

Significant laws passed in 2007 affecting workers' compensation

- HB 2218** Eliminates the requirement to adopt a rule and instead allows the determination of impairment to be included in an order on reconsideration, which can be appealed to the Workers' Compensation Board. The bill eliminates the requirement to consult a physician if requested when determining whether to approve a worker's additional change of attending physician. The bill also consolidates into one section of the law the reasons an insurer can deny a lump sum payment for a permanent partial disability award and removes the director's review of a denied request. The bill also gives the department the authority to issue civil penalties against managed care organizations that fail to comply with laws or rules. *Effective Jan. 1, 2008.*
- HB 2244** Makes permanent the partial disability benefit changes made by SB 757 in 2003 and HB 2408 in 2005 permanent. The bill also requires the Workers' Compensation Management-Labor Advisory Committee to review permanent partial disability benefit amounts on a biennial basis and make recommendations to ensure the original policy goals continue to be met over time. *Effective Jan. 1, 2008.*
- HB 2247** Makes permanent the expanded role of nurse practitioners in the workers' compensation system by allowing them to provide compensable medical services to injured workers for up to 90 days, authorize time loss for up to 60 days, release the worker to work, and manage the worker's return to work in that time period. *Effective Jan. 1, 2008.*
- HB 2250** Allows a surcharge on assigned risk plan members, if necessary, to help pay the costs of assigned risk pool losses when the losses exceed premiums. *Effective Jan. 1, 2008.*
- HB 2756** Allows chiropractors, podiatrists, naturopaths, and physician assistants to act as attending physicians for up to 60 days or 18 visits, whichever comes first. In addition, the four provider groups can authorize time loss for up to 30 days and manage the worker's return to work during that period. All four provider types also are required to certify they have reviewed informational materials developed by the director of the department. *Effective June 1, 2007.*
- HB 2783** Extends the notice requirement to an employer from 30 days to 45 days when an insurer terminates the employer's workers' compensation insurance. The bill also shortens the notice required to the employer to 10 days in the event of nonpayment of premium. *Effective Jan. 1, 2008.*
- HB 2943** Removes the statutory reference to the American Board of Independent Medical Examiners guidelines relating to code of conduct for independent medical examination providers. Instead, the bill requires that the department adopt rules that outline the standard of conduct for providers that do not have conduct guidelines from their regulatory board. The rules may be consistent with the code of conduct adopted by the Oregon Independent Medical Examination Association. *Effective: June 4, 2007.*

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- HB 3362** Allows the Home Care Commission to elect coverage on behalf of all Department of Human Services clients who employ home care workers, making the home care workers “subject workers” if they are paid by the state on behalf of the client. The bill also allows termination of temporary total disability benefits when a home care worker refuses modified employment offered by any Department of Human Services client who employs home care workers, not just the original employer client, with some exceptions for work location and the worker’s physical capacity. *Effective Jan. 1, 2008.*
- HB 3632** Clarifies that certain ski patrol and other ski program volunteers are not subject workers. *Effective March 11, 2008.*
- SB 253** Allows the administrative law judge that mediates a workers’ compensation Claim Disposition Agreement to approve the agreement. *Effective Jan. 1, 2008.*
- SB 404** Allows for payment of reasonable costs for records, expert opinions, and witness fees associated with appealing a workers’ compensation claim if the claimant prevails, capped at \$1,500 unless extraordinary circumstances justify a greater amount. The bill also allows an attorney who represents an injured worker to place a lien for recovery of fees out of additional awarded compensation or a claim settlement if the worker signs an attorney fee agreement for representation and the attorney was instrumental in obtaining the outcome of the claim. *Effective Jan. 1, 2008.*
- SB 504** Excludes an emergency room physician from the definition of an attending physician when the physician refers the worker to a primary care physician for follow-up care.
- The bill allows the emergency room physician to authorize time-loss benefits for a maximum of 14 days. *Effective Jan. 1, 2008.*
- SB 559** Removes the requirement for a guaranty contract filing and instead requires the insurer to provide insurance policy information to the department as proof of workers’ compensation coverage. *Operative July 1, 2009.*
- SB 563** Removes the requirement for the department to review and approve all individual treatment standards adopted by managed care organizations. *Effective Jan. 1, 2008.*
- SB 688** Clarifies that the exemption from workers’ compensation coverage for owner-operators of taxicabs applies to a person who operates and has an ownership or leasehold interest in a passenger motor vehicle that is operated as a taxicab. The bill also exempts workers who provide passenger vehicle transportation for non-emergency medical transportation. *Effective Jan. 1, 2008.*
- SB 762** Requires the department to annually set the amount of nondisabling medical costs that an employer can voluntarily pay to minimize impact on the employer’s experience rating. The threshold amount is based on the change in the medical services consumer price index, rounded to the nearest \$100. *Effective Jan. 1, 2008.*
- SB 835** Requires Management-Labor Advisory Committee to conduct an interim study of the adequacy of death benefits in the workers’ compensation system and report to the 75th Oregon Legislative Assembly is required by Jan. 31, 2009. *Effective Jan. 1, 2008.*