocate private insurer premium taxes of \$2,170,000 and \$2,388,000 for FY90 6. and FY91, respectively, to reduce the state fund deficit.

- 7. That totally new premium taxes from the state fund will be \$2,987,000 and \$3,435,000 for FY90 and FY91, respectively, to be used to reduce the state fund deficit. However, these tax monies represent a loss to the general fund.
- 8. That the state fund currently holds approximately 60% of the market share of workers' compensation insurance; that this bill may cause a significant change in that percentage, but such change is not contemplated in the accompanying calculations.
- 9. That a triennial examination of the state fund, required by 33-1-401 under this bill and estimated to cost \$30,000, would be conducted in FY91 (contracted services; operating expenses).
- 10. That the State Auditor's Office will not need to expend contracted services to develop the "Assigned-Risk Plan" mentioned in Section 13 of this bill.

FISCAL IMPACT:				FY90						FY91		
	Cu	rrent	Pı	roposed			Cur	rent	Ŧ	roposed		
Revenue:		Law		Law	Di	fference	I	aw	Law		<u>Dif</u>	ference
Premium Tax		·										
State Fund	\$	-0-	\$2,9	987,000	\$2	,987,000	\$	-0-	\$3,	435,000	\$3,	435,000
General Fund≯												
Private Insurers	\$2	,170,000	\$	-0-	(\$2	,170,000)	\$ 2,	388,000	\$	-0-	(\$2,	,388,000)
State Special Fund												
Private Insurers	\$	-0-	\$2,3	170,000	\$2	,170,000	\$	-0-	\$2,	388,000	\$2,	,388,000
Expenditures:	\$	-0-	\$	25,756	\$	25,756	\$	-0-	\$	52,926	\$	52,926
Fund Impact:												
General Fund	\$2	,170,000	\$	-0-	(\$2	,170,000)	\$2,	388,000	\$	-0-	(\$2,	,388,000)
State Special												
Revenue	\$	-0-	\$5,3	157,000	\$ 5	,157,000	\$	-0-	\$ 5,	,823,000	\$5,	,823,000
				•		•						

*The Premium Tax collected from private insurers writing workers compensation insurance under plan no. 2 will be transferred from the general fund to the newly created state fund.

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APPROVED BY COMM. ON BUSINESS & INDUSTRY

2	INTRODUCED BY THAYER, NATHE, THOMAS, NOBLE, MEYER,
3	DRISCOLL, PAVLOVICH, GRADY, MAZUREK, WILLIAMS, SMITH,
4	SQUIRES, GLASER, RAPP-SVRCEK, RUSSELL, AKLESTAD,
5	DEVLIN, RASMUSSEN, GRINDE, MARKS
6	BY REQUEST OF THE GOVERNOR
7	
8	A BILL FOR AN ACT ENTITLED: "AN ACT CREATING THE STATE
9	COMPENSATION MUTUAL INSURANCE FUND TO INSURE EMPLOYERS FOR
LO	WORKERS' COMPENSATION AND OCCUPATIONAL DISEASE LIABILITY;
1 1	PROVIDING FOR A BOARD OF DIRECTORS; ESTABLISHING THE POWERS
12	AND DUTIES OF THE BOARD AND THE CHIEF EXECUTIVE OFFICER OF
13	THE STATE COMPENSATION MUTUAL INSURANCE FUND; TRANSFERRING
14	THE OFFICE OF WORKERS' COMPENSATION JUDGE TO THE DEPARTMENT
15	OF LABOR AND INDUSTRY; AMENDING SECTIONS 2-15-1014,
16	2-15-1702, 2-18-103, <u>33-2-119</u> , 33-17-502, 33-18-212,
17	<u>37-72-101</u> , 39-71-116, 39-71-201, 39-71-203, 39-71-206,
18	39-71-306 THROUGH 39-71-308 , 39-71-403 , 39-71-421 ,
19	39-71-604, 39-71-704, 39-71-901, 39-71-908, 39-71-910,
20	39-71-911, 39-71-913, 39-71-2303, 39-71-2307, 39-71-2308,
21	39-71-2321 THROUGH 39-71-2323, 39-71-2325, 39-71-2327,
22	39-71-2501, 39-72-201, AND 39-72-310, <u>50-71-102</u> , AND
23	50-73-102, MCA; REPEALING SECTIONS 2-15-1702, 39-71-2301,
24	39-71-2302, 39-71-2304 THROUGH 39-21-2306, AND 39-71-2324,
25	MCA: AND PROVIDING EFFECTIVE DATES."

SENATE BILL NO. 428



STATEMENT OF INTENT

A statement of intent is required for this bill because [section 8] grants rulemaking authority to the newly created state fund to adopt or repeal rules or amend existing rules to implement the new state compensation mutual insurance fund. The chief purposes of creating the state fund as a mutual insurer and placing it in a department other than the department of labor are:

- (1) to remove the inherent conflict between the interests of the workers' compensation division in regulating all workers' compensation insurers in this state, including the state compensation insurance fund, and the interests of the state fund as a workers' compensation insurer; and
 - (2) to ensure the solvency of the new state fund.
- The legislature recognizes that the fund actuary has 17 determined that at June 30, 1988, a full funding deficiency 18 19 of \$157.3 million existed for the present state compensation insurance fund. The legislature intends that the new state 20 compensation mutual insurance fund adopt rules in a manner 21 that will assure the solvency of the new fund. Rates must be set on an actuarially sound basis as required by state law. 23 24 To further ensure the solvency of the state fund, it is not the workers' compensation insurer of last resort, as the

SB 0428/02

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state fund presently is. The new state fund would not be
bound to insure all employers who apply to it for workers'
compensation coverage, except for state agencies. #t-could
refuse-to-insure-an-employer-it-considered-a-poor-risk.
As the primary means of ensuring the solvency of the
state fund, it must institute safety programs and set rates
in a manner that awards employers who provide a safe working
environment and penalizes employers who do not.
The legislature further intends that the new state fund
institute programs to automate the processing of claims and
payment of benefits. The state fund may contract out to the

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functions if the

cost-effective.

15 THE LEGISLATURE INTENDS THAT THE GOVERNOR SHALL

16 IMPLEMENT STAGGERED TERMS IN NAMING THE INITIAL MEMBERS OF

17 THE BOARD.

private sector certain claims administration and servicing

state fund determines it to be

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. Section 1. Intent and purpose of plan.

It is the intent and purpose of the state fund to allow employers the option to insure their liability for workers' compensation and occupational disease coverage with a nonprofit, independent public corporation. The state fund is a domestic mutual insurer. It is not required to insure any

-3-

employer in this state requesting coverage, and it may 2 refuse coverage for an employer, except a state agency,-that the-state-fund-determines-to-be-a-bad-risk. The state fund 3 must be neither more nor less than self-supporting. Premium rates must be set at a level sufficient to fund the insurance program, including the costs of administration, benefits, and adequate reserves. For the purpose of keeping the state fund solvent, it must implement safety-programs VARIABLE PRICING LEVELS WITHIN INDIVIDUAL RATE CLASSIFICATIONS to reward an employer with a good safety 10 record and penalize an employer with a poor safety record. 11 1.2 NEW SECTION. Section 2. Definitions. Unless

15 (1) "Board" means the board of directors of the state 16 compensation mutual insurance fund provided for in [section 17 3].

12] the following definitions apply:

context requires otherwise, in [sections 1, 2, and 4 through

- 18 (2) "Department" means the department of 19 administration provided for in 2-15-1001.
- 20 (3) "Executive director" means the chief executive21 officer of the state compensation mutual insurance fund.
- 22 (4) "State fund" means the state compensation mutual 23 insurance fund provided for in [section 4]. It is also known 24 as compensation plan No. 3 or plan No. 3.
- 25 NEW SECTION. Section 3. Board of directors of the

SB 428

SB 428

SB 0428/02

state compensation mutual insurance fund. (1) There is a board of directors of the state compensation mutual insurance fund.

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- (2) The board is allocated to the department for administrative purposes only as prescribed in 2-15-121. However, the board may employ its own staff.
- (3) The board may provide for its own office space and the office space of the state fund.
- (4) The board consists of five members appointed by the governor. The executive director of the state fund is an ex officio nonvoting member.
- (5) At least three of the five members shall represent state fund policyholders and may be employees of state fund policyholders. At least three members of the board shall represent private, for-profit enterprises. A member of the board may not:
- 17 (a) represent or be an employee of an insurance 18 company that is licensed to transact workers' compensation 19 insurance under compensation plan No. 2; or
- 20 (b) be an employee of a self-insured employer under 21 compensation plan No. 1.
- 22 (6) A member is appointed for a term of 4 years. The 23 terms of board members must be staggered. A member of the 24 board may serve no more than two 4-year terms. A member 25 shall hold office until a successor is appointed and

qualified.

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2 (7) The board--is--designated--as MEMBERS MUST BE

3 APPOINTED AND COMPENSATED IN THE SAME MANNER AS MEMBERS OF a

4 quasi-judicial board for-the--purposes--of AS PROVIDED IN

5 2-15-124, except that the requirement that at least one

6 member be an attorney does not apply.

NEW SECTION. Section 4. State compensation mutual insurance fund created. There is a state compensation mutual insurance fund known as the state fund that is a nonprofit, independent public corporation established for the purpose of allowing an option for employers to insure their liability for workers' compensation and occupational disease coverage under this chapter. The state fund exists as a domestic mutual insurer as defined in 33-3-102.

NEW SECTION. Section 5. Management of state fund -powers and duties of the board. (1) The management and
control of the state fund is vested solely in the board.

(2) The board is vested with full power, authority, and jurisdiction over the state fund. The board may perform all acts necessary or convenient in the exercise of any power, authority, or jurisdiction over the state fund, either in the administration of the state fund or in connection with the insurance business to be carried on under the provisions of (sections 1, 2, and 4 through 12;, as fully and completely as the governing body of a private

-6-

SB 428

SB 0428/02

mutual insurance carrier, in order to fulfill the objectives and intent of [sections 1, 2, and 4 through 12].

NEW SECTION. Section 6. Personal liability excluded. The members of the board, the executive director, and employees of the state fund are not liable personally, either jointly or severally, for any debt or obligation created or incurred by the state fund.

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NEW SECTION. Section 7. Appointment of executive director -- management staff. The board shall appoint an executive director of the state fund who has general responsibility for the operations of the state fund. The executive director must have executive level experience, with knowledge of the insurance industry. The executive director must receive compensation as set by the board and serve at the pleasure of the board. The executive director may hire the management staff of the state fund, each of whom serves at the pleasure of the executive director.

<u>NEW SECTION.</u> **Section 8.** Powers of the state fund --rulemaking. For the purposes of carrying out its functions,
the state fund may:

(1) insure any employer for workers' compensation and occupational disease liability as the coverage is required by the laws of this state and, in connection with the coverage, provide employers' liability insurance. The state fund may charge a minimum yearly premium to cover its

- administrative costs for coverage of a small employer.
- 2 (2) sue and be sued;
- 3 (3) adopt, amend, and repeal rules relating to the 4 conduct of its business;
- 5 (4) enter into contracts relating to the 6 administration of the state fund, including claims 7 management, servicing, and payment;
- 8 (5) collect and disburse money received;
- g (6) adopt classifications and charge premiums for the classifications so that the state fund will be neither more nor less than self-supporting. The state fund must belong to the national council on compensation insurance and small use the classifications of employment adopted by the national council <u>AND CORRESPONDING RATES AS A BASIS FOR</u>

 15 SETTING ITS OWN RATES.
- 16 (7) pay the amounts determined due under a policy of insurance issued by the state fund;
 - (8) hire personnel;
- 19 (9) declare dividends if there is an excess of assets
 20 over liabilities. However, dividends may not be paid until
 21 the unfunded liability of the state fund is eliminated AND
 22 ADEQUATE ACTUARIALLY DETERMINED RESERVES ARE DETERMINED.
 - (10) perform all functions and exercise all powers of a domestic mutual insurer that are necessary, appropriate, or convenient for the administration of the state fund.

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SB 0428/02

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- 1 NEW SECTION. Section 9. Property of the state fund --2 investment required. All premiums and other money paid to 3 the state fund, all property and securities acquired through the use of money belonging to the state fund, and all 4 interest and dividends earned upon money belonging to the 5 state fund are the sole property of the state fund and must 6 be used exclusively for the operations and obligations of 7 the state fund. The money collected by the state fund may 8 9 not be used for any other purpose. However, state fund money must be invested by the board of investments provided for in 10 11 2-15-1808.
- NEW SECTION. Section 10. State 12 fund mutual 13 insurance carrier. (1) The state fund is a domestic mutual insurer controlled by the laws relating to the regulation of 14 domestic mutual insurers in this state. However, the 15 16 formation, incorporation, bylaws, and bonding requirements 17 set forth in Title 33, chapter 3, do not apply to the state 18 fund.
- the operations of the state fund based on insolvency due to the unfunded liability that is recognized to exist on the date of passage of [sections 1, 2, and 4 through 12] and recognized in [section 12].
- 24 (3) The state fund is subject to the premium tax 25 liability for insurers as provided in 33-2-705 BASED ON

- 1 EARNED PREMIUM AND PAID ON REVENUE FROM THE PREVIOUS FISCAL
 2 YEAR.
 - NEW SECTION. Section 11. Assets and liabilities of prior state fund. All assets and funds held by the state compensation insurance fund established in 39-71-2301 through 39-71-2308 and 39-71-2321 through 39-71-2327 must be transferred to the state fund, and the state fund shall assume liability for all outstanding claims and indebtedness of the previously existing state fund.
- NEW SECTION. Section 12. Unfunded liability. (1) It 10 is recognized at the date of creation of the state fund that 11 12 there exists an unfunded liability that is being assumed by newly created state fund for the prior state 13 the compensation insurance fund's liability for industrial 14 15 injuries and occupational diseases that occurred prior to July 1, 1987. To assist the state fund in alleviating the 16 17 unfunded liability, the premium taxes collected by the state 18 from the following sources must be transferred to the newly created state fund: 19
 - (a) the state fund;
- 21 (b) excess or reinsurance policies on self-insurers
 22 writing coverage on a self-insurer's workers' compensation
 23 program under compensation plan No. 1; and
- (c) private insurance carriers writing workers'compensation insurance under compensation plan No. 2.

-10-

SB 428

SB 428

(2) The premium taxes must be transferred to the state fund for payment of the unfunded liability. The premium tax payments must continue until the unfunded liability has been paid, at which time the premium taxes must be paid to the general fund.

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- NEW SECTION. Section 13. Assigned risk plan. (1) The commissioner of insurance shall promulgate and administer a plan to equitably apportion among the state fund, plan No. 3, and private insurers, plan No. 2, the coverage required by this chapter for employers who are unable to procure coverage through ordinary methods.
- (2) All plan No. 2 insurers and the state fund shall subscribe to and participate in the assigned risk plan.
- (3) If an insurer refuses to accept its equitable apportionment under the assigned risk plan, the commissioner of insurance may suspend or revoke the insurer's authority to issue workers' compensation coverage-contracts INSURANCE POLICIES in this state.
- 19 **Section 14.** Section 39-71-116, MCA, is amended to 20 read:
 - "39-71-116. Definitions. Unless the context otherwise requires, words and phrases employed in this chapter have the following meanings:
- 24 (1) "Average weekly wage" means the mean weekly 25 earnings of all employees under covered employment, as

- defined and established annually by the Montana department of labor and industry. It is established at the nearest whole dollar number and must be adopted by the division of workers'-compensation prior to July 1 of each year.
 - (2) "Beneficiary" means:

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- (a) a surviving spouse living with or legally entitled to be supported by the deceased at the time of injury;
- (b) an unmarried child under the age of 18 years;
- 9 (c) an unmarried child under the age of 22 years who
 10 is a full-time student in an accredited school or is
 11 enrolled in an accredited apprenticeship program;
- 12 (d) an invalid child over the age of 18 years who is 13 dependent upon the decedent for support at the time of 14 injury;
 - (e) a parent who is dependent upon the decedent for support at the time of the injury (however, such a parent is a beneficiary only when no beneficiary, as defined in subsections (2)(a) through (2)(d) of this section, exists); and
- 20 (f) a brother or sister under the age of 18 years if 21 dependent upon the decedent for support at the time of the 22 injury (however, such a brother or sister is a beneficiary 23 only until the age of 18 years and only when no beneficiary, 24 as defined in subsections (2)(a) through (2)(e) of this 25 section, exists).

SB 0428/02 SB 0428/02

(3) "Casual employment" means employment not in the usual course of trade, business, profession, or occupation of the employer.

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- (4) "Child" includes a posthumous child, a dependent stepchild, and a child legally adopted prior to the injury.
- (5) "Days" means calendar days, unless otherwise specified.
- 8 (6) "Department" means the department of labor and
 9 industry.
- 10 (7) "Division" means the division of workers'

 11 compensation <u>insurance compliance</u> of the department of labor

 12 and industry provided-for-in-2-15-1702.
- 13 (8) "Fiscal year" means the period of time between
 14 July 1 and the succeeding June 30.
 - (9) "Insurer" means an employer bound by compensation plan No. 1, an insurance company transacting business under compensation plan No. 2, the state compensation-insurance fund under compensation plan No. 3, or the uninsured employers' fund provided for in part 5 of this chapter.
- 20 (10) "Invalid" means one who is physically or mentally 21 incapacitated.
- 22 (11) "Maximum healing" means the status reached when a 23 worker is as far restored medically as the permanent 24 character of the work-related injury will permit.
- 25 (12) "Order" means any decision, rule, direction,

- requirement, or standard of the division or any other determination arrived at or decision made by the division.
- 3 (13) "Payroll", "annual payroll", or "annual payroll for the preceding year" means the average annual payroll of the employer for the preceding calendar year or, if the employer shall not have operated a sufficient or any length of time during such calendar year, 12 times the average monthly payroll for the current year; provided, that an estimate may be made by the division for any employer 10 starting in business where no average payrolls available, such estimate to be adjusted by additional 11 payment by the employer or refund by the division, as the 12 13 case may actually be, on December 31 of such current year.
 - (14) "Permanent partial disability" means a condition, after a worker has reached maximum healing, in which a worker:
- 17 (a) has a medically determined physical restriction as 18 a result of an injury as defined in 39-71-119: and
- 19 (b) is able to return to work in the worker's job pool
 20 pursuant to one of the options set forth in 39-71-1012 but
 21 suffers impairment or partial wage loss, or both.
- 22 (15) "Permanent total disability" means a condition
 23 resulting from injury as defined in this chapter, after a
 24 worker reaches maximum healing, in which a worker is unable
 25 to return to work in the worker's job pool after exhausting

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all options set forth in 39-71-1012.

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- 2 (16) The term "physician" includes "surgeon" and in 3 either case means one authorized by law to practice his 4 profession in this state.
 - (17) The "plant of the employer" includes the place of business of a third person while the employer has access to or control over such place of business for the purpose of carrying on his usual trade, business, or occupation.
 - (18) "Public corporation" means the state or any county, municipal corporation, school district, city, city under commission form of government or special charter, town, or village.
 - (19) "Reasonably safe place to work" means that the place of employment has been made as free from danger to the life or safety of the employee as the nature of the employment will reasonably permit.
- 17 (20) "Reasonably safe tools and appliances" are such
 18 tools and appliances as are adapted to and are reasonably
 19 safe for use for the particular purpose for which they are
 20 furnished.
 - (21) "Temporary total disability" means a condition resulting from an injury as defined in this chapter that results in total loss of wages and exists until the injured worker reaches maximum healing.
 - (22) "Year", unless otherwise specified, means calendar

year."

