State workers’ compensation: legislation enacted in 1987

Of 38 States passing legislation last year, one-third took action to improve medical care and rehabilitation services; several States now allow garnishment for the support of dependent children

LaVerne C. Tinsley

As of October 1, 1987, 232 amendments affecting State workers’ compensation programs had been enacted by 38 States. Significant changes were made in workers’ compensation statutes covering medical care and vocational rehabilitation in 18 States. Seven States revised occupational disease statutes; in Oregon, the statute of limitations for filing claims was reduced from 5 years to 1 year. Other laws were amended covering insurance, attorney fees, and penalties, and fines were established to cover violations.

Connecticut increased the percentage of the State average weekly wage upon which benefits are based for disability and death to 150 percent, formerly 100 percent. But New Mexico reduced the percentage of the State average weekly wage used in determining compensation for total disability from 100 percent to 85 percent. The freeze on benefits for disability and death was extended for an additional month in Maine. A new freeze was placed on 1987 compensation rates in Montana.

Several States now allow garnishment of compensation benefits for the support of dependent children of workers’ compensation recipients.

Many study committees and commissions were continued, and new ones established to review and recommend possible changes that would improve the overall compensation system.

The 1987 legislative changes by State follow.

Alabama

Two self-insured employer groups or more may now pool their liabilities for obtaining excess or reinsurance coverage above the retention levels maintained by individual employer groups.

Arizona

Handicapped clients enrolled in vocational training programs offered by nonprofit organizations may now be covered for work-

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ers’ compensation at the option of the organization.

Lump-sum compensation payments for certain cases of disability, or for death, may be received up to a maximum of $50,000 after June 30, 1987.

The Director of the Industrial Commission is required to employ an ombudsman to provide assistance to workers’ compensation recipients concerning the State’s workers’ compensation program and the rules governing claims proceedings and methods used in determining benefits.

A definition for “loss of use” was added to the law for purposes of compensating partial disabilities.

Another new provision provides for a penalty of 25 percent based on any previously awarded benefits for charges of unfair claims processing or bad faith practices by an employer, insurer, or others who handle claims, and in addition to any compensation awarded. Payments made by the State Compensation Fund will be reimbursed by the State Compensation Fund.

Arkansas

Coverage is broadened to include certain volunteer public safety workers. Group self-insurance programs which give credits against renewal premiums based on annual loss experience have been opened to local governments. The filing requirements for obtaining self-insurance or group self-insurance status (includes posting a surety bond, posting securities, or obtaining excess insurance) are no longer applicable.
Colorado

The maximum weekly benefit level for a "schedule" injury was increased from $84 to $150; and for a nonschedule injury from $84 to $120. Total maximum compensable payable is $37,560, previously $26,292. Indemnity payments for total disability and temporary partial disability will cease when the employee reaches maximum medical improvement. Inability payments for total disability and temporary partial disability will cease when the employee returns to work, or is capable of returning to work, refuses an offer of rehabilitation, or when payments are discontinued at the discretion of the Director of the Division of Labor.

Injured employees are newly entitled to receive unlimited vocational rehabilitation benefits from the Major Medical Insurance Fund. The time limit (52 weeks) on receipt of vocational rehabilitation benefits from the Fund has been eliminated. The provision of furnishing rehabilitation benefits is no longer an obligation of the employer.

A surcharge will be assessed against all workers' compensation insurance premiums to cover employers against claims for personal injuries to their employees.

Two employers or more in the same or similar type of business, or who are members of the same bona fide trade or professional association are permitted to form self-insurance pools for workers' compensation purposes.

The title, "hearing officers," has been changed to "administrative law judges."

An independent study of the State's present workers' compensation system may now be authorized by the Director of the Division of Labor to determine the system's effectiveness.

Florida

The maximum compensation payable to dependents of nonresident aliens in cases of death was increased from $1,000 to $50,000. Injured employees are eligible to receive lump-sum compensation payments 3 months (formerly 6 months) after reaching maximum medical improvement.

Authority was given to the Division of Workers' Compensation to assess a civil penalty against any carrier who deauthorizes a health care provider approved by an employer. A 1-year study of deauthorization complaints by the Division of Workers' Compensation and the Department of Labor and Employment Security was approved to determine whether current law is adequate for protecting the interests of injured employees.

