Workers’ compensation in 1980: summary of major enactments

Broader coverage and levels of benefits received the most attention among the 46 jurisdictions which met during the year, although several States did set new standards for measuring hearing loss.

LaVerne C. Tinsley

All but six State legislatures convened in 1980, resulting in enactment of 136 amendments to State workers’ compensation laws. Twenty-three jurisdictions carried over legislation introduced from 1979 to the 1980 sessions. Most amendments either revised coverage or increased or supplemented weekly benefits.

Twenty-two jurisdictions amended their coverage laws. California extended coverage to off-duty peace officers and firefighters performing work-related duties anywhere in the State. Colorado and Missouri broadened coverage to include sheriffs and deputy sheriffs and Ohio extended coverage to jail inmates.

Domestic employees employed by an employer for 240 hours or more during a calendar quarter will be covered in the District of Columbia next year. New Jersey now requires that domestic servants and household employees be covered by homeowners’ policies.

Missouri adopted a provision that excludes from mandatory coverage salaried corporate officers and private employment where the total gross annual payroll is under $10,000 (except for the salaries of certain relatives). Sole proprietors and partners may elect coverage for themselves in Minnesota, Vermont, and Virginia. In New Mexico, employers with fewer than three employees and who are generally exempt from occupational disease coverage may also elect coverage.

By October 1980, 43 States and the District of Columbia had increased maximum weekly benefits for temporary total disability, and 40 States had increased benefits for total disability and death through automatic adjustments of maximum benefit levels linked to each State’s average weekly wage. (See table 1.)

The percentage of the State weekly wage on which benefits are based was raised from 100 to 150 percent in Nevada, from 60 to 100 percent in Kentucky, and from 72 to 75 percent in Kansas. The percentage of the worker’s wage for determining weekly benefits was increased from 66-2/3 to 70 percent in New Jersey. Effective in 1981, maximum weekly benefits in Missouri will be based on a percentage of the State average weekly wage rather than being a statutory amount. Maximum benefits were also increased statutorily in five other jurisdictions.

The aggregate amount of compensation for death was increased from $55,000 to $75,000 in California. Children who are dependent and full-time students, in Mississippi, are newly entitled to receive death benefits until they are 23 years of age.

The burial allowance was increased from $1,500 to $3,000 in Louisiana, and from $750 to $2,000 in New Jersey.

Awards for disfigurement to the head, neck, hands, or arms were increased from $2,000 to $4,000 in Missouri.

New standards were established for occupational hearing loss compensation at frequencies ranging from 1,000 to 3,000 cycles per second in Illinois and New Jersey, and from 500 to 3,000 cycles per second in Iowa.

Louisiana enacted penalty provisions to prohibit employers from refusing to hire an applicant or rehire an employee solely because such person had previously

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filed a workers’ compensation claim.

References to “workmen’s compensation” were changed to “workers’ compensation” in Kentucky, Missouri, New Jersey, and Tennessee.

Other amendments pertaining to benefits, coverage, medical care, rehabilitation, administration, and other aspects of State systems are included in the following State-by-State summary.

Alaska

Coverage was extended to public high school students in work-study programs while they are working outside the school.

A Workers’ Compensation Study Commission was established to review the workers’ compensation law and recommend changes to eliminate outdated and inadequate provisions, to provide fully for the rights of workers injured in the State, and to minimize costs to employers.

Arizona

Definitions for “co-employee”, “heart-related or perivascular injury, illness or death”, “mental injury, illness or condition”, and “weakness, disease or other condition of the heart or perivascular system” were added to the act.

An amendment was added to the Arizona Constitution which allows persons injured while engaged in manual or mechanical labor, or in case of death, the dependents, the option to accept benefits or retain the right to sue their employers.