Section 15. Section 39-71-201, MCA, is amended to

3 read:

compensation administration fund. (1) A workers' compensation administration fund is established out of which all costs of administering the Workers' Compensation and Occupational Disease Acts and the various occupational safety acts the division must administer are to be paid upon lawful appropriation. The following moneys money collected by the division shall must be deposited in the state treasury to the credit of the workers' compensation administrative fund and shall must be used for the administrative expenses of the division:

- 14 (a) all fees and penalties provided in 39-71-205 and 15 39-71-304;
- 16 (b) all fees paid for inspection of boilers and 17 issuance of licenses to operating engineers as required by 18 law;
- 19 (c) all fees paid from an assessment on each plan No.
 20 l employer, plan No. 2 insurer, and plan No. 3, the state
 21 insurance fund. The assessments shall must be levied
 22 against the preceding calendar year's gross annual payroll
 23 of the plan No. 1 employers and the gross annual direct
 24 premiums collected in Montana on the policies of the plan
 25 No. 2 insurers, insuring employers covered under the

1	chapter, during the preceding calendar year. However, no
2	assessment of the plan No. 1 employer or plan No. 2 insurer
3	shall may be less than \$200. The assessments shall must be
4	sufficient to fund the direct costs identified to the three
5	plans and an equitable portion of the indirect costs based
6	on the ratio of the preceding fiscal year's indirect costs
7	distributed to the plans, using proper accounting and cost
В	allocation procedures. Plan No. 3 shall must be assessed an
9	amount sufficient to fund its direct costs and an equitable
10	portion of the indirect costs as referred to above. Other
11	sources of revenue, including unexpended funds from the
12	preceding fiscal year, shall must be used to reduce the
13	costs before levying the assessments.

(2) The administration fund shall must be debited with expenses incurred by the division in the general administration of the provisions of this chapter, including the salaries of its members, officers, and employees and the travel expenses of the members, officers, and employees, as provided for in 2-18-501 through 2-18-503, as amended, incurred while on the business of the division either within or without the state.

- 22 (3) Disbursements from the administration money shall
 23 must be made after being approved by the division upon claim
 24 therefor."
- Section 16. Section 39-71-203, MCA, is amended to

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read:

"39-71-203. Powers of division -- rules ---staffing.

(1) The division is hereby vested with full power,

authority, and jurisdiction to do and perform any and all

things;--whether--herein--specifically--designated---or---in

addition--thereto; that are necessary or convenient in the

exercise of any power, authority, or jurisdiction conferred

upon it under this chapter.

- 9 (2) The division may adopt rules to carry out the provisions of this chapter.
 - (3)--The-division-shall-employ-sufficient-personnel--to
 allow--it--to--meet-the-claims-processing-goals-contained-in
 39-71-604.-The-division-shall--implement--staffing--patterns
 that-are-supported-by-indicators-of-workload:--The-open-file
 is--the--workload--indicator--for-claims-processing,-and-the
 number-of-open-claims-per-claims-examiner-may--not--be--less
 than--300:--The--claims--support--staff;-including-the-file;
 medical-pay;-and-new-claims-units;-may-not-exceed--two--PTEs
 per--claims--examiner;--The--administrative-and-underwriting
 staffing-must-be-based--on--the--number--of--premium--paying
 policyholders---and--may--not--exceed--i:4--FTEs--per--l;000
 policyholders-
 - (4)--The-division-administrator-shall-submit-a--revised operation--plan-to-the-budget-office-for-review-and-approval and-to-the-legislative-finance-committee-for-review-whenever

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SB 0428/02

increases-or-decreases-of-staff-are-necessarytoimplement
the-provisions-of-subsection-(3).

- t5)--Punds-from-the-state-special-revenue-fund-shall-be
 used-to-implement-subsection-(3):"
- **Section 17.** Section 39-71-206, MCA, is amended to 6 read:
 - "39-71-206. Legal advisers adviser ADVISERS of division and state fund. (1) The attorney general shall-be is the legal adviser of the division and the state fund and shall represent it either entity in all proceedings whenever so if requested by the division or state fund any-member thereof. THE DIVISION AND STATE FUND MAY EMPLOY OTHER ATTORNEYS OR LEGAL ADVISERS AS THEY CONSIDER NECESSARY.
 - t2)--The-division-may;-in-the-investigation-and-defense of--cases-under-plan-No:-3-of-the-Workers+-Compensation-Act; employ-such-other-attorney-or--legal--adviser--as--it--deems necessary--and--pay--for--the--same--out--of--the-industrial insurance-account-in-the-expendable-trust-fund:"
- **Section 18.** Section 39-71-306, MCA, is amended to 20 read:
 - "39-71-306. Plan-one-employers-and-plan-two-insurers
 Insurers to file duplicate--receipts SUMMARY REPORTS OF
 BENEFITS paid for injuries and statements of medical
 expenditures. Every employer-coming-under-the-provisions--of
 compensation--plan--No₇-1-and-every-insurer coming-under-the

- provisions-of-compensation-plan-No:-2 insurer shall, on or before the 15th day of each and every month, file with the division:
 - (1) duplicate-receipts SUMMARY REPORTS OF BENEFITS for all payments made during the previous month to injured workers or their beneficiaries or dependents; and
 - (2) statements showing the amounts expended during the previous month for medical, surgical, and hospital services for injured workers and for the burial of deceased workers."
- **Section 19.** Section 39-71-307, MCA, is amended to 11 read:
 - "39-71-307. Employers and insurers to file reports of accidents. (1) Every employer of-labor and every insurer is hereby required to file with the division, under such division rules as-the-division-may-from-time-to-time-make, a full and complete report of every accident to an employee arising out of or in the course of his employment and resulting in loss of life or injury to such-person the employee. Such The reports shall must be furnished to the division in such the form and such detail as the division shall-from-time-to-time-prescribe prescribes and shall-make must provide specific answers to all questions required by the division under its rules_f-except_-in-case-he However, if an employee EMPLOYER is unable to answer any-such questions_-a-good-and-sufficient-reason-shall-be-given-for

SB 0428/02 SB 0428/02

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such-failure a question, he shall state the reason he is unable to answer.

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- (2) Every insurance---company insurer transacting business under this chapter shall, at the time and in the manner prescribed by the division, make and file with the division such the reports of accidents as the division may require requires."
- Section 20. Section 39-71-308, MCA, is amended to 8 9 read:
- 10 "39-71-308. Neglect or refusal of public corporation 11 to file payroll reports -- arbitrary assessment by division. 12 Whenever--any If a public corporation insured by the state compensation-insurance fund neglects or refuses to file 13 14 prescribed payroll reports of its employees, the division may levy an arbitrary assessment upon such the public 15 16 corporation in an amount of \$75 for each such assessment. 17 which-assessments-shall The assessment must be collected in 18 the manner provided in this chapter for the collection of 19 assessments."
- 20 Section 21. Section 39-71-403, MCA, is amended to 21 read:
- 22 "39-71-403. Plan three exclusive for state agencies --23 election of plan by other public corporations. (1) Where If 24 a state agency is the employer, the terms, conditions, and 25 provisions of compensation plan No. 3, state fund, shall-be

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- 1 are exclusive, compulsory, and obligatory upon both employer 2 and employee. Any sums necessary to be paid under the provisions of this chapter by any state agency shall-be are considered to be ordinary and necessary expense of the agency, and the agency shall make appropriation of and pay such the sums into the state compensation-insurance fund at the time and in the manner provided for in this chapter, notwithstanding that the state agency may have failed to anticipate such ordinary and necessary expense in any budget, estimate of expenses, appropriations, ordinances, or 10 otherwise. 11
- (2) A public corporation, other than a state agency, may elect coverage under compensation plan No. 1, employer; plan No. 2, insurer; or plan No. 3, state insurance fund; 15 separately or jointly with any other public corporation. other than a state agency. A public corporation electing 16 compensation plan No. 1 may purchase reinsurance. A public 17 18 corporation electing compensation plan No. 1 is subject to same provisions as a private employer electing 19 20 compensation plan No. 1.
- (3) A public corporation, other than a state agency, 21 22 that elects plan No. 1 may establish a fund sufficient to 23 pay the compensation and benefits provided for in this chapter and chapter 72 and to discharge all liabilities that 24 25 reasonably incur during the fiscal year for which the

election is effective. Proceeds from the fund must be used only to pay claims covered by this chapter and chapter 72 and for actual and necessary expenses required for the efficient administration of the fund.

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- 5 (4) All money in the fund established under subsection 6 (3) not needed to meet immediate expenditures must be 7 invested by the governing body of the public corporation, 8 and all proceeds of the investment shall be credited to the 9 fund."
- 10 **Section 22.** Section 39-71-421, MCA, is amended to 11 read:
 - programs. The state compensation insurance fundy plan No. 37-and-private Private insurers, plan No. 27 INSURERS may provide financial incentives to an employer who implements a formal safety program. The insurance carrier An insurer may provide to an employer a premium discount that reflects the degree of risk diminished by the implemented safety program."
- 20 **Section 23.** Section 39-71-604, MCA, is amended to 21 read:
- 22 **39-71-604. Application for compensation. (1) Where If
 23 a worker is entitled to benefits under this chapter, the
 24 worker shall file with the insurer or the division all
 25 reasonable information needed by the insurer to determine

compensability. It is the duty of the worker's attending physician to lend all necessary assistance in making application for compensation and such proof of other matters as may be required by the rules of the division without charge to the worker. The filing of forms or other documentation by the attending physician does not constitute a claim for compensation.

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- 8 (2) Where If death results from an injury, the parties
 9 entitled to compensation or someone in their behalf shall
 10 file a claim with the insurer or the division. The claim
 11 must be accompanied with proof of death and proof of
 12 relationship, showing the parties entitled to compensation,
 13 certificate of the attending physician, if any, and such
 14 other proof as may be required by the division.
 - (3)--The--goal-of-the-division-is-to-process-all-claims
 for-compensation-within-14-days-after-initial-acceptance--of
 liability-for-a-claim-"
- 18 **Section 24**. Section 39-71-704, MCA, is amended to 19 read:
- 20 "39-71-704. Payment of medical, hospital, and related
 21 services -- fee schedules and hospital rates. (1) In
 22 addition to the compensation provided by this chapter and as
 23 an additional benefit separate and apart from compensation,
 24 the following shall must be furnished:
- 25 (a) After the happening of the injury, the insurer

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- shall furnish, without limitation as to length of time or dollar amount, reasonable services by a physician or surgeon, reasonable hospital services and medicines when needed, and such other treatment as may be approved by the division for the injuries sustained.
 - (b) The insurer shall replace or repair prescription eyeglasses, prescription contact lenses, prescription hearing aids, and dentures that are damaged or lost as a result of an injury, as defined in 39-71-119, arising out of and in the course of employment.

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chiropractic, and paramedical services provided for in this chapter, excluding hospital services, shall must be established annually by the workers1--compensation division and become effective in January of each year. The maximum fee schedule must be adopted as a relative value fee schedule of medical, chiropractic, and paramedical services, with unit values to indicate the relative relationship within each grouping of specialties. Medical fees must be based on the median fees as billed to the state compensation insurance fund during the year preceding the adoption of the schedule. THE STATE FUND SHALL REPORT FEES BILLED IN THE FORM AND AT THE TIMES REQUIRED BY THE DIVISION. The division shall adopt rules establishing relative unit values, groups of specialties, the procedures insurers must use to pay for

- services under the schedule, and the method of determining
- the median of billed medical fees. These rules shall must be
- 3 modeled on the 1974 revision of the 1969 California Relative
- 4 Value Studies.
- 5 (3) Beginning January 1, 1988, the division shall
- 6 establish rates for hospital services necessary for the
- 7 treatment of injured workers. Approved rates must be in
- 8 effect for a period of 12 months from the date of approval.
 - The division may coordinate this ratesetting function with
- other public agencies that have similar responsibilities.
- 11 (4) Notwithstanding subsection (2), beginning January
- 12 1, 1988, and ending January 1, 1990, the maximum fees
- 13 payable by insurers must be limited to the relative value
- 14 fee schedule established in January 1987. Notwithstanding
- 15 subsection (3), the hospital rates payable by insurers must
- 16 be limited to those set in January 1988, until December 31,
- 17 1989."

- Section 25. Section 39-71-901, MCA, is amended to
- 19 read:
- 20 "39-71-901. Definitions. As used in this part, the
- 21 following definitions apply:
- 22 (1) "Vocationally handicapped" means a person who has
- 23 a medically certifiable permanent impairment which is a
- 24 substantial obstacle to obtaining employment or to obtaining
- 25 reemployment if the employee should become unemployed,

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- considering such factors as the person's age, education, training, experience, and employment rejection.
- (2) "Certificate" means documentation issued by the division of--workers'--compensation to an individual who is vocationally handicapped.
 - (3) "Fund" means the subsequent injury fund."

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- Section 26. Section 39-71-908, MCA, is amended to 7 8 read:
 - "39-71-908. Notification of fund of its potential liability under part -- review by fund. Not less than 90 or more than 150 days before the expiration of 104 weeks after the date of injury, the employer; -carrier; -or-the-industrial insurance-fund, as-the-case-may-be; insurer shall notify the fund whether it is likely that compensation may be payable beyond a period of 104 weeks after the date of the injury. The fund thereafter may review, at reasonable times, such information as the employer, -- carrier, -- or -- industrial insurance-fund insurer has regarding the accident and the nature and extent of the injury and disability."
- Section 27. Section 39-71-910, MCA, is amended to 20 21 read:
 - *39-71-910. Procedure for resolving disputes as to liability under part. (1) If an employee was employed or retained in employment under the provisions of this part and a dispute or controversy arises as to payment of benefits or

the liability therefor, the division shall hold a hearing and resolve all disputes. On motion made in writing by the employer; -carrier; -or-industrial-insurance-fund insurer, the administrator shall join the fund as a party defendant.

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- (2) The division, within 5 days of the entry of an order joining the fund as a party defendant, shall give the fund written notice thereof not less than 20 days before the date of hearing and shall include the name names of the employee and the employer insurer and the date of the alleged injury or disability. The fund named as a defendant shall--have has 10 days after the date of notification to file objections to being named as a party defendant. On the date of the hearing at which the liability of the parties is determined, the hearing examiner first shall hear arguments and take evidence concerning the joinder as party defendant. If the fund has filed timely objection and if argument and evidence warrant, the hearing examiner shall grant a motion to dismiss.
- (3) At the time of the hearing, the employer insurer and fund may appear, cross-examine witnesses, give evidence, and defend both on the issue of liability of the employer insurer to the employee and on the issue of the liability of 23 the fund.
 - (4) The hearing examiner shall make findings of fact and conclusions of law determining the respective liability

- of the employer insurer and the fund."
- 2 Section 28. Section 39-71-911, MCA, is amended to
- 3 read:

- 4 "39-71-911. Obligation to make payments on behalf of
- 5 fund not an independent liability. The obligation imposed by
 - this part on the employer;-carrier;-or-industrial--insurance
- 7 fund insurer to make payments on behalf of the fund does not
- 8 impose an independent liability on the employer, carrier, or
- 9 industrial-insurance-fund insurer."
- 10 Section 29. Section 39-71-913, MCA, is amended to
- 11 read:
- 12 "39-71-913. Payments by fund directly to persons
- 13 entitled. If the employer, -- carrier, -- or -- the -- industrial
- 14 insurance-fund insurer does not make the payments on behalf
- 15 of the fund, the fund may make the payments directly to the
- 16 persons entitled to the payments."
- Section 30. Section 39-71-2303, MCA, is amended to
- 18 read:
- 19 "39-71-2303. Manner of electing -- contract or policy
- 20 of insurance -- payment of premium. The division state fund
- 21 shall prescribe the procedure by which employers an employer
- 22 may elect to be bound by compensation plan No. 3, the
- effective time of such $\underline{\text{the}}$ election, and the manner in which
- 24 such the election is terminated for reasons other than
- 25 default in payment of premiums. Every employer electing to

-29-

- 1 be bound by compensation plan No. 3 shall must receive from
- 2 the division state fund a contract or policy of insurance in
- 3 a form approved by the division. The premium thereon-shall
- 4 must be paid by the employer to the division state fund at
- . 5 such times as the division-shall--prescribe state fund
 - 6 prescribes and shall must be paid over by the division state
 - 7 <u>fund</u> to the state treasurer to the credit of the <u>industrial</u>
 - 8 insurance-expendable-trust state mutual-insurance fund."
 - 9 Section 31. Section 39-71-2307, MCA, is amended to
 - read:

- 11 "39-71-2307. Cancellation of coverage under--plan--for
- 12 default -- thirty days' notice required. The division-is
- 13 hereby-muthorized-in-its-discretion-to state fund may cancel
- 14 an employer's right to operate under plan No. 3 of the
- 15 Workers' Compensation Act for failure to pay the premiums
- 16 due OR BECAUSE OF A SIGNIFICANT CHANGE IN LIABILITY
- 17 EXPOSURE. When the division-makes-an-order-canceling state
- 18 fund cancels an employer's right-for-failure-to-pay-premiums
- 19 COVERAGE, the-division it shall notify the employer of its
- 20 intent to cancel the employer at least 30 days before the
- 21 cancellation becomes effective. After the cancellation date,
- 22 the employer shall-have has the same status as an employer
- 23 who is not enrolled under the Workers' Compensation Act."
- 24 Section 32. Section 39-71-2308, MCA, is amended to
- 25 read:

*39-71-2308. Collection in case of default. (1) If any an employer under plan No. 3 shall-default defaults in any payment to the division state fund, the state fund may collect the sum due may-be-collected-by-an-action-at-law in a civil action in the name of the state. T-and-such-right-of action-shall-be The right of action is cumulative.

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- (2) When If an employer's right to operate has been canceled by the division state fund for failure to pay premiums and when-the-division-in-its-discretion the state fund finds that the property and assets of the employer are not sufficient to pay the premiums, the division state fund may compromise the claim for premiums and accept a payment of an amount less than the total amount due."
- Section 33. Section 39-71-2321, MCA, is amended to read:
 - "39-71-2321. What to be deposited in industrial insurance-expendable-trust STATE fund. All premiums, penalties, recoveries by subrogation, interest earned upon money belonging to the state fund, and securities acquired by or through use of money shall must be deposited in the industrial-insurance-expendable-trust state fund."
- 22 **Section 34.** Section 39-71-2322, MCA, is amended to 23 read:
- 24 "39-71-2322. Money in industrial-insurance state fund 25 held in trust -- disposition of funds upon repeal of

- 1 chapter. The moneys money coming into the industrial insurance-expendable-trust state fund shall must be held in 3 trust for the purpose for which such-moneys-were the money was collected.7-and-if-this-chapter-shall--be--hereafter If this chapter is repealed, such-moneys-shall-be the money is 6 subject to such the disposition as-may-be provided by the legislature repealing this chapter. In default-of-such the absence of a legislative provision, distribution thereof 8 9 shall must be in accordance with the justice of the matter. due regard being had to obligations of compensation incurred 10 11 and existing."
- 14 "39-71-2323. Surplus in industrial --- insurance expendable-trust state fund -- payment of dividends. If at 15 16 the end of any fiscal year there exists in the industrial 17 insurance-expendable-trust state fund an excess of assets over liabilities and a reasonable surplus, such liabilities 18 to include necessary reserves, which excess may be divided 19 20 safely, then the division state fund may declare a dividend 21 in such the manner as the rules of the division -- may state 22 fund prescribe to those employers who have paid premiums 23 into the industrial-insurance-expendable-trust state fund in excess of liabilities chargeable to them in the fund for 24 25 that year. In determining the amount or proportion of the

SB 0428/02 SB 0428/02

balance to which the employer is entitled as dividends, the division state fund shall give consideration to the prior paid premiums and accident experience of each individual employer during the dividend year." 4

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Section 36. Section 39-71-2325, MCA, is amended to 5 read: 6

*39-71-2325. Bivision State fund to keep accounts of segregations. The division state fund shall keep an accurate account of all such the segregations of the industrial insurance-expendable-trust state fund and shall divert from the fund any sums necessary to meet monthly payments, pending the conversion into cash of any security, and in such case shall repay the same out of the cash realized from the security."

