House	Amendment NO
Offered By	
AMEND Senate Committee Substitute for Seninserting immediately after said line the follow "287.140. 1. In addition to all other of the employee shall receive and the employer's hospital treatment, including nursing, custodial required after the injury or disability, to cure a employee desires, he shall have the right to se requirement at his own expense. Where the reinstitution, payment therefor shall be made to health care provider is selected by the employe expense, the health care provider shall have the employee regarding the nature of the employe any evaluation for a permanent disability rating constitute a disciplinary violation by the provident employee is required to submit to medical exact outside of the local or metropolitan area from employer or its insurer shall advance or reimb expenses; except that an injured employee whemployed by an employer located in Missouri services provided in this section either at a loce employee's residence, place of injury or place within the location selected shall continue to be examination if a dispute arises as to what expensented to the legal advisor, the administration sum to be paid and same shall be paid by the event, however, shall the employer or its insure distance than two hundred fifty miles each wate the event, however, shall the employer or its insure distance than two hundred fifty miles each wate the in such manner that there is reasonable ground employee is endangered thereby, the division of physician, surgeon, hospital or other requirem the surgeon of the contraction of the requirem and the surgeon of the requirem and charges under this charge.	nate Bill No. 613, Page 1, Section A, Line 3, by wing: ompensation paid to the employee under this section, shall provide such medical, surgical, chiropractic, and al, ambulance and medicines, as may reasonably be and relieve from the effects of the injury. If the lect his own physician, surgeon, or other such equirements are furnished by a public hospital or other the proper authorities. Regardless of whether the error is selected by the employee at the employee's are affirmative duty to communicate fully with the ere's injury and recommended treatment exclusive of ag. Failure to perform such duty to communicate shall der subject to the provisions of chapter 620. When are aminations or necessary medical treatment at a place the employee's principal place of employment, the surse the employee for all necessary and reasonable to resides outside the state of Missouri and who is a shall have the option of selecting the location of cation within one hundred miles of the injured of hire by the employer. The choice of provider the made by the employer. In case of a medical enses shall be paid by the employer, the matter shall be leave law judge or the commission, who shall set the employer prior to the medical examination. In no tere be required to pay transportation costs for a greater by from place of treatment.  The commission that the requirements are being furnished the for believing that the life, health, or recovery of the or the commission may order a change in the ent.  The pter shall be fair and reasonable, shall be subject to
A health care provider shall not charge a fee for provisions of this chapter greater than the usual	or the board of rehabilitation in rehabilitation cases. For treatment and care which is governed by the all and customary fee the provider receives for the
Standing Action Taken	such treatment or service is a private individual or a  Date

Select Action Taken\_\_\_\_\_\_ Date \_\_\_\_\_

private health insurance carrier. The division or the commission, or the board of rehabilitation in rehabilitation cases, shall also have jurisdiction to hear and determine all disputes as to such charges. A health care provider is bound by the determination upon the reasonableness of health care bills.

- 4. The division shall, by regulation, establish methods to resolve disputes concerning the reasonableness of medical charges, services, or aids. This regulation shall govern resolution of disputes between employers and medical providers over fees charged, whether or not paid, and shall be in lieu of any other administrative procedure under this chapter. The employee shall not be a party to a dispute over medical charges, nor shall the employee's recovery in any way be jeopardized because of such dispute. Any application for payment of additional reimbursement, as such term is used in 8 CSR 50-2.030, as amended, shall be filed not later than:
- (1) Two years from the date the first notice of dispute of the medical charge was received by the health care provider if such services were rendered before July 1, 2013; and
- (2) One year from the date the first notice of dispute of the medical charge was received by the health care provider if such services were rendered after July 1, 2013.

Notice shall be presumed to occur no later than five business days after transmission by certified United States mail. For the purposes of this section, the phrase "notice of dispute" means a written explanation of benefits clearly including the term "Notice of Fee Dispute", which prominently evidences the payment is considered to be the full payment of the fee or charge.