The statute of limitations for claim filing changed so that a

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Former maximum</th>
<th>New maximum</th>
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<tbody>
<tr>
<td>Alabama</td>
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<td>$245.46, plus $6 for each dependent; aggregate not to exceed worker’s average weekly wage</td>
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<td>$242.00</td>
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<td>Tennessee</td>
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<td>Texas</td>
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<td>$133.00</td>
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<tr>
<td>Utah</td>
<td>$210.00, plus $5 for dependent spouse and each dependent child up to 4, but not to exceed 100 percent of State average weekly wage</td>
<td>$230.00, plus $5 for dependent spouse and each dependent child up to 4, but not to exceed 100 percent of State average weekly wage</td>
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<td>Vermont</td>
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<td>$227.00, plus $5 for each dependent under 21 years of age</td>
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</table>

Note: Benefit increases are based on the applicable State’s average weekly or monthly wage, and for the District of Columbia, the national average weekly wage. However, nine States (Arizona, Arkansas, California, Georgia, Indiana, Mississippi, Nebraska, New York, and Tennessee) and Puerto Rico prescribe statutory amounts; six States (California, Georgia, Mississippi, Nebraska, New York, and South Dakota) are not listed because no increases for temporary total disability were legislated during 1980.
late claim can not be considered unless the claimant is deemed incompetent or justifiably relied on a “material representation” by the Industrial Commission, employer, or insurance carrier.

The Second Injury Fund is now responsible for one-half of the compensation award above a 50-percent reduced monthly earning capacity for a second injury to a preexisting scheduled injury.

The maximum amount used for computing the employee’s average monthly wage was raised from $1,250 to $1,325.

Scheduled injuries will now be paid solely for fixed periods, regardless of the claimant’s earning capacity, if compensation has not been awarded for permanent partial disability.

The time for requesting a hearing was extended from 60 to 90 days.

**California**

Coverage was extended to off-duty peace officers or firefighters who are injured, killed, or disabled while engaged in the performance of their duties anywhere in the State. Employees of the San Luis Obispo County sheriff’s office disabled in the line of duty are entitled to 1 year of disability leave, in lieu of temporary disability benefits, if such leave is approved.

Employers must post in a conspicuous place at the worksite, written notice of compensation coverage, including names of persons responsible for claims adjustment.

The average weekly wage used for determining total disability payments was increased from $231 to $262.50. The total maximum compensation for death was increased from $35,000 to $37,500, according to the number of dependents.

The Asbestos Workers’ Account was established in the Uninsured Employer’s Fund to provide temporary disability and medical benefits to asbestos workers suffering from asbestosis when the liable employer either cannot be located or fails to provide benefits within 30 days of the disability.

The director of the Department of Industrial Relations is authorized to adopt rules and regulations to implement the statutory coverage provisions relating to uninsured employers.

Legal actions may now be taken against an uninsured employer. The administrative director of the Division of Industrial Accidents no longer has authority to change regulations regarding the privacy of certain employee records.

All attorneys employed as referees by the Division of Industrial Accidents must now adhere to the California Code of Judicial Conduct.

Delivery of notices in third party actions will be made by personal service or certified mail, instead of by registered mail.

Claimants traveling to medical facilities for examination by a physician will be reimbursed 21 cents for each mile traveled, instead of the previous 14 cents.

**Colorado**

Municipalities can now elect coverage for unpaid appointed or elected officials. Coverage was extended to deputy sheriffs and persons who serve on posses.

Tax paid by insurers into the Major Medical Insurance Fund was raised to 1.75 percent of the premiums received, from 1.25 percent.

**Connecticut**

Interlocal risk management pools (established to insure high-risk employers) now have authority to operate separate pools to cover hypertension and heart disease risks.

Supplemental compensation for recipients on-the-rolls prior to October 1977 was changed from a one-time 25 percent increase to an annual cost-of-living increase.

Dependent children who are full-time students are eligible for benefits until age 22 (previously, the limit was 18 years).

Claimants will now be reimbursed 15 cents for each mile traveled to medical treatment facilities, instead of the previous 10 cents per mile.

The lung function test now applies to all foundry workers, except those who are exempted for religious reasons.

