1	S.101
2	Introduced by Senators Ram Hinsdale and Clarkson
3	Referred to Committee on
4	Date:
5	Subject: Labor; workers' compensation; unemployment insurance; temporary
6	partial disability benefits; cost of living adjustment; appeals;
7	Workers' Compensation Administration Fund; rate of contribution;
8	discontinuance of benefits; eligibility
9	Statement of purpose of bill as introduced: This bill proposes to permit an
10	injured worker to request preauthorization of benefits in addition to medical
11	treatment, specify when an employer may require an employee who has been
12	medically cleared to return to work to engage in a work search, to amend the
13	formula for determining the amount of compensation that is due to an
14	employee with a temporary partial disability, to clarify the requirements for
15	providing dependency benefits and cost of living adjustments to compensation
16	paid to an employee with a temporary partial disability, and to permit the
17	Commissioner to award the necessary costs of a proceeding to a claimant if the
18	claimant prevails. This bill also proposes to set the annual rate of contribution
19	for the Workers' Compensation Administration Fund, to establish a default rate
20	of contribution in the event that the General Assembly does not set the rate of
21	contribution for a fiscal year, and to make permanent a provision permitting a

I	worker to file an appeal of a proposed discontinuance of workers'
2	compensation benefits and to obtain a 14-day extension to the time for filing an
3	appeal. In addition, this bill proposes to establish additional instances in which
4	an employee who voluntarily separates from employment may be eligible for
5	unemployment insurance benefits.
6	An act relating to miscellaneous workers' compensation amendments
7	It is hereby enacted by the General Assembly of the State of Vermont:
8	* * * Workers' Compensation * * *
9	Sec. 1. 21 V.S.A. § 640b is amended to read:
10	§ 640b. REQUEST FOR PREAUTHORIZATION TO DETERMINE IF
11	PROPOSED TREATMENT IS BENEFITS ARE NECESSARY
12	(a) As used in this section, "benefits" means medical treatment and
13	surgical, medical, and nursing services and supplies, including prescription
14	drugs and durable medical equipment.
15	(b) Within 14 days of after receiving a written request for preauthorization
16	for a proposed medical treatment benefits and medical evidence supporting the
17	requested treatment benefits, a workers' compensation insurer shall do one of
18	the following, in writing:
19	(1) authorize Authorize the treatment benefits and notify the health care
20	provider, the injured worker, and the Department; or.

1	(2)(A) deny Deny the treatment benefits because the entire claim is
2	disputed and the Commissioner has not issued an interim order to pay benefits;
3	OF. The insurer shall notify the health care provider, the injured worker, and
4	the Department of the decision to deny benefits.
5	(B)(3) deny Deny the treatment benefits if, based on a preponderance
6	of credible medical evidence specifically addressing the proposed treatment
7	benefits, it is the benefits are unreasonable or, unnecessary, or unrelated to the
8	work injury. The insurer shall notify the health care provider, the injured
9	worker, and the Department of the decision to deny treatment; or benefits.
10	(3)(4) notify Notify the health care provider, the injured worker, and
11	the Department that the insurer has scheduled an examination of the employee
12	pursuant to section 655 of this title or ordered a medical record review
13	pursuant to section 655 655a of this title. Based on the examination or review,
14	the insurer shall authorize or deny the treatment benefits and notify the
15	Department and the injured worker of the decision within 45 days of after a
16	request for preauthorization. The Commissioner may, in his or her the
17	Commissioner's sole discretion, grant a 10-day extension to the insurer to
18	authorize or deny treatment benefits, and such an extension shall not be subject
19	to appeal.
20	(b)(c) If the insurer fails to authorize or deny the treatment benefits
21	pursuant to subsection (a) of this section within 14 days of after receiving a