- 5. No compensation shall be payable for the death or disability of an employee, if and insofar as the death or disability may be caused, continued or aggravated by any unreasonable refusal to submit to any medical or surgical treatment or operation, the risk of which is, in the opinion of the division or the commission, inconsiderable in view of the seriousness of the injury. If the employee dies as a result of an operation made necessary by the injury, the death shall be deemed to be caused by the injury.
- 6. The testimony of any physician or chiropractic physician who treated the employee shall be admissible in evidence in any proceedings for compensation under this chapter, subject to all of the provisions of section 287.210.
- 7. Every hospital or other person furnishing the employee with medical aid shall permit its record to be copied by and shall furnish full information to the division or the commission, the employer, the employee or his dependents and any other party to any proceedings for compensation under this chapter, and certified copies of the records shall be admissible in evidence in any such proceedings.
- 8. The employer may be required by the division or the commission to furnish an injured employee with artificial legs, arms, hands, surgical orthopedic joints, or eyes, or braces, as needed, for life whenever the division or the commission shall find that the injured employee may be partially or wholly relieved of the effects of a permanent injury by the use thereof. The director of the division shall establish a procedure whereby a claim for compensation may be reactivated after settlement of such claim is completed. The claim shall be reactivated only after the claimant can show good cause for the reactivation of this claim and the claim shall be made only for the payment of medical procedures involving life-threatening surgical procedures or if the claimant requires the use of a new, or the modification, alteration or exchange of an existing, prosthetic device. For the purpose of this subsection, "life threatening" shall mean a situation or condition which, if not treated immediately, will likely result in the death of the injured worker.
- 9. Nothing in this chapter shall prevent an employee being provided treatment for his injuries by prayer or spiritual means if the employer does not object to the treatment.
  - 10. The employer shall have the right to select the licensed treating physician, surgeon,

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chiropractic physician, or other health care provider; provided, however, that such physicians, surgeons or other health care providers shall offer only those services authorized within the scope of their licenses. For the purpose of this subsection, subsection 2 of section 287.030 shall not apply.

- 11. Any physician or other health care provider who orders, directs or refers a patient for treatment, testing, therapy or rehabilitation at any institution or facility shall, at or prior to the time of the referral, disclose in writing if such health care provider, any of his partners or his employer has a financial interest in the institution or facility to which the patient is being referred, to the following:
  - (1) The patient;

- (2) The employer of the patient with workers' compensation liability for the injury or disease being treated;
  - (3) The workers' compensation insurer of such employer; and
  - (4) The workers' compensation adjusting company for such insurer.
  - 12. Violation of subsection 11 of this section is a class A misdemeanor.
- 13. (1) No hospital, physician or other health care provider, other than a hospital, physician or health care provider selected by the employee at his own expense pursuant to subsection 1 of this section, shall bill or attempt to collect any fee or any portion of a fee for services rendered to an employee due to a work-related injury or report to any credit reporting agency any failure of the employee to make such payment, when an injury covered by this chapter has occurred and such hospital, physician or health care provider has received actual notice given in writing by the employee, the employer or the employer's insurer. Actual notice shall be deemed received by the hospital, physician or health care provider five days after mailing by certified mail by the employer or insurer to the hospital, physician or health care provider.
  - (2) The notice shall include:
  - (a) The name of the employer;
  - (b) The name of the insurer, if known;
  - (c) The name of the employee receiving the services:
  - (d) The general nature of the injury, if known; and
  - (e) Where a claim has been filed, the claim number, if known.
- (3) When an injury is found to be noncompensable under this chapter, the hospital, physician or other health care provider shall be entitled to pursue the employee for any unpaid portion of the fee or other charges for authorized services provided to the employee. Any applicable statute of limitations for an action for such fees or other charges shall be tolled from the time notice is given to the division by a hospital, physician or other health care provider pursuant to subdivision (6) of this subsection, until a determination of noncompensability in regard to the injury which is the basis of such services is made, or in the event there is an appeal to the labor and industrial relations commission, until a decision is rendered by that commission.
- (4) If a hospital, physician or other health care provider or a debt collector on behalf of such hospital, physician or other health care provider pursues any action to collect from an employee after such notice is properly given, the employee shall have a cause of action against the hospital, physician or other health care provider for actual damages sustained plus up to one thousand dollars in additional damages, costs and reasonable attorney's fees.
- (5) If an employer or insurer fails to make payment for authorized services provided to the employee by a hospital, physician or other health care provider pursuant to this chapter, the hospital, physician or other health care provider may proceed pursuant to subsection 4 of this section with a dispute against the employer or insurer for any fees or other charges for services provided.
- (6) A hospital, physician or other health care provider whose services have been authorized in advance by the employer or insurer may give notice to the division of any claim for fees or other

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charges for services provided for a work-related injury that is covered by this chapter, with copies of the notice to the employee, employer and the employer's insurer. Where such notice has been filed, the administrative law judge may order direct payment from the proceeds of any settlement or award to the hospital, physician or other health care provider for such fees as are determined by the division. The notice shall be on a form prescribed by the division.

14. The employer may allow or require an employee to use any of the employee's accumulated paid leave, personal leave, or medical or sick leave to attend to medical treatment, physical rehabilitation, or medical evaluations during work time. The intent of this subsection is to specifically supercede and abrogate any case law that contradicts the express language of this section."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.