Session of 2016

## **HOUSE BILL No. 2617**

By Committee on Commerce, Labor and Economic Development

2-4

AN ACT concerning workers compensation; relating to the medical administrator; electronic filing for administrative hearings; amending K.S.A. 44-534 and 44-536a and K.S.A. 2015 Supp. 44-510i and repealing the existing sections.

Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2015 Supp. 44-510i is hereby amended to read as follows: 44-510i. (a) Subject to the approval of the secretary, the director shall contract with or appoint; subject to the approval of the secretary, a specialist in health services delivery, who shall be referred to as the medical administrator. The medical administrator, if appointed, shall be person-licensed to practice medicine and surgery in this state and shall be in the unclassified service under the Kansas civil service act.

- (b) The medical administrator, subject to the direction of the director, shall have the duty of overseeing the providing of health care services to employees in accordance with the provisions of the workers compensation act, including, but not limited to:
- (1) Preparing, with the assistance of the advisory panel, the fee schedule for health care services as set forth in this section;
- (2) developing, with the assistance of the advisory panel, the utilization review program for health care services as set forth in this section;

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- (3) developing a system for collecting and analyzing data on expenditures for health care services by each type of provider under the workers compensation act; and
- (4) carrying out such other duties as may be delegated or directed by the director or secretary.
- (c) The director shall prepare and adopt rules and regulations which establish a schedule of maximum fees for medical, surgical, hospital, dental, nursing, vocational rehabilitation or any other treatment or services provided or ordered by health care providers and rendered to employees under the workers compensation act and procedures for appeals and review of disputed charges or services rendered by health care providers under this section;
- The schedule of maximum fees shall be reasonable, shall promote health care cost containment and efficiency with respect to the workers

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Proposed Amendments to HB 2617 #2
Committee on Commerce, Labor and
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Office of Revisor of Statutes

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compensation health care delivery system, and shall be sufficient to ensure availability of such reasonably necessary treatment, care and attendance to each injured employee to cure and relieve the employee from the effects of the injury. The schedule shall include provisions and review procedures for exceptional cases involving extraordinary medical procedures or circumstances and shall include costs and charges for medical records and testimony.

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- (2) In every case, all fees, transportation costs, charges under this section and all costs and charges for medical records and testimony shall be subject to approval by the director and shall be limited to such as are fair, reasonable and necessary. The schedule of maximum fees shall be revised as necessary at least every two years by the director to assure that the schedule is current, reasonable and fair.
- (3) Any contract or any billing or charge which any health care provider, vocational rehabilitation service provider, hospital, person or institution enters into with or makes to any patient for services rendered in connection with injuries covered by the workers compensation act or the fee schedule adopted under this section, which is or may be in excess of or not in accordance with such act or fee schedule, is unlawful, void and unenforceable as a debt.

- expenses as provided in K.S.A. 75-3223, and amendments thereto. advisory panel, shall be paid subsistence allowances, mileage and other or attending a subcommittee of the advisory panel authorized by the two years which shall commence on July 1 of the year of appointment appointed by the secretary. Of the members appointed by the secretary, physical therapy association, one member shall be appointed by the chiropractic association; one member shall be appointed by the Kansas hospital association; one member shall be appointed by the Kansas of osteopathic medicine; one member shall be appointed by the Kansas medical society; one member shall be appointed by the Kansas association appointed as follows: One person shall be appointed by the Kansas establishing a schedule of maximum fees as required by this section. The Members of the advisory panel attending meetings of the advisory panel, thereto. Each appointed member shall be appointed for a term of office of rehabilitation services pursuant to K.S.A. 44-510g, and amendments AFL-CIO; and one shall be a representative of providers of vocational representatives of employees recommended to the secretary by the Kansas by the Kansas chamber of commerce and industry; two shall be two shall be representatives of employers recommended to the secretary Kansas occupational therapy association and five members shall be panel shall consist of the commissioner of insurance and 11 members (d) There is hereby created an advisory panel to assist the director in
- (e) All fees and other charges paid for such treatment, care and

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attendance, including treatment, care and attendance provided by any health care provider, hospital or other entity providing health care services, shall not exceed the amounts prescribed by the schedule of maximum fees established under this section or the amounts authorized pursuant to the provisions and review procedures prescribed by the schedule for exceptional cases. With the exception of the rules and regulations established for the payment of selected hospital inpatient services under the diagnosis related group prospective payment system, a health care provider, hospital or other entity providing health care services shall be paid either such health care provider, hospital or other entity's usual and customary charge for the treatment, care and attendance or the maximum fees as set forth in the schedule, whichever is less. In reviewing and approving the schedule of maximum fees, the director shall consider the following:

(1) The levels of fees for similar treatment, care and attendance imposed by other health care programs or third-party payors in the locality in which such treatment or services are rendered;

- (2) the impact upon cost to employers for providing a level of fees for treatment, care and attendance which will ensure the availability of treatment, care and attendance required for injured employees;
- (3) the potential change in workers compensation insurance premiums or costs attributable to the level of treatment, care and attendance provided; and
- (4) the financial impact of the schedule of maximum fees upon health care providers and health care facilities and its effect upon their ability to make available to employees such reasonably necessary treatment, care and attendance to each injured employee to cure and relieve the employee from the effects of the injury.