Section 37. Section 39-71-2327, MCA, is amended to 15 16 read:

*39-71-2327. Earnings of industrial----insurance expendable -- trust state fund to be credited to fund -improper use a felony. All earnings made by the industrial insurance--expendable-trust state fund by reason of interest paid for the deposit thereof or otherwise shall must be credited to and become a part of the fund, and the making of profit, either directly or indirectly, by any person out of the use of the fund shall-constitute is a felony. and--on conviction -- thereof -- shall -- subject -- the -- person-making-such 1 profit-to-imprisonment-in-the-state-penitentiary-for-a--term not-exceeding-2-years-or-a-fine-not-exceeding-\$5,000-or-both 3 such-fine-and-imprisonment: A person convicted of an offense under this section is punishable by imprisonment in the 5 state prison for a term not to exceed 2 years or a fine of 6 not more than \$5,000, or both."

7 Section 38. Section 39-72-201. MCA, is amended to 8 read:

9 "39-72-201. Administration of chapter. This chapter shall--be is administered by the division of--workers+ 1.0 11 compensation."

12 Section 39. Section 39-72-310. MCA, is amended to 13 read:

"39-72-310. Occupational disease coverage under workers' compensation plans. (1) Every employer enrolled under compensation plan No. 1 ffitle-397-chapter-717-part 21), every insurer writing -- workers -- compensation -- coverage under compensation plan No. 2 tTitle=397 chapter-717-part 22), and the state compensation--insurance fund under compensation plan No. 3 (Title-397-chapter-717-part-23), all provided for under the Workers' Compensation Act, are considered to also provide full coverage for claims under this chapter. Any policy of insurance for workers' compensation coverage under the Workers' Compensation Act written by a private insurance carrier or the state

SB 428 -33--34-SB 428

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- compensation-insurance fund is considered to provide full occupational disease coverage under the provisions of this chapter.
- (2) Except as provided in this chapter, the division shall apply the appropriate provisions of Title 39, chapter 71, parts 21, 22, and 23, to the administration of The Occupational Disease Act of Montana in the same manner as they are applied to the administration of the Workers' Compensation Act.
- (3) Under compensation plan No. 3, any premiums and other receipts held by the division state fund for occupational disease insurance coverage shall must be transferred and-become-part-of to the workers' compensation industrial insurance account, and payments for occupational disease claims by the state fund shall must be paid out of the industrial insurance account."
- Section 40. Section 2-18-103, MCA, is amended to read:

 "2-18-103. Officers and employees excepted. Parts 1

 and 2 do not apply to the following positions in state

 government:
- 21 (1) elected officials:

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- 22 (2) county assessors and their chief deputy;
- 23 (3) officers and employees of the legislative branch;
- 24 (4) judges and employees of the judicial branch;
- 25 (5) members of boards and commissions appointed by the

- governor, appointed by the legislature, or appointed by other elected state officials;
- 3 (6) officers or members of the militia;
 - (7) agency heads appointed by the governor;
- (8) academic and professional administrative personnel with individual contracts under the authority of the board of regents of higher education;
 - (9) academic and professional administrative personnel and live-in houseparents who have entered into individual contracts with the state school for the deaf and blind under the authority of the state board of public education;
- 12 (10) teachers under the authority of the department of institutions;
- (11) investment officer, assistant investment officer,
 executive director, and three professional staff positions
 of the board of investments;
- 17 (12) four professional staff positions under the board
 18 of oil and gas conservation; and
- 19 (13) assistant director for security of the Montana 20 state lottery; and
- 21 (14) executive director and employees of the state
 22 compensation mutual insurance fund."
- Section 41. Section 33-17-502, MCA, is amended to read:
- 25 "33-17-502. Prohibition on holding out as consultant

SB 0428/02 SB 0428/02

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-- receiving fee. (1) Any person not licensed as an insurance consultant in this state who identifies or holds himself out to be an insurance consultant without having been licensed as an insurance consultant under this part or any person who uses any other designation or title which is likely to mislead the public and holds himself out in any manner as having particular insurance qualifications other than those for which he may be otherwise licensed or otherwise qualified is guilty of a misdemeanor and upon conviction shall be fined \$1,500.

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- (2) Any person not licensed as an insurance consultant with respect to the relevant kinds of insurance who receives any fee for examining, appraising, reviewing, or evaluating any insurance policy, annuity or pension contract, plan, or program or who shall make recommendations or give advice with regard to any of the above without first having been licensed by the commissioner as an insurance consultant is quilty of a misdemeanor and upon conviction shall be fined \$1,500.
 - (3) Nothing in this part applies to:
- (a) licensed attorneys at law in this state acting in 21 22 their professional capacity;
- (b) an actuary or a certified public accountant who 23 provides information, recommendations, advice, or services 24 in his professional capacity if neither he nor his employer 25

- receives any compensation directly or indirectly on account 1 2 of any insurance, bond, annuity or pension contract that 3 results in whole or part from that information, 4 recommendation, advice, or services; or
- (c) a duly licensed casualty insurance agent who accepts a fee from an insured for placement through the state compensation mutual insurance fund as provided in 7 33-18-212."
- 9 Section 42. Section 33-18-212, MCA, is amended to 10 read:
- 11 "33-18-212. Illegal dealing in premiums -- improper 12 charges for insurance. (1) No A person shall may not willfully collect any sum as premium or charge for 13 14 insurance, which insurance is not then provided or is not in 15 due course to be provided (subject to acceptance of the risk by the insurer) by an insurance policy issued by an insurer 16 17 as authorized by this code.
- 18 (2) No A person shall may not willfully collect as premium or charge for insurance any sum in excess of or less 19 than the premium or charge applicable to such insurance and, 20 21 as specified in the policy, in accordance with the applicable classifications and rates as filed with and 22 23 approved by the commissioner; or in cases where classifications, premiums, or rates are not required by this 24 code to be so filed and approved, such premiums and charges 25

SB 0428/02 SB 0428/02

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shall may not be in excess of or less than those specified in the policy and as fixed by the insurer. This provision shall may not be deemed to prohibit the charging and collection, by surplus lines agents licensed under chapter 2, part 3, of the amount of applicable state and federal taxes in addition to the premium required by the insurer. It shall may not be deemed considered to prohibit the charging and collection, by a life insurer, of amounts actually to be expended for medical examination of an applicant for life insurance or for reinstatement of a life insurance policy. The provision of this subsection does not prohibit the collection from an insured of a placement fee, not to exceed 7 1/2% of the annual premium, for placement through the state compensation mutual insurance fund by a duly licensed casualty insurance agent. This placement fee is not a premium as defined in 33-15-102.

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(3) Each violation of this section shall--be is punishable under 33-1-104."

19 **Section-43**:--Section--2-15-1702;--MCA;--is--amended--to
20 read:

#2-15-1702.--Bivision----of----workers-----compensation

insurance-compliance ---head.-(1)-There--is--a--division--of

workers----compensation insurance--compliance within--the

department.-The-division-head-is-an-administrator--appointed

by---the--governor--as--are--directors--in--accordance--with

2 (2)--The-division-is-allocated-to--the--department--for
3 administrative--purposes--only--as--prescribed--in-2-15-121+
4 Howevery-the--division--may--hire--its--own--personnely--and
5 2-15-121(2)(d)-does-not-apply-"

Section 43. Section 2-15-1014, MCA, is amended to read:

*2-15-1014. Office of workers' compensation judge -allocation -- appointment -- salary. (1) There is the office
of workers' compensation judge. The office is allocated to
the department of administration labor AND INDUSTRY for
administrative purposes only as prescribed in 2-15-121.

- (2) The governor shall appoint the workers' compensation judge for a term of 6 years in the same manner provided by Title 3, chapter 1, part 10, for the appointment of supreme or district court judges. A vacancy shall must be filled in the same manner as the original appointment.
- 18 (3) To be eligible for workers' compensation judge, a
 19 person must:
- 20 (a) have the qualifications necessary for district 21 court judges found in Article VII, section 9, of the Montana 22 constitution;
 - (b) devote full time to the duties of workers' compensation judge and not engage in the private practice of law.

-40-

-39- SB 428

SB 428

1	(4) The workers' compensation judge is entitled to the
2	same salary and other emoluments as that of a district judge
3	but shall must be accorded retirement benefits under the
4	public employees' retirement system."

- 5 **Section 44.** Section 39-71-2501, MCA, is amended to read:
- 9 (1) "Board" means the board of examiners created in 2-15-1007.
- 11 (2) "Department" means the department of labor and 12 industry provided for in 2-15-1701.
- 13 (3) "Employer" has the meaning set forth in 39-71-117.
- 14 (4) "Payroll" means the payroll of an employer for 15 each of the calendar quarters ending March 31, June 30,
- 16 September 30, and December 31, for all employments covered
- 17 under 39-71-401.
- 18 (5) "State fund" means the state compensation MUTUAL

 19 insurance fund referred-to-in-39-71-2301.
- 20 (6) "Tax" means the workers' compensation payroll tax
 21 provided for in 39-71-2503.
- 22 (7) "Tax account" means the workers' compensation tax
 23 account created by 39-71-2504. (Terminates June 30,
 24 1991--sec. 10, Ch. 664, L. 1987.)"
- 25 NEW SECTION. SECTION 45. STATE FUND TO SUBMIT NOTICE

- 1 OF COVERAGE WITHIN THIRTY DAYS -- PENALTY FOR FAILURE. (1)
- 2 THE STATE FUND SHALL, WITHIN 30 DAYS AFTER THE ISSUANCE OF
- 3 AN INSURANCE POLICY, SUBMIT TO THE DIVISION THE NOTICE OF
- 4 COVERAGE STATING THE EFFECTIVE DATE OF THE POLICY INSURING
- 5 THE EMPLOYER AND OTHER INFORMATION THE DIVISION REQUIRES.
- 6 (2) THE DIVISION MAY ASSESS A PENALTY OF NO MORE THAN
 7 \$200 AGAINST THE STATE FUND IF, AS A GENERAL BUSINESS
- 8 PRACTICE, THE STATE FUND DOES NOT COMPLY WITH THE 30-DAY
- 9 NOTICE REQUIREMENT.
- 10 NEW SECTION. SECTION 46. POLICY REMAINS IN EFFECT
- 11 UNTIL CANCELED OR REPLACED -- TWENTY-DAY NOTIFICATION OF
- 12 CANCELLATION REQUIRED. THE INSURANCE POLICY REMAINS IN
- 13 EFFECT UNTIL CANCELED. CANCELLATION MAY TAKE EFFECT ONLY BY
- WRITTEN NOTICE TO THE NAMED INSURED AND TO THE DIVISION AT
- 15 LEAST 20 DAYS PRIOR TO THE DATE OF CANCELLATION. HOWEVER,
- 16 THE POLICY TERMINATES ON THE EFFECTIVE DATE OF A REPLACEMENT
- 17 OR SUCCEEDING INSURANCE POLICY ISSUED TO THE INSURED.
- 18 NOTHING IN THIS SECTION PREVENTS THE STATE FUND FROM
- 19 CANCELING AN INSURANCE POLICY BEFORE A REPLACEMENT POLICY IS
- 20 ISSUED TO THE INSURED.
- 21 SECTION 47. SECTION 33-2-119, MCA, IS AMENDED TO READ:
- 22 *33-2-119. Suspension or revocation for violations and
- 23 special grounds. (1) The commissioner may, in his
- 24 discretion, suspend or revoke an insurer's certificate of
- 25 authority if, after a hearing thereon, he finds that the

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- (a) violated any lawful order of the commissioner or
 any provision of this code other than those for which
 suspension or revocation is mandatory;
 - (b) reinsured more than 90% of its risks resident, located, or to be performed in Montana, in another insurer. In considering suspension or revocation, the commissioner shall consider all relevant factors, including whether:
- 9 (i) after the reinsurance transaction all parties will 10 be in compliance with Montana law; and
- 11 (ii) the transaction will substantially reduce
 12 protection and service to Montana policyholders;
- 13 (c) failed to accept an equitable apportionment of
 14 assigned coverage as required by (section 13).
 - (2) The commissioner shall, after a hearing thereon, suspend or revoke an insurer's certificate of authority if he finds that the insurer:
 - (a) is in unsound condition or in such condition or using such methods or practices in the conduct of its business as to render its further transaction of insurance in Montana injurious or hazardous to its policyholders or to the public;
- 23 (b) has refused to be examined or to produce its 24 accounts, records, and files for examination or if any of 25 its officers have refused to give information with respect

to its affairs, when required by the commissioner;

- (c) has failed to pay any final judgment rendered against it in Montana within 30 days after the judgment became final;
- (d) with such frequency as to indicate its general business practice in Montana, has without just cause refused to pay proper claims arising under its policies, whether any such claim is in favor of an insured or is in favor of a third person with respect to the liability of an insured to such third person, or without just cause compels such insured or claimant to accept less than the amount due them or to employ attorneys or to bring suit against the insurer or such an insured to secure full payment or settlement of such claims;
- (e) is affiliated with and under the same general management or interlocking directorate or ownership as another insurer which transacts direct insurance in Montana without having a certificate of authority therefor, except as permitted as to a surplus lines insurer under part 3 of this chapter.
- (3) The commissioner may, in his discretion and without advance notice or a hearing thereon, immediately suspend the certificate of authority of any insurer as to which proceedings for receivership, conservatorship, rehabilitation, or other delinquency proceedings have been

commenced in any state." 1 SECTION 48. SECTION 37-72-101, MCA, IS AMENDED TO 2 READ: 3 *37-72-101. Construction blasting restrictions 4 5 license required -- definitions -- exemptions. (1) No person 6 may engage in the practice of construction blasting unless 7 licensed or under the supervision of a person licensed as a construction blaster by the workers' compensation division. 8 (2) For the purposes of this chapter: 9 10 (a) "construction blaster" means a person who engages 11 in construction blasting; 12 (b) "construction blasting" means 13 explosives to: (i) reduce, destroy, or weaken any residential. 14 15 commercial, or other building; or 16 (ii) excavate any ditch, trench, cut, or hole or 17 reduce, destroy, weaken, or cause a change in grade of any land formation in the construction of any building, highway, 18 19 road, pipeline, sewerline, or electric or other utility 20 line; 21 (c) "division" means the division of workers' 22 compensation division insurance compliance of the department

of labor and industry provided-for-in-2-15-1782:

(d) "explosive" has the meaning given in 50-38-101;

(e) "magazine" has the meaning given in 50-38-101.

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- 1 (3) Nothing in this chapter applies to the private or 2 commercial use of explosives by persons engaged in farming, 3 ranching, logging, geophysical work, drilling or development of water, oil, or gas wells, or mining of any kind or to the private use of explosives in the removal of stumps and rocks from land owned by the person using the explosives, except that the persons exempted from this chapter by subsection must comply with rules adopted under 37-72-201(1)(c) and the provisions of 37-72-102 apply to a 10 violation of those rules by an exempted person. 11 (4) This chapter does not apply to persons conducting 12 blasting operations when the persons and operations are to rules adopted under and implementing 13 subject 14 82-4-231(10)(e)." SECTION 49. SECTION 50-71-102, MCA, IS AMENDED TO 15 16 READ: *50-71-102. Definitions. Unless the context requires 17 18
- otherwise, in this chapter, the following definitions apply:
- (1) "Amendment" means such modification or change in a 19 code as shall be intended to be of universal or general 20 21 application.
- (2) "Code" means a standard body of rules for safety 22 formulated, adopted, and issued by the division under the 23 provisions of this chapter. 24
- (3) "Division" means the division of workers'

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- compensation <u>insurance compliance</u> of the department of labor and industry provided-for-in-2-15-1702.
- 3 (4) "Employee" and "worker" are defined as in 4 39-71-118.
- (5) "Employer" is defined as in 39-71-117.

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- (6) "Variation" means a special, limited modification or change in the code which is applicable only to the particular place of employment of the employer or person petitioning for such modification or change."
- 10 **SECTION 50.** SECTION 50-73-102, MCA, IS AMENDED TO
 11 READ:
 - "50-73-102. Definitions. As used in this chapter, the following definitions apply:
 - (1) "Division" means the division of workers' compensation <u>insurance compliance</u> of the department of labor and industry <u>provided--for-in-2-15-1702</u> and the state coal mine inspectors employed by the division.
 - (2) "Excavations" and "workings" mean all parts of a mine excavated or being excavated, including shafts, slopes, tunnels, entries, rooms, and working places, whether abandoned or in use.
- 22 (3) "Gassy mine" means a mine is considered to be 23 potentially gassy. The division may further define this term 24 in its rules.
- 25 (4) "Mine" and "coal mine" mean all parts of the

property of a mining plant under one management which contribute, directly or indirectly, to the mining or handling of coal.

