Senate Engrossed

workers' compensation; service; electronic transmission

State of Arizona Senate Fifty-fifth Legislature First Regular Session 2021

CHAPTER 333

SENATE BILL 1651

AN ACT

AMENDING SECTIONS 23-901, 23-941, 23-942, 23-943, 23-1047 AND 23-1061, ARIZONA REVISED STATUTES; RELATING TO WORKERS' COMPENSATION.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona: 2 Section 1. Section 23-901, Arizona Revised Statutes, is amended to 3 read: 4 23-901. Definitions 5 In this chapter, unless the context otherwise requires: 6 1. "Award" means the finding or decision of an administrative law 7 judge or the commission as to the amount of compensation or benefit due an 8 injured employee or the dependents of a deceased employee. 9 2. "Client" means an individual, association, company, firm, partnership, corporation or any other legally recognized entity that is 10 11 subject to this chapter and that enters into a professional employer 12 agreement with a professional employer organization. 3. "Co-employee" means every person employed by 13 an injured 14 employee's employer. 15 "Commission" means the industrial commission of Arizona. 4. 16 5. "Compensation" means the compensation and benefits provided by 17 this chapter. 18 6. "Employee", "workman", "worker" and "operative" means: 19 (a) Every person in the service of this state or a county, city, 20 town, municipal corporation or school district, including regular members 21 of lawfully constituted police and fire departments of cities and towns, 22 whether by election, appointment or contract of hire. 23 (b) Every person in the service of any employer subject to this 24 chapter, including aliens and minors legally or illegally allowed to work 25 for hire, but not including a person whose employment is both: 26 (i) Casual. 27 (ii) Not in the usual course of the trade, business or occupation 28 of the employer. 29 (c) Lessees of mining property and the lessees' employees and 30 contractors engaged in the performance of work that is a part of the 31 business conducted by the lessor and over which the lessor retains supervision or control are within the meaning of this paragraph employees 32 of the lessor, and are deemed to be drawing wages as are usually paid 33 employees for similar work. The lessor may deduct from the proceeds of 34 35 ores mined by the lessees the premium required by this chapter to be paid 36 for such employees. 37 (d) Regular members of volunteer fire departments organized pursuant to title 48, chapter 5, article 1, regular firefighters of any 38 39 volunteer fire department, including private fire protection service 40 organizations, organized pursuant to title 10, chapters 24 through 40, 41 volunteer firefighters serving as members of a fire department of any 42 incorporated city or town or an unincorporated area without pay or without 43 full pay and on a part-time basis, and voluntary policemen and volunteer firefighters serving in any incorporated city, town or unincorporated area 44 45 without pay or without full pay and on a part-time basis, are deemed to be

1 employees, but for the purposes of this chapter, the basis for computing 2 wages for premium payments and compensation benefits for regular members 3 of volunteer fire departments organized pursuant to title 48, chapter 5, 4 article 1, or organized pursuant to title 10, chapters 24 through 40, 5 regular members of any private fire protection service organization, 6 volunteer firefighters and volunteer policemen of these departments or 7 organizations shall be the salary equal to the beginning salary of the 8 same rank or grade in the full-time service with the city, town, volunteer 9 fire department or private fire protection service organization, provided if there is no full-time equivalent then the salary equivalent shall be as 10 11 determined by resolution of the governing body of the city, town or 12 volunteer fire department or corporation.

13 (e) Members of the department of public safety reserve, organized pursuant to section 41-1715, are deemed to be employees. For the purposes 14 of this chapter, the basis for computing wages for premium payments and 15 16 compensation benefits for a member of the department of public safety 17 reserve who is a peace officer shall be the salary received by officers of 18 the department of public safety for the officers' first month of regular 19 duty as an officer. For members of the department of public safety 20 reserve who are not peace officers, the basis for computing premiums and 21 compensation benefits is \$400 a month.

22 (f) Any person placed in on-the-job evaluation or in on-the-job training under the department of economic security's temporary assistance 23 24 for needy families program or vocational rehabilitation program shall be 25 deemed to be an employee of the department for the purpose of coverage 26 under the state workers' compensation laws only. The basis for computing 27 premium payments and compensation benefits shall be \$200 per month. Any 28 person receiving vocational rehabilitation services under the department 29 of economic security's vocational rehabilitation program whose major evaluation or training activity is academic, whether as an enrolled 30 31 attending student or by correspondence, or who is confined to a hospital 32 or penal institution, shall not be deemed to be an employee of the 33 department for any purpose.