Georgia

Coverage was broadened to include publicly employed medical technicians permanently disabled or killed while performing during an emergency occurring after July 1, 1977. Elected officials of a county-governing authority are now also covered. Compensation for death benefits based on partial dependency will be terminated at age 65, or after payment of 400 weeks of benefits, whichever is greater.

The terms "occupational disease" and "disability" have been modified. The schedule of compensable occupational diseases and the statute of limitations provisions for occupational disease were deleted from the law. Further, coverage was dropped for some cases of psychiatric and psychological problems and heart and vascular diseases. All disability claims for occupational disease must be filed prior to 7 years after last injurious exposure to the hazard of a disease in the workplace; and death claims must be filed within 1 year after death if the cause of action was not barred during the employee's life.

A Senate workers' compensation study committee was created to study the conditions, needs, issues and problems associated with providing rehabilitative services to injured employees. Recommendations for legislation must be made on or before December 15, 1988.

Hawaii

Coverage was extended to volunteer boating enforcement officers and to psychologists under the definition of "physician." Reference to "volunteer deputy fish and game warden" has been changed to "volunteer conservation and resource enforcement officer."

An amendment provided for a $150,000 appropriation for the organization and sponsorship of a conference on the State Fund which will give business, labor, carriers, government officials, and others an opportunity to discuss the most effective ways of implementing the objectives of the Fund.

Idaho

The burial allowance was increased from $1,500 to $3,000.

Iowa

Medical care personnel who provide emergency services are newly covered for workers' compensation.

Kansas

Total maximum compensation was increased to $125,000, formerly $100,000, for permanent total disability and to $200,000, from $100,000, for the death of a worker. In cases of temporary total and permanent partial disability, the total maximum compensation that may be received is $100,000, formerly $75,000.

The coverage of wholly dependent children was extended to include any child who is less than 23 years of age and who is not physically or mentally capable of earning wages in any type of substantial or gainful employment, or any child who is a full-time student.

Employees are allowed to select a physician of their own choosing without prior approval of the Director of Workers' Compensation (Director); however, liability of the employer is limited to costs of up to $350. All preventive medical care and treatment for exposure to hepatitis on the job is the responsibility of employers.

The Director of Workers' Compensation is no longer required to use information based upon medical evidence in determining the percentage of an employee's disability and the proportion of an award attributable to a preexisting physical or mental impairment.

Attorney fees for an initial workers' compensation claim are limited to a reasonable amount determined by the director, or 25 percent of any compensation recovered and paid, whichever is less.

References to "Workmen's Compensation Act" and "workmen's compensation" were changed to "Workers' Compensation Act" and "workers' compensation" throughout the statute.

Injured employees are now entitled to vocational rehabilitation if the compensable injury or disease prohibits the employee from working for the same employer with or without accommodation.

The director is authorized to refer an injured worker to an agency for rehabilitation if the worker is off the job for 90 days, or
if the director determines that rehabilitation services are needed, in cases in which rehabilitation has not been offered voluntarily.

Costs for vocational rehabilitation, reeducation, or training away from the employee's customary place of residence, have been increased to a maximum of $3,500, from $2,000. An additional $2,000, formerly $1,000, may be paid in unusual cases at the discretion of the director.

The period allowed for vocational rehabilitation was extended to 36 weeks, previously 26 weeks; and in extremely unusual cases, the period may be extended an additional 36 weeks.

Employers are relieved from liability for subsequent injury to a handicapped worker if the employer files a written notice of his or her knowledge of an employee's preexisting impairment.

Kentucky

In a special session, workers' compensation legislation was enacted raising premium assessments on employers 23.3 percent, up from 7.5 percent. The increase is anticipated to reduce the Kentucky Special Fund's unfunded liability estimated at $1.7 billion.

Louisiana

The method used for determining the employee's average weekly wage when the employee is paid on a monthly basis was changed. Monthly wages are now multiplied by 12 and divided by 52; formerly monthly wages were divided by 4.