**District of Columbia**

The city council passed, and the mayor signed, a bill establishing the District of Columbia Workers’ Compensation Act of 1979, effective October 1, 1981. This action was taken to simultaneously remove private employment in the District of Columbia from the provisions of the Longshoremen’s and Harbor Workers’ Compensation Act, and to transfer administration of the District of Columbia’s compensation law from the U.S. Department of Labor to the District of Columbia.

However, the legality of the act is in doubt because on September 26, 1980, D.C. Superior Court Judge John F. Doyle ruled that the reform law passed by the D.C. city council violated the home rule charter of the city. He concluded that the city, therefore, had illegally legislated the Federal program out of existence. The council appealed Judge Doyle’s decision in the U.S. Court of Appeals for the District of Columbia on November 12, 1980, requesting an expedited decision.

Under the new act, coverage will include only workers employed in the District of Columbia and injured or killed as a result of their employment. Domestic workers also will be covered if they worked for the same employers at least 240 hours during a calendar quarter. Compensation for illness or death resulting from a job-related disease is the responsibility of the employer where the last known exposure occurred.

The same maximum will apply for both weekly disability and death benefits; however, benefits to survivors will only be allowed if death was caused by a job-related injury or illness. Minimum compensation for total disability and death is 25 percent of the maximum weekly benefit amount, rather than 50 percent of the national average weekly wage as required by the Longshoremen’s and Harbor Workers’ Compensation Act. Permanent partial disability awards can now be reviewed at any time up to 3 years after either the date of the last compensation payment or the rejection of the claim. For those receiving benefits for permanent total disability or death, a supplementary benefit is provided of no more than 5 percent of the maximum weekly benefit received the preceding year. However, this provision does not become effective until the average weekly wage in the District of Columbia exceeds $396.78.

Compensation for total disability will be paid at 66-2/3 percent of the employee’s average weekly wage. In case of death, compensation to all survivors is not to exceed that amount. Eighty percent of the employee’s spendable earnings will be considered as 66-2/3 percent of his or her average weekly wage. Benefits for disability or death will be offset by no more than 80 percent of disability compensation under the Social Security Act or an employee benefit plan, subject to the Employee Retirement Income Security Act.

The mayor will be required to appoint a panel of physicians from which an injured employee must select an attending physician.

Attorney fees will be limited to no more than 20 percent of the actual benefit the attorney secured for the claimant.

The costs of administering the act will be met by assessing

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insurance carriers and self-insured employers based on the share of payments made by each to the total amount of all payments during the preceding fiscal year.

Florida

General contractors are now liable for coverage for all employees of a subcontractor, unless the subcontractor already provides coverage.

The basis for computing temporary partial disability benefits was changed from a "monthly" to "weekly" rate.

An award must now be paid within 30 days, rather than the previous 20 days.

The definition for "accident" now includes the acceleration or exaggeration of a preexisting disability.

An employer must now provide at least two physicians from which the employee must select one for treatment.

Changes in medical fee schedules will be determined annually by a panel consisting of the Secretary of Labor and Employment Security, the Insurance Commissioner, and the State medical consultant of the Division of Workers' Compensation.

Physicians were added to the list of health care providers, making them subject to evaluation by the Division to determine if their services are acceptable based on medically accepted standards and the medical fee schedules.

Medical reports required from self-insurers must be filed with the Division of Workers' Compensation within 15 days, instead of the previous 5 days.

An injured employee is no longer required to notify the Division within 30 days of an injury.

Georgia

Group self-insurance will be allowed in the State next year.

A requirement was enacted for both public and private corporations to provide employee coverage.

Hawaii

Permanent total disability awards made before July 1, 1980, are now to be increased annually.

A rehabilitation unit, in the Department of Labor and Industrial Relations, will refer to the director employees suspected of having permanent disabilities and those who have permanent disabilities and who can be physically or vocationally rehabilitated.

Enrollment in a rehabilitation program will not affect a disabled worker's entitlement to temporary total disability compensation, if the worker earns no wages during the enrollment period.