34 (g) Regular members of a volunteer sheriff's reserve, which may be 35 established by resolution of the county board of supervisors, to assist 36 the sheriff in the performance of the sheriff's official duties. A roster of the current members shall monthly be certified to the clerk of the 37 board of supervisors by the sheriff and shall not exceed the maximum 38 39 number authorized by the board of supervisors. Certified members of an 40 authorized volunteer sheriff's reserve shall be deemed to be employees of 41 the county for the purpose of coverage under the Arizona workers' compensation laws and occupational disease disability laws and shall be 42 43 entitled to receive the benefits of these laws for any compensable injuries or disabling conditions that arise out of and occur in the course 44 45 of the performance of duties authorized and directed by the sheriff.

1 Compensation benefits and premium payments shall be based on the salary 2 received by a regular full-time deputy sheriff of the county involved for 3 the first month of regular patrol duty as an officer for each certified 4 member of a volunteer sheriff's reserve. This subdivision does not 5 provide compensation coverage for any member of a sheriff's posse who is 6 not a certified member of an authorized volunteer sheriff's reserve except 7 as a participant in a search and rescue mission or a search and rescue 8 training mission.

9 (h) A working member of a partnership may be deemed to be an 10 employee entitled to the benefits provided by this chapter on written 11 acceptance, by endorsement, at the discretion of the insurance carrier for 12 the partnership of an application for coverage by the working partner. 13 The basis for computing premium payments and compensation benefits for the 14 working partner shall be an assumed average monthly wage of not less than \$600 nor OR more than the maximum wage provided in section 23-1041 and is 15 16 subject to the discretionary approval of the insurance carrier. Any 17 compensation for permanent partial or permanent total disability payable 18 to the partner is computed on the lesser of the assumed monthly wage 19 agreed to by the insurance carrier on the acceptance of the application 20 for coverage or the actual average monthly wage received by the partner at 21 the time of injury.

22 (i) The sole proprietor of a business subject to this chapter may be deemed to be an employee entitled to the benefits provided by this 23 24 chapter on written acceptance, by endorsement, at the discretion of the 25 insurance carrier of an application for coverage by the sole proprietor. 26 The basis for computing premium payments and compensation benefits for the 27 sole proprietor is an assumed average monthly wage of not less than \$600 28 nor OR more than the maximum wage provided by section 23-1041 and is 29 subject to the discretionary approval of the insurance carrier. Any 30 compensation for permanent partial or permanent total disability payable 31 to the sole proprietor shall be computed on the lesser of the assumed 32 monthly wage agreed to by the insurance carrier on the acceptance of the 33 application for coverage or the actual average monthly wage received by 34 the sole proprietor at the time of injury.

35 (j) A member of the Arizona national guard, Arizona state guard or 36 unorganized militia shall be deemed a state employee and entitled to 37 coverage under the Arizona workers' compensation law at all times while the member is receiving the payment of the member's military salary from 38 this state under competent military orders or on order of the governor. 39 40 Compensation benefits shall be based on the monthly military pay rate to 41 which the member is entitled at the time of injury, but not less than a salary of \$400 per month, mor OR more than the maximum provided by the 42 43 workers' compensation law. Arizona compensation benefits shall not inure to a member compensable under federal law. 44

1 (k) Certified ambulance drivers and attendants who serve without 2 pay or without full pay on a part-time basis are deemed to be employees 3 and entitled to the benefits provided by this chapter and the basis for 4 computing wages for premium payments and compensation benefits for 5 certified ambulance personnel shall be \$400 per month.

6 (1) Volunteer workers of a licensed health care institution may be 7 deemed to be employees and entitled to the benefits provided by this 8 chapter on written acceptance by the insurance carrier of an application 9 by the health care institution for coverage of such volunteers. The basis 10 for computing wages for premium payments and compensation benefits for 11 volunteers shall be \$400 per month.