Fees for nonemergency medical care are limited to $1,000, without the mutual consent of the employee, the employer, or the employer's insurer. After the initial selection of a physician by the employee in any field or specialty, approval must be obtained from the employer or carrier for changing the treating physician. A privately owned vehicle may be used by an employee for transportation to receive medical benefits. Employees who use their own vehicles are entitled to reimbursement at the same rate per mile as established for reimbursement of State employees who use their personal vehicles while doing business for the State.

The Director of the Office of Risk Management of the Division of Administration is required to establish and promulgate a medical fee schedule for State self-insured workers' compensation cases.

Health care providers who treat workers' compensation claimants must release medical records upon request by the employer, carrier, or employee.

The assessment for immovable property that a foreign corporation must own in Louisiana as security for workers' compensation benefit payments was raised from $25,000 to $100,000.

A Special Commission on Workers' Compensation and Safety was created to study the feasibility of developing plans and procedures for establishing the Louisiana Workers' Compensation Insurance Fund, and for developing safety programs for all public and private sector employees. A report on the work of the Commission is scheduled for preparation no later than March 30, 1988.

Maine

All prisoners are excluded from coverage, except those who are serving the final 72 hours or less of a sentence, those assigned to work outside of the prison facility, and those who are employed under a work release program.

New coverage was enacted for work-related stress considered extraordinary and unusual in comparison to pressure and tensions experienced by the average employee; and the work-related stress is the predominant cause of the mental injury.

A person who employs an independent contractor is not liable for workers' compensation protection for the employees of the independent contractor.

The freeze in effect until July 1, 1988, on maximum weekly benefits for disability and death occurring on or after June 30, 1985, was extended an additional month, to August 1, 1988.

The Superintendent of Insurance is authorized to assign certain cases to insurers who participate in the accident prevention account and in the safety pool. Employers who fail to secure their liabilities for funding the Second Injury Fund will now be fined up to a maximum of $10,000.

A Joint Select Committee was formed to study the costs of providing benefits under the Workers' Compensation Act.

Maryland

Legislation provides for an annual cost-of-living adjustment for recipients of permanent total disability benefits based on increases in the Consumer Price Index; however, the annual rate of change applied as an adjustment may not exceed 5 percent.

The Workmen's Compensation Commission is required, at least once every 2 years, to review the fees and charges established for medical care and make appropriate revisions as necessary. Providers of vocational rehabilitation services must now be registered with the Commission or be subject to penalty.

Group self-insurance pools may be established by a county board of education, a community college, a regional community college, and now by employers in order to meet their obligations for workers' compensation.

Funding for the Subsequent Injury Fund is provided through assessments against employers or insurers that equal 6.4 percent of all awards and settlement agreements approved on or after July 1, 1987.

The Workers' Compensation Commission is now authorized to request a review by the Occupational Safety and Health Administration of work sites and practices of each industry and employer it has identified for evidence of excessive safety violations.

The Workers' Compensation Benefit and Insurance Oversight Committee was set up to examine and evaluate the condition of the State's workers' compensation benefit and insurance structure.

Michigan

Suits for damages against an employer are permitted by employees in cases in which injury or occupational disease is the result of an act of intentional tort as determined by the court.

Minnesota

Elective coverage is extended to sole proprietors, to certain family members of the sole proprietors, and to an executive officer of a closely held corporation having less than 22,880 hours of payroll during the preceding calendar year, if the officer owns at least 25 percent of the corporate stock. Coverage may also be elected for an independent contractor.

For injuries resulting from total loss of taste or smell occurring between December 31, 1983, and November 12, 1985, the disability rating used for determining benefits is set at 3 percent.

Exenses for travel, lodging, and meals of employees have been made the responsibility of the employer under medical care. Monitored medical care and surgical treatment must be reported to the Medical Service Review Board. Testimony of a health care provider is allowed only in cases of occupational disease, cardio-pulmonary injuries or diseases, injuries from cumulative trauma, issues of apportionment of liability, and mental disorders, or upon a compensation judge's order.

The Commissioner of Labor and Industry is responsible for preparation of recommendations to reduce workers' compensation insurance premiums to be submitted to the legislature before January 1, 1988. The proposals should consider benefit levels for wage replacement and should be designed to reduce the high rate of litigation and increase the equity of the system.
Other revisions in the law include grounds and procedures for discontinuing payment of benefits, settlement of disputes, expedition of hearings in cases involving financial hardship, and a general administrative reform.