Labor organizations are exempted from third party liability for injuries to its members on the basis of the organizations' failure to furnish or enforce health or safety regulations.

Illinois

Real estate brokers, broker-salesworkers, salesworkers paid solely by commission, and volunteers in recreational programs and drug and alcohol rehabilitation programs are now excluded from workers' compensation coverage.

The Department of Insurance must adopt rules that will permit two or more employers with similar risks to group self-insure.

Employers may now obtain life insurance policies to cover liabilities for work-related death benefits.

Maximum weekly benefit levels for permanent partial disability are frozen (at $269.21 or 100 percent of the State's average weekly wage) from January 1, 1981, through December 31, 1983.

The definition of "average weekly wage" was redefined to mean the actual earnings of the employee at the time of the injury during the 52 weeks ending with the pay period immediately preceding the injury.

All time periods of compensation for fractures were reduced: for skull and vertebrae fractures, from 60 to 6 weeks; for each facial bone fracture, from 20 to 2 weeks; for each transverse process, from 30 to 3 weeks; and for the loss of a kidney, spleen, or lung, from 100 to 10 weeks.

New standards were established for compensation of occupational hearing loss at frequencies of 1,000, 2,000, and 3,000 cycles per second and a causation level of 90 decibels. Employers are no longer responsible for cases of occupational hearing loss before July 1, 1975, and the new standards do not apply to hearing loss resulting from trauma or explosion.

Attorney fees are limited to 20 percent of the amount of compensation recovered and paid, unless otherwise approved by the Industrial Commission.

The Industrial Commission must publish a workers' compensation handbook for employers and employees. The Director of Insurance is required to publish informational booklets on workers' compensation insurance rates and the rights and obligations of employers and employees under the Workers' Compensation and Occupational Disease Acts.

Indiana

Coverage was extended to participants in a township poor relief program who are satisfying assistance requirements. A wage rate was set as the basis for computing his or her workers' compensation benefits.

Iowa

New standards require determining the severity of occupational hearing loss based on using frequencies of 500, 1,000, 2,000, and 3,000 cycles to measure hearing levels. A maximum of 175 weeks of compensation can be received for hearing loss but compensation will not be paid to an employee who fails to use hearing protective devices.

Kansas

Self-insurance is now permitted for cities, counties, school districts, vocational-technical schools, or community colleges. A separate reserve fund was created to pay claims, judgments, and expenses of these entities.

The director of the Division of Workers' Compensation, now has authority to conduct hearings and determine all disputes on medical charges and interest due.

Kentucky

The maximum weekly benefit levels were increased to 100 percent (formerly 60 percent) of the State's average weekly wage for total disability; and, to 75 percent (formerly 60 percent) for permanent partial disability and death. All provisions for scheduled injuries were deleted. Payment for permanent partial disability will be determined by multiplying the weekly benefit for permanent partial disability by the percentage of disability or the wage earning capacity, whichever is greater, for a maximum period of 425 weeks.

The maximum period for vocational rehabilitation was extended from 26 to 52 weeks. During rehabilitation, the percentage for calculating the employee's average weekly wage will be raised from 66 2/3 percent to 80 percent times the percentage of disability.

The definition of "injury" now includes any work-related harmful change in the human organism, "arising out of and in
the course of employment.” Previously, communicable diseases were not included unless the risk of contacting such disease increased by the nature of the employment.

The Pneumoconiosis Fund was abolished and all unfunded liabilities transferred to the Special Fund.

The time limit for notifying the Board of Workers’ Compensation that a claim will be disputed was increased from 60 to 90 days.

A sum of $150,000 was appropriated from the General Fund to finance a study of the State’s workers’ compensation program. The study will review the National Council on Compensation Insurance rating procedures, compare premium levels in Kentucky with other jurisdictions, and analyze the feasibility of a computer system and of a State Fund.

References to “workmen’s” were changed to “workers’” throughout the Act.

**Louisiana**

Surviving parents are now entitled to a $20,000 lump-sum payment in death cases where there are no other legal dependents.

Burial expenses were doubled from $1,500 to $3,000.