Sec. 2. K.S.A. 44-534 is hereby amended to read as follows: 44-534. (a) Whenever the employer, worker, Kansas workers compensation fund or insurance carrier cannot agree upon the worker's right to compensation under the workers compensation act or upon any issue in regard to workers compensation benefits due the injured worker thereunder, the employer, worker, Kansas worker's compensation fund or insurance carrier may apply in writing to the director for a determination of the benefits or compensation due or claimed to be due. The application shall be *filed* in the form prescribed by the rules and regulations of the director, *including requirements for electronic filing*, and the application shall set forth the substantial and material facts in relation to the claim. Whenever an application is filed under this section, the matter shall be assigned to an administrative law judge. The director shall forthwith mail a certified copy of the application to the adverse party. The administrative law judge shall proceed, upon due and reasonable notice to the parties, which shall not be

findings concerning the amount of compensation, if any due to the worker. less than 20 days, to hear all evidence in relation thereto and to make

- whichever is later. within two years of the date of the last payment of compensation, the office of the director within three years of the date of the accident or workers compensation act unless an application for a hearing is on file in (b) No proceeding for compensation shall be maintained under the
- extended to the first accessible day that is not a Saturday, Sunday or legal holiday. As used in this subsection: inaccessible on the last day for filing, then the time for filing shall be 0 If the workers compensation electronic filing system
- "Last day" means:

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- time zone on the final day for filing; and (A) For electronic or facsimile filing, at midnight in the division's
- the final day for filing; and (B) for filing by other means, at 5 p.m. in the division's time zone on
- 12 13 14 15 16 17 holiday. governor. A half holiday shall be treated as other days and not as a president of the United States, the congress of the United States or the legislature of this state, or any day observed as a holiday by order of the (2) "legal holiday" means any day declared a holiday by the
- address, if applicable. the party's name, address, telephone number; fax number and email utilizing the workers compensation electronic filing system, and shall state attorney shall be signed by the party in writing or electronically, when workers compensation act of any party who is not represented by an signing. A pleading, motion or other paper document provided for by the compensation electronic filing system, satisfies the requirements for stated. Signature by electronic means, when utilizing the workers number, email address and supreme court registration number shall be attorney, shall be signed by at least one attorney of record in the attorney's by the workers compensation act of any party, who is represented by an 536a. (a) Every pleading, motion and other-paper document provided for individual name, and the attorney's address-and, telephone number, fax Sec. 3. K.S.A. 44-536a is hereby amended to read as follows: 44-
- existing law; and (3) that the pleading is not imposed for any improper regulation of the director, pleadings need not be verified or accompanied law or a good faith argument for the extension, modification or reversal of inquiry, the pleading is well grounded in fact and is warranted by existing person; (1) That the person has read the pleading;; (2) that to the best of by an affidavit. The signature of a person constitutes a certificate by the the person's knowledge, information and belief formed after reasonable (b) Except when otherwise specifically provided by rule and

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After implementation by rules and regulations by the director,

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increase in the cost of resolving disputed claims for benefits. purpose, such as to harass or to cause unnecessary delay or needless

movant. promptly after the omission is called to the attention of the pleader or paper document shall not be accepted and shall be void unless it is signed the workers compensation act is not signed, such pleading, motion or other (c) If any pleading, motion or other-paper document provided for by

reasonable attorney fees. filing of the pleading, motion or other-paper document, including or parties the amount of the reasonable expenses incurred because of the appropriate sanction, which may include an order to pay to the other party the person who signed such pleading or a represented party, or both, an initiative upon notice and after opportunity to be heard, shall impose upon administrative law judge, director or board, upon motion or upon its own workers compensation act is signed in violation of this section, the (d) If a pleading, motion or other-paper document provided for by the

are hereby repealed. Sec. 4. K.S.A. 44-534 and 44-536a and K.S.A. 2015 Supp. 44-510i

publication in the statute book. This act shall take effect and be in force from and after its