Mississippi

The Commission is empowered to impose sanctions against parties who make frivolous claims.

Assessments maintained by the Second Injury Fund from death cases may not exceed $350,000, previously $250,000.

The Workers' Compensation Commission is authorized to appoint a medical advisory board for advisory purposes and for studying the possibility of the Commission's use of a medical fee schedule.

An advisory council was established for purposes of informing and advising the Commission on all matters related to the administration of the act.

Montana

Numerous revisions were made in the workers' compensation statutes. For instance, the law now specifies which employers are required to come within the act, which may elect coverage, and which employers are excluded.

Cost-of-living allowances will now be paid for cases of permanent total disability. The compensation rates effective in 1987 are frozen for 2 years. The waiting period for payment of compensation for temporary total disability is 7 days if the injured employee has not returned to work after 5 days; previously it was the day after injury.

A limited dollar amount will be used in determining a lump-sum compensation payment. Death benefits for a spouse may be received up to 10 years. Previously, payments for death were for life. Compensation for incarcerated felons is no longer permitted and only one compensation award is permitted for impairment of the same body part.

Payment of claimant attorney fees and costs are allowed in cases where an insurer has been unreasonable or where a claimant has been successful.

In cases involving third-party settlements, the insurer is entitled to subrogation rights. Also, a provision was enacted which prohibits the firing of an employee solely because the employee filed a claim for compensation.

An insurer's liability for payment of benefits to a certified vocationally handicapped person is limited to 104 weeks of compensation.

Garnishment or attachment may be placed against workers' compensation benefits for child support in certain cases.

The amount of bond required for guarantee of benefit payments now begins at a minimum of $25,000 and extends to a maximum of $200,000; formerly the amounts were $5,000 and $100,000, respectively.

Injured workers are newly entitled to 2 years of preferential hiring with the same employer. Criminal penalties will go into effect against persons who file fraudulent claims or obtain benefits by wrongful means.

The period within which occurrence of an injury must be reported to the employer or insurer was reduced to 30 days from 60 days.

Compensation benefit payments to a certified vocationally handicapped person may not exceed 104 weeks.

Insurers have authority to give immediate financial incentives to employers who institute approved safety programs.

Additional staff may be employed by the Division of Workers' Compensation as needed to ensure the timely processing of claims.

Nebraska

Coverage was broadened to include prison inmates while they are working for the Department of Correctional Services under certain circumstances.

Maximum weekly benefits for disability and death were raised to $235, formerly $225. On July 1, 1988, benefits will increase to $245. The minimum benefit level remains at $49.

The Workers' Compensation Court is now authorized to establish and publish schedules of maximum fees for medical, surgical, and hospital services.

Nevada

Sole proprietors and certain corporate officers are now permitted to be covered for workers' compensation.

Injuries occurring to employees on or after July 1, 1987, that result in a disability rating for permanent partial disability exceeding 25 percent may be compensated in a lump sum.

The waiting period for temporary total disability compensation is a minimum of 5 consecutive days, or 5 cumulative days, within a 20-day period.

The terms "medical benefits" and "rehabilitative services" have been added to the definitions of "accident benefits" and "compensation," respectively.

An insurer who pays compensation for subsequent injury is entitled to reimbursement from the Subsequent Injury Fund if the employee has misrepresented his or her original claim for injury.

The Subsequent Injury Fund is solely responsible for compensating cases of permanent physical impairment resulting in death or greater disability by the combined effects of a preexisting impairment and a subsequent injury.

Cancer caused by exposure to a known carcinogen which is reasonably associated with cancer is covered as an occupational disease of any person employed as a firefighter for at least 5 years. Also, police officers and firefighters are relieved of the burden of proving their heart disease is from exposure to noxious gases, fumes or smoke, overexertion, stress, and danger, unless these employees suffered from such an ailment during a 5-year period preceding employment.

X-ray examinations required to detect lung diseases of police officers and firefighters will now be scheduled more frequently; however, complete lung tests of volunteer firefighters are not mandatory.

Compensation is now allowed for exposure to asbestos resulting in permanent total disability or death.

Employers have the option to provide occupational disease coverage to employees who were previously excluded.

