SENATE SUBSTITUTE

FOR

SENATE COMMITTEE SUBSTITUTE

FOR

SENATE BILL NO. 113

AN ACT

To repeal sections 287.120, 287.140, 287.170, and 287.780, RSMo, and to enact in lieu thereof four new sections relating to workers' compensation, with an existing penalty provision.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF MISSOURI, AS FOLLOWS:

- 1 Section A. Sections 287.120, 287.140, 287.170, and 287.780,
- 2 RSMo, are repealed and four new sections enacted in lieu thereof,
- 3 to be known as sections 287.120, 287.140, 287.170, and 287.780,
- 4 to read as follows:
- 5 287.120. 1. Every employer subject to the provisions of
- 6 this chapter shall be liable, irrespective of negligence, to
- 7 furnish compensation under the provisions of this chapter for
- 8 personal injury or death of the employee by accident or
- 9 occupational disease arising out of and in the course of the
- 10 employee's employment. Any employee of such employer shall not
- 11 be liable for any injury or death for which compensation is
- 12 recoverable under this chapter and every employer and employees
- of such employer shall be released from all other liability
- 14 whatsoever, whether to the employee or any other person, except
- that an employee shall not be released from liability for injury
- or death if the employee engaged in an affirmative negligent act

- 1 that purposefully and dangerously caused or increased the risk of
- 2 injury. The term "accident" as used in this section shall
- 3 include, but not be limited to, injury or death of the employee
- 4 caused by the unprovoked violence or assault against the employee
- 5 by any person.
- 6 2. The rights and remedies herein granted to an employee
- 7 shall exclude all other rights and remedies of the employee, his
- 8 wife, her husband, parents, personal representatives, dependents,
- 9 heirs or next kin, at common law or otherwise, on account of such
- injury or death by accident or occupational disease, except such
- 11 rights and remedies as are not provided for by this chapter.
- 12 3. No compensation shall be allowed under this chapter for
- the injury or death due to the employee's intentional
- self-inflicted injury, but the burden of proof of intentional
- self-inflicted injury shall be on the employer or the person
- 16 contesting the claim for allowance.
- 4. Where the injury is caused by the failure of the
- 18 employer to comply with any statute in this state or any lawful
- order of the division or the commission, the compensation and
- death benefit provided for under this chapter shall be increased
- 21 fifteen percent.
- 22 5. Where the injury is caused by the failure of the
- employee to use safety devices where provided by the employer, or
- from the employee's failure to obey any reasonable rule adopted
- by the employer for the safety of employees, the compensation and
- death benefit provided for herein shall be reduced at least
- 27 twenty-five but not more than fifty percent; provided, that it is
- 28 shown that the employee had actual knowledge of the rule so

adopted by the employer; and provided, further, that the employer had, prior to the injury, made a reasonable effort to cause his or her employees to use the safety device or devices and to obey or follow the rule so adopted for the safety of the employees.

- 6. (1) Where the employee fails to obey any rule or policy adopted by the employer relating to a drug-free workplace or the use of alcohol or nonprescribed controlled drugs in the workplace, the compensation and death benefit provided for herein shall be reduced fifty percent if the injury was sustained in conjunction with the use of alcohol or nonprescribed controlled drugs.
- (2) If, however, the use of alcohol or nonprescribed controlled drugs in violation of the employer's rule or policy is the proximate cause of the injury, then the benefits or compensation otherwise payable under this chapter for death or disability shall be forfeited.
- (3) The voluntary use of alcohol to the percentage of blood alcohol sufficient under Missouri law to constitute legal intoxication shall give rise to a rebuttable presumption that the voluntary use of alcohol under such circumstances was the proximate cause of the injury. A preponderance of the evidence standard shall apply to rebut such presumption. An employee's refusal to take a test for alcohol or a nonprescribed controlled substance, as defined by section 195.010, at the request of the employer shall result in the forfeiture of benefits under this chapter if the employer had sufficient cause to suspect use of alcohol or a nonprescribed controlled substance by the claimant or if the employer's policy clearly authorizes post-injury

- 1 testing.
- 2 (4) Any positive test result for a nonprescribed controlled
- drug from an employee, if confirmed by mass-spectrometry, using
- 4 generally accepted medical or forensic testing procedures, shall
- 5 give rise to a rebuttable presumption that the tested
- 6 nonprescribed controlled drug was in the employee's system and,
- 7 if the test was administered within forty-eight hours of the
- 8 <u>injury</u>, such positive result shall give rise to a rebuttable
- 9 presumption that the injury was sustained in conjunction with the
- 10 <u>use of the tested nonprescribed controlled drug.</u> A preponderance
- of the evidence standard shall apply to rebut such presumption.
- 7. Where the employee's participation in a recreational
- activity or program is the prevailing cause of the injury,
- benefits or compensation otherwise payable under this chapter for
- death or disability shall be forfeited regardless that the
- 16 employer may have promoted, sponsored or supported the
- 17 recreational activity or program, expressly or impliedly, in
- 18 whole or in part. The forfeiture of benefits or compensation
- 19 shall not apply when:

- 20 (1) The employee was directly ordered by the employer to
- 21 participate in such recreational activity or program;
 - (2) The employee was paid wages or travel expenses while
- 23 participating in such recreational activity or program; or
- 24 (3) The injury from such recreational activity or program
- occurs on the employer's premises due to an unsafe condition and
- the employer had actual knowledge of the employee's participation
- 27 in the recreational activity or program and of the unsafe
- 28 condition of the premises and failed to either curtail the

- 1 recreational activity or program or cure the unsafe condition.
- 2 8. Mental injury resulting from work-related stress does
- 3 not arise out of and in the course of the employment, unless it
- 4 is demonstrated that the stress is work related and was
- 5 extraordinary and unusual. The amount of work stress shall be
- 6 measured by objective standards and actual events.
- 7 9. A mental injury is not considered to arise out of and in
- 8 the course of the employment if it resulted from any disciplinary
- 9 action, work evaluation, job transfer, layoff, demotion,
- 10 termination or any similar action taken in good faith by the
- 11 employer.
- 12 10. The ability of a firefighter to receive benefits for
- 13 psychological stress under section 287.067 shall not be
- diminished by the provisions of subsections 8 and 9 of this
- 15 section.
- 16 287.140. 1. In addition to all other compensation paid to
- the employee under this section, the employee shall receive and
- 18 the employer shall provide such medical, surgical, chiropractic,
- and hospital treatment, including nursing, custodial, ambulance
- and medicines, as may reasonably be required after the injury or
- 21 disability, to cure and relieve from the effects of the injury.
- 22 If the employee desires, he shall have the right to select his
- own physician, surgeon, or other such requirement at his own
- 24 expense. Where the requirements are furnished by a public
- 25 hospital or other institution, payment therefor shall be made to
- the proper authorities. Regardless of whether the health care
- 27 provider is selected by the employer or is selected by the
- employee at the employee's expense, the health care provider

shall have the affirmative duty to communicate fully with the 1 2 employee regarding the nature of the employee's injury and recommended treatment exclusive of any evaluation for a permanent 3 4 disability rating. Failure to perform such duty to communicate 5 shall constitute a disciplinary violation by the provider subject 6 to the provisions of chapter 620. When an employee is required 7 to submit to medical examinations or necessary medical treatment 8 at a place outside of the local or metropolitan area from the 9 employee's principal place of employment, the employer or its 10 insurer shall advance or reimburse the employee for all necessary and reasonable expenses; except that an injured employee who 11 12 resides outside the state of Missouri and who is employed by an 13 employer located in Missouri shall have the option of selecting 14 the location of services provided in this section either at a 15 location within one hundred miles of the injured employee's 16 residence, place of injury or place of hire by the employer. 17 choice of provider within the location selected shall continue to be made by the employer. In case of a medical examination if a 18 19 dispute arises as to what expenses shall be paid by the employer, 20 the matter shall be presented to the legal advisor, the 21 administrative law judge or the commission, who shall set the sum 22 to be paid and same shall be paid by the employer prior to the 23 medical examination. In no event, however, shall the employer or 24 its insurer be required to pay transportation costs for a greater 25 distance than two hundred fifty miles each way from place of 26 treatment.

2. If it be shown to the division or the commission that the requirements are being furnished in such manner that there is

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reasonable ground for believing that the life, health, or recovery of the employee is endangered thereby, the division or the commission may order a change in the physician, surgeon, hospital or other requirement.

- 3. All fees and charges under this chapter shall be fair and reasonable, shall be subject to regulation by the division or the commission, or the board of rehabilitation in rehabilitation cases. A health care provider shall not charge a fee for treatment and care which is governed by the provisions of this chapter greater than the usual and customary fee the provider receives for the same treatment or service when the payor for such treatment or service is a private individual or a private health insurance carrier. The division or the commission, or the board of rehabilitation in rehabilitation cases, shall also have jurisdiction to hear and determine all disputes as to such charges. A health care provider is bound by the determination upon the reasonableness of health care bills.
 - 4. The division shall, by regulation, establish methods to resolve disputes concerning the reasonableness of medical charges, services, or aids. This regulation shall govern resolution of disputes between employers and medical providers over fees charged, whether or not paid, and shall be in lieu of any other administrative procedure under this chapter. The employee shall not be a party to a dispute over medical charges, nor shall the employee's recovery in any way be jeopardized because of such dispute. Any application for payment of additional reimbursement, as such term is used in 8 CSR 50-2.030, as amended, shall be filed not later than:

- (1) Two years from the date the first notice of dispute of the medical charge was received by the health care provider if such services were rendered before July 1, 2013; and
 - (2) One year from the date the first notice of dispute of the medical charge was received by the health care provider if such services were rendered after July 1, 2013.