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- 4 (5) "Mine examiner" means a person charged with the sexamination of the condition of the mine before the miners are permitted to enter it and who is commonly known as the "fire boss".
 - (6) "Mine foreman" means a person who is charged with the general direction of the underground work or both the underground work and the outside work of a coal mine and who is commonly known and designated as "mine boss".
- 12 (7) "Operator", as applied to the party in control of 13 a mine under this chapter, means the person, firm, or body 14 corporate which is the immediate proprietor as owner or 15 lessee of the plant and, as such, is responsible for the 16 condition and management thereof.
- 17 (8) "Shaft" means any vertical opening through the

 18 strata which is or may be used for the purpose of

 19 ventilation or escape or for hoisting or lowering of men or

 20 material in connection with the mining of coal.
- 21 (9) "Slope" and "drift" mean respectively an incline 22 or horizontal way, opening, or tunnel to a seam of coal to 23 be used for the same purpose as a shaft."
- 24 <u>NEW SECTION.</u> **Section 51.** Repealer. Sections 25 <u>2-15-1702</u>, 39-71-2301, 39-71-2302, 39-71-2304 through

- 1 39-71-2306, and 39-71-2324, MCA, are repealed.
- NEW SECTION. Section 52. Extension of authority. Any
- 3 existing authority to make rules on the subject of the
- 4 provisions of [this act] is extended to the provisions of
- 5 [this act].
- 6 NEW SECTION. Section 53. Codification instruction.
- (1) [Sections 1, 2, and 4 through 12] are intended to be
- 8 codified as an integral part of Title 39, chapter 71, part
- 9 23, and the provisions of Title 39, chapter 71, part 23,
- apply to [sections 1, 2, and 4 through 12].
- 11 (2) [Section 3] is intended to be codified as an
- 12 integral part of Title 2, chapter 15, part 10, and the
- 13 provisions of Title 2, chapter 15, part 10, apply to
- 14 [section 3].
- 15 (3) [Section 13] is intended to be codified as an
- 16 integral part of Title 39, chapter 71, and the provisions of
- 17 Title 39, chapter 71, apply to [section 13].
- 18 NEW SECTION. Section 54. Reorganization procedure.
- 19 The provisions of sections 2-15-131 through 2-15-137 govern
- 20 the creation of the state compensation mutual insurance fund
- 21 and the transfer of the various functions contained in [this
- 22 act] from the state workers1 compensation INSURANCE fund to
- 23 the state compensation mutual insurance fund.
- 24 NEW SECTION. Section 55. Implementation. (1) The
- 25 governor shall by executive order implement the provisions

-49-

- of [this act].
- 2 (2) The governor may by executive order assign to the
- 3 state compensation mutual insurance fund, in a manner
- 4 consistent with [this act], functions allocated to the
- 5 workers' compensation state fund provided for in Title 39,
- 6 chapter 71, part 23, by the 51st legislature and not
- 7 transferred by (this act).
- NEW SECTION. Section 56. Effective dates. (1)
- 9 [Sections 3, 7, 50 54, 55, and this section] are effective
- 10 on passage and approval.
- 11 (2) [Sections 1, 2, 4 through 6, and 8 through 49 53]
- 12 are effective upon signing of the executive order under
- 13 [section 50 55] or on October 1, 1989, whichever occurs
- 14 earlier.

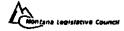
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2	INTRODUCED BY THAYER, NATHE, THOMAS, NOBLE, MEYER,
3	DRISCOLL, PAVLOVICH, GRADY, MAZUREK, WILLIAMS, SMITH,
4	SQUIRES, GLASER, RAPP-SVRCEK, RUSSELL, AKLESTAD,
5	DEVLIN, RASMUSSEN, GRINDE, MARKS
6	BY REQUEST OF THE GOVERNOR
7	
8	A BILL FOR AN ACT ENTITLED: "AN ACT CREATING THE STATE
9	COMPENSATION MUTUAL INSURANCE FUND TO INSURE EMPLOYERS FOR
0	WORKERS' COMPENSATION AND OCCUPATIONAL DISEASE LIABILITY;
1	PROVIDING FOR A BOARD OF DIRECTORS; ESTABLISHING THE POWERS
2	AND DUTIES OF THE BOARD AND THE CHIEF EXECUTIVE OFFICER OF
. 3	THE STATE COMPENSATION MUTUAL INSURANCE FUND; TRANSFERRING
4	THE OFFICE OF WORKERS' COMPENSATION JUDGE TO THE DEPARTMENT
.5	OF LABOR AND INDUSTRY; AMENDING SECTIONS 2-15-1014,
6	2-15-1702, 2-18-103, <u>33-2-119,</u> 33-17-502, 33-18-212,
.7	<u>37-72-101,</u> 39-71-116, 39-71-201, 39-71-203, 39-71-206,
8	39-71-306 THROUGH 39-71-308, 39-71-403, 39-71-421,
9	39-71-604, 39-71-704, 39-71-901, 39-71-908, 39-71-910,
0	39-71-911, 39-71-913, 39-71-2303, 39-71-2307, 39-71-2308,
1	39-71-2321 THROUGH 39-71-2323, 39-71-2325, 39-71-2327,
2	39-71-2501, 39-72-201, AND 39-72-310, <u>50-71-102</u> , <u>AND</u>
23	50-73-102, MCA; REPEALING SECTIONS 2-15-1702, 39-71-2301,
24	39-71-2302, 39-71-2304 THROUGH 39-21-2306, AND 39-71-2324,
3 5	MCA. AND DECUTOING EFFECTUR DAMES "

SENATE BILL NO. 428

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There is no change on <u>SB 428</u> and will not be reprinted. Please refer to second reading (yellow) for complete text.



STANDING COMMITTEE REPORT

March 22, 1989 Page 1 of 10

Mr. Speaker: We, the committee on <u>Labor</u> report that <u>Senate</u>

<u>Bill 428</u> (third reading copy -- blue) <u>be concurred in as</u>

amended .

Signed: Angela Russell, Chairman

[REP. THOMAS WILL CARRY THIS BILL ON THE HOUSE FLOOR]

And, that such amendments read:

- 1. Title, line 16.
 Following: "2-18-103,"
 Insert: "19-3-1002, 19-3-1007, 19-3-1202, 19-13-601, 33-1-102,"
 Following: "33-2-119,"
 Insert: "33-16-1005, 33-16-1011,"
- 2. Title, line 17.
 Following: "37-72-101,"
 Insert: "39-1-103,"
 Following: "39-71-206,"
 Insert: "39-71-207,"
- Page 2, line 24 through page 3, line 1.
 Strike: line 24 through "is." on page 3, line 1
- 4. Page 3, line 1.
 Strike: "not"
- 5. Page 3, line 3.
 Strike: ", except for"
 Insert: "and shall insure"
- 6. Page 3, lines 24 and 25. Following: "corporation." on line 24 Strike: remainder of line 24 through "not" on line 25 Insert: "The state fund is"
- 7. Page 4, line 1. Following: "may" Insert: "not"
- 8. Page 4, line 2.
 Strike: ", except a state agency"

Insert: "unless an assigned risk plan is established under
[section 12] and is in effect"

- 9. Page 4, line 14. Strike: "12" Insert: "11"
- 10. Page 6, line 24. Strike: "12" Insert: "11"
- 11. Page 7, line 2. Strike: "12" Insert: "11"
- 12. Page 9, line 18.
 Following: "fund."
 Insert: "The state fund is not a member insurer for the purposes of the insurance guaranty association established pursuant to Title 33, chapter 10, part 1."
- 13. Page 9, lines 22 and 23.
 Strike: "12" on line 22
 Insert: "11"
 Strike: "and" on line 22 through "12]" on line 23
- 14. Page 9, line 24.
 Following: "{3}"
 Strike: "The"
 Insert: "If an assigned risk plan is established and administered pursuant to [section 12], the"
- 15. Page 10, line 10 through page 11, line 5. Strike: section 12 in its entirety Renumber: subsequent sections
- 16. Page 11, lines 6 and 7. Strike: "The commissioner of insurance shall promulgate" Insert: "Following the date on which the provisions of [this act] are implemented but no later than December 31, 1990, the commissioner of the department of labor and industry may order the establishment of"
- 17. Page 11, line 11.
 Following: "methods."
 Insert: "In determining whether to order an assigned risk plan
 to be established, the commissioner shall consider the effect a
 plan would have on the availability of workers' compensation

insurance and the need to provide competitive workers' compensation premium rates for employers in this state. If the commissioner orders the establishment of an assigned risk plan, it may not take effect until at least 6 months following the commissioner's order creating the plan."

18. Page 11,
Following: line 18
Insert: "(4) If an assigned risk plan is established and in
effect, the state fund, plan No. 3, is not required to insure any
employer in this state requesting coverage, and it may refuse
coverage for an employer, except for a state agency.

(5) If an assigned risk plan is established and in effect, an employer who is refused the coverage required by this chapter by the state fund, plan No. 3, and by at least two private insurers, plan No. 2, may be assigned coverage by the commissioner under the assigned risk plan pursuant to the procedure established by the commissioner for the equitable apportionment of coverage."

19. Page 12, line 3. Page 14, lines 1, 2, 9, and 12. Page 16, lines 8, 10, and 13. Page 17, lines 15, 20, and 23. Page 18, lines 2, 3, and 9. Page 19, lines 8, 9, 11, and 12. Page 20, lines 3, 14, 15, 20 (two places), and 23. Page 21, lines 5, 6 (two places), 11, and 14. Page 23, line 24. Page 24, lines 4, 10, and 14. Page 25, lines 5, 14, and 23 (two places). Page 26, lines 5 and 9. Page 27, line 4. Page 28, lines 1 and 5. Page 30, line 3. Page 34, line 10. Page 35, line 4. Page 42, lines 3, 5, 6, and 14. Page 46, line 23. Page 47, lines 17 and 23. Strike: "division", "division", "division", and "DIVISION" Insert: "department"

20. Page 13, lines 10 through 12. Strike: subsection (7) in its entirety Renumber: subsequent subsections

21. Page 30, lines 16 and 17. Following: "due" or line 16

22. Page 37, line 22. Following: "capacity;" Insert: "or" 23. Page 38, line 4. Strike: "; or" 24. Page 38, lines 5 through 8. Strike: "(c)" on line 5 through "33-18-212" on line 8 25. Page 39, lines 11 through 16. Strike: lines 11 through 16 in their entirety 26. Page 43, line 14. Strike: "13" Insert: "12" 27. Page 45, line 8. Strike: "workers' compensation division" Insert: "department" 28. Page 45, lines 21 through 23. Following: "(c)" on line 21 Strike: remainder of line 21 through line 23
Insert: ""department" means the department of labor and industry;" 29. Page 46, line 25 through page 47, line 2. Following: "(3)" on line 25 Strike: remainder of line 25 through page 47, line 2 Insert: ""Department" means the department of labor and industry." 30. Page 47, lines 14 through 16. Following: "(1)" on line 14 Strike: remainder of line 14 through "industry" on line 16 Following: "2-15-1702" Insert: ""Department" means the department of labor and industry" 31. Page 48. Following: line 23 Insert: "Section 50. Section 39-1-103, MCA, is amended to read: "39-1-103. Powers of department. (1) In discharging the duties imposed upon the department, the commissioner or his

authorized representatives may administer oaths, examine

witnesses under oath, take depositions or cause same to be taken,

Strike: remainder of line 16 through "EXPOSURE" on line 17

deputize any citizen 18 years of age or older to serve subpoenas upon witnesses, and issue subpoenas for the attendance of witnesses before him in the same manner as for attendance before district courts.

(2) The commissioner may likewise cause to be inspected any mine, factory, workshop, smelter, mill, warehouse, elevator, foundry, machine shop, or other industrial establishment.

(3) Nothing herein contained shall in any manner confer upon the commissioner the authority to interfere in any manner with the conduct of the matters under the control of the workers' compensation division, nor shall the commissioner be charged with the duty of enforcing any of the laws of the state pertaining to the affairs of the workers' compensation division or with the enforcement of the safety provisions of the Workers' Compensation Act:

(4) (3) Nothing in this chapter applies to labor violations preempted by federal law or regulation."

Section 51. Section 39-71-207, MCA, is amended to read:
"39-71-207. Merit system. Employees of the division, except
the administrator, department are included within the joint merit
system if such inclusion is required for the receipt of federal
funds by 29 CFR 1902.3(h) or by any other federal law or
regulation."

Section 52. Section 33-1-102, MCA, is amended to read:
"33-1-102. Compliance required -- exceptions -- health
service corporations -- health maintenance organizations -governmental insurance programs. (1) No person shall transact a
business of insurance in Montana or relative to a subject
resident, located, or to be performed in Montana without
complying with the applicable provisions of this code.

(2) No provision of this code shall apply with respect to:(a) domestic farm mutual insurers as identified in chapter

4, except as stated in chapter 4;

(b) domestic benevolent associations as identified in chapter 6, except as stated in chapter 6; and

(c) fraternal benefit societies, except as stated in

chapter 7.

(3) This code applies to health service corporations as prescribed in 33-30-102. The existence of such corporations is

Montana Code Annotated.

(4) This code does not apply to health maintenance

(4) This code does not apply to health maintenance organizations to the extent that the existence and operations of such organizations are authorized by chapter 31.

(5) This code does not apply to workers' compensation insurance programs provided for in Title 39, chapter 71, parts part 21 and 23, and related sections.

(6) This code does not apply to the state employee group insurance program established in Title 2, chapter 18, part 8.

(7) This code does not apply to insurance funded through the state self-insurance reserve fund provided for in 2-9-202.

(8) (a) This code does not apply to any arrangement, plan, or interlocal agreement between political subdivisions of this state whereby the political subdivisions undertake to separately or jointly indemnify one another by way of a pooling, joint retention, deductible, or self-insurance plan.

(b) This code does not apply to any arrangement, plan, or interlocal agreement between political subdivisions of this state or any arrangement, plan, or program of a single political subdivision of this state whereby the political subdivision provides to its officers, elected officials, or employees disability insurance or life insurance through a self-funded program."

Section 53. Section 33-16-1005, MCA, is amended to read:
"33-16-1005. Membership in rating organization required -exception -- filings with commissioner. (1) Every insurer, except
the division of workers' compensation including the state
compensation mutual insurance fund, writing workers' compensation
insurance in this state shall be a member of a workers'
compensation rating organization. No insurer may, at the same
time, belong to more than one rating organization with respect to
such insurance.

(2) A rating organization shall file with the insurance commissioner every manual of classifications and rules and every rating plan and advisory manual rates, including every modification of the foregoing. Every such filing shall state the effective date thereof. Any insurer writing pursuant to compensation plan No. 2 shall adhere to the manual rules and classifications and rating plans of the rating organization of which it is a member and may adopt by reference, in whole or in part, the advisory manual rates filed under this section. Nothing in this section, however, requires adherence by any insurer to any rates established or published by any rating organization."

Section 54. Section 33-16-1011, MCA, is amended to read: "33-16-1011. Classification and rating committee -- membership -- term. (1) There is a classification and rating committee.

(2) The committee is composed of five voting members, consisting of:

(a) three representatives of private insurance carriers writing workers' compensation insurance in Montana. The members must reside in Montana and shall be appointed by the Montana commissioner of insurance.

(b) one licensed independent insurance agent who resides in

March 22, 1989 Page 7

Montana, appointed by the Montana commissioner of insurance; and

(c) one representative of the division of workers compensation state compensation mutual insurance fund who is an employee of the division state fund and who shall be is appointed by the administrator of the division executive director of the state fund.

(3) Each member shall hold office for a period of 3 years. Any appointee who fills the vacancy of a member whose term has not expired shall fill only the remaining term and may be reappointed for a full term.

(4) Before appointments are to be made by the commissioner of insurance under subsections (2)(a) and (2)(b) above, established private organizations representing insurance carriers and independent insurance agents may submit names of individuals they recommend for appointments. The commissioner of insurance shall give consideration to such names submitted before appointments are made. However, the commissioner of insurance is not required to appoint any person from the names submitted.

(5) The committee shall be funded from the operations budget of the rating organization. Committee members may, if they request, be paid their actual and necessary travel expenses."

Section 55. Section 19-3-1007, MCA, is amended to read:
"19-3-1007. Allowance for duty-related disability. (1) The annual amount of retirement allowance payable to a member eligible for disability retirement for duty-related reasons and granted prior to July 1, 1977, is 50% of his final compensation. However, the annual amount of retirement allowance is 25% of final compensation for any period during which the member has been awarded compensation by the workers' compensation division, whether such compensation is received in periodic payments or in a lump sum. The annual amount of retirement allowance reverts to 50% of final compensation at the end of such period.

(2) Any retired member receiving a retirement allowance on July 1, 1977, who has previously been granted a duty-related disability under provisions in effect on June 30, 1977, will be subject to the provisions of this section after July 1, 1977."

Section 56. Section 19-3-1002, MCA, is amended to read: "19-3-1002. Eligibility for disability retirement. (1) Except as provided in subsection (2) and 19-3-1004, a member who is not eligible for service or early retirement but has completed 5 years of creditable service and has become disabled while in active service, as defined in 19-3-1001, is eligible for disability retirement.

(2) A member age 60 or older who has completed 5 years of creditable service and has had a duty-related accident forcing him to terminate his employment but who has not received or is ineligible to receive workers' compensation benefits under Title

39, chapter 71, for the duty-related accident may conditionally waive his eligibility for a service retirement to be eligible for disability retirement. The waiver is effective only upon approval by the board of his application for disability retirement. The board shall determine whether a member has become disabled under the provisions of 19-3-1003. The board may request any information on file with the workers' compensation division-state compensation mutual insurance fund concerning the duty-related accident. If no information is available, the board may request and the division state fund shall provide an investigative report on the disabling accident."

Section 57 Section 19-3-1202, MCA, is amended to read: "19-3-1202. Amount of death benefit. The amount of death benefit is the sum of $\{1\}$, $\{2\}$, and $\{3\}$ as follows:

(1) the member's accumulated contributions;

(2) an amount equal to one-twelfth of the compensation received by the member during the last 12 months of such compensation multiplied by the smaller of six or the number of years of his creditable service; provided, however, that this portion of the death benefit is not payable if the board receives a certification from the workers' compensation division of the state of Montana state compensation mutual insurance fund that it is paying compensation because the member's death resulted from injury or disease arising out of or in the course of employment; and

(3) the accumulated interest on the amounts in subsections (1) and (2) of this section to the first day of the month in which the benefit is paid."

Section 58. Section 19-13-601, MCA, is amended to read: "19-13-601. Deduction remitted to firemen's association -- member's contributions. (1) Each employer shall retain from the monthly compensation of each active member a sum equal to 1% of his monthly compensation for his services as a firefighter and shall remit this amount on a monthly basis to the Montana state firemen's association for the payment of premiums on a group life and accidental death and dismemberment insurance policy for members and to defray expenses incurred by the association when representing members of the plan.

(2) The member's contribution to the retirement system for each active member is 6% of his monthly compensation.

(3) If a member receives compensation under the provisions of the Workers' Compensation Act, Title 39, chapter 71, the amount received must be included as part of his monthly compensation for purposes of determining contributions and service credits under the retirement system. Contributions made under this section, 19-13-604, and 19-13-605 must be based on the total compensation received by the member from his employer and

March 22, 1989 Page 9

from the workers' compensation division during the period of

disability.

(4) Each employer, pursuant to section 414(h)(2) of the federal Internal Revenue Code, as amended and applicable on July 1, 1987, shall pick up and pay the contributions which would be payable by the member under subsection (2) for service rendered after June 30, 1987.

(5) The member's contributions picked up by the employer must be designated for all purposes of the retirement system as the member's contributions, except for the determination of a tax upon a distribution from the retirement system. These contributions must become part of the member's accumulated contributions but must be accounted for separately from those previously accumulated.

(6) The member's contributions picked up by the employer must be payable from the same source as is used to pay compensation to the member and must be included in the member's monthly compensation as defined in 19-13-104. The employer shall deduct from the member's compensation an amount equal to the amount of the member's contributions picked up by the employer and remit the total of the contributions to the board."

Renumber: subsequent sections

32. Page 49, line 7. Strike: "and" Following: "through" Strike: "12" Insert: "11, 44, and 45"

33. Page 49, line 10. Strike: "and" Following: "through" Strike: "12" Insert: "11, 44, and 45"

34. Page 49, line 15. Strike: "13" Insert: "12"

35. Page 49, line 17. Strike: "13" Insert: "12"

36. Page 49, line 19. Following: line 18 Insert: "(1)"

37. Page 49, line 24.

Following: line 23
Insert: "(2) It is intended that current employees of the division of workers' compensation whose functions are transferred to the state compensation mutual insurance fund shall retain employment rights consistent with their positions at the time of transfer."