New Hampshire

Workers' compensation awards may now be garnished for child support obligations.

Benefits for rehabilitation must be provided within 5 workdays after the labor commissioner has rendered a decision in any case.

A prima facie presumption was added to the law stating that a disease in a firefighter is occupationally related, provided that there is no record of reasonable medical evidence that the employee was free of the disease at the beginning of employment.

New Jersey

Individuals working as public employees under general supervision of the Palisades Interstate Park Commission of New Jersey are covered for workers' compensation. New coverage is provided for certain claimants whose insurance carriers have become insolvent. They are now covered under the Federal Longshore and Harbor Workers' Compensation Act.

New Mexico

A new Labor Department has been created and the Workers' Compensation Division established within the Department to administer the workers' compensation law. The new Division has all the authority and duties for administration that were previously assigned to the Workers' Compensation Administration agency.

Legislation was enacted reducing maximum weekly benefits for total disability
from 100 percent to 85 percent of the State average weekly wage. The weekly compensation period for total disability was raised to a maximum of 700 weeks, formerly 600 weeks; except for cases of total disability from primary and secondary mental impairment (100 weeks). For unscheduled permanent partial disability, the maximum payment period was increased to 600 weeks from 500 weeks, except for permanent partial disability resulting from primary and secondary mental impairment (100 weeks).

The allowance for funerals was increased from $1,500 to $3,000.

Employers are required to furnish psychiatric and psychological services to injured employees when necessary. And for occupational diseases, they are responsible for furnishing physical therapy and dental and optometric services. A $2,500 limit has been established for vocational evaluation and counseling services. The additional $3,000 allowable for maintenance for living expenses, tuition, and travel during rehabilitation training has been eliminated. Training must now be completed within 2 years from the date the vocational rehabilitation training is determined as necessary. Other new and detailed procedures have been established concerning vocational rehabilitation services.

Attorney fees are payable up to a maximum of $12,500 and additional fees may be authorized if the employer has acted in bad faith.

An offset of unemployment compensation benefits against total disability benefits was added to the law.

A Joint Interim Legislative “Workers’ Compensation Committee” was set up to study the State’s workers’ compensation program. The committee is required to submit a report and any recommendations for legislation to the Legislature on or before December 15, 1987.

New York

Under certain circumstances, benefits pursuant to the Longshore and Harbor Workers’ Compensation Act are now payable with respect to coverage of employees located or resident only in the State of New York.

A 2-year statute of limitations is established for filing discrimination complaints against an employer, after the employer’s commission of a discriminatory practice.

North Carolina

Compulsory coverage under the law is now required of employers with three regular employees or more; however, the exceptions established pertaining to agriculture, domestic services, and sawmill and logging operations are still applicable. The requirement that hernia injury be accompanied by pain was eliminated. Compensation for hernia is permitted if the condition arises out of and in the course of employment and is the direct result of a specific traumatic incident of the assigned work.

Maximum weekly benefits will be computed by multiplying the State average weekly wage by 1.10 and by rounding the figure to its nearest multiple of $2.

Benefits for serious facial or head disfigurement and for body organ damage were raised to $20,000, from $10,000. Additionally, maximum benefits for burial are $2,000, formerly $1,000.

Revisions made in the occupational disease statutes which affect compensation for hearing loss, change the statute of limitations for claims in which payments have been discontinued and additional compensation is claimed, by requiring that such claims be made within 2 years after the last payment date, formerly 1 year after last payment.

The fines for noncompliance with insurance requirements are increased to $1 per employee, formerly 10 cents, but not less than $50, formerly $1, nor more than $100, formerly $50, for each day of noncompliance.

North Dakota

Coverage was broadened to include full-time firefighters and emergency medical technicians who contract infectious diseases in the line of duty.

In death cases, the total maximum amount of compensation allowable is $197,000, formerly $175,000. Supplementary compensation payments for total disability have been raised from a minimum of $143 to $150.

Garnishment of benefits for any child support obligation may be ordered by the court.

Vocational rehabilitation benefits are limited to 2 years, except in cases of catastrophic injury in which a worker is permanently and totally disabled and needs rehabilitation to return to gainful employment. Fees to cover expenses for relocation and/or remodeling of living and business facilities are payable up to an amount not exceeding $10,000; previously, the maximum allowable was $5,000.