The statute of limitations for filing a claim for an occupational disease was extended to 6 months from the time: (1) of the initial manifestation; (2) of the disability resulting from the disease; or, (3) that the employee knew or had reason to suspect that the disease is occupationally related. For claims arising from death due to an occupational disease, the filing period was extended to 6 months from the date of death or from the date the claimant has reason to believe that the death resulted from an occupational disease.

Employers are now required to conspicuously post notices regarding time limitations for filing occupational disease claims; failure to comply will allow claims to be filed against the employer for an additional 6 months.

Attorney fees were raised to 20 percent of the first $10,000 of an award (formerly $5,000) and 10 percent for any additional amount.

Employers are prohibited from refusing to hire applicants or discriminating against employees solely because they had previously filed compensation claims. For such discrimination, an employee is eligible for up to 1 year’s salary in addition to a reasonable attorney’s fee.

Injured employees are now permitted to file petitions in the District Court of the parish in which either the employee or his or her dependents live.

**Maine**

A commissioner whose term has expired is now entitled to $50 per day for time spent preparing decisions in cases where all evidence was heard and no decision was made.

**Maryland**

Mandatory coverage was authorized for participants in the State’s Workfare Program and for jurors serving on State juries.

Minimum weekly compensation for temporary total disability was increased from $25 to $50.

The time in which an employee must notify the employer of his or her occupational disease was extended from 30 days to 1 year after the employee knows he or she has a disease.

**Massachusetts**

Third party actions in industrial accident cases will only be enforced 7 months after the injury and after compensation is paid.

Interest on late payments of compensation awards was increased from 6 to 10 percent.

**Minnesota**

Coverage now includes certain volunteer workers whose services are accepted or contracted.

The following may elect coverage for certain employed relatives: owners or partners of a business or farm, a family farm corporation, and a closely-held corporation which had fewer than 22,880 hours of payroll in the preceding year.

The definition of “family farm” now includes any farming operation which pays or is obligated to pay less than $8,000 in wages to farm laborers; and, excludes from the definition of “employee,” farmers and members of their families who exchange work with other community farmers.

Supplementary benefits based on the statewide average weekly wage for the preceding year will be adjusted annually on October 1.

Payment of benefits was authorized for dependents of State, county, or city medical care employees who die from tuberculosis contacted by exposure to tuberculosis patients or contaminated material in the course of employment. An employee who contacts tuberculosis from work exposure is permitted to select a physician or medical care facility for treatment.

**Mississippi**

Dependent children who are full-time students are now eligible for death benefits until age 23 (previously the limit was 18 years).

**Missouri**

Coverage was extended to sheriffs and deputy sheriffs. Exempted from coverage are salaried corporate officers and private industries with a total gross annual payroll of under $10,000 in the preceding year; wages paid to certain relatives are not included in calculating gross annual payroll.

Maximum weekly benefits for total disability and death were raised from $125 to $150. On August 13, 1981, benefits will change from a statutory amount to 66-2/3 percent of the State average weekly wage. On January 1, 1981, maximum weekly benefits for permanent partial disability will change to 66-2/3 percent of 60 percent of the State average weekly wage.

Awards were increased from $2,000 to $4,000 for disfigurement to the head, neck, hands, or arms.

A worker is now eligible to receive compensation for the first 3 days of an illness after a waiting period of 14 days, instead of the previous 4 weeks. The healing period for permanent partial disability was lengthened from 40 to 52 weeks.

A surviving husband is no longer required to prove dependency for benefits.

The statute of limitations for filing a claim was increased from 1 to 2 years and up to 3 years from date of injury if the employer did not file a report of injury.

Interest on unpaid workers’ compensation benefits was raised from 6 to 8 percent.

References to “workmen’s” were changed to “workers’” throughout the act.

**New Jersey**

Coverage was extended to recipients under the General Public Assistance Law.

All homeowner’s or comprehensive personal liability insurance policies must cover injuries to domestic servants and household employees.