12 (m) Personnel who participate in a search or rescue operation or a 13 search or rescue training operation that carries a mission identifier assigned by the division of emergency management as provided in section 14 35-192.01 and who serve without compensation as volunteer state employees. 15 16 The basis for computation of wages for premium purposes and compensation 17 benefits is the total volunteer man-hours recorded by the division of 18 emergency management in a given quarter multiplied by the amount 19 determined by the appropriate risk management formula.

20 (n) Personnel who participate in emergency management training, 21 exercises or drills that are duly enrolled or registered with the division 22 of emergency management or any political subdivision as provided in 23 section 26-314, subsection C and who serve without compensation as 24 volunteer state employees. The basis for computation of wages for premium 25 purposes and compensation benefits is the total volunteer man-hours 26 recorded by the division of emergency management or political subdivision 27 during a given training session, exercise or drill multiplied by the 28 amount determined by the appropriate risk management formula.

29 (o) Regular members of the Arizona game and fish department reserve, organized pursuant to section 17-214. 30 The basis for computing 31 wages for premium payments and compensation benefits for a member of the reserve is the salary received by game rangers and wildlife managers of 32 33 the Arizona game and fish department for the game rangers' and wildlife 34 managers' first month of regular duty.

35 (p) Every person employed pursuant to a professional employer 36 agreement.

37 (q) A working member of a limited liability company who owns less 38 than fifty percent of the membership interest in the limited liability 39 company.

40 (r) A working member of a limited liability company who owns fifty 41 percent or more of the membership interest in the limited liability 42 company may be deemed to be an employee entitled to the benefits provided 43 by this chapter on the written acceptance, by endorsement, of an application for coverage by the working member at the discretion of the 44 45 insurance carrier for the limited liability company. The basis for

1 computing wages for premium payments and compensation benefits for the 2 working member is an assumed average monthly wage of \$600 or more but not 3 more than the maximum wage provided in section 23-1041 and is subject to 4 the discretionary approval of the insurance carrier. Any compensation for 5 permanent partial or permanent total disability payable to the working 6 member is computed on the lesser of the assumed monthly wage agreed to by 7 the insurance carrier on the acceptance of the application for coverage or 8 the actual average monthly wage received by the working member at the time 9 of injury.

10 (s) A working shareholder of a corporation who owns less than fifty 11 percent of the beneficial interest in the corporation.

12 (t) A working shareholder of a corporation who owns fifty percent 13 or more of the beneficial interest in the corporation may be deemed to be an employee entitled to the benefits provided by this chapter on the 14 15 written acceptance, by endorsement, of an application for coverage by the 16 working shareholder at the discretion of the insurance carrier for the 17 corporation. The basis for computing wages for premium payments and 18 compensation benefits for the working shareholder is an assumed average 19 monthly wage of \$600 or more but not more than the maximum wage provided 20 in section 23-1041 and is subject to the discretionary approval of the 21 insurance carrier. Any compensation for permanent partial or permanent 22 total disability payable to the working shareholder is computed on the lesser of the assumed monthly wage agreed to by the insurance carrier on 23 24 the acceptance of the application for coverage or the actual average 25 monthly wage received by the working shareholder at the time of injury.

7. "General order" means an order applied generally throughout this
state to all persons under jurisdiction of the commission.

8. "Heart-related or perivascular injury, illness or death" means myocardial infarction, coronary thrombosis or any other similar sudden, violent or acute process involving the heart or perivascular system, or any death resulting therefrom, and any weakness, disease or other condition of the heart or perivascular system, or any death resulting therefrom.

9. "Insurance carrier" means every insurance carrier duly authorized by the director of the department of insurance and financial institutions to write workers' compensation or occupational disease compensation insurance in this state.

38 10. "Interested party" means the employer, the employee, or if the 39 employee is deceased, the employee's estate, the surviving spouse or 40 dependents, the commission, the insurance carrier or their representative.

41 11. "Mental injury, illness or condition" means any mental,
42 emotional, psychotic or neurotic injury, illness or condition.

1 12. "Order" means and includes any rule, direction, requirement, 2 standard, determination or decision other than an award or a directive by the commission or an administrative law judge relative to any entitlement 3 4 to compensation benefits, or to the amount of compensation benefits, and 5 any procedural ruling relative to the processing or adjudicating of a 6 compensation matter.

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13. "Personal injury by accident arising out of and in the course 8 of employment" means any of the following:

9 (a) Personal injury by accident arising out of and in the course of 10 employment.