The name of the “Workmen’s Compensation Bureau” has been changed to “Workers’ Compensation Bureau” (Bureau). The Legislative Council is directed to study the functions and duties of the Bureau, in particular, to decide whether certain functions of the agency should be performed by a single agency.

Oklahoma

By enactment, an examining physician is required to evaluate deafness or hearing impairment according to the latest “Guides to the Evaluation of Permanent Impairment” adopted and published by the American Medical Association. These guides are the exclusive basis for testimony and conclusions concerning cases of hearing impairment.

Oregon

The Department of Insurance and Finance is newly created and the Workers’ Compensation Department abolished. All statutory duties, functions, and authority of the Workers’ Compensation Department have been transferred to the Department of Insurance and Finance.

Newspaper delivery persons who are 19 years of age or older are exempted from coverage; and amateur sports officials are no longer required to carry health insurance.

Injured workers who are required to leave work for a period of 4 hours or more to receive medical consultation, examination, or treatment with regard to a compensable injury, are entitled to receive temporary disability benefits for the period during which the worker is absent and until the worker is determined to be medically stationary. Injuries occurring solely as a result of any personal recreational or social activities for the employee’s personal pleasure are not covered as a compensable injury. The definition of occupational disease has been generally revised.

Approval for formation of self-insured employer groups is granted to certain cities, counties, special districts, intergovernmental agencies, general school districts, and regional council of governments.

Provisions concerning death benefits to dependent children and other surviving dependents of a deceased employee were amended.

The statute of limitations for filing occupational disease claims was reduced to 1 year, formerly 5 years.

Employees actively engaged in rehabilitation training are entitled to receive temporary disability benefits for a period of 16 months; however, an extension may be authorized by the Director of the Workers’ Compensation Department when good cause is shown.

Reports of vocational rehabilitation agencies or counselors and all medical reports must be made available to the worker or employer upon request. Other provisions of the law pertaining to vocational rehabilitation hearings, and selection of a vocational rehabilitation provider, medical
services, claims, and workers' compensation ratings and penalties have all been revised.

The Director of Workers' Compensation is authorized to recover fees incurred from noncomplying employers when the Director has prevailed in a suit brought against such employer for noncompliance with the law.

Rhode Island

Dependency benefits for a child over the age of 18 years will now continue to be paid if the person is satisfactorily enrolled as a full-time student in an accredited educational institution or facility; however, such payments will be terminated at age 23 years.

An employer is required to continue payment of health insurance benefits for 2 years, formerly 1 year, after an employee receives weekly compensation benefits pursuant to a preliminary determination by the Department of Workers' Compensation or a decision of the Workers' Compensation Commission; if the employer files a memorandum of agreement or notice of direct payment with the Department for injuries occurring on or before February 28, 1986.

The terms "widow" and "widower" have been changed to "surviving spouse."

A Special Legislative Commission is created to review rehabilitation under the workers' compensation act and make recommendations for retraining and/or education of the disabled worker. The Special Legislative Commission established to study the feasibility of creating a State-controlled workers' compensation program has been reinstated with the same members and is scheduled to expire on July 3, 1988.

South Carolina

The South Carolina Industrial Commission has been renamed the South Carolina Workers' Compensation Commission.

Texas

Although mandatory coverage of family members is no longer applicable under the employer's workers' compensation insurance policy, elective coverage is available by law. It has been determined that a farm or ranch worker who performs work, or who provides a service for the benefit of the farm or ranch covered by law, is an employee of that employer unless the worker is hired to perform work or provide a service as an employee of a person acting as an independent contractor. Peace officers are covered as State employees while making warrantless arrests outside of their jurisdictions.

The Industrial Accident Board is required to establish and maintain guidelines for medical fees and charges, necessary treatment, and an internal program of systematic monitoring of charges to ensure that the guidelines are not exceeded. An annual report must be submitted to the legislature indicating the degree to which the fees paid comply with the guidelines.

In any lifetime benefit case, under certain conditions in which a dispute arises over medical benefits, the Industrial Accident Board may make an award that shall be appealable in accordance with other appeals, but only to the extent of the medical benefits in question. Guidelines for charges and utilization of medical services must also be developed by the Board.

