South Carolina Legislature

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Session 117 - (2007-2008)

H 3799 General Bill, By Thompson, Chellis, G.M. Smith, Leach, Cato, Shoopman and Sandifer

Summary: Insurance Fraud Division

A BILL TO AMEND THE CODE OF LAWS OF SOUTH CAROLINA, 1976, BY ADDING SECTION 42-15-85 TO CHAPTER 15, TITLE 42 SO AS TO REQUIRE THE BURDEN OF PROOF IN A WORKERS' COMPENSATION CLAIM TO BE ON THE EMPLOYEE, TO PROVIDE HOW CAUSATION IN MEDICALLY COMPLEX CASES MUST BE PROVEN, AND TO DEFINE EXPERT WITNESS; TO AMEND SECTION 38-55-530, AS AMENDED, RELATING TO DEFINITIONS AS USED IN THE OMNIBUS INSURANCE FRAUD AND REPORTING IMMUNITY ACT, SO AS TO FURTHER DEFINE "FALSE STATEMENT AND MISREPRESENTATION"; TO AMEND SECTION 38-55-540, RELATING TO CRIMINAL PENALTIES FOR MAKING FALSE STATEMENTS OR MISREPRESENTATIONS, SO AS TO PROVIDE ADDITIONAL FELONY OFFENSES; TO AMEND SECTION 38-55-560, RELATING TO THE INSURANCE FRAUD DIVISION IN THE OFFICE OF THE ATTORNEY GENERAL, SO AS TO AUTHORIZE THE ATTORNEY GENERAL TO HIRE A FORENSIC ACCOUNTANT; TO AMEND SECTION 42-1-10, RELATING TO THE CITATION AND REFERENCES TO TERMS USED IN THE WORKERS' COMPENSATION LAW, SO AS TO PROVIDE FOR THE PURPOSES OF THE WORKERS' COMPENSATION LAW; TO AMEND SECTION 42-1-160, AS AMENDED, RELATING TO THE DEFINITIONS OF "INJURY" AND "PERSONAL INJURY", SO AS TO FURTHER DEFINE THESE TERMS AND TO ADD A DEFINITION FOR "ACCIDENT"; TO AMEND SECTION 42-9-30, AS AMENDED, RELATING TO THE AMOUNT OF COMPENSATION AND THE PERIOD OF DISABILITY FOR CERTAIN INJURIES, SO AS TO PROVIDE THAT AWARDS MUST BE DETERMINED BASED ON CERTAIN FACTORS, TO DEFINE "PERMANENT MEDICAL IMPAIRMENT", AND TO DELETE THE EXCEPTION FOR FIFTY PERCENT OR MORE LOSS OF THE USE OF THE BACK FOR COMPENSATION TO BE PAID UNDER THE SCHEDULE; TO AMEND SECTION 42-9-400, AS AMENDED, RELATING TO THE DEFINITION OF "PERMANENT PHYSICAL IMPAIRMENT" FOR PURPOSES OF REIMBURSEMENT TO AN EMPLOYER FROM THE SECOND INJURY FUND, SO AS TO LIMIT THE MEANING OF THE TERM TO AN AMPUTATED LIMB, LOSS OR PARTIAL LOSS OF SIGHT, AND RUPTURED INTERVERTEBRAL DISC AND TO PROVIDE FOR THE CLOSURE OF THE SECOND INJURY FUND ON JUNE 30, 2012; TO AMEND SECTION 42-11-10, RELATING TO THE DEFINITION OF "OCCUPATIONAL DISEASE", SO AS TO FURTHER DEFINE THE TERM AND TO PROVIDE FOR WHEN COMPENSATION FOR THIS DISEASE IS PAYABLE; TO AMEND SECTION 42-15-60, RELATING TO MEDICAL TREATMENT AND SUPPLIES BEING FURNISHED AND AN EMPLOYEE'S REFUSAL TO ACCEPT TREATMENT, SO AS TO PROVIDE FOR HOW LONG AN EMPLOYER MUST CONTINUE TO PROVIDE MEDICAL BENEFITS; TO AMEND SECTION 42-15-80, RELATING TO PRIVILEGED INFORMATION COMMUNICATED AT EMPLOYEE EXAMINATIONS, SO AS TO PROVIDE THAT A PHYSICIAN AND OTHER HEALTH CARE PROVIDERS, WITHOUT THE EMPLOYEE'S PERMISSION, MAY DISCUSS AND COMMUNICATE AN EMPLOYEE'S MEDICAL TREATMENT WITH THE REPRESENTATIVES OF THE INSURANCE CARRIER, THE EMPLOYER, THE EMPLOYEE, THEIR ATTORNEY, THE REHABILITATION PROFESSIONAL, OR THE WORKERS' COMPENSATION COMMISSION; TO AMEND SECTION 42-15-95, AS AMENDED, RELATING TO WORKERS' COMPENSATION CLAIMS AND THE DISCLOSURE OF INFORMATION BY HEALTH CARE PROVIDERS, SO AS TO DEFINE "MEDICAL AND VOCATIONAL INFORMATION"; AND TO AMEND SECTION 42-17-90, RELATING TO THE REVIEW OF AN AWARD ON CHANGE OF A CONDITION, SO AS TO REQUIRE, IN OCCUPATION DISEASE CASES, THAT A REVIEW MUST NOT BE MADE AFTER TWELVE MONTHS FROM THE DATE OF THE LAST PAYMENT OF BENEFITS.

03/27/07 House Introduced and read first time HJ-94

03/27/07 House Referred to Committee on Labor, Commerce and Industry HJ-96

03/28/07 House Member(s) request name added as sponsor: Sandifer