11 (b) An injury caused by the wilful act of a third person directed 12 against an employee because of the employee's employment, but does not 13 include a disease unless resulting from the injury.

14 (c) An occupational disease that is due to causes and conditions characteristic of and peculiar to a particular trade, occupation, process 15 16 or employment, and not the ordinary diseases to which the general public 17 is exposed, and subject to section 23-901.01 or, for heart-related, 18 perivascular or pulmonary cases, section 23-1105.

19 14. "Professional employer agreement" means a written contract 20 between a client and a professional employer organization:

21 (a) In which the professional employer organization expressly 22 agrees to co-employ all or a majority of the employees providing services 23 the client. In determining whether the professional employer for 24 organization employs all or a majority of the employees of a client, any 25 person employed pursuant to the terms of the professional employer 26 agreement after the initial placement of client employees on the payroll 27 of the professional employer organization shall be included.

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(b) That is intended to be ongoing rather than temporary in nature.

29 (c) In which employer responsibilities for worksite employees, including hiring, firing and disciplining, are expressly allocated between 30 31 the professional employer organization and the client in the agreement.

15. "Professional employer organization" means any person engaged 32 33 in the business of providing professional employer services. Professional 34 employer organization does not include a temporary help firm or an 35 employment agency.

36 16. "Professional employer services" means the service of entering 37 into co-employment relationships under this chapter to which all or a 38 majority of the employees providing services to a client or to a division 39 or work unit of a client are covered employees.

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17. "SERVE" OR "SERVICE" MEANS EITHER:

(a) MAILING TO THE LAST KNOWN ADDRESS OF THE RECEIVING PARTY.

(b) TRANSMITTING BY OTHER MEANS, INCLUDING ELECTRONIC TRANSMISSION, 42 43 WITH THE WRITTEN CONSENT OF THE RECEIVING PARTY.

17. 18. "Special order" means an order other than a general order.

1 18. 19. "Weakness, disease or other condition of the heart or 2 perivascular system" means arteriosclerotic heart disease. cerebral vascular disease, peripheral vascular disease, cardiovascular disease, 3 4 angina pectoris, congestive heart trouble, coronary insufficiency, 5 ischemia and all other similar weaknesses, diseases and conditions, and 6 also previous episodes or instances of myocardial infarction, coronary 7 thrombosis or any similar sudden, violent or acute process involving the 8 heart or perivascular system.

9 19. 20. "Workers' compensation" means workmen's compensation as 10 used in article XVIII, section 8, Constitution of Arizona.

11 Sec. 2. Section 23-941, Arizona Revised Statutes, is amended to 12 read:

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23-941. <u>Hearing rights and procedure</u>

A. Subject to section 23-947, any interested party may file a request for a hearing concerning a claim.

16 B. A request for a hearing shall be made in writing, be signed by 17 or on behalf of the interested party and include the interested party's 18 address, state that a hearing is desired and be filed with the commission.

19 C. The commission shall refer the request for the hearing to the 20 administrative law judge division for determination as expeditiously as 21 possible. The presiding administrative law judge may dismiss a request 22 for A hearing if it appears to the presiding administrative law judge's 23 satisfaction that the disputed issue or issues have been resolved by the 24 parties. Any interested party who objects to such A dismissal may request 25 a review pursuant to section 23-943.

D. At least twenty days' prior notice of the time and place of the hearing shall be given to all parties in interest by mail at their last known address SERVED ON ALL PARTIES IN INTEREST. In the case of a hearing concerning suspension of benefits, pursuant to section 23-1026, 23-1027 or 23-1071, only ten days' prior notice is required. Hearings shall be held in the county where the workman resided at the time of the injury or another place selected by the administrative law judge.

E. A record of all proceedings at the hearing shall be made but need not be transcribed unless a party applies to the court of appeals for a writ of certiorari pursuant to section 23-951. The record of the proceedings, if not transcribed, shall be kept for at least two years but may be destroyed after that time if a transcription is not requested.

F. Except as otherwise provided in this section and rules of procedure established by the commission, the administrative law judge is not bound by common law or statutory rules of evidence or by technical or formal rules of procedure and may conduct the hearing in any manner that will achieve substantial justice.

G. Any party shall be entitled to issuance and service of subpoenas
under section 23-921. Any party or the party's representative may serve
such subpoenas.