38. Page 50.
Following: line 7
Insert: "NEW SECTION. Section 64. Name change -- code commissioner instruction. (1) In the provisions of the Montana Code Annotated, the terms "division of workers' compensation", "division", and "workers' compensation division", meaning the division of workers' compensation, are changed to "department of labor and industry" or "department", meaning the "department of labor and industry".

(2) The code commissioner shall designate, in a manner consistent with [this act], workers' compensation insurance regulatory functions allocated to the division of workers' compensation by the 51st legislature to the department of labor and industry that are not so designated by [this act].

(3) Wherever it appears in 39-71-205, 39-71-222 through 39-71-224, 39-71-613, 39-71-902, 39-71-904, 39-71-910, or in law enacted by the 51st legislature, the code commissioner is directed to change the term "administrator" or "his" to "department", meaning the department of labor and industry." Renumber: subsequent section

39. Page 50, line 9. Following: "50" Strike: "54, 55" Insert: "39, 60 through 64"

40. Page 50, line 11.
Strike: "and"
Following: "through"
Insert: "38, and 40 through"
Strike: "53"
Insert: "59"

41. Page 50, line 13. Strike: "55" Insert: "63" Strike: "October 1, 1989" Insert: "January 1, 1990"

COMMITTEE OF THE WHOLE AMENDMENT SENATE BILL 428 Representative Fred Thomas

March 28, 1989 1:31 pm Page 1 of 1

I move to amend SENATE BILL 428 (third reading Mr. Chairman:

copy -- blue).

Signed:

Fred Thomas

And, that such amendment to SENATE BILL 428 read as follows:

1. Page 49, line 19. Strike: "2-15-131"

Insert: "2-15-132"

ADOPT

REJECT

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2	INTRODUCED BY THAYER, NATHE, THOMAS, NOBLE, MEYER,					
3	DRISCOLL, PAVLOVICH, GRADY, MAZUREK, WILLIAMS, SMITH,					
4	SQUIRES, GLASER, RAPP-SVRCEK, RUSSELL, AKLESTAD,					
5	DEVLIN, RASMUSSEN, GRINDE, MARKS					
6	BY REQUEST OF THE GOVERNOR					
7						
8	A BILL FOR AN ACT ENTITLED: "AN ACT CREATING THE STATE					
9	COMPENSATION MUTUAL INSURANCE FUND TO INSURE EMPLOYERS FOR					
.0	WORKERS' COMPENSATION AND OCCUPATIONAL DISEASE LIABILITY;					
1	PROVIDING FOR A BOARD OF DIRECTORS; ESTABLISHING THE POWERS					
.2	AND DUTIES OF THE BOARD AND THE CHIEF EXECUTIVE OFFICER OF					
.3	THE STATE COMPENSATION MUTUAL INSURANCE FUND; TRANSFERRING					
. 4	THE OFFICE OF WORKERS' COMPENSATION JUDGE TO THE DEPARTMENT					
L 5	OF LABOR AND INDUSTRY; AMENDING SECTIONS 2-15-1014,					
16	2-15-1702, 2-18-103, 19-3-1002, 19-3-1007, 19-3-1202,					
١7	19-13-601, 33-1-102, 33-2-119, 33-16-1005, 33-16-1011,					
18	33-17-502, 33-18-212, <u>37-72-101</u> , <u>39-1-103</u> , 39-71-116,					
19	39-71-201, $39-71-203$, $39-71-206$, $39-71-207$, $39-71-306$					
20	THROUGH 39-71-308, 39-71-403, 39-71-421, 39-71-604,					
21	39-71-704, 39-71-901, 39-71-908, 39-71-910, 39-71-911,					
22	39-71-913, 39-71-2303, 39-71-2307, 39-71-2308, 39-71-2321					
23	THROUGH 39-71-2323, 39-71-2325, 39-71-2327, 39-71-2501,					
24	39-72-201, AND 39-72-310, 50-71-102, AND 50-73-102, MCA;					
25	PERFALING SECTIONS 2-15-1702, 39-71-2301, 39-71-2302,					

SENATE BILL NO. 428

39-71-2304 THROUGH	39-21-2306,	AND	39-71-2324,	MCA;	AND
PROVIDING EFFECTIVE	DATES."		•		

STATEMENT OF INTENT

A statement of intent is required for this bill because [section 8] grants rulemaking authority to the newly created state fund to adopt or repeal rules or amend existing rules to implement the new state compensation mutual insurance fund. The chief purposes of creating the state fund as a mutual insurer and placing it in a department other than the department of labor are:

- (1) to remove the inherent conflict between the interests of the workers' compensation division in regulating all workers' compensation insurers in this state, including the state compensation insurance fund, and the interests of the state fund as a workers' compensation insurer; and
 - (2) to ensure the solvency of the new state fund.
 - The legislature recognizes that the fund actuary has determined that at June 30, 1988, a full funding deficiency of \$157.3 million existed for the present state compensation insurance fund. The legislature intends that the new state compensation mutual insurance fund adopt rules in a manner that will assure the solvency of the new fund. Rates must be set on an actuarially sound basis as required by state law.

Tofurther-ensure-the-solvency-of-the-state-fund;-it-is-not					
the-workers1-compensation~insurer-oflastresort7asthe					
statefundpresentlyis: The new state fund would not be					
bound to insure all employers who apply to it for workers'					
compensation coverage, except for AND SHALL INSURE state					
agencies. Itcouldrefusetoinsureanemployerit					
considered-a-poor-risk:					

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As the primary means of ensuring the solvency of the state fund, it must institute safety programs and set rates in a manner that awards employers who provide a safe working environment and penalizes employers who do not.

The legislature further intends that the new state fund institute programs to automate the processing of claims and payment of benefits. The state fund may contract out to the private sector certain claims administration and servicing functions if the state fund determines it to be cost-effective.

18 THE LEGISLATURE INTENDS THAT THE GOVERNOR SHALL

19 IMPLEMENT STAGGERED TERMS IN NAMING THE INITIAL MEMBERS OF

20 THE BOARD.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. Section 1. Intent and purpose of plan.

It is the intent and purpose of the state fund to allow
employers the option to insure their liability for workers'

-3-

compensation and occupational disease coverage with a nonprofit, independent public corporation. The state-fund-is a--domestic--mutual--insurer,--it--is--not THE STATE FUND IS 3 required to insure any employer in this state requesting coverage, and it may NOT refuse coverage for an employer, except-a-state-agency--that-the-state-fund-determines-to--be a-bad-risk UNLESS AN ASSIGNED RISK PLAN IS ESTABLISHED UNDER (SECTION 12) AND IS IN EFFECT. The state fund must be neither more nor less than self-supporting. Premium rates 9 must be set at a level sufficient to fund the insurance 10 11 program, including the costs of administration, benefits, 12 and adequate reserves. For the purpose of keeping the state fund solvent, it must implement safety--programs VARIABLE 13 PRICING LEVELS WITHIN INDIVIDUAL RATE CLASSIFICATIONS to 14 reward an employer with a good safety record and penalize an 15 16 employer with a poor safety record.

NEW SECTION. Section 2. Definitions. Unless the context requires otherwise, in [sections 1, 2, and 4 through 19 12 11] the following definitions apply:

20 (1) "Board" means the board of directors of the state
21 compensation mutual insurance fund provided for in [section
22 3].

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- (2) "Department" means the department of administration provided for in 2-15-1001.
- 25 (3) "Executive director" means the chief executive

SB 428

SB 428

officer of the state compensation mutual insurance fund.

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- 2 (4) "State fund" means the state compensation mutual
 3 insurance fund provided for in [section 4]. It is also known
 4 as compensation plan No. 3 or plan No. 3.
- 5 NEW SECTION. Section 3. Board of directors of the 6 state compensation mutual insurance fund. (1) There is a 7 board of directors of the state compensation mutual insurance fund.
- 9 (2) The board is allocated to the department for 10 administrative purposes only as prescribed in 2-15-121. 11 However, the board may employ its own staff.
- 12 (3) The board may provide for its own office space and the office space of the state fund.
 - (4) The board consists of five members appointed by the governor. The executive director of the state fund is an ex officio nonvoting member.
 - (5) At least three of the five members shall represent state fund policyholders and may be employees of state fund policyholders. At least three members of the board shall represent private, for-profit enterprises. A member of the board may not:
- 22 (a) represent or be an employee of an insurance 23 company that is licensed to transact workers' compensation 24 insurance under compensation plan No. 2; or
- 25 (b) be an employee of a self-insured employer under

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compensation plan No. 1.

- 2 (6) A member is appointed for a term of 4 years. The
 3 terms of board members must be staggered. A member of the
 4 board may serve no more than two 4-year terms. A member
 5 shall hold office until a successor is appointed and
 6 qualified.
- 7 (7) The board-is--designated--as MEMBERS MUST BE

 8 APPOINTED AND COMPENSATED IN THE SAME MANNER AS MEMBERS OF a

 9 quasi-judicial board for--the--purposes--of AS PROVIDED IN

 10 2-15-124, except that the requirement that at least one

 11 member be an attorney does not apply.
- 12 NEW SECTION. Section 4. State compensation insurance fund created. There is a state compensation mutual 13 insurance fund known as the state fund that is a nonprofit, 14 independent public corporation established for the purpose 15 16 of allowing an option for employers to insure their 17 liability for workers' compensation and occupational disease coverage under this chapter. The state fund exists as a 18 19 domestic mutual insurer as defined in 33-3-102.
- 20 <u>NEW SECTION.</u> **Section 5.** Management of state fund -21 powers and duties of the board. (1) The management and
 22 control of the state fund is vested solely in the board.
- 23 (2) The board is vested with full power, authority,
 24 and jurisdiction over the state fund. The board may perform
 25 all acts necessary or convenient in the exercise of any

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SB 0428/03

SB 0428/03

power, authority, or jurisdiction over the state fund, either in the administration of the state fund or in connection with the insurance business to be carried on under the provisions of [sections 1, 2, and 4 through ½2 11], as fully and completely as the governing body of a private mutual insurance carrier, in order to fulfill the objectives and intent of [sections 1, 2, and 4 through ½2 11].

NEW SECTION. Section 6. Personal liability excluded. The members of the board, the executive director, and employees of the state fund are not liable personally, either jointly or severally, for any debt or obligation created or incurred by the state fund.

NEW SECTION. Section 7. Appointment of executive director — management staff. The board shall appoint an executive director of the state fund who has general responsibility for the operations of the state fund. The executive director must have executive level experience, with knowledge of the insurance industry. The executive director must receive compensation as set by the board and serve at the pleasure of the board. The executive director may hire the management staff of the state fund, each of whom serves at the pleasure of the executive director.

NEW SECTION. Section 8. Powers of the state fund -- rulemaking. For the purposes of carrying out its functions,

the state fund may:

- 2 (1) insure any employer for workers' compensation and
 3 occupational disease liability as the coverage is required
 4 by the laws of this state and, in connection with the
 5 coverage, provide employers' liability insurance. The state
 6 fund may charge a minimum yearly premium to cover its
 7 administrative costs for coverage of a small employer.
 - (2) sue and be sued;
- 9 (3) adopt, amend, and repeal rules relating to the 10 conduct of its business:
- 11 (4) enter into contracts relating to the
 12 administration of the state fund, including claims
 13 management, servicing, and payment;
 - (5) collect and disburse money received;
 - (6) adopt classifications and charge premiums for the classifications so that the state fund will be neither more nor less than self-supporting. The state fund must belong to the national council on compensation insurance and shall use the classifications of employment adopted by the national council AND CORRESPONDING RATES AS A BASIS FOR SETTING ITS OWN RATES.
- 22 (7) pay the amounts determined due under a policy of 23 insurance issued by the state fund;
 - (8) hire personnel;
 - (9) declare dividends if there is an excess of assets

SB 428

SB 0428/03 SB 0428/03

over liabilities. However, dividends may not be paid until the unfunded liability of the state fund is eliminated $\underline{\text{AND}}$ ADEOUATE ACTUARIALLY DETERMINED RESERVES ARE DETERMINED.

(10) perform all functions and exercise all powers of a domestic mutual insurer that are necessary, appropriate, or convenient for the administration of the state fund.

NEW SECTION. Section 9. Property of the state fund -investment required. All premiums and other money paid to
the state fund, all property and securities acquired through
the use of money belonging to the state fund, and all
interest and dividends earned upon money belonging to the
state fund are the sole property of the state fund and must
be used exclusively for the operations and obligations of
the state fund. The money collected by the state fund may
not be used for any other purpose. However, state fund money
must be invested by the board of investments provided for in
2-15-1808.

NEW SECTION. Section 10. State fund a mutual insurance carrier. (1) The state fund is a domestic mutual insurer controlled by the laws relating to the regulation of domestic mutual insurers in this state. However, the formation, incorporation, bylaws, and bonding requirements set forth in Title 33, chapter 3, do not apply to the state fund. THE STATE FUND IS NOT A MEMBER INSURER FOR THE PURPOSES OF THE INSURANCE GUARANTY ASSOCIATION ESTABLISHED

PURSUANT TO TITLE 33, CHAPTER 10, PART 1.

- 2 (2) The commissioner of insurance may not terminate
 3 the operations of the state fund based on insolvency due to
 4 the unfunded liability that is recognized to exist on the
 5 date of passage of [sections 1, 2, and 4 through 12 11] and
 6 recognized-in-[section-12].
- 7 (3) The IF AN ASSIGNED RISK PLAN IS ESTABLISHED AND
 8 ADMINISTERED PURSUANT TO [SECTION 12], THE state fund is
 9 subject to the premium tax liability for insurers as
 10 provided in 33-2-705 BASED ON EARNED PREMIUM AND PAID ON
 11 REVENUE FROM THE PREVIOUS FISCAL YEAR.
 - NEW SECTION. Section 11. Assets and liabilities of prior state fund. All assets and funds held by the state compensation insurance fund established in 39-71-2301 through 39-71-2308 and 39-71-2321 through 39-71-2327 must be transferred to the state fund, and the state fund shall assume liability for all outstanding claims and indebtedness of the previously existing state fund.
 - NEW-SECTION: -- Section-12. -- Unfunded -- Liability -- (L) -- It is recognized at the date of creation of the state fund that there exists an unfunded liability that is being assumed -- by the -- newly -- created -- state -- fund -- for -- the -- prior -- state compensation -- insurance -- fund -s -- liability -- for -- industrial injuries -- and -- occupational -- diseases -- that -- occurred -- prior -- to July -1; -1987; -- To -assist -- the -- state -- fund -- in -- alleviating -- the

fromthe-following-sources-must-be-transferred-to-the-newly
created-state-fund:

fa) -- the - state - fund;

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(b)--excess-or-reinsurance--policies--on--self-insurers
writing--coverage--on-a-self-insurer's-workers'-compensation
program-under-compensation-plan-No;-l;-and

(c)--private--insurance---carriers---writing---workers+
compensation-insurance-under-compensation-plan-No--2-

t2)--The-premium-taxes-must-be-transferred-to-the-state fund--for-payment-of-the-unfunded-liability--The-premium-tax payments-must-continue-until-the-unfunded-liability-has-been paid;-at-which-time-the-premium-taxes-must-be--paid--to--the general-fund;

NEW SECTION. Section 12. Assigned risk plan. (1) The commissioner-of-insurance--shall--promutgate FOLLOWING THE DATE ON WHICH THE PROVISIONS OF [THIS ACT] ARE IMPLEMENTED BUT NO LATER THAN DECEMBER 31, 1990, THE COMMISSIONER OF THE DEPARTMENT OF LABOR AND INDUSTRY MAY ORDER THE ESTABLISHMENT OF and administer a plan to equitably apportion among the state fund, plan No. 3, and private insurers, plan No. 2, the coverage required by this chapter for employers who are unable to procure coverage through ordinary methods. IN DETERMINING WHETHER TO ORDER AN ASSIGNED RISK PLAN TO BE ESTABLISHED, THE COMMISSIONER SHALL CONSIDER THE EFFECT A

- 1 PLAN WOULD HAVE ON THE AVAILABILITY OF WORKERS' COMPENSATION
 2 INSURANCE AND THE NEED TO PROVIDE' COMPETITIVE WORKERS'
- 3 COMPENSATION PREMIUM RATES FOR EMPLOYERS IN THIS STATE, IF
- 4 THE COMMISSIONER ORDERS THE ESTABLISHMENT OF AN ASSIGNED
- RISK PLAN, IT MAY NOT TAKE EFFECT UNTIL AT LEAST 6 MONTHS
- 6 FOLLOWING THE COMMISSIONER'S ORDER CREATING THE PLAN.
- 7 (2) All plan No. 2 insurers and the state fund shall8 subscribe to and participate in the assigned risk plan.
- 9 (3) If an insurer refuses to accept its equitable
 10 apportionment under the assigned risk plan, the commissioner
 11 of insurance may suspend or revoke the insurer's authority
 12 to issue workers' compensation eoverage-contracts INSURANCE
 13 POLICIES in this state.
- 14 (4) IF AN ASSIGNED RISK PLAN IS ESTABLISHED AND IN
 15 EFFECT, THE STATE FUND, PLAN NO. 3, IS NOT REQUIRED TO
- 16 INSURE ANY EMPLOYER IN THIS STATE REQUESTING COVERAGE, AND
- 17 IT MAY REFUSE COVERAGE FOR AN EMPLOYER, EXCEPT FOR A STATE
- 18 AGENCY.
- 19 (5) IF AN ASSIGNED RISK PLAN IS ESTABLISHED AND IN
- 20 EFFECT, AN EMPLOYER WHO IS REFUSED THE COVERAGE REQUIRED BY
- 21 THIS CHAPTER BY THE STATE FUND, PLAN NO. 3, AND BY AT LEAST
- 22 TWO PRIVATE INSURERS, PLAN NO. 2, MAY BE ASSIGNED COVERAGE
- 23 BY THE COMMISSIONER UNDER THE ASSIGNED RISK PLAN PURSUANT TO
- 24 THE PROCEDURE ESTABLISHED BY THE COMMISSIONER FOR THE
- 25 EQUITABLE APPORTIONMENT OF COVERAGE.