1	request, the claimant or health care provider may request that the Department
2	issue an order authorizing treatment benefits. After receipt of the request, the
3	Department shall issue an interim order within five days after notice to the
4	insurer, and five days in which to respond, absent evidence that the entire
5	claim is disputed. Upon request of a party, the Commissioner shall notify the
6	parties that the treatment has benefits have been authorized by operation of
7	law.
8	(c)(d) If the insurer denies the preauthorization of the treatment benefits
9	pursuant to subdivision (a)(2) $\frac{\partial \mathbf{r}}{\partial t}$ (3), or (4) of this section, the Commissioner
10	may, on his or her the Commissioner's own initiative or upon a request by the
11	claimant, issue an order authorizing the treatment benefits if he or she the
12	Commissioner finds that the evidence shows that the treatment is benefits are
13	reasonable, necessary, and related to the work injury.
14	Sec. 2. 21 V.S.A. § 643d is added to read:
15	§ 643d. WORK SEARCH; REQUIREMENTS; EXCEPTIONS
16	(a) An employer may require an employee who is receiving temporary
17	disability benefits pursuant to section 646 of this chapter to engage in a good
18	faith search for suitable work if:
19	(1) the injured employee is medically released to return to work, either
20	with or without limitations;

1	(2) the employer has provided the injured employee with written
2	notification that the employee is medically released to return to work and the
3	notification describes any applicable limitations; and
4	(3) the employer cannot offer the injured employee work that the
5	employee is medically released to do.
6	(b) An injured employee shall not be required to engage in a good faith
7	search for suitable work if the employee:
8	(1) is already employed; or
9	(2) has been referred for or is scheduled to undergo one or more surgical
10	procedures.
11	(c) An employer shall not require an injured employee to contact more than
12	three employers per week as part of a good faith work search performed
13	pursuant to this section.
14	Sec. 3. 21 V.S.A. § 646 is amended to read:
15	§ 646. TEMPORARY PARTIAL DISABILITY BENEFITS
16	(a)(1) Where the disability for work resulting from an injury is partial,
17	during the disability and beginning on the eighth day thereof of the period of
18	disability, the employer shall pay the injured employee a weekly compensation
19	equal to:
20	(A) the difference between the wage the injured employee earns
21	during the period of disability and the amount the injured employee would be

1	eligible to receive pursuant to section 642 of this chapter, including any
2	applicable cost of living adjustment or dependency benefits that would be due;
3	<u>or</u>
4	(B) for an injured employee who would be eligible to receive the
5	maximum weekly compensation pursuant to section 642 of this chapter, two-
6	thirds of the difference between his or her the injured employee's average
7	weekly wage before the injury and the average weekly wage which he or she is
8	able to earn thereafter amount the employee earns during the period of
9	disability.
10	(2) Compensation paid pursuant to this subsection shall be adjusted
11	following the receipt of 26 weeks of benefits and annually on each subsequent
12	July 1, so that the compensation continues to bear the same percentage
13	relationship to the average weekly wage in the State as it did at the time of
14	<u>injury.</u>
15	(b)(1) In addition to the amount paid pursuant to subsection (a) of this
16	section, the employer shall pay the injured employee during the disability
17	\$20.00 per week for each dependent child under 21 years of age, provided that
18	no other injured worker is receiving the same benefits on behalf of the
19	dependent child or children.
20	(2) The amount allowed for dependent children shall be adjusted weekly
21	to reflect the number of dependent children during each week of payment.

1	(c)(1)(A) For an injured employee who continues to work for the employer
2	from whom the employee is claiming workers' compensation, payment of
3	compensation pursuant to this section shall be mailed or deposited into the
4	injured employee's bank account within not more than seven days after the
5	injured employee's wages are paid.
6	(B) The employer shall be responsible for providing the injured
7	employee's wage information to the insurance carrier.
8	(2) For an injured employee who is working for a different employer
9	from the employer from whom the employee is claiming workers'
10	compensation, payment of compensation pursuant to this section shall be
11	mailed or deposited into the injured employee's bank account within not more
12	than three days after the injured employee submits the wage information to the
13	insurance carrier.
14	Sec. 4. 21 V.S.A. § 642 is amended to read:
15	§ 642. TEMPORARY TOTAL DISABILITY BENEFITS
16	(a)(1) Where the injury causes total disability for work, during such the
17	disability, but not including the first three days, with the day of the accident to
18	be counted as the first day, unless the employee received full wages for that
19	day, the employer shall pay the injured employee a weekly compensation equal
20	to two-thirds of the employee's average weekly wages, but.