1 H. Any interested party or the interested party's authorized agent shall be entitled to inspect any claims file of the commission, provided 2 3 that IF such authorization is filed in writing with the commission.

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4 I. Any interested party is entitled to one change of administrative 5 law judge as a matter of right. To exercise the right to a change of 6 administrative law judge, the interested party shall file a notice of 7 change of administrative law judge. The notice of change of administrative law judge shall: 8

9 1. Be signed by the interested party or the interested party's 10 authorized agent.

2. State the name of the administrative law judge to be changed.

3. Certify that the interested party or the interested party's 12 13 authorized agent has timely filed the notice of change of administrative law judge. A notice of change of administrative law judge as a matter of 14 right is timely if filed not more than thirty days after the date of the 15 16 notice of hearing or not more than thirty days after a new administrative 17 law judge is assigned to the claim if another interested party or the 18 interested party's authorized agent has filed a notice of change of 19 administrative law judge as a matter of right.

20 4. Certify that the interested party or the interested party's 21 authorized agent has not previously been granted a change of 22 administrative law judge as a matter of right for the claim.

23 J. Any interested party to a hearing before the commission or the 24 interested party's authorized agent may file an affidavit for change of 25 administrative law judge for cause against a presiding administrative law 26 judge that sets forth any of the grounds as provided in subsection K of 27 this section. The chief administrative law judge shall immediately 28 transfer the matter to another administrative law judge. An affidavit for 29 change of administrative law judge for cause shall be filed within the 30 time frames provided in subsection I of this section.

31 K. Grounds that may be alleged as provided in subsection J of this 32 section for change of administrative law judge for cause are:

33 1. That the administrative law judge has been engaged as counsel in the hearing before appointment as administrative law judge. 34

35 2. That the administrative law judge is otherwise interested in the 36 hearing.

37 3. That the administrative law judge is of kin or otherwise related 38 to a party to the hearing.

4. That the administrative law judge is a material witness in the 39 40 hearing.

41 5. That the party filing the affidavit has cause to believe and 42 does believe that on account of the bias, prejudice or interest of the 43 administrative law judge the administrative law judge PARTY cannot obtain 44 a fair and impartial hearing.

L. For the purposes of subsections I and J of this section, the employer and the employer's insurance carrier are considered a single party unless the employer's and the employer's insurance company's interests are in conflict.

5 M. After final disposition of the proceedings in which they are 6 used, exhibits marked for identification or introduced as evidence at 7 hearings or proceedings that cannot be readily copied, photocopied, 8 mechanically reproduced or otherwise preserved as a document for inclusion 9 in the record of the proceedings may be disposed of in the following 10 manner:

11 1. By written notice, the attorneys of record, or if none, the 12 parties, shall be notified that the counsel or the party introducing the 13 exhibit may claim it at the industrial commission within sixty days.

14 2. After Sixty days following AFTER notification, any exhibit 15 remaining in the custody of the industrial commission shall be disposed of 16 as state surplus property pursuant to the direction of the department of 17 administration. A written description of the exhibit shall be included in 18 the record to preserve the exhibit's identity.

19 Sec. 3. Section 23-942, Arizona Revised Statutes, is amended to 20 read:

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23-942. <u>Awards of administrative law judge; contents;</u> <u>disposition and effect</u>

A. Upon ON the conclusion of any hearing, or prior thereto with concurrence of the parties, the administrative law judge shall promptly, and not later than thirty days after the matter is submitted for decision, SHALL determine the matter and make an award in accordance with his THE ADMINISTRATIVE LAW JUDGE'S determination.

B. In the event of the demise, resignation, retirement, termination
of employment, or other incapacitation of the presiding administrative law
judge, the award shall be determined by the chief administrative law judge
or his THE CHIEF ADMINISTRATIVE LAW JUDGE'S appointee.

32 C. The award shall become a part of the commission file. A copy of 33 the award shall be sent forthwith by mail to SERVED ON all parties in 34 interest.

D. The award is final when entered unless within thirty days after the date on which a copy of the award is mailed SERVED to the parties, one of the parties files a request for review under section 23-943. The award shall contain a statement explaining the rights of the parties under section 23-943.