The percentage of the worker’s wage on which benefits are

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based for disability and, in death cases, for a spouse with children was raised from 66-2/3 to 70 percent. Maximum weekly benefits for disability and death were increased from 66-2/3 to 75 percent of the State average weekly wage. Minimum weekly benefits for total disability and death were changed from $15 to 20 percent of the State average weekly wage, and from $10 to $35 for permanent partial disability.

Temporary disability benefits can now be received for 400 weeks, up from the previous 300 weeks. The number of weeks of compensation for specified losses was extended as follows: loss of a hand, from 230 to 245 weeks; loss of an arm, from 300 to 330 weeks; loss of a foot, from 200 to 230 weeks; and loss of a leg from 275 to 315 weeks. In cases of non-scheduled injury, where the disability is determined as a percentage of permanent total disability, the maximum period of compensation increased to 600 weeks from 550 weeks.

Standards for measuring occupational hearing loss were established at frequencies of 1,000, 2,000, and 3,000 Hertz. A maximum of 200 weeks of compensation is authorized for total loss of hearing and for partial disability for such periods as are proportionate to the relation which the calculated percentage loss bears to 100 percent hearing loss.

A special adjustment of benefits was established for employees receiving benefits at a rate applicable before January 1, 1980. For fiscal year 1981, the adjustment rate is 35 percent; for fiscal 1982, 75 percent; and for fiscal 1983, 100 percent. These benefits will be offset by social security disability payments, black lung payments, or an employer's share of disability pension payments.

The burial allowance was increased from $750 to $2,000.

Lump-sum awards are now permitted if approved by the Division of Workers' Compensation.

Either spouse is now a presumptive dependent for survivors benefits; previously, only widows were specified in the law.

For occupational disease claims, the statute of limitations will not begin to run until the claimant has actual knowledge of the condition and its relation to work. Formerly, the statute began when the claimant first had knowledge of the disability.

By enactment, "workmen's" was changed to "workers'" throughout the law.

New Mexico

Employers who are generally exempt from provisions of the Occupational Diseases Disablement Law must now file notices of acceptance, rejection, or revocation of coverage with the Superintendent of Insurance.

New York

Either alien spouse is now entitled to compensation benefits; previously, only widows were eligible.

In the event of the death of a corporation officer, the dependents are entitled to compensation from the Uninsured Employers' Fund.

The waiting period before compensation for occupational hearing loss was shortened from 6 to 3 months after removal from exposure to harmful noise. Removal from exposure may be accomplished by the use of effective ear protection devices provided by the employer.

An employee's failure to file a claim for occupational hearing loss within the required 2-year period will not bar his or her claim, if the claim is filed within 90 days after knowledge that the loss of hearing is employment-related. An employee disabled prior to October 1, 1980, will have 6 months from such date to file a claim.

Assets in Uninsured Employers' Fund are now set at a maximum of $600,000, formerly $300,000.

Full disclosure is required by the employer of all accidents that occur in the business operation of the employer.

North Carolina

Confirmed cases of brown lung disease or byssinosis will be compensable, regardless of the date of the employee's last injurious exposure.

Ohio

Coverage was extended to jail inmates and probationers in work relief programs.

Employers contributing to the Disabled Workers' Relief Fund will be assessed an additional 5 to 10 cents per $100 of payroll.

The Marine Industry Fund was established to insure enrollees in the marine industry.

Oklahoma

Excluded from coverage is agricultural or horticultural employment in which the employer had a gross annual payroll of under $100,000 (previously $25,000) in the preceding year. Also exempted are licensed real estate sales associates or brokers who are paid solely by commission, and farm employees with annual payrolls in the preceding year of $100,000 (formerly $25,000).

Pennsylvania

The definition of "employee" was broadened to include any paid firefighter who is a member of a volunteer fire company during off-duty hours. Similarly, coverage was extended to all members of volunteer ambulance corps, volunteer rescue workers, and lifesaving squads.