- Section 13. Section 39-71-116, MCA, is amended to read:
- - (1) "Average weekly wage" means the mean weekly earnings of all employees under covered employment, as defined and established annually by the Montana department of labor and industry. It is established at the nearest whole dollar number and must be adopted by the division DEPARTMENT of-workers1-compensation prior to July 1 of each year.
- 13 (2) "Beneficiary" means:

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- (a) a surviving spouse living with or legally entitled to be supported by the deceased at the time of injury;
 - (b) an unmarried child under the age of 18 years;
- 17 (c) an unmarried child under the age of 22 years who
 18 is a full-time student in an accredited school or is
 19 enrolled in an accredited apprenticeship program;
- 20 (d) an invalid child over the age of 18 years who is 21 dependent upon the decedent for support at the time of 22 injury:
- 23 (e) a parent who is dependent upon the decedent for 24 support at the time of the injury (however, such a parent is 25 a beneficiary only when no beneficiary, as defined in

- subsections (2)(a) through (2)(d) of this section, exists);
 and
- 3 (f) a brother or sister under the age of 18 years if 4 dependent upon the decedent for support at the time of the 5 injury (however, such a brother or sister is a beneficiary 6 only until the age of 18 years and only when no beneficiary, 7 as defined in subsections (2)(a) through (2)(e) of this 8 section, exists).
- 9 (3) "Casual employment" means employment not in the 10 usual course of trade, business, profession, or occupation 11 of the employer.
- 12 (4) "Child" includes a posthumous child, a dependent 13 stepchild, and a child legally adopted prior to the injury.
- 14 (5) "Days" means calendar days, unless otherwise
 15 specified.
- 16 (6) "Department" means the department of labor and 17 industry.
- 18 (7)--"Division"---means--the--division---of--workers+

 19 compensation-<u>insurance-compliance-of-the-department-of-labor</u>

 20 and-industry-provided-for-in-2-15-1782-
- 21 (8)(7) "Fiscal year" means the period of time between 22 July 1 and the succeeding June 30.
- 23 t9)(8) "Insurer" means an employer bound by 24 compensation plan No. 1, an insurance company transacting 25 business under compensation plan No. 2, the state

-13- SB 428

-14-

SB 428

compensation-insurance fund under compensation plan No. 3, or the uninsured employers' fund provided for in part 5 of this chapter.

4 (±0)(9) "Invalid" means one who is physically or
5 mentally incapacitated.

fiff(10) "Maximum healing" means the status reached
when a worker is as far restored medically as the permanent
character of the work-related injury will permit.

ti2)(11) "Order" means any decision, rule, direction, requirement, or standard of the division DEPARTMENT or any other determination arrived at or decision made by the division DEPARTMENT.

ti3)(12) "Payroll", "annual payroll", or "annual payroll for the preceding year" means the average annual payroll of the employer for the preceding calendar year or, if the employer shall not have operated a sufficient or any length of time during such calendar year, 12 times the average monthly payroll for the current year; provided, that an estimate may be made by the division DEPARTMENT for any employer starting in business where no average payrolls are available, such estimate to be adjusted by additional payment by the employer or refund by the division DEPARTMENT, as the case may actually be, on December 31 of such current year.

(14)(13) "Permanent partial disability" means a

condition, after a worker has reached maximum healing, in which a worker:

- (a) has a medically determined physical restriction as a result of an injury as defined in 39-71-119; and
- 5 (b) is able to return to work in the worker's job pool 6 pursuant to one of the options set forth in 39-71-1012 but 7 suffers impairment or partial wage loss, or both.

fiff(14) "Permanent total disability" means a condition
resulting from injury as defined in this chapter, after a
worker reaches maximum healing, in which a worker is unable
to return to work in the worker's job pool after exhausting
all options set forth in 39-71-1012.

(16)(15) The term "physician" includes "surgeon" and in either case means one authorized by law to practice his profession in this state.

(†7)(16) The "plant of the employer" includes the place of business of a third person while the employer has access to or control over such place of business for the purpose of carrying on his usual trade, business, or occupation.

(18)(17) "Public corporation" means the state or any county, municipal corporation, school district, city, city under commission form of government or special charter, town, or village.

(19)(18) "Reasonably safe place to work" means that the place of employment has been made as free from danger to the

-15- SB 428

-16- SB 428

- life or safety of the employee as the nature of the
 employment will reasonably permit.
- 3 t207(19) "Reasonably safe tools and appliances" are
 4 such tools and appliances as are adapted to and are
 5 reasonably safe for use for the particular purpose for which
 6 they are furnished.
- 7 (21)(20) "Temporary total disability" means a condition
 8 resulting from an injury as defined in this chapter that
 9 results in total loss of wages and exists until the injured
 10 worker reaches maximum healing.
- 11 (22†(21) "Year", unless otherwise specified, means
 12 calendar year."
- 13 **Section 14.** Section 39-71-201, MCA, is amended to 14 read:

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compensation administration fund. (1) A workers' compensation administration fund is established out of which all costs of administering the Workers' Compensation and Occupational Disease Acts and the various occupational safety acts the division DEPARTMENT must administer are to be paid upon lawful appropriation. The following moneys money collected by the division DEPARTMENT shall must be deposited in the state treasury to the credit of the workers' compensation administrative fund and shall must be used for the administrative expenses of the division DEPARTMENT:

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- 1 (a) all fees and penalties provided in 39-71-205 and 2 39-71-304;
- 3 (b) all fees paid for inspection of boilers and 4 issuance of licenses to operating engineers as required by 5 law;
- 6 (c) all fees paid from an assessment on each plan No. 1 employer, plan No. 2 insurer, and plan No. 3, the state . 8 insurance fund. The assessments shall must be levied 9 against the preceding calendar year's gross annual payroll 10 of the plan No. 1 employers and the gross annual direct premiums collected in Montana on the policies of the plan 11 12 No. 2 insurers, insuring employers covered under the chapter, during the preceding calendar year. However, no 13 14 assessment of the plan No. 1 employer or plan No. 2 insurer 15 shall may be less than \$200. The assessments shall must be 16 sufficient to fund the direct costs identified to the three plans and an equitable portion of the indirect costs based 17 18 on the ratio of the preceding fiscal year's indirect costs 19 distributed to the plans, using proper accounting and cost 20 allocation procedures. Plan No. 3 shall must be assessed an 21 amount sufficient to fund its direct costs and an equitable 22 portion of the indirect costs as referred to above. 23 sources of revenue, including unexpended funds from the 24 preceding fiscal year, shall must be used to reduce the 25 costs before levying the assessments.

(2) The administration fund shall must be debited with expenses incurred by the division <u>DEPARTMENT</u> in the general administration of the provisions of this chapter, including the salaries of its members, officers, and employees and the travel expenses of the members, officers, and employees, as provided for in 2-18-501 through 2-18-503, as amended, incurred while on the business of the division <u>DEPARTMENT</u> either within or without the state.

- (3) Disbursements from the administration money shall must be made after being approved by the division DEPARTMENT upon claim therefor."
- Section 15. Section 39-71-203, MCA, is amended to read:
- "39-71-203. Powers of division <u>DEPARTMENT</u> -- rules -staffing. (1) The division <u>DEPARTMENT</u> is hereby vested with
 full power, authority, and jurisdiction to do and perform
 any and all things,-whether-herein-specifically-designated
 or-in-addition-thereto; that are necessary or convenient in
 the exercise of any power, authority, or jurisdiction
 conferred upon it under this chapter.
- (2) The division DEPARTMENT may adopt rules to carry out the provisions of this chapter.
- f3;--The--division-shall-employ-sufficient-personnel-to
 allow-it-to-meet-the-claims-processing--goals--contained--in
 39-71-604---The--division--shall-implement-staffing-patterns

- that-are-supported-by-indicators-of-workload:--The-open-file
 is-the-workload-indicator-for--claims--processing:--and--the
 number--of--open--claims-per-claims-examiner-may-not-be-less
 than-300:-The-claims--support--staff:--including--the--file:
 medical--pay:--and-new-claims-units:-may-not-exceed-two-PTEs
 per-claims-examiner:--The--administrative--and--underwriting
 staffing--must--be--based--on--the--number-of-premium-paying
 policyholders--and--may--not--exceed--l:4--PTEs--per---l:000
 policyholders-
 - (4)--The--division-administrator-shall-submit-a-revised operation-plan-to-the-budget-office-for-review-and--approval and-to-the-legislative-finance-committee-for-review-whenever increases--or--decreases-of-staff-are-necessary-to-implement the-provisions-of-subsection-(3):
 - (5)--Punds-from-the-state-special-revenue-fund-shall-be
 used-to-implement-subsection-(3);"
- **Section 16.** Section 39-71-206, MCA, is amended to 18 read:
 - "39-71-206. Legal advisers adviser ADVISERS of division DEPARTMENT and state fund. (1) The attorney general shall-be is the legal adviser of the division DEPARTMENT and the state fund and shall represent it either entity in all proceedings whenever—so if requested by the division DEPARTMENT or state fund any-member-thereof. THE DIVISION DEPARTMENT AND STATE FUND MAY EMPLOY OTHER ATTORNEYS OR

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LEGAL	ADVISERS	AS	THEY	CONSIDER	NECESSARY.

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- (2)--The-division-may,-in-the-investigation-and-defense of-cases-under-plan-No--3-of-the-Workers--Compensation--Act, employ--such--other--attorney--or--legal-adviser-as-it-deems necessary-and--pay--for--the--same--out--of--the--industrial insurance-account-in-the-expendable-trust-fund."
- 7 **Section 17.** Section 39-71-306, MCA, is amended to 8 read:
 - "39-71-306. Płan-one-employers-and-płan--two--insurers

 Insurers to file duplicate--receipts SUMMARY REPORTS OF

 BENEFITS paid for injuries and statements of medical

 expenditures. Every employer-coming-under-the-provisions-of

 compensation-plan-Nor-l-and-every-insurer-coming--under--the

 provisions--of--compensation-plan-Nor-2 insurer shall, on or

 before the 15th day of each and every month, file with the

 division DEPARTMENT:
 - (1) duplicate-receipts SUMMARY REPORTS OF BENEFITS for all payments made during the previous month to injured workers or their beneficiaries or dependents; and
- 20 (2) statements showing the amounts expended during the 21 previous month for medical, surgical, and hospital services 22 for injured workers and for the burial of deceased workers."
- 23 **Section 18.** Section 39-71-307, MCA, is amended to 24 read:
- 25 *39-71-307. Employers and insurers to file reports of

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- accidents. (1) Every employer of-labor and every insurer is 1 hereby required to file with the division DEPARTMENT, under 3 such division DEPARTMENT rules as the division may from time to--time--make, a full and complete report of every accident to an employee arising out of or in the course of his employment and resulting in loss of life or injury to such 7 person the employee. Such The reports shall must be furnished to the division DEPARTMENT in such the form and such detail as the division DEPARTMENT shall--from--time--to time--prescribe prescribes and shall--make must provide 10 11 specific answers to all questions required by the division DEPARTMENT under its rules.;-except;-in-case-he However, if 12 13 an employee EMPLOYER is unable to answer any-such-questions, a-good-and-sufficient-reason-shall-be-given-for-such-failure 14 15 a question, he shall state the reason he is unable to 16 answer.
 - (2) Every insurance——company insurer transacting business under this chapter shall, at the time and in the manner prescribed by the division DEPARTMENT, make and file with the division DEPARTMENT such the reports of accidents as the division DEPARTMENT may-require requires."
- 22 **Section 19.** Section 39-71-308, MCA, is amended to 23 read:
- "39-71-308. Neglect or refusal of public corporation
 to file payroll reports -- arbitrary assessment by division

DEPARTMENT. Whenever-any If a public corporation insured by the state compensation-insurance fund neglects or refuses to file prescribed payroll reports of its employees, the division DEPARTMENT may levy an arbitrary assessment upon such the public corporation in an amount of \$75 for each such assessment. The assessment must be collected in the manner provided in this chapter for the collection of assessments."

9 Section 20. Section 39-71-403, MCA, is amended to 10 read:

election of plan by other public corporations. (1) Where If a state agency is the employer, the terms, conditions, and provisions of compensation plan No. 3, state fund, shall—be are exclusive, compulsory, and obligatory upon both employer and employee. Any sums necessary to be paid under the provisions of this chapter by any state agency shall—be are considered to be ordinary and necessary expense of the agency, and the agency shall make appropriation of and pay such the sums into the state compensation—insurance fund at the time and in the manner provided for in this chapter, notwithstanding that the state agency may have failed to anticipate such ordinary and necessary expense in any budget, estimate of expenses, appropriations, ordinances, or otherwise.

(2) A public corporation, other than a state agency, may elect coverage under compensation plan No. 1, employer; plan No. 2, insurer; or plan No. 3, state insurance fund; separately or jointly with any other public corporation, other than a state agency. A public corporation electing compensation plan No. 1 may purchase reinsurance. A public corporation electing compensation plan No. 1 is subject to the same provisions as a private employer electing compensation plan No. 1.

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- (3) A public corporation, other than a state agency, that elects plan No. 1 may establish a fund sufficient to pay the compensation and benefits provided for in this chapter and chapter 72 and to discharge all liabilities that reasonably incur during the fiscal year for which the election is effective. Proceeds from the fund must be used only to pay claims covered by this chapter and chapter 72 and for actual and necessary expenses required for the efficient administration of the fund.
- (4) All money in the fund established under subsection (3) not needed to meet immediate expenditures must be invested by the governing body of the public corporation, and all proceeds of the investment shall be credited to the fund."
- **Section 21.** Section 39-71-421, MCA, is amended to read:

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*39-71-421. Financial incentives to institute safety 1 programs. The -- state -- compensation - insurance - fundy - plan - No -37-and-private Private insurers;-plan-Nor--27 INSURERS may provide financial incentives to an employer who implements a formal safety program. The-insurance-carrier An insurer may provide to an employer a premium discount that reflects the degree of risk diminished by the implemented safety program."

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read:

*39-71-604. Application for compensation. (1) Where If a worker is entitled to benefits under this chapter, the worker shall file with the insurer or the division DEPARTMENT all reasonable information needed by the insurer to determine compensability. It is the duty of the worker's attending physician to lend all necessary assistance in making application for compensation and such proof of other matters as may be required by the rules of the division DEPARTMENT without charge to the worker. The filing of forms or other documentation by the attending physician does not constitute a claim for compensation.

Section 22. Section 39-71-604, MCA, is amended to

(2) Where If death results from an injury, the parties entitled to compensation or someone in their behalf shall file a claim with the insurer or the division DEPARTMENT. The claim must be accompanied with proof of death and proof

- 1 of relationship, showing the parties entitled to compensation, certificate of the attending physician, if any, and such other proof as may be required by the division 3 4 DEPARTMENT.
- 5 +3) -- The -- qoal -of-the-division-is-to-process-all-claims for-compensation-within-14-days-after-initial-acceptance--of 7 liability-for-a-claim-"
- Section 23. Section 39-71-704, MCA, is amended to 9 read:
- *39-71-704. Payment of medical, hospital, and related 10 11 services -- fee schedules and hospital rates. (1) In 12 addition to the compensation provided by this chapter and as 13 an additional benefit separate and apart from compensation, the following shall must be furnished: 14
 - (a) After the happening of the injury, the insurer shall furnish, without limitation as to length of time or dollar amount, reasonable services by a physician or surgeon, reasonable hospital services and medicines when needed, and such other treatment as may be approved by the division DEPARTMENT for the injuries sustained.
 - (b) The insurer shall replace or repair prescription eyeglasses, prescription contact lenses, prescription hearing aids, and dentures that are damaged or lost as a result of an injury, as defined in 39-71-119, arising out of and in the course of employment.

-25-SB 428

-26-

SB 428

(2) A relative value fee schedule for medical. chiropractic, and paramedical services provided for in this chapter, excluding hospital services, shall must be established annually by the workers'--compensation division DEPARTMENT and become effective in January of each year. The maximum fee schedule must be adopted as a relative value fee schedule of medical, chiropractic, and paramedical services. with unit values to indicate the relative relationship within each grouping of specialties. Medical fees must be based on the median fees as billed to the state compensation insurance fund during the year preceding the adoption of the schedule. THE STATE FUND SHALL REPORT FEES BILLED IN THE FORM AND AT THE TIMES REQUIRED BY THE DIVISION DEPARTMENT. The division DEPARTMENT shall adopt rules establishing relative unit values, groups of specialties, the procedures insurers must use to pay for services under the schedule, and the method of determining the median of billed medical fees. These rules shall must be modeled on the 1974 revision of the 1969 California Relative Value Studies.

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(3) Beginning January 1, 1988, the division <u>DEPARTMENT</u> shall establish rates for hospital services necessary for the treatment of injured workers. Approved rates must be in effect for a period of 12 months from the date of approval. The division <u>DEPARTMENT</u> may coordinate this ratesetting function with other public agencies that have similar

- 1 responsibilities.
- 2 (4) Notwithstanding subsection (2), beginning January
 3 1, 1988, and ending January 1, 1990, the maximum fees
 4 payable by insurers must be limited to the relative value
 5 fee schedule established in January 1987. Notwithstanding
 6 subsection (3), the hospital rates payable by insurers must
 7 be limited to those set in January 1988, until December 31,
 8 1989."
- 9 Section 24. Section 39-71-901, MCA, is amended to 10 read:
- 11 "39-71-901. Definitions. As used in this part, the 12 following definitions apply:
- (1) "Vocationally handicapped" means a person who has
 a medically certifiable permanent impairment which is a
 substantial obstacle to obtaining employment or to obtaining
 reemployment if the employee should become unemployed,
 considering such factors as the person's age, education,
 training, experience, and employment rejection.
- 19 (2) "Certificate" means documentation issued by the
 20 division <u>DEPARTMENT</u> of---workers1---compensation to an
 21 individual who is vocationally handicapped.
- 22 (3) "Fund" means the subsequent injury fund."
- 23 **Section 25.** Section 39-71-908, MCA, is amended to read:
- 25 "39-71-908. Notification of fund of its potential

-27- SB 428

SB 428

SB 0428/03 SB 0428/03

liability under part -- review by fund. Not less than 90 or more than 150 days before the expiration of 104 weeks after the date of injury, the employer, carrier, or the industrial insurance fund, as the case may be, insurer shall notify the fund whether it is likely that compensation may be payable beyond a period of 104 weeks after the date of the injury. The fund thereafter may review, at reasonable times, such information as the employer, carrier, or industrial insurance fund insurer has regarding the accident and the nature and extent of the injury and disability."

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11 **Section 26.** Section 39-71-910, MCA, is amended to 12 read:

"39-71-910. Procedure for resolving disputes as to liability under part. (1) If an employee was employed or retained in employment under the provisions of this part and a dispute or controversy arises as to payment of benefits or the liability therefor, the division DEPARTMENT shall hold a hearing and resolve all disputes. On motion made in writing by the employer, --carrier, --or --industrial --insurance-fund insurer, the administrator shall join the fund as a party defendant.

(2) The division <u>DEPARTMENT</u>, within 5 days of the entry of an order joining the fund as a party defendant, shall give the fund written notice thereof not less than 20 days before the date of hearing and shall include the **name**

-29-

names of the employee and the employer insurer and the date 1 2 of the alleged injury or disability. The fund named as a defendant shall--have has 10 days after the date of 3 notification to file objections to being named as a party 4 5 defendant. On the date of the hearing at which the liability 6 of the parties is determined, the hearing examiner first shall hear arguments and take evidence concerning the 7 joinder as party defendant. If the fund has filed timely objection and if argument and evidence warrant, the hearing 9 10 examiner shall grant a motion to dismiss.

- 11 (3) At the time of the hearing, the employer insurer
 12 and fund may appear, cross-examine witnesses, give evidence,
 13 and defend both on the issue of liability of the employer
 14 insurer to the employee and on the issue of the liability of
 15 the fund.
- 16 (4) The hearing examiner shall make findings of fact
 17 and conclusions of law determining the respective liability
 18 of the employer insurer and the fund."
- 19 **Section 27.** Section 39-71-911, MCA, is amended to 20 read:
- 21 "39-71-911. Obligation to make payments on behalf of
 22 fund not an independent liability. The obligation imposed by
 23 this part on the employer, carrier, or industrial insurance
 24 fund insurer to make payments on behalf of the fund does not
 25 impose an independent liability on the employer, carrier, or

industrial-insurance-fund insurer."