40 Sec. 4. Section 23-943, Arizona Revised Statutes, is amended to 41 read:

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23-943. <u>Decision on review</u>

A. The request for review of an administrative law judge award need
only state that the party requests a review of the award. The request may
be accompanied by a memorandum of points and authorities, in which event

1 any other interested party shall have fifteen days from AFTER the date of 2 filing in which to respond. Failure to respond will not be deemed an 3 admission against interest.

B. The request for review shall be filed with the administrative law judge division and copies of the request shall be mailed to SERVED ON all other parties to the proceeding.

7 C. When IF review has been requested, the record of such oral 8 proceedings at the hearings before the administrative law judge for 9 purposes of the review shall be transcribed at the expense of the 10 commission.

11 D. Notice of the review shall be given to the parties by mail 12 SERVED ON THE PARTIES.

E. The review shall be made by the presiding administrative law judge and shall be based upon ON the record and the memoranda submitted under the provisions of subsection A of this section.

F. The presiding administrative law judge may affirm, reverse, rescind, modify or supplement the award and make such disposition of the case as is determined to be appropriate. A decision upon ON review shall be made within sixty days after the review has been requested, with preference being given to those cases not receiving compensation.

G. The decision upon ON review shall become a part of the commission file and a copy thereof sent by mail to SHALL BE SERVED ON the parties.

H. The decision upon ON review shall be final unless within thirty days after the date of mailing of copies SERVICE of such decision to the parties, one of the parties applies to the court of appeals for a writ of certiorari pursuant to section 23-951. The decision shall contain a statement explaining the rights of the parties under this section and section 23-951.

30 Sec. 5. Section 23–1047, Arizona Revised Statutes, is amended to 31 read:

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23-1047. <u>Procedure for determining compensation for partial</u> <u>disability and permanent total disability in cases</u> <u>not enumerated; procedure for determining</u> <u>nonscheduled dependency and duration of</u> <u>compensation to partial dependents in death cases</u>

37 A. In cases of permanent partial disability under section 23-1044, subsection B, paragraph 22 and subsections C and F, when the physical 38 condition of the injured employee becomes stationary, or in the case of 39 40 permanent total disability not enumerated in section 23-1045, and under 41 section 23-1045, subsection D, or in death cases under section 23-1046, subsection B, the employer or insurance carrier within thirty days shall 42 43 notify the commission and request that the claim be examined and further 44 compensation, if any, be determined. A copy of all medical reports 45 necessary to make such determination also shall be furnished to the 1 commission. The employer or insurance carrier may commence payment of a 2 permanent disability award without waiting for a determination under 3 subsection B of this section.

4 B. Within thirty days after the commission receives the medical 5 reports, the claims shall be examined and further compensation, including 6 a permanent disability award, if any, SHALL BE determined under the 7 commission's supervision. If necessary, the commission may require 8 additional medical or other information with respect to the claim and may 9 postpone the determination for not more than sixty additional days. Any 10 determination under this subsection may include necessary adjustments in 11 any compensation paid or payable.

12 C. The commission shall mail SERVE a copy of the determination to 13 all interested parties. Any such party may request a hearing under 14 section 23-941 on the determination made under subsection B of this 15 section within ninety days after copies of the determination are mailed 16 SERVED.

17 D. Any person receiving permanent compensation benefits shall 18 report annually on the anniversary date of the award to the self-insured 19 employer or insurance carrier all of the person's earnings for the prior twelve-month period. In the event IF the person fails to make such 20 21 report, the self-insured employer or insurance carrier shall notify the 22 person that such report has not been received and that payment of further benefits will be suspended unless such report of earnings is filed within 23 24 thirty days. After thirty days have elapsed from the date of such notice, 25 the self-insured employer or insurance carrier may issue a notice to the 26 person suspending payment of further benefits and no further payments need 27 be made until such report of earnings is filed.