- Notice shall be presumed to occur no later than five business days after transmission by certified United States mail.
- 5. No compensation shall be payable for the death or disability of an employee, if and insofar as the death or disability may be caused, continued or aggravated by any unreasonable refusal to submit to any medical or surgical treatment or operation, the risk of which is, in the opinion of the division or the commission, inconsiderable in view of the seriousness of the injury. If the employee dies as a result of an operation made necessary by the injury, the death shall be deemed to be caused by the injury.
- 6. The testimony of any physician or chiropractic physician who treated the employee shall be admissible in evidence in any proceedings for compensation under this chapter, subject to all of the provisions of section 287.210.
- 7. Every hospital or other person furnishing the employee with medical aid shall permit its record to be copied by and shall furnish full information to the division or the commission, the employer, the employee or his dependents and any other party to any proceedings for compensation under this chapter, and certified copies of the records shall be admissible in evidence

- 1 in any such proceedings.
- 2 8. The employer may be required by the division or the
- 3 commission to furnish an injured employee with artificial legs,
- 4 arms, hands, surgical orthopedic joints, or eyes, or braces, as
- 5 needed, for life whenever the division or the commission shall
- 6 find that the injured employee may be partially or wholly
- 7 relieved of the effects of a permanent injury by the use thereof.
- 8 The director of the division shall establish a procedure whereby
- 9 a claim for compensation may be reactivated after settlement of
- such claim is completed, unless the employee explicitly agrees
- 11 that the claim cannot be reactivated under this subsection. The
- 12 claim shall be reactivated only after the claimant can show good
- 13 cause for the reactivation of this claim and the claim shall be
- made only for the payment of medical procedures involving
- 15 life-threatening surgical procedures or if the claimant requires
- 16 the use of a new, or the modification, alteration or exchange of
- an existing, prosthetic device. For the purpose of this
- 18 subsection, "life threatening" shall mean a situation or
- 19 condition which, if not treated immediately, will likely result
- in the death of the injured worker.
- 9. Nothing in this chapter shall prevent an employee being
- 22 provided treatment for his injuries by prayer or spiritual means
- if the employer does not object to the treatment.
- 24 10. The employer shall have the right to select the
- licensed treating physician, surgeon, chiropractic physician, or
- other health care provider; provided, however, that such
- 27 physicians, surgeons or other health care providers shall offer
- 28 only those services authorized within the scope of their

- licenses. For the purpose of this subsection, subsection 2 of section 287.030 shall not apply.
- 11. Any physician or other health care provider who orders,
 directs or refers a patient for treatment, testing, therapy or
 rehabilitation at any institution or facility shall, at or prior
 to the time of the referral, disclose in writing if such health
 care provider, any of his partners or his employer has a
 financial interest in the institution or facility to which the
- 10 (1) The patient;

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11 (2) The employer of the patient with workers' compensation 12 liability for the injury or disease being treated;

patient is being referred, to the following:

- (3) The workers' compensation insurer of such employer; and
- 14 (4) The workers' compensation adjusting company for such insurer.
- 16 12. Violation of subsection 11 of this section is a class A misdemeanor.
 - provider, other than a hospital, physician or other health care provider, other than a hospital, physician or health care provider selected by the employee at his own expense pursuant to subsection 1 of this section, shall bill or attempt to collect any fee or any portion of a fee for services rendered to an employee due to a work-related injury or report to any credit reporting agency any failure of the employee to make such payment, when an injury covered by this chapter has occurred and such hospital, physician or health care provider has received actual notice given in writing by the employee, the employer or the employer's insurer. Actual notice shall be deemed received

- by the hospital, physician or health care provider five days
 after mailing by certified mail by the employer or insurer to the
- 3 hospital, physician or health care provider.
- 4 (2) The notice shall include:

- (a) The name of the employer;
- 6 (b) The name of the insurer, if known;
- 7 (c) The name of the employee receiving the services;
- 8 (d) The general nature of the injury, if known; and
- 9 (e) Where a claim has been filed, the claim number, if 10 known.
 - (3) When an injury is found to be noncompensable under this chapter, the hospital, physician or other health care provider shall be entitled to pursue the employee for any unpaid portion of the fee or other charges for authorized services provided to the employee. Any applicable statute of limitations for an action for such fees or other charges shall be tolled from the time notice is given to the division by a hospital, physician or other health care provider pursuant to subdivision (6) of this subsection, until a determination of noncompensability in regard to the injury which is the basis of such services is made, or in the event there is an appeal to the labor and industrial relations commission, until a decision is rendered by that commission.
 - (4) If a hospital, physician or other health care provider or a debt collector on behalf of such hospital, physician or other health care provider pursues any action to collect from an employee after such notice is properly given, the employee shall have a cause of action against the hospital, physician or other

health care provider for actual damages sustained plus up to one
thousand dollars in additional damages, costs and reasonable
attorney's fees.