1	(2) The weekly compensation shall be in an amount that is not more
2	than the maximum nor less than the minimum weekly compensation.
3	(3) Compensation paid pursuant to this subsection shall be adjusted on
4	the first July 1 following the receipt of 26 weeks of benefits and annually on
5	each subsequent July 1, so that the compensation continues to bear the same
6	percentage relationship to the average weekly wage in the State as it did at the
7	time of injury.
8	(b)(1) In addition, the injured employee, during the disability period shall
9	receive \$10.00 a to the amount paid pursuant to subsection (a) of this section,
10	the employer shall pay the injured employee during the disability \$20.00 per
11	week for each dependent child who is unmarried and under the age of 21 years
12	of age, provided that no other injured worker is receiving the same benefits on
13	behalf of the dependent child or children. However, in no event shall an
14	(2) The amount allowed for the dependent children shall be adjusted
15	weekly to reflect the number of dependent children during each week of
16	payment.
17	(c) Notwithstanding any provision of subsection (a) or (b) of this section to
18	the contrary:
19	(1) An employee's total weekly wage replacement benefits, including
20	any payments for a dependent child, shall not exceed 90 percent of the
21	employee's average weekly wage prior to applying any applicable cost of

1	living adjustment. The amount allowed for dependent children shall be
2	increased or decreased weekly to reflect the number of dependent children
3	extant during the week of payment.
4	(2) If the total disability continues after the third day for a period of
5	seven consecutive calendar days or more, compensation shall be paid for the
6	whole period of the total disability.
7	Sec. 5. 21 V.S.A. § 650 is amended to read:
8	§ 650. PAYMENT; AVERAGE WAGE; COMPUTATION
9	* * *
10	(d)(1) Compensation computed pursuant to this section shall be adjusted
11	annually on July 1, so that such the compensation continues to bear the same
12	percentage relationship to the average weekly wage in the State as computed
13	under this chapter as it did at the time of injury.
14	(2) Temporary total or temporary partial compensation shall first be
15	adjusted on the first July 1 following the receipt of 26 weeks of benefits.
16	(3) Permanent total and permanent partial compensation shall be
17	adjusted for each July 1 following the date of injury regardless of whether
18	indemnity benefits were paid on each intervening July 1.
19	(e)(1) If weekly compensation benefits or weekly accrued benefits are not
20	paid within 21 days after becoming due and payable pursuant to an order of the
21	Commissioner, or in cases in which the overdue benefit is not in dispute, 10 25

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1	percent of the overdue amount shall be added and paid to the employee, in
2	addition to any amounts due pursuant to subsection (f) of this section and
3	interest and any other penalties.
4	(2) In the case of an initial claim, benefits are due and payable upon
5	entering into an agreement pursuant to subsection 662(a) of this title, upon
6	issuance of an order of the Commissioner pursuant to subsection 662(b) of this
7	title, or if the employer has not denied the claim within 21 days after the claim
8	is filed.
9	(3) Benefits are in dispute if the claimant has been provided actual
10	written notice of the dispute within 21 days of after the benefit being due and
11	payable and the evidence reasonably supports the denial.
12	(4) Interest shall accrue and be paid on benefits that are found to be
13	compensable during the period of nonpayment.
14	(5) The Commissioner shall promptly review requests for payment
15	under this section and, consistent with subsection 678(d) of this title, shall
16	allow for the recovery of reasonable attorney's fees associated with an
17	employee's successful request for payment under this subsection.
18	(f)(1)(A) When benefits have been awarded or are not in dispute as
19	provided in subsection (e) of this section, the employer shall establish a