Persons guilty of unethical or fraudulent conduct during a hearing before the Industrial Accident Board may be barred from practicing before the Board.

In compensable cases where disputes exist between two or more employers as to the liability for benefits, each employer will be

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<td>$210.00</td>
</tr>
<tr>
<td>Texas</td>
<td>$264.00</td>
<td>$231.00</td>
</tr>
<tr>
<td>Utah</td>
<td>$329.00, plus $5 for each dependent, aggregate not to exceed 90 percent of State's average weekly wage</td>
<td>$329.00, plus $5 for each dependent, aggregate not to exceed 90 percent of State's average weekly wage</td>
</tr>
<tr>
<td>Vermont</td>
<td>$465.00, plus $10 for each dependent under age 21</td>
<td>$486.00, plus $10 for each dependent under age 21</td>
</tr>
<tr>
<td>Virgin Islands</td>
<td>$187.00</td>
<td>$185.00</td>
</tr>
<tr>
<td>Virginia</td>
<td>$328.00</td>
<td>$344.00</td>
</tr>
<tr>
<td>Washington</td>
<td>$372.72</td>
<td>$398.70</td>
</tr>
<tr>
<td>West Virginia</td>
<td>$434.00</td>
<td>$350.88</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>$329.00</td>
<td>$338.00</td>
</tr>
<tr>
<td>Wyoming</td>
<td>$348.01</td>
<td>$382.37</td>
</tr>
</tbody>
</table>

NOTE: Most benefit increases are based on the applicable jurisdiction's average weekly or monthly wage. However, nine States (Arizona, Arkansas, California, Georgia, Indiana, Mississippi, Nebraska, New York, and Tennessee) and Puerto Rico prescribe statutory amounts. Six of the nine States (Arizona, California, Georgia, Indiana, Mississippi, and New York) and Puerto Rico made no changes in the benefit amounts. Benefits were frozen in Maine for a period of 3 years and in Montana for 2 years.
required to pay a proportionate share of the benefits.

The Joint Select Committee on Workers’ Compensation Insurance was created to conduct a detailed study of the workers’ compensation system in Texas, the effect of the system on employees and employers, and how other States have addressed problems that Texas now faces. A complete report, including findings, recommendations, and drafts of any legislation deemed necessary, must be prepared for the 71st Legislature to consider when it convenes in January 1989.

New criteria are now in effect concerning time requirements for nonrenewal of a subscriber’s workers’ compensation insurance policy.

Also, criteria for use in scheduling locations for workers’ compensation hearings are now available that apply to claimants and to the Texas Employers’ Insurance Association.

**Utah**

The “State Insurance Fund” will now be known as the “Workers’ Compensation Fund of Utah,” and responsibility for determining and setting premium rates has been transferred from the Industrial Commission to the Division of Finance.

Legislation was enacted which requires insurance carriers and employers to pay $30,000 into the Uninsured Employers’ Fund, or the Second Injury Fund, in no dependency death cases to maintain the solvency of the funds.

**Vermont**

Workers who recover from work-related injuries within a 2-year period are entitled to be reinstated with seniority to the first available and suitable positions considering the jobs held by the workers at the time of injury.

**Virginia**

Members of the State National Guard and auxiliary and reserve deputy sheriffs while on duty are volunteer employees and are now covered for workers’ compensation.

Schedule injury awards for incurable imbecility or insanity, except those resulting in total paralysis, may not extend beyond the 500-week limit for total and partial incapacity. Compensation for schedule injury will be paid for a specified period in addition to all other compensation benefits. Formerly, such compensation was in lieu of all other compensation.

The maximum amount payable for rehabilitative appliances for an injured employee was increased to $20,000, from $10,000. The Industrial Commission will order payment of attorney fees, costs and charges of physicians and hospitals by an employer, employee or insurance carrier in contested claims cases determined to be compensable.

Self-insurance certification may be revoked within 30 days, previously 60 days, from notification date to hearing date.

**Washington**

All agricultural workers now come within coverage; previously workers who earned less than $150 in a calendar year had no coverage. Automatic coverage of certain corporate officers was removed from the law.

**Wyoming**

Elective coverage is authorized for employees and occupations not designated as extra hazardous.