- (5) If an employer or insurer fails to make payment for authorized services provided to the employee by a hospital, physician or other health care provider pursuant to this chapter, the hospital, physician or other health care provider may proceed pursuant to subsection 4 of this section with a dispute against the employer or insurer for any fees or other charges for services provided.
- whose services have been authorized in advance by the employer or insurer may give notice to the division of any claim for fees or other charges for services provided for a work-related injury that is covered by this chapter, with copies of the notice to the employee, employer and the employer's insurer. Where such notice has been filed, the administrative law judge may order direct payment from the proceeds of any settlement or award to the hospital, physician or other health care provider for such fees as are determined by the division. The notice shall be on a form prescribed by the division.
- 14. The employer may allow or require an employee to use any of the employee's accumulated paid leave, personal leave, or medical or sick leave to attend to medical treatment, physical rehabilitation, or medical evaluations during work time. The intent of this subsection is to specifically supercede and abrogate any case law that contradicts the express language of this section.

287.170. 1. For temporary total disability the employer shall pay compensation for not more than four hundred weeks during the continuance of such disability at the weekly rate of compensation in effect under this section on the date of the injury for which compensation is being made. The amount of such compensation shall be computed as follows:

- (1) For all injuries occurring on or after September 28, 1983, but before September 28, 1986, the weekly compensation shall be an amount equal to sixty-six and two-thirds percent of the injured employee's average weekly earnings as of the date of the injury; provided that the weekly compensation paid under this subdivision shall not exceed an amount equal to seventy percent of the state average weekly wage, as such wage is determined by the division of employment security, as of the July first immediately preceding the date of injury;
- (2) For all injuries occurring on or after September 28, 1986, but before August 28, 1990, the weekly compensation shall be an amount equal to sixty-six and two-thirds percent of the injured employee's average weekly earnings as of the date of the injury; provided that the weekly compensation paid under this subdivision shall not exceed an amount equal to seventy-five percent of the state average weekly wage, as such wage is determined by the division of employment security, as of the July first immediately preceding the date of injury;
- (3) For all injuries occurring on or after August 28, 1990, but before August 28, 1991, the weekly compensation shall be an amount equal to sixty-six and two-thirds percent of the injured employee's average weekly earnings as of the date of the injury;

provided that the weekly compensation paid under this subdivision shall not exceed an amount equal to one hundred percent of the state average weekly wage;

- (4) For all injuries occurring on or after August 28, 1991, the weekly compensation shall be an amount equal to sixty-six and two-thirds percent of the injured employee's average weekly earnings as of the date of the injury; provided that the weekly compensation paid under this subdivision shall not exceed an amount equal to one hundred five percent of the state average weekly wage;
- 11 (5) For all injuries occurring on or after September 28, 12 1981, the weekly compensation shall in no event be less than 13 forty dollars per week.
 - 2. Temporary total disability payments shall be made to the claimant by check or other negotiable instruments approved by the director which will not result in delay in payment and shall be forwarded directly to the claimant without intervention, or, when requested, to claimant's attorney if represented, except as provided in section 454.517, by any other party except by order of the division of workers' compensation.
 - 3. An employee is disqualified from receiving temporary total disability during any period of time in which the claimant applies and receives unemployment compensation.
 - 4. If the employee is terminated from post-injury employment based upon the employee's post-injury misconduct, neither temporary total disability nor temporary partial disability benefits under this section or section 287.180 are payable. As used in this section, the phrase "post-injury

misconduct" shall not include absence from the workplace due to an injury unless the employee is capable of working with restrictions, as certified by a physician.

5. If an employee voluntarily separates from employment with an employer at a time when the employer had work available for the employee that was in compliance with any medical restriction imposed upon the employee as a result of the injury that is the subject of a claim for benefits under this chapter, neither temporary total disability nor temporary partial disability benefits available under this section or section 287.180 shall be payable.

287.780. No employer or agent shall discharge or [in any way] discriminate against any employee [for exercising any of] because the employee exercised his or her rights under this chapter. Any employee who has been discharged or discriminated against in such manner shall have a civil action for damages against his or her employer. For purposes of this section, the word "because" shall mean that the discharge or discrimination would not have happened but for the employee having exercised his or her rights under this chapter.