E. Any person receiving permanent compensation benefits from the 28 29 special fund established by section 23-1065 shall report annually on the anniversary date of the award to the industrial commission all of the 30 31 person's earnings for the prior twelve-month period. In the event IF the person fails to make such report, the industrial commission shall notify 32 the person that such report has not been received and that payment of 33 further benefits will be suspended unless such report of earnings is filed 34 within thirty days. After thirty days have elapsed from the date of such 35 36 notice, the industrial commission may issue a notice to the person 37 suspending payment of further benefits and no further payments need be made until such report of earnings is filed. 38

39 Sec. 6. Section 23–1061, Arizona Revised Statutes, is amended to 40 read:

41 42 23-1061. <u>Notice of accident: form of notice: claim for</u> <u>compensation; reopening; payment of compensation</u>

A. Notwithstanding section 23-908, subsection E, no claim for compensation shall be valid or enforceable unless the claim is filed with the commission by the employee, or if resulting in death by the parties

1 entitled to compensation, or someone on their behalf, in writing within 2 one year after the injury occurred or the right thereto accrued. The time 3 for filing a compensation claim begins to run when the injury becomes 4 manifest or when the claimant knows or in the exercise of reasonable 5 diligence should know that the claimant has sustained a compensable 6 injury. Except as provided in subsection B of this section, neither the 7 commission nor any court shall have jurisdiction to consider a claim which 8 THAT is not timely filed under this subsection, except if the employee or 9 other party entitled to file the claim has delayed in doing so because of justifiable reliance on a material representation by the commission, 10 11 employer or insurance carrier or if the employee or other party entitled 12 to file the claim is insane or legally incompetent or incapacitated at the 13 time the injury occurs or the right to compensation accrues or during the 14 one-year period thereafter. If the insanity or legal incompetence or incapacity occurs after the one-year period has commenced, the running of 15 16 the remainder of the one-year period shall be suspended during the period 17 of insanity or legal incompetence or incapacity. If the employee or other 18 party is insane or legally incompetent or incapacitated when the injury 19 occurs or the right to compensation accrues, the one-year period commences 20 to run immediately upon ON the termination of insanity or legal 21 incompetence or incapacity. The commission upon ON receiving a claim 22 shall give notice to the carrier.

23 B. Failure of an employee or any other party entitled to 24 compensation to file a claim with the commission within one year or to comply with section 23-908 shall not bar a claim if the insurance carrier 25 26 or employer has commenced payment of compensation benefits under section 27 23-1044, 23-1045 or 23-1046, except that the payments provided for by 28 section 23-1046, subsection A, paragraph 1 and section 23-1065, subsection 29 A shall not be considered compensation benefits for the purposes of this 30 section.

31 C. If the commission receives a notification of the injury, the 32 commission shall send a claim form to the employee.

D. The issue of failure to file a claim must be raised at the first hearing on a claim for compensation in respect to the injury or death.

E. Within ten days after receiving notice of an accident, the employer shall inform his THE EMPLOYER'S insurance carrier and the commission on such forms as may be prescribed by the commission.

F. Each insurance carrier and self-insuring employer shall report 38 39 to the commission a notice of the first payment of compensation and shall promptly report to SERVE ON the commission and to the employee by mail at 40 41 his last known address any denial of a claim, any change in the amount of compensation and the termination thereof, except that claims for medical, 42 43 surgical and hospital benefits which THAT are not denied shall be reported to the commission in the form and manner determined by the commission. In 44 45 all cases where compensation is payable, the carrier or self-insuring

1 employer shall promptly determine the average monthly wage pursuant to 2 section 23-1041. Within thirty days of the payment of the first 3 installment of compensation, the carrier or self-insuring employer shall 4 notify the employee and commission of the average monthly wage of the 5 claimant as calculated, and the basis for such determination. The 6 commission shall then make its own independent determination of the 7 average monthly wage pursuant to section 23–1041. The commission, shall 8 within thirty days after receipt of such notice, SHALL notify the 9 employer and carrier of such determination. The employee, amount 10 determined by the commission shall be payable retroactive to the first 11 date of entitlement. The first payment of compensation shall be 12 accompanied by a notice on a form prescribed by the commission stating the 13 manner in which the amount of compensation was determined.

G. Except as otherwise provided by law, the insurance carrier or self-insuring employer shall process and pay compensation and provide medical, surgical and hospital benefits, without the necessity for the making of an award or determination by the commission.