Rhode Island

Effective the first fiscal year of 1981, coverage will be compulsory for employees of the city of Providence. Group self-insurance is now allowed for hospitals with the approval of the Director of Labor.

Legislation extended the existence of the Dr. John E. Donley Rehabilitation Center, the State's rehabilitation center, until June 30, 1983.

South Carolina

In cases of permanent partial disability, prostheses will be furnished as long as needed by the injured employee.

Employers must report all injuries that require medical or surgical attention to the Industrial Commission within 10 days after knowledge of the injury. Employers who refuse or neglect to submit the required forms, records, or reports will be fined $50 (formerly $10) for each offense. Also, employers who willfully refuse payment of compensation will receive fines ranging from $100 to $1,000, or 30 days to 6 months imprisonment, or both.

Information compiled by treatment facilities pertaining to workers' compensation claimants must be made available, upon request, to employers, carriers, attorneys, or the Industrial Commission.

South Dakota

Coverage was extended to employees of the Game, Fish, and Parks Department.

The time limit in which an employer must file an accident report was shortened from 30 to 10 days.
Tennessee

Self-insurance is now permitted with the posting of acceptable negotiable securities or a bond worth at least $125,000, and certified evidence of financial ability to pay all claims.

Maximum weekly benefits for disability and death were increased from $107 to $119; and the total maximum from $42,800 to $47,600. A lump-sum payment of $10,000 will be paid to a deceased employee’s estate, if there are no dependents.

A joint legislative committee was established to study the State’s workers’ compensation system and make recommendations to the 92nd General Assembly by February 1, 1981.

An enactment expanded the definition of “total disability” from coal workers’ pneumoconiosis to include employees who would be entitled to benefits under the Black Lung Benefits Act of 1972.

References to “workmen’s” were changed to “workers” throughout the law.

Vermont

The Military Department may elect coverage for employees whose salaries are paid fully or partially with Federal funds.

Virginia

Sole proprietors and partners may now elect coverage for themselves. The Secretary of Administration and Finance is authorized to implement a workers’ compensation program for State employees.

Payment of compensation in a lump sum in lieu of periodic payments will be reduced by the disability retirement benefits a disabled worker or the worker’s surviving dependents are entitled to receive.

Employers are required to furnish medical care and prosthetic appliances for loss of hearing injuries.

Reimbursement was authorized for employers who pay compensation and medical and vocational rehabilitation expenses while awaiting an award decision from the Industrial Commission.

A regional peer review committee will be established in each health systems area to evaluate and determine the level, quality, duration, and cost of health care services.

The Industrial Commission is authorized to order an injunction against employers who fail to comply with the workers’ compensation law.

The Subcommittee of the House Committee on Labor and Commerce was requested to continue its study of the factors accounting for the accelerating increases in workers’ compensation premiums.

Washington

Under certain conditions, the State Fund can insure employers as a group.

Costs of supplies and equipment are now included in the coverage of vocational rehabilitation.

Wisconsin

Coverage was extended to State legislators on official travel and to State legislators serving as committee members or as members of other official bodies.

Maximum weekly benefits for permanent partial disability were raised from $65 to $70. The death benefit payable to parents when there are no wholly dependent survivors was increased to $5,000, from $2,000.

Interest was increased from 6 to 7 percent on late death benefits payments.

It is now mandatory for the Department of Industry, Labor and Human Relations to employ a specialist in physical, medical, and vocational rehabilitation.

Requests by employers for employees to submit to medical examinations must not involve travel in excess of 100 miles from the employee’s home.

Payments from the Work Injury Supplemental Benefit Fund to an employee whose claim is barred by the statute of limitations will be supplemental to any payment under any Federal insurance benefit program.

All workers’ compensation disability benefits will be reduced if the employee is also receiving social security disability.

The statute of limitations for initiating a compensation action was extended from 10 to 12 years. A claim for occupational deafness can not be filed until 14 days (formerly 2 months) after removal from the noisy employment.

——FOOTNOTE——

1 Arkansas, Montana, Nevada, North Dakota, Oregon, and Texas did not meet in 1980.