weekday on which payment shall be mailed or deposited and notify the

1	ciaimant and the Department of that day. The employer shall ensure that each
2	weekly payment is mailed or deposited on or before the day established.
3	(B) Payment shall be made by direct deposit to a claimant who elects
4	that payment method. The employer shall notify the claimant of his or her the
5	claimant's right to payment by direct deposit.
6	(2) If the benefit payment is not mailed or deposited on the day
7	established, the employer shall pay to the claimant a late fee equal to the
8	<u>greater</u> of \$10.00 or:
9	(A) five percent of the benefit amount, whichever is greater, for each
10	weekly the first payment that is made after the established day;
11	(B) 10 percent of the benefit amount for the second payment that is
12	made after the established day:
13	(C) 15 percent of the benefit amount for the third payment that is
14	made after the established day; and
15	(D) 20 percent of the benefit amount for the fourth and any
16	subsequent payments that are made after the established day.
17	(3) As used in this subsection, "paid" means the payment is mailed to
18	the claimant's mailing address or, in the case of direct deposit, transferred into
19	the designated account. In the event of a dispute, proof of payment shall be
20	established by affidavit.

1	Sec. b. 21 V.S.A. § 6/8 is amended to read:
2	§ 678. COSTS; ATTORNEY'S FEES
3	(a) Necessary costs of proceedings under this chapter, including deposition
4	expenses, subpoena fees, and expert witness fees, shall be assessed by the
5	Commissioner against the employer or its workers' compensation carrier when
6	the claimant prevails. The Commissioner may allow the claimant to recover
7	reasonable attorney's fees when the claimant prevails. Costs shall not be taxed
8	or allowed either party except as provided in this section.
9	(b)(1) When a claimant prevails in either a formal or informal proceeding
10	under this chapter, the Commissioner shall award the claimant necessary costs
11	incurred in relation to the proceeding, including deposition expenses, subpoena
12	fees, and expert witness fees.
13	(2) The Commissioner may allow a claimant to recover reasonable
14	attorney's fees when the claimant prevails.
15	(3) In cases for which a formal hearing is requested and the case is
16	resolved prior to a formal hearing:
17	(A) the Commissioner may award reasonable attorney's fees if the
18	claimant retained an attorney in response to an actual or effective denial of a
19	claim and payments were made to the claimant as a result of the attorney's
20	efforts; and

1	(B) the Commissioner may award necessary costs if the claimant
2	incurred the costs in response to an actual or effective denial of a claim and
3	payments were made to the claimant as a result of the costs incurred.
4	(c)(1) In appeals to the Superior or Supreme Court, if the claimant prevails,
5	he or she the claimant shall be entitled to reasonable attorney's fees as
6	approved by the court; necessary costs, including deposition expenses,
7	subpoena fees, and expert witness fees; and interest at the rate of 12 percent
8	per annum on that portion of any award the payment of which is contested.
9	(2) Interest shall be computed from the date of the award of the
10	Commissioner.
11	(e)(d) By January 1, 1999, and at least every five years thereafter, the
12	Commissioner shall amend existing rules regarding reasonable attorney's fees
13	awarded under subsection (a) of this section. In amending these rules, the
14	Commissioner shall consider accessibility to legal services, appropriate
15	inflation factors, and any other related factors consistent with the purposes of
16	this chapter. In the event the Commissioner proposes no change in the rules in
17	any five-year period, the Commissioner shall provide a written report to the
18	Legislative Committee on Administrative Rules of the General Assembly
19	explaining the reasons for not changing the rules.
20	(d) In cases for which a formal hearing is requested and the case is resolved
21	prior to formal hearing, the Commissioner may award reasonable attorney's

1	fees if the claimant retained an attorney in response to an actual or effective
2	denial of a claim and thereafter payments were made to the claimant as a result
3	of the attorney's efforts.
4	* * *
5	Sec. 7. ADOPTION OF RULES
6	The Commissioner of Labor shall, on or before July 1, 2024, adopt rules as
7	necessary to implement the provisions Secs. 1 through 6 of this act.
8	Sec. 8. WORKERS' COMPENSATION RATE OF CONTRIBUTION
9	For fiscal year 2024, after consideration of the formula in 21 V.S.A.
10	§ 711(b) and historical rate trends, the General Assembly determines that the
11	rate of contribution for the direct calendar year premium for workers'
12	compensation insurance shall be 1.5 percent. The contribution rate for self-
13	insured workers' compensation losses and workers' compensation losses of
14	corporations approved under 21 V.S.A. chapter 9 shall remain at one percent.
15	Sec. 9. 21 V.S.A. § 711 is amended to read:
16	§ 711. WORKERS' COMPENSATION ADMINISTRATION FUND
17	* * *
18	(b)(1) Annually, the General Assembly shall establish the rate of
19	contribution for the direct calendar year premium for workers' compensation
20	insurance. The rate shall equal the amount approved in the appropriations
21	process for the program and the Department's projection of salary and benefit