18 H. On a claim that has been previously accepted, an employee may 19 reopen the claim to secure an increase or rearrangement of compensation or 20 additional benefits by filing with the commission a petition requesting 21 the reopening of the employee's claim upon ON the basis of a new, 22 additional or previously undiscovered temporary or permanent condition, which petition shall be accompanied by a statement from a physician 23 24 setting forth the physical condition of the employee relating to the 25 claim. A claim shall not be reopened if the initial claim for 26 compensation was previously denied by a notice of claim status or 27 determination by the commission and the notice or determination was 28 allowed to become final and no exception applies under section 23-947 29 excusing a late filing to request a hearing. A claim shall not be 30 reopened because of increased subjective pain if the pain is not 31 accompanied by a change in objective physical findings. A claim shall not 32 be reopened solely for additional diagnostic or investigative medical tests, but expenses for any reasonable and necessary diagnostic or 33 34 investigative tests that are causally related to the injury shall be paid 35 by the employer or the employer's insurance carrier. Expenses for 36 reasonable and necessary medical and hospital care and laboratory work 37 shall be paid by the employer or the employer's insurance carrier if the claim is reopened as provided by law and if these expenses are incurred 38 39 within fifteen days \overline{of} AFTER the date that the petition to reopen is 40 The payment for such reasonable and necessary medical, hospital filed. 41 and laboratory work expense shall be paid for by the employer or the employer's insurance carrier if the claim is reopened as provided by law 42 43 and if such expenses are incurred within fifteen days of AFTER the filing 44 of the petition to reopen. Surgical benefits are not payable for any 45 period prior to the date of filing a petition to reopen, except that

surgical benefits are payable for a period prior to the date of filing the petition to reopen not to exceed seven days if a bona fide medical emergency precludes the employee from filing a petition to reopen prior to the surgery. No monetary compensation is payable for any period prior to the date of filing the petition to reopen.

6 I. Upon ON the filing of a petition to reopen a claim, the 7 commission shall in writing notify the employer's insurance carrier or the 8 self-insuring employer, which shall in writing notify the commission and 9 the employee within twenty-one days after the date of such notice of its 10 acceptance or denial of the petition. The reopened claim shall be 11 processed thereafter in like manner as a new claim.

12 J. The commission shall investigate and review any claim in which 13 it appears to the commission that the claimant has not been granted the benefits to which such claimant is entitled. If the commission determines 14 15 that payment or denial of compensation is improper in any way, it shall 16 hold a hearing pursuant to section 23-941 within sixty days after 17 receiving notice of such impropriety. Any claim for temporary partial 18 disability benefits under this subsection must be filed with the 19 commission within two years after the date the claimed entitlement to 20 compensation accrued or within two years after the date on which an award 21 for benefits encompassing the entitlement period becomes final. A claim 22 for temporary partial disability compensation shall be deemed to accrue 23 when the employee knew or with the exercise of reasonable diligence should 24 have known that the carrier, self-insured employer or special fund denied 25 or improperly paid compensation. A claim for temporary partial disability 26 benefits shall not be deemed to have accrued any earlier than the 27 effective date of this amendment to this subsection SEPTEMBER 26, 2008.

K. When there is a dispute as to which employer, or insurance 28 29 carrier, is liable for the payment of a compensable claim, the commission, by order, may designate the employer or insurance carrier 30 31 which THAT shall pay the claim. Payment shall begin within fourteen days after the employer or insurance carrier has been ordered by the commission 32 33 to commence payment. When a final determination has been made as to which 34 employer or insurance carrier is actually liable, the commission shall 35 direct any necessary monetary adjustment or reimbursement among the 36 parties or carriers involved.

L. Upon ON application to the commission, and for good cause shown, the commission may direct that a document filed as a claim for compensation benefits be designated as a petition to reopen, effective as of the original date of filing. In like manner upon ON application and good cause shown, the commission may direct that a document filed as a petition to reopen be designated AS a claim for compensation benefits, effective as of the original date of filing. 1 M. If the insurance carrier or self-insurer does not issue a notice 2 of claim status denying the claim within twenty-one days from AFTER the 3 date the carrier is notified by the commission of a claim or of a petition 4 to reopen, the carrier shall pay immediately compensation as if the claim 5 were accepted, from the date the carrier is notified by the commission of 6 a claim or petition to reopen until the date upon ON which the carrier 7 issues a notice of claim status denying such claim. Compensation includes 8 medical, surgical and hospital benefits. This section shall not apply to 9 cases involving seven days or less of time lost from work.

APPROVED BY THE GOVERNOR MAY 5, 2021.

FILED IN THE OFFICE OF THE SECRETARY OF STATE MAY 5, 2021.