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Section 28. Section 39-71-913, MCA, is amended to read:

"39-71-913. Payments by fund directly to persons entitled. If the employer, --carrier, --or--the--industrial insurence--fund insurer does not make the payments on behalf of the fund, the fund may make the payments directly to the persons entitled to the payments."

9 Section 29. Section 39-71-2303, MCA, is amended to 10 read:

of insurance — payment of premium. The division state fund shall prescribe the procedure by which employers an employer may elect to be bound by compensation plan No. 3, the effective time of such the election, and the manner in which such the election is terminated for reasons other than default in payment of premiums. Every employer electing to be bound by compensation plan No. 3 shall must receive from the division state fund a contract or policy of insurance in a form approved by the division DEPARTMENT. The premium thereon—shall must be paid by the employer to the division state fund at such times as the division—shall—prescribe state fund prescribes and shall must be paid over by the division state fund to the state treasurer to the credit of the industrial—insurance—expendable—trust state mutual

insurance fund."

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Section 30. Section 39-71-2307, MCA, is amended to 3 read:

*39-71-2307. Cancellation of coverage under-plan-for default -- thirty days' notice required. The division--is hereby-authorized-in-its-discretion-to state fund may cancel an employer's right to operate under plan No. 3 of the Workers' Compensation Act for failure to pay the premiums OR--BECAUSE--OF--A--SIGNIFICANT--CHANGE--IN--LIABILITY 10 EXPOSURE. When the division-makes-an-order-canceling state 11 fund cancels an employer's right-for-failure-to-pay-premiums 12 COVERAGE, the -- division it shall notify the employer of its 13 intent to cancel the employer at least 30 days before the cancellation becomes effective. After the cancellation date, 14 15 the employer shall-have has the same status as an employer 16 who is not enrolled under the Workers' Compensation Act."

17 **Section 31.** Section 39-71-2308, MCA, is amended to 18 read:

an employer under plan No. 3 shall-default defaults in any payment to the division state fund, the state fund may collect the sum due may-be-collected-by-an-action-at-law in a civil action in the name of the state. 7-and-such-right-of action-shall-be The right of action is cumulative.

(2) When If an employer's right to operate has been

SB 0428/03

- canceled by the division state fund for failure to pay
 premiums and when-the-division-in-its-discretion the state
 fund finds that the property and assets of the employer are
 not sufficient to pay the premiums, the division state fund
 may compromise the claim for premiums and accept a payment
 of an amount less than the total amount due."
- 7 Section 32. Section 39-71-2321, MCA, is amended to 8 read:

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- "39-71-2321. What to be deposited in industrial insurance---expendable---trust STATE fund. All premiums, penalties, recoveries by subrogation, interest earned upon money belonging to the state fund, and securities acquired by or through use of money shall must be deposited in the industrial-insurance-expendable-trust state fund."
- 15 **Section 33.** Section 39-71-2322, MCA, is amended to read:
 - "39-71-2322. Money in industrial-insurance state fund held in trust disposition of funds upon repeal of chapter. The moneys money coming into the industrial insurance—expendable-trust state fund shall must be held in trust for the purpose for which such-moneys-were the money was collected.7—and—if—this-chapter—shall—be—hereafter If this chapter is repealed, such-moneys-shall—be the money is subject to such the disposition as-may-be provided by the legislature repealing this chapter. In default—of—such the

- absence of a legislative provision, distribution thereof
 and a legislative provision, distribution thereof
- 3 due regard being had to obligations of compensation incurred
- 4 and existing."

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- 5 **Section 34.** Section 39-71-2323, MCA, is amended to 6 read:
 - *39-71-2323. Surplus in industrial----insurance expendable--trust state fund -- payment of dividends. If at the end of any fiscal year there exists in the industrial insurance--expendable--trust state fund an excess of assets over liabilities and a reasonable surplus, such liabilities to include necessary reserves, which excess may be divided safely, then the division state fund may declare a dividend in such the manner as the rules of the division-may state fund prescribe to those employers who have paid premiums into the industrial-insurance-expendable-trust state fund in excess of liabilities chargeable to them in the fund for that year. In determining the amount or proportion of the balance to which the employer is entitled as dividends, the division state fund shall give consideration to the prior paid premiums and accident experience of each individual employer during the dividend year."
- 23 **Section 35.** Section 39-71-2325, MCA, is amended to 24 read:
- 25 "39-71-2325. Division State fund to keep accounts of

-33- SB 428

-34- SB 428

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read:

segregations. The division state fund shall keep an accurate account of all such the segregations of the industrial insurance--expendable-trust state fund and shall divert from the fund any sums necessary to meet monthly payments, pending the conversion into cash of any security, and in such case shall repay the same out of the cash realized from the security."

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Я Section 36. Section 39-71-2327, MCA, is amended to 9 read:

*39-71-2327, Earnings of industrial --- insurance expendable-trust state fund to be credited to fund -improper use a felony. All earnings made by the industrial insurance-expendable-trust state fund by reason of interest paid for the deposit thereof or otherwise shall must be credited to and become a part of the fund, and the making of profit, either directly or indirectly, by any person out of the use of the fund shall-constitute is a felony. and-on conviction-thereof-shall--subject--the--person--making--such profit--to-imprisonment-in-the-state-penitentiary-for-a-term not-exceeding-2-years-or-a-fine-not-exceeding-\$5,000-or-both such-fine-and-imprisonment. A person convicted of an offense under this section is punishable by imprisonment in the state prison for a term not to exceed 2 years or a fine of not more than \$5,000, or both."

Section 37. Section 39-72-201, MCA, is amended to

*39-72-201. Administration of chapter. This chapter 2 shall-be is administered by the division DEPARTMENT of 3 workers -- compensation."

Section 38. Section 39-72-310, MCA, is amended to 5 read:

under "39-72-310. Occupational disease coverage workers' compensation plans. (1) Every employer enrolled under compensation plan No. 1 tTitle-397--chapter--717--part 21), every insurer writing-workers1-compensation-coverage under compensation plan No. 2 (Title-39,--chapter--71,--part 22), and the state compensation -- insurance fund under compensation plan No. 3 fPitle-397-chapter-717-part-23), all provided for under the Workers' Compensation Act, are considered to also provide full coverage for claims under this chapter. Any policy of insurance for workers' compensation coverage under the Workers' Compensation Act written by a private insurance carrier or the state compensation -- insurance fund is considered to provide full occupational disease coverage under the provisions of this chapter.

(2) Except as provided in this chapter, the division DEPARTMENT shall apply the appropriate provisions of Title 39, chapter 71, parts 21, 22, and 23, to the administration of The Occupational Disease Act of Montana in the same

> -36-SB 428

SB 0428/03 SB 0428/03

manner as they are applied to the administration of the Workers' Compensation Act.

- (3) Under compensation plan No. 3, any premiums and other receipts held by the division state fund for occupational disease insurance coverage shall must be transferred and-become-part-of to the workers' compensation industrial insurance account, and payments for occupational disease claims by the state fund shall must be paid out of the industrial insurance account."
- Section 39. Section 2-18-103, MCA, is amended to read:

 "2-18-103. Officers and employees excepted. Parts 1

 and 2 do not apply to the following positions in state

 government:
- 14 (1) elected officials;

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- (2) county assessors and their chief deputy;
 - (3) officers and employees of the legislative branch;
- 17 (4) judges and employees of the judicial branch;
- 18 (5) members of boards and commissions appointed by the 19 governor, appointed by the legislature, or appointed by 20 other elected state officials;
 - (6) officers or members of the militia;
 - (7) agency heads appointed by the governor;
- 23 (8) academic and professional administrative personnel 24 with individual contracts under the authority of the board 25 of regents of higher education;

- 1 (9) academic and professional administrative personnel
 2 and live-in houseparents who have entered into individual
 3 contracts with the state school for the deaf and blind under
 4 the authority of the state board of public education;
- 5 (10) teachers under the authority of the department of 6 institutions;
- 7 (11) investment officer, assistant investment officer, 8 executive director, and three professional staff positions 9 of the board of investments:
- 10 (12) four professional staff positions under the board 11 of oil and gas conservation; and
- 12 (13) assistant director for security of the Montana 13 state lottery; and
- 14 (14) executive director and employees of the state
 15 compensation mutual insurance fund."
- - -- receiving fee. (1) Any person not licensed as an insurance consultant in this state who identifies or holds himself out to be an insurance consultant without having been licensed as an insurance consultant under this part or

*33-17-502. Prohibition on holding out as consultant

- any person who uses any other designation or title which is likely to mislead the public and holds himself out in any
- 25 manner as having particular insurance qualifications other

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than those for which he may be otherwise licensed or otherwise qualified is guilty of a misdemeanor and upon conviction shall be fined \$1,500.

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- (2) Any person not licensed as an insurance consultant with respect to the relevant kinds of insurance who receives any fee for examining, appraising, reviewing, or evaluating any insurance policy, annuity or pension contract, plan, or program or who shall make recommendations or give advice with regard to any of the above without first having been licensed by the commissioner as an insurance consultant is guilty of a misdemeanor and upon conviction shall be fined \$1,500.
 - (3) Nothing in this part applies to:
- (a) licensed attorneys at law in this state acting in their professional capacity; OR
- (b) an actuary or a certified public accountant who provides information, recommendations, advice, or services in his professional capacity if neither he nor his employer receives any compensation directly or indirectly on account of any insurance, bond, annuity or pension contract that results in whole or part from that information, recommendation, advice, or services;—or
- {c}--a--duly--licensed--casualty--insurance--agent--who
 accepts-a-fee-from-an--insured--for--placement--through--the
 atate--compensation--mutual--insurance--fund--as-provided-in

1 33-18-212."

2 Section 41. Section 33-18-212, MCA, is amended to read:

"33-18-212. Illegal dealing in premiums -- improper charges for insurance. (1) No A person shall may not willfully collect any sum as premium or charge for insurance, which insurance is not then provided or is not in due course to be provided (subject to acceptance of the risk by the insurer) by an insurance policy issued by an insurer as authorized by this code.

premium or charge for insurance any sum in excess of or less than the premium or charge applicable to such insurance and, as specified in the policy, in accordance with the applicable classifications and rates as filed with and approved by the commissioner; or in cases where classifications, premiums, or rates are not required by this code to be so filed and approved, such premiums and charges shall may not be in excess of or less than those specified in the policy and as fixed by the insurer. This provision shall may not be deemed to prohibit the charging and collection, by surplus lines agents licensed under chapter 2, part 3, of the amount of applicable state and federal taxes in addition to the premium required by the insurer. It shall may not be deemed considered to prohibit the charging

- and collection, by a life insurer, of amounts actually to be
 expended for medical examination of an applicant for life
 insurance or for reinstatement of a life insurance policy.

 The-provision-of--this--subsection--does--not--prohibit--the
 collection-from-an-insured-of-a-placement-fee7-not-to-exceed
 7-1/2%--of--the--annual--premium7--for-placement-through-the
 state-compensation-mutual-insurance-fund-by-a-duly--licensed
 casualty--insurance--agent7--This--placement--fee--is--not-a
 premium-as-defined-in-33-15-1027
- 10 (3) Each violation of this section shall--be is
 11 punishable under 33-1-104."
- 12 **Section-43**.--Section--2-15-1702,--MCA,--is--amended--to
 13 read:

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- #2-15-1782:--Bivision----of----workers-----compensation

 insurance--compliance ----head:--(1)-There-is-a-division-of

 workers---compensation insurance--compliance within---the

 department:--The-division-head-is-an-administrator-appointed

 by--the--governor--as--are--directors--in--accordance---with
 2-15-111:
- {2}--The--division--is--allocated-to-the-department-for
 administrative-purposes--only--as--prescribed--in--2-15-121However,--the--division--may--hire--its--own--personnel,-and
 2-15-121(2)(d)-does-not-apply-"
- Section 42. Section 2-15-1014, MCA, is amended to read:

- 1 "2-15-1014. Office of workers' compensation judge -2 allocation -- appointment -- salary. (1) There is the office
 3 of workers' compensation judge. The office is allocated to
 4 the department of administration labor AND INDUSTRY for
 5 administrative purposes only as prescribed in 2-15-121.
- 6 (2) The governor shall appoint the workers'
 7 compensation judge for a term of 6 years in the same manner
 8 provided by Title 3, chapter 1, part 10, for the appointment
 9 of supreme or district court judges. A vacancy shall must be
 10 filled in the same manner as the original appointment.
- 11 (3) To be eligible for workers' compensation judge, a
 12 person must:
- 13 (a) have the qualifications necessary for district
 14 court judges found in Article VII, section 9, of the Montana
 15 constitution;
- 16 (b) devote full time to the duties of workers'
 17 compensation judge and not engage in the private practice of
 18 law.
- 19 (4) The workers' compensation judge is entitled to the
 20 same salary and other emoluments as that of a district judge
 21 but shall must be accorded retirement benefits under the
 22 public employees' retirement system."
- 23 **Section 43.** Section 39-71-2501, MCA, is amended to 24 read:
- 25 "39-71-2501. (Temporary) Definitions. As used in this

- part, the following definitions apply:
- 2 (1) "Board" means the board of examiners created in 2-15-1007. 3
- (2) "Department" means the department of labor and industry provided for in 2-15-1701. 5
- (3) "Employer" has the meaning set forth in 39-71-117. 6
- 7 (4) "Payroll" means the payroll of an employer for
- each of the calendar quarters ending March 31, June 30, 8
 - September 30, and December 31, for all employments covered
- 10 under 39-71-401.

- 11 (5) "State fund" means the state compensation MUTUAL
- 12 insurance fund referred-to-in-39-71-2301.
- 13 (6) "Tax" means the workers' compensation payroll tax
- 14 provided for in 39-71-2503.
- (7) "Tax account" means the workers' compensation tax 15
- account created by 39-71-2504. (Terminates June 16
- 17 1991--sec. 10, Ch. 664, L. 1987.)"
- NEW SECTION. SECTION 44. STATE FUND TO SUBMIT NOTICE 18
- 19 OF COVERAGE WITHIN THIRTY DAYS -- PENALTY FOR FAILURE. (1)
- THE STATE FUND SHALL, WITHIN 30 DAYS AFTER THE ISSUANCE OF 20
- AN INSURANCE POLICY, SUBMIT TO THE BIVISION DEPARTMENT THE 21
- 22 NOTICE OF COVERAGE STATING THE EFFECTIVE DATE OF THE POLICY
- 23 INSURING THE EMPLOYER AND OTHER INFORMATION THE DIVISION
- DEPARTMENT REQUIRES. 24
- (2) THE DIVISION DEPARTMENT MAY ASSESS A PENALTY OF NO 25

-43-

- 1 MORE THAN \$200 AGAINST THE STATE FUND IF, AS A GENERAL
- 2 BUSINESS PRACTICE, THE STATE FUND DOES NOT COMPLY WITH THE
- 3 30-DAY NOTICE REQUIREMENT.
- NEW SECTION. SECTION 45. POLICY REMAINS IN EFFECT 4
- UNTIL CANCELED OR REPLACED -- TWENTY-DAY NOTIFICATION OF 5
- 6 CANCELLATION REQUIRED. THE INSURANCE POLICY REMAINS IN
- 7 EFFECT UNTIL CANCELED. CANCELLATION MAY TAKE EFFECT ONLY BY
- 8 WRITTEN NOTICE TO THE NAMED INSURED AND TO THE BIVISION
- 9 DEPARTMENT AT LEAST 20 DAYS PRIOR TO THE DATE OF
- 10 CANCELLATION. HOWEVER. THE POLICY TERMINATES ON THE
- EFFECTIVE DATE OF A REPLACEMENT OR SUCCEEDING INSURANCE 11
- POLICY ISSUED TO THE INSURED. NOTHING IN THIS SECTION 12
- PREVENTS THE STATE FUND FROM CANCELING AN INSURANCE POLICY 13
- 14 BEFORE A REPLACEMENT POLICY IS ISSUED TO THE INSURED.
- 15 **SECTION 46.** SECTION 33-2-119, MCA, IS AMENDED TO READ:
- 16 *33-2-119. Suspension or revocation for violations and
- 17 special grounds. (1) The commissioner may, in his
- 18

discretion, suspend or revoke an insurer's certificate of

- 19 authority if, after a hearing thereon, he finds that the
- 20 insurer has:
- 21 (a) violated any lawful order of the commissioner or
- 22 any provision of this code other than those for which
- 23 suspension or revocation is mandatory;
- 24 (b) reinsured more than 90% of its risks resident.
- 25 located, or to be performed in Montana, in another insurer.

- In considering suspension or revocation, the commissioner shall consider all relevant factors, including whether:
- (i) after the reinsurance transaction all parties will be in compliance with Montana law; and

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- (ii) the transaction will substantially reduceprotection and service to Montana policyholders;
- 7 (c) failed to accept an equitable apportionment of 8 assigned coverage as required by [section ±3 12].
 - (2) The commissioner shall, after a hearing thereon, suspend or revoke an insurer's certificate of authority if he finds that the insurer:
 - (a) is in unsound condition or in such condition or using such methods or practices in the conduct of its business as to render its further transaction of insurance in Montana injurious or hazardous to its policyholders or to the public;
 - (b) has refused to be examined or to produce its accounts, records, and files for examination or if any of its officers have refused to give information with respect to its affairs, when required by the commissioner;
- 21 (c) has failed to pay any final judgment rendered 22 against it in Montana within 30 days after the judgment 23 became final;
- 24 (d) with such frequency as to indicate its general25 business practice in Montana, has without just cause refused

- to pay proper claims arising under its policies, whether any such claim is in favor of an insured or is in favor of a third person with respect to the liability of an insured to such third person, or without just cause compels such insured or claimant to accept less than the amount due them or to employ attorneys or to bring suit against the insurer or such an insured to secure full payment or settlement of such claims:
 - (e) is affiliated with and under the same general management or interlocking directorate or ownership as another insurer which transacts direct insurance in Montana without having a certificate of authority therefor, except as permitted as to a surplus lines insurer under part 3 of this chapter.
- 15 (3) The commissioner may, in his discretion and
 16 without advance notice or a hearing thereon, immediately
 17 suspend the certificate of authority of any insurer as to
 18 which proceedings for receivership, conservatorship,
 19 rehabilitation, or other delinquency proceedings have been
 20 commenced in any state."
- 21 SECTION 47. SECTION 37-72-101, MCA, IS AMENDED TO
- 22 <u>READ:</u>

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"37-72-101. Construction blasting restrictions - license required -- definitions -- exemptions. (1) No person
 may engage in the practice of construction blasting unless

licensed	or	under	the	supe	rvision	of	а	person	licensed	as	a
construct	ion	blaste	er by	y the	worker	9 1	-00	ompensat	tiondiv	isi	'n
DEPARTMENT	т.										