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1	increases for that fiscal year, less the amount collected in the prior calendar
2	year under subsection (a) of this section from self-insured workers'
3	compensation losses and from corporations approved under this chapter,
4	adjusted by any balance in the fund from the prior fiscal year, divided by the
5	total direct calendar year premium for workers' compensation insurance for the
6	prior year.
7	(2) In the event that the General Assembly does not establish the rate of
8	contribution for the direct calendar year premium for workers' compensation
9	insurance for a given fiscal year, the rate shall remain unchanged from the
10	prior fiscal year.
11	Sec. 10. 2014 Acts and Resolves No. 199, Sec. 54b is amended to read:
12	Sec. 54b. 21 V.S.A. § 643a is added to read:
13	§ 643a. DISCONTINUANCE OF BENEFITS
14	Unless an injured worker has successfully returned to work, an employer
15	shall notify both the Commissioner and the employee prior to terminating
16	benefits under either section 642 or 646 of this title. The notice of intention to
17	discontinue payments shall be filed on forms prescribed by the Commissioner
18	and shall include the date of the proposed discontinuance, the reasons for it,
19	and, if the employee has been out of work for 90 days, a verification that the
20	employer offered vocational rehabilitation screening and services as required

under this chapter. All relevant evidence, including evidence that does not

1	support discontinuance in the possession of the employer not already filed,
2	shall be filed with the notice. The liability for the payments shall continue for
3	seven days after the notice is received by the Commissioner and the employee.
4	If the claimant disputes the discontinuance, the claimant may file with
5	the Commissioner an objection to the discontinuance and seek an extension
6	of 14 days. The objection to the discontinuance shall be specific as to the
7	reasons and include supporting evidence. A copy of the objection shall be
8	provided to the employer at the time the request is made to the Commissioner.
9	Those The payments shall be made without prejudice to the employer and may
10	be deducted from any amounts due pursuant to section 648 of this title if the
11	Commissioner determines that the discontinuance is warranted or if otherwise
12	ordered by the Commissioner. Every notice shall be reviewed by the
13	Commissioner to determine the sufficiency of the basis for the proposed
14	discontinuance. If, after review of all the evidence in the file, the
15	Commissioner finds that a preponderance of all the evidence in the file does
16	not reasonably support the proposed discontinuance, the Commissioner shall
17	order that payments continue until a hearing is held and a decision is rendered.
18	Prior to a formal hearing, an injured worker may request reinstatement of
19	benefits by providing additional new evidence to the Department that
20	establishes that a preponderance of all evidence now supports the claim. If the
21	Commissioner's decision, after a hearing, is that the employee was not entitled

1	to any or all benefits paid between the discontinuance and the final decision,
2	upon request of the employer, the Commissioner may order that the employee
3	repay all benefits to which the employee was not entitled. The employer may
4	enforce a repayment order in any court of law having jurisdiction.
5	* * * Unemployment Insurance * * *
6	Sec. 11. 21 V.S.A. § 1344 is amended to read:
7	§ 1344. DISQUALIFICATIONS
8	(a) An individual shall be disqualified for benefits:
9	* * *
10	(2) For any week benefits are claimed, except as provided in subdivision
11	(3) of this subsection, until the individual has presented evidence to the
12	satisfaction of the Commissioner that the individual has performed services in
13	employment for a bona fide employer and has had earnings in excess of six
14	times the individual's weekly benefit amount if the Commissioner finds that
15	the individual is unemployed because:
16	(A)(i) The individual left the employ of the individual's last
17	employing unit voluntarily without good cause attributable to the employing
18	unit. An individual shall not suffer more than one disqualification by reason of
19	such separation.
20	(ii) However, an individual shall not be disqualified for benefits if

the individual left such employment for one of the following reasons:

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1	(I) to To accompany a spouse who:
2	(i)(aa) is on active duty with the U.S. Armed Forces and is
3	required to relocate due to permanent change of station orders, activation
4	orders, or unit deployment orders, and when such the relocation would make it
5	impractical or impossible, as determined by the Commissioner, for the
6	individual to continue working for such the employing unit; or
7	(ii)(bb) holds a commission in the U.S. Foreign Service and is
8	assigned overseas, and when such the relocation would make it impractical or
9	impossible, as determined by the Commissioner, for the individual to continue
10	working for such the employing unit.
11	(II) Due to urgent, compelling, or necessitous circumstances, as
12	determined by the Commissioner, including the individual's injury or illness,
13	to obtain or recover from medical treatment, to escape domestic or sexual
14	violence, to care for a child following an unexpected loss of child care, or to
15	care for an ill or injured family member.
16	* * *
17	(3) For not more than six weeks nor less than one week immediately
18	following the filing of a claim for benefits (in addition to any applicable
19	waiting period), as may be determined by the Commissioner according to the
20	circumstances in each case, if the Commissioner finds that the individual has

left the employ of the individual's last employing unit without good cause

1	attributable to the employing unit because of a health condition, as certified by
2	a health care provider, as defined in 18 V.S.A. § 9432(9), that precludes the
3	discharge of duties inherent in such employment. [Repealed.]
4	* * *
5	Sec. 12. 21 V.S.A. § 1301 is amended to read:
6	§ 1301. DEFINITIONS
7	The following words and phrases, as As used in this chapter, shall have the
8	following meanings unless the context clearly requires otherwise:
9	* * *
10	(25) "Domestic and sexual violence" means domestic violence, sexual
11	assault, or stalking as defined in 15 V.S.A. § 1151.
12	(26) "Family member" means an individual's parent, grandparent,
13	spouse, domestic partner, civil union partner, child, sibling, parent-in-law, or
14	grandchild. As used in this subdivision (26), child includes an individual's
15	biological child, foster child, adoptive child, or stepchild.
16	Sec. 13. 21 V.S.A. § 1325 is amended to read:
17	§ 1325. EMPLOYERS' EXPERIENCE-RATING RECORDS;
18	DISCLOSURE TO SUCCESSOR ENTITY
19	(a)(1) The Commissioner shall maintain an experience-rating record for
20	each employer. Benefits paid shall be charged against the experience-rating
21	record of each subject employer who provided base-period wages to the

1	eligible individual. Each subject employer's experience-rating charge shall
2	bear the same ratio to total benefits paid as the total base-period wages paid by
3	that employer bear to the total base-period wages paid to the individual by all
4	base-period employers. The experience-rating record of an individual subject
5	base-period employer shall not be charged for benefits paid to an individual
6	under any of the following conditions:
7	* * *
8	(F) The individual voluntarily separated from that employer to
9	accompany a spouse who is on active duty with the U.S. Armed Forces or who
10	holds a commission in the U.S. Foreign Service and is assigned overseas as
11	provided by subdivision $\frac{1344(a)(2)(A)}{1344(a)(2)(A)(ii)(I)}$ of this chapter.
12	* * *
13	(I) The individual voluntarily separated from that employer due to
14	urgent, compelling, or necessitous circumstances pursuant to the provisions of
15	subdivision 1344(a)(2)(A)(ii)(II) of this chapter.
16	* * *
17	* * * Effective Dates * * *
18	Sec. 14. EFFECTIVE DATES
19	(a) This section and Secs. 1 (preauthorization of workers' compensation
20	benefits), 2 (work search), 3 (temporary partial disability benefits),
21	4 (temporary total disability benefits), 5 (compensation calculation),

1	6 (attorney's fees and costs), 7 (adoption of rules), 9 (Workers' Compensation
2	Administrative Fund), 11 (unemployment disqualifications),
3	12 (unemployment definitions), and 13 (unemployment experience rating)
4	shall take effect on July 1, 2023.
5	(b) Secs. 8 (Workers' Compensation Administrative Fund rate for 2023)
6	and 10 (discontinuance of workers' compensation benefits) shall take effect on
7	passage.