(2) For the purposes of this chapter:

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- 5 (a) "construction blaster" means a person who engages 6 in construction blasting;
 - (b) "construction blasting" means the use of explosives to:
 - (i) reduce, destroy, or weaken any residential, commercial, or other building; or
 - (ii) excavate any ditch, trench, cut, or hole or reduce, destroy, weaken, or cause a change in grade of any land formation in the construction of any building, highway, road, pipeline, sewerline, or electric or other utility line:
 - (c) "division"---means---the---division---of--workers* compensation-division-insurance-compliance-of-the-department of--labor--and---industry---provided---for---in---2-15-1702; "DEPARTMENT" MEANS THE DEPARTMENT OF LABOR AND INDUSTRY;
 - (d) "explosive" has the meaning given in 50-38-101;
 - (e) "magazine" has the meaning given in 50-38-101.
- 22 (3) Nothing in this chapter applies to the private or 23 commercial use of explosives by persons engaged in farming, 24 ranching, logging, geophysical work, drilling or development 25 of water, oil, or gas wells, or mining of any kind or to the

- private use of explosives in the removal of stumps and rocks
 from land owned by the person using the explosives, except
 that the persons exempted from this chapter by this
 subsection must comply with rules adopted under
 37-72-201(1)(c) and the provisions of 37-72-102 apply to a
- 6 violation of those rules by an exempted person.

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- (4) This chapter does not apply to persons conducting blasting operations when the persons and operations are subject to rules adopted under and implementing 82-4-231(10)(e)."
- 11 **SECTION 48.** SECTION 50-71-102, MCA, IS AMENDED **TO**12 READ:
- 13 "50-71-102. Definitions. Unless the context requires
 14 otherwise, in this chapter, the following definitions apply:
- 15 (1) "Amendment" means such modification or change in a 16 code as shall be intended to be of universal or general 17 application.
 - (2) "Code" means a standard body of rules for safety formulated, adopted, and issued by the division DEPARTMENT under the provisions of this chapter.
- 21 (3) "Bivision"—means—the—division—of—workers*

 22 compensation—insurance—compliance—of—the—department—of—labor

 23 and—industry—provided—for—in—2—15—1702: "DEPARTMENT" MEANS

 24 THE DEPARTMENT OF LABOR AND INDUSTRY.
- 25 (4) "Employee" and "worker" are defined as in

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- 2 (5) "Employer" is defined as in 39-71-117.
- 3 (6) "Variation" means a special, limited modification
- 4 or change in the code which is applicable only to the
- particular place of employment of the employer or person
- 6 petitioning for such modification or change."

7 SECTION 49. SECTION 50-73-102, MCA, IS AMENDED TO

8 READ:

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- 9 "50-73-102. Definitions. As used in this chapter, the
- 10 following definitions apply:
- 11 (1) "Division"---means---the---division---of--workers"
- 12 compensation-insurance-compliance-of-the-department-of-labor
- 13 and-industry-provided-for-in--2-15-1702 "DEPARTMENT" MEANS
- 14 THE DEPARTMENT OF LABOR AND INDUSTRY and the state coal mine
- inspectors employed by the division DEPARTMENT.
- 16 (2) "Excavations" and "workings" mean all parts of a
- 17 mine excavated or being excavated, including shafts, slopes,
- 18 tunnels, entries, rooms, and working places, whether
 - abandoned or in use.
- 20 (3) "Gassy mine" means a mine is considered to be
- 21 potentially gassy. The division DEPARTMENT may further
- 22 define this term in its rules.
- 23 (4) "Mine" and "coal mine" mean all parts of the
- 24 property of a mining plant under one management which
- 25 contribute, directly or indirectly, to the mining or

- handling of coal.
- 2 (5) "Mine examiner" means a person charged with the
- 3 examination of the condition of the mine before the miners
- are permitted to enter it and who is commonly known as the
- 5 "fire boss".

- 6 (6) "Mine foreman" means a person who is charged with
- 7 the general direction of the underground work or both the
- underground work and the outside work of a coal mine and who
- 9 is commonly known and designated as "mine boss".
- 10 (7) "Operator", as applied to the party in control of
- 11 a mine under this chapter, means the person, firm, or body
- 12 corporate which is the immediate proprietor as owner or
- 13 lessee of the plant and, as such, is responsible for the
 - condition and management thereof.
- 15 (8) "Shaft" means any vertical opening through the
- 16 strata which is or may be used for the purpose of
- 17 ventilation or escape or for hoisting or lowering of men or
- 18 material in connection with the mining of coal.
- 19 (9) "Slope" and "drift" mean respectively an incline
- 20 or horizontal way, opening, or tunnel to a seam of coal to
- 21 be used for the same purpose as a shaft."
- SECTION 50. SECTION 39-1-103, MCA, IS AMENDED TO READ:
- 23 *39-1-103. Powers of department. (1) In discharging
- 24 the duties imposed upon the department, the commissioner or
- 25 his authorized representatives may administer oaths, examine

SB 0428/03

and the first the state of the

witnesses under oath, take depositions or cause same to be taken, deputize any citizen 18 years of age or older to serve subpoenas upon witnesses, and issue subpoenas for the attendance of witnesses before him in the same manner as for attendance before district courts.

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- (2) The commissioner may likewise cause to be inspected any mine, factory, workshop, smelter, mill, warehouse, elevator, foundry, machine shop, or other industrial establishment.
- t3)-Nothing-herein-contained-shall-in-any-manner confer-upon-the-commissioner-the-authority-to-interfere-in any-manner-with-the-conduct-of-the-matters-under-the-control of-the-workers'--compensation--division;--nor-shall---the commissioner--be--charged--with-the-duty-of-enforcing-any-of the-laws-of-the-state--pertaining--to--the--affairs--of--the workers'--compensation--division--or-with-the-enforcement-of the-safety-provisions-of-the-Workers'-Compensation-Act
- (4)(3) Nothing in this chapter applies to labor violations preempted by federal law or regulation."
- 20 **SECTION 51.** SECTION 39-71-207, MCA, IS AMENDED TO 21 READ:
 - *39-71-207. Merit system. Employees of the division? except-the-administrator? department are included within the joint merit system if such inclusion is required for the receipt of federal funds by 29 CFR 1902.3(h) or by any other

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federal law or regulation."

SECTION 52. SECTION 33-1-102, MCA, IS AMENDED TO READ:

"33-1-102. Compliance required -- exceptions -- health

service corporations -- health maintenance organizations -
governmental insurance programs. (1) No person shall

transact a business of insurance in Montana or relative to a

subject resident, located, or to be performed in Montana

without complying with the applicable provisions of this

code.

- 10 (2) No provision of this code shall apply with respect 11 to:
- 12 (a) domestic farm mutual insurers as identified in 13 chapter 4, except as stated in chapter 4;
- (b) domestic benevolent associations as identified in chapter 6, except as stated in chapter 6; and
- (c) fraternal benefit societies, except as stated in chapter 7.
- 18 (3) This code applies to health service corporations
 19 as prescribed in 33-30-102. The existence of such
 20 corporations is governed by Title 35, chapter 2, and related
 21 sections of the Montana Code Annotated.
- 22 (4) This code does not apply to health maintenance 23 organizations to the extent that the existence and 24 operations of such organizations are authorized by chapter 25 31.

SB 428 -52- SB 428

SB 0428/03 SB 0428/03

(5) This code does not apply to workers' compensation insurance programs provided for in Title 39, chapter 71, parts part 21 and-23, and related sections.

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- 4 (6) This code does not apply to the state employee group insurance program established in Title 2, chapter 18, 5 6 part 8.
 - (7) This code does not apply to insurance funded through the state self-insurance reserve fund provided for in 2-9-202.
 - (8) (a) This code does not apply to any arrangement, plan, or interlocal agreement between political subdivisions of this state whereby the political subdivisions undertake to separately or jointly indemnify one another by way of a pooling, joint retention, deductible, or self-insurance plan.
 - (b) This code does not apply to any arrangement, plan, or interlocal agreement between political subdivisions of this state or any arrangement, plan, or program of a single political subdivision of this state whereby the political subdivision provides to its officers, elected officials, or employees disability insurance or life insurance through a self-funded program."
- SECTION 53. SECTION 33-16-1005, MCA, IS AMENDED TO 23 24 READ:
- 25 "33-16-1005. Membership in rating organization

- required -- exception -- filings with commissioner. (1) 1
- Every insurer, except-the-division-of-workers1--compensation
- 3 including the state compensation mutual insurance fund.
- writing workers' compensation insurance in this state shall 4
- 5 be a member of a workers' compensation rating organization.
- No insurer may, at the same time, belong to more than one 6
- rating organization with respect to such insurance. 7
- (2) A rating organization shall file with the 8

insurance commissioner every manual of classifications and

writing pursuant to compensation plan No. 2 shall adhere to

- rules and every rating plan and advisory manual rates,
- including every modification of the foregoing. Every such 11
- filing shall state the effective date thereof. Any insurer
- the manual rules and classifications and rating plans of the 14
- 15 rating organization of which it is a member and may adopt by
- 16 reference, in whole or in part, the advisory manual rates
- 17 filed under this section. Nothing in this section, however,
- 18 requires adherence by any insurer to any rates established
- or published by any rating organization." 19
- SECTION 54. SECTION 33-16-1011, MCA, IS AMENDED TO 20
- 21 READ:

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- 22 "33-16-1011. Classification and rating committee --
- 23 membership -- term. (1) There is a classification and rating
- 24 committee.
- (2) The committee is composed of five voting members,

consisting of:

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- (a) three representatives of private insurance carriers writing workers' compensation insurance in Montana. The members must reside in Montana and shall be appointed by the Montana commissioner of insurance.
- (b) one licensed independent insurance agent who resides in Montana, appointed by the Montana commissioner of insurance: and
- (c) one representative of the division--of--workers' compensation state compensation mutual insurance fund who is an employee of the division state fund and who shall-be is appointed by the administrator -- of -- the -- division executive director of the state fund.
- (3) Each member shall hold office for a period of 3 years. Any appointee who fills the vacancy of a member whose term has not expired shall fill only the remaining term and may be reappointed for a full term.
- (4) Before appointments are to be made by the commissioner of insurance under subsections (2)(a) and (2)(b) above, established private organizations representing insurance carriers and independent insurance agents may submit names of individuals they recommend for appointments. The commissioner of insurance shall give consideration to such names submitted before appointments are made. However, the commissioner of insurance is not required to appoint any

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1 person from the names submitted.

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- 2 (5) The committee shall be funded from the operations budget of the rating organization. Committee members may, if they request, be paid their actual and necessary travel expenses."
- SECTION 55. SECTION 19-3-1007, MCA, IS AMENDED TO 6 7 READ:
- 8 "19-3-1007. Allowance for duty-related disability. (1) 9 The annual amount of retirement allowance payable to a 10 member eligible for disability retirement for duty-related 11 reasons and granted prior to July 1, 1977, is 50% of his final compensation. However, the annual amount of retirement 12 13 allowance is 25% of final compensation for any period during 14 which the member has been awarded compensation -- by -- the 15 workers' compensation division, whether such compensation is 16 received in periodic payments or in a lump sum. The annual 17 amount of retirement allowance reverts to 50% of final 18 compensation at the end of such period.
- 19 (2) Any retired member receiving a retirement 20 allowance on July 1, 1977, who has previously been granted a 21 duty-related disability under provisions in effect on June 22 30, 1977, will be subject to the provisions of this section 23 after July 1, 1977."
- SECTION 56. SECTION 19-3-1002, MCA, IS AMENDED TO 24 25 READ:

SB 0428/03 SB 0428/03

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#19-3-1002. Eligibility for disability retirement. (1) Except as provided in subsection (2) and 19-3-1004, a member who is not eligible for service or early retirement but has completed 5 years of creditable service and has become disabled while in active service, as defined in 19-3-1001, is eligible for disability retirement.

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- (2) A member age 60 or older who has completed 5 years of creditable service and has had a duty-related accident forcing him to terminate his employment but who has not received or is ineligible to receive workers' compensation benefits under Title 39, chapter 71, for the duty-related accident may conditionally waive his eligibility for a service retirement to be eliqible for disability retirement. The waiver is effective only upon approval by the board of his application for disability retirement. The board shall determine whether a member has become disabled under the provisions of 19-3-1003. The board may request information on file with the workers1-compensation-division state compensation mutual insurance fund concerning the duty-related accident. If no information is available, the board may request and the division state fund shall provide an investigative report on the disabling accident."
- 23 <u>SECTION 57. SECTION 19-3-1202, MCA, IS AMENDED TO</u>
 24 READ:
- 25 "19-3-1202. Amount of death benefit. The amount of

death benefit is the sum of (1), (2), and (3) as follows:

- 2 (1) the member's accumulated contributions;
 - (2) an amount equal to one-twelfth of the compensation received by the member during the last 12 months of such compensation multiplied by the smaller of six or the number of years of his creditable service; provided, however, that this portion of the death benefit is not payable if the board receives a certification from the workers' compensation—division—of—the—state—of—Montana state compensation mutual insurance fund that it is paying compensation because the member's death resulted from injury or disease arising out of or in the course of employment; and
 - (3) the accumulated interest on the amounts in subsections (1) and (2) of this section to the first day of the month in which the benefit is paid."
- 17 **SECTION 58.** SECTION 19-13-601, MCA, IS AMENDED TO 18 READ:
 - "19-13-601. Deduction remitted to firemen's association -- member's contributions. (1) Each employer shall retain from the monthly compensation of each active member a sum equal to 1% of his monthly compensation for his services as a firefighter and shall remit this amount on a monthly basis to the Montana state firemen's association for the payment of premiums on a group life and accidental death

-57- SB 428

-58- SB 428

and dismemberment insurance policy for members and to defray expenses incurred by the association when representing members of the plan.

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- (2) The member's contribution to the retirement system for each active member is 6% of his monthly compensation.
- (3) If a member receives compensation under the provisions of the Workers' Compensation Act, Title 39, chapter 71, the amount received must be included as part of his monthly compensation for purposes of determining contributions and service credits under the retirement system. Contributions made under this section, 19-13-604, and 19-13-605 must be based on the total compensation received by the member from his employer and from the workers' compensation division during the period of disability.
- (4) Each employer, pursuant to section 414(h)(2) of the federal Internal Revenue Code, as amended and applicable on July 1, 1987, shall pick up and pay the contributions which would be payable by the member under subsection (2) for service rendered after June 30, 1987.
- (5) The member's contributions picked up by the employer must be designated for all purposes of the retirement system as the member's contributions, except for the determination of a tax upon a distribution from the retirement system. These contributions must become part of

- the member's accumulated contributions but must be accounted for separately from those previously accumulated.
- 3 (6) The member's contributions picked up by the
 4 employer must be payable from the same source as is used to
 5 pay compensation to the member and must be included in the
 6 member's monthly compensation as defined in 19-13-104. The
 7 employer shall deduct from the member's compensation an
 8 amount equal to the amount of the member's contributions
 9 picked up by the employer and remit the total of the
 10 contributions to the board."
- NEW SECTION. **Section 59.** Repealer. Sections 12 <u>2-15-1702</u>, 39-71-2301, 39-71-2302, 39-71-2304 through 13 39-71-2306, and 39-71-2324, MCA, are repealed.
- NEW SECTION. Section 60. Extension of authority. Any
 sexisting authority to make rules on the subject of the
 provisions of [this act] is extended to the provisions of
 [this act].
- 18 NEW SECTION. Section 61. Codification instruction.
- 19 (1) [Sections 1, 2, and 4 through $\frac{1}{2}$ 11, 44, AND 45] are
- 20 intended to be codified as an integral part of Title 39,
- 21 chapter 71, part 23, and the provisions of Title 39, chapter
- 22 71, part 23, apply to [sections 1, 2, and 4 through $\frac{12}{2}$ $\frac{11}{2}$,
- 23 44, AND 45].

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(2) [Section 3] is intended to be codified as an integral part of Title 2, chapter 15, part 10, and the

- provisions of Title 2, chapter 15, part 10, apply to [section 3].
- 3 (3) [Section ±3 12] is intended to be codified as an integral part of Title 39, chapter 71, and the provisions of Title 39, chapter 71, apply to [section ±3 12].
- 6 NEW SECTION. Section 62. Reorganization procedure.
- (1) The provisions of sections 2-15-131 2-15-132 through
- 2-15-137 govern the creation of the state compensation
- 9 mutual insurance fund and the transfer of the various
- 10 functions contained in [this act] from the state workers1
- 11 compensation INSURANCE fund to the state compensation mutual
- 12 insurance fund.

- 13 (2) IT IS INTENDED THAT CURRENT EMPLOYEES OF THE
- 14 DIVISION OF WORKERS' COMPENSATION WHOSE FUNCTIONS AR
 - TRANSFERRED TO THE STATE COMPENSATION MUTUAL INSURANCE FUND
- 16 SHALL RETAIN EMPLOYMENT RIGHTS CONSISTENT WITH THEIR
- 17 POSITIONS AT THE TIME OF TRANSFER.
- NEW SECTION. Section 63. Implementation. (1) The
- 19 governor shall by executive order implement the provisions
- 20 of [this act].
- 21 (2) The governor may by executive order assign to the
- 22 state compensation mutual insurance fund, in a manner
- 23 consistent with [this act], functions allocated to the
- 24 workers' compensation state fund provided for in Title 39,
- 25 chapter 71, part 23, by the 51st legislature and not

- 1 transferred by [this act].
- NEW SECTION. SECTION 64. NAME CHANGE -- CODE
- 3 COMMISSIONER INSTRUCTION. (1) IN THE PROVISIONS OF THE
- 4 MONTANA CODE ANNOTATED, THE TERMS "DIVISION OF WORKERS'
- 5 COMPENSATION", "DIVISION", AND "WORKERS' COMPENSATION
- 6 DIVISION", MEANING THE DIVISION OF WORKERS' COMPENSATION,
- 7 ARE CHANGED TO "DEPARTMENT OF LABOR AND INDUSTRY" OR
- 8 "DEPARTMENT", MEANING THE "DEPARTMENT OF LABOR AND
- 9 INDUSTRY".
- 10 (2) THE CODE COMMISSIONER SHALL DESIGNATE, IN A MANNER
- 11 CONSISTENT WITH [THIS ACT], WORKERS' COMPENSATION INSURANCE
- 12 REGULATORY FUNCTIONS ALLOCATED TO THE DIVISION OF WORKERS'
- 13 COMPENSATION BY THE 51ST LEGISLATURE TO THE DEPARTMENT OF
- 14 LABOR AND INDUSTRY THAT ARE NOT SO DESIGNATED BY [THIS ACT].
- 15 (3) WHEREVER IT APPEARS IN 39-71-205, 39-71-222
- 16 THROUGH 39-71-224, 39-71-613, 39-71-902, 39-71-904,
- 17 39-71-910, OR IN LAW ENACTED BY THE 51ST LEGISLATURE, THE
- 18 CODE COMMISSIONER IS DIRECTED TO CHANGE THE TERM
- 19 "ADMINISTRATOR" OR "HIS" TO "DEPARTMENT", MEANING THE
- 20 DEPARTMENT OF LABOR AND INDUSTRY.
- 21 NEW SECTION. Section 65. Effective dates. (1)
- 22 [Sections 3, 7, 50 547-55 39, 60 THROUGH 64, and this
- 23 section) are effective on passage and approval.
- 24 (2) (Sections 1, 2, 4 through 6, and 8 through 38, AND
- 25 40 THROUGH 49 53 59] are effective upon signing of the

- executive order under [section 50 $\underline{55}$ $\underline{63}$] or on θ ctober--17
- 2 1989 JANUARY 1, 1990, whichever occurs earlier.

-End-