STATE OF NEW YORK

8387--В

2017-2018 Regular Sessions

IN ASSEMBLY

June 12, 2017

Introduced by M. of A. PRETLOW, TAYLOR, D'URSO, GOTTFRIED, STECK, McDO-NALD -- Multi-Sponsored by -- M. of A. EPSTEIN, PALMESANO -- read once and referred to the Committee on Labor -- recommitted to the Committee on Labor in accordance with Assembly Rule 3, sec. 2 -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- again reported from said committee with amendments, ordered reprinted as amended and recommittee

AN ACT to amend the workers' compensation law, in relation to extending the board's authority to resolve medical bill disputes and simplify the process

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Section 13-b of the workers' compensation law, as amended by chapter 1068 of the laws of 1960, the section heading, subdivisions 1 and 2 as amended by chapter 473 of the laws of 2000 and subdivision 3 as amended by section 85 of part A of chapter 58 of the laws of 2010, is amended to read as follows:

5 6 § 13-b. Authorization of [physicians] providers, medical bureaus and 7 laboratories by the chair. 1. [Upon the recommendation of the medical 8 society of the county in which the physician's office is located or of a 9 board designated by such county society or of a board representing duly 10 licensed physicians of any other school of medical practice in such county, the chair may authorize physicians licensed to practice medicine 11 12 in the state of New York to render medical care under this chapter and 13 to perform independent medical examinations in accordance with subdivi-14 sion four of section thirteen-a of this article. If, within sixty days 15 after the chair requests such recommendations the medical society of 16 such county or board fails to act, or if there is no such society in 17 such county, the chair shall designate a board of three outstanding 18 physicians, who shall make the requisite recommendations.

EXPLANATION--Matter in <u>italics</u> (underscored) is new; matter in brackets
[-] is old law to be omitted.

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No such authorization shall be made in the absence of a recommendation of the appropriate society or board or of a review and recommendation by the medical appeals unit. No person shall render medical care or conduct independent medical examinations under this chapter without such authorization by the chair[, provided, that: (a)]. As used in this title, the following definitions shall have the following meanings unless their context requires otherwise:

- (a) "Acupuncturist" shall mean licensed as having completed a formal course of study and having passed an examination in accordance with the education law, the regulations of the commissioner of education, and the requirements of the board of regents. Acupuncturists are required by the education law to advise, in writing, each patient of the requirement that he or she consult with a physician for the condition or conditions necessitating acupuncture care, as prescribed by the education law.
- (b) "Authorization agreement" shall mean an agreement between the chair and the provider signed by the provider desirous of rendering medical care and/or treatment to a claimant or claimants injured in the course of their employment and/or to conduct independent medical examinations.
- (c) "Chair" of the board shall mean either the chair or the chair's designee.
- (d) "Chiropractor" shall mean licensed and having completed two years of preprofessional college study and a four-year resident program in chiropractic in accordance with the education law, and consistent with the licensing requirements of the commissioner of education.
- (e) "Dentist" shall mean licensed and having completed a four-year course of study leading to a D.D.S. or D.D.M. degree, or an equivalent degree, in accordance with the education law and the licensing requirements of the commissioner of education.
- (f) "Employer" shall mean a self-insured employer or, if insured, the insurance carrier.
- (g) "Independent medical examination" shall mean an examination performed by a medical provider, authorized under this section to perform such examination, for the purpose of examining or evaluating injury or illness pursuant to paragraph (b) of subdivision four of section thirteen-a and section one hundred thirty-seven of this chapter and as more fully set forth in regulation.
- (h) "Nurse practitioner" shall mean a licensed registered professional nurse certified pursuant to section sixty-nine hundred ten of the education law.
- (i) "Occupational therapist" shall mean licensed as having a bachelor's or master's degree in occupational therapy from a registered program with the education department or receipt of a diploma or degree resulting from completion of not less than four years of postsecondary study, which includes the professional study of occupational therapy in accordance with the education law and the regulations of the commissioner of education.
- (j) "Physical therapist" shall mean licensed as having completed a master's degree or higher in physical therapy in accordance with the education law and the licensing requirements of the commissioner of education.
- (k) "Physician" shall mean licensed with a degree of doctor of medicine, M.D., or doctor of osteopathic medicine, D.O., or an equivalent degree in accordance with the education law and the licensing requirements of the state board of medicine and the regulations of the commissioner of education.

(1) "Physician assistant" shall mean a licensed provider who has graduated from a two- to four-year state-approved physician assistant program, has passed a licensing examination, and whose actions and duties are within the scope of practice of the supervising physician, in accordance with the education law and the regulations of the commissioner of education.

- (m) "Podiatrist" shall mean a doctor of podiatric medicine licensed as having received a doctoral degree in podiatric medicine in accordance with the regulations of the commissioner of education and the education law, and must satisfactorily meet all other requirements of the state board for podiatric medicine.
- (n) "Provider" shall mean a duly licensed acupuncturist, chiropractor, independent medical examiner, nurse practitioner, physical therapist, physician, physician assistant, podiatrist, psychologist, or social worker subject to an authorization agreement.
- (o) "Psychologist" shall mean licensed as having received a doctoral degree in psychology from a program of psychology registered with the state education department or the substantial equivalent thereof in accordance with the education law, the requirements of the state board for psychology, and the regulations of the commissioner of education.
- (p) "Social worker" shall mean a licensed clinical social worker. A licensed clinical social worker has completed a master's degree of social work that includes completion of a core curriculum of at least twelve credit hours of clinical courses or the equivalent post-graduate clinical coursework, in accordance with the education law and the regulations of the commissioner of education.
- 2. Any [physician] provider licensed [to practice medicine] pursuant to the education law to provide medical care and treatment in the state of New York may render emergency [medical] care and treatment in an emergency hospital or urgent care setting providing emergency treatment under this chapter without authorization by the chair under this section; [and
- (b) [a) Such licensed [physician] provider as identified in this subdivision who is [a member of a constituted medical staff of any hospital] on staff at any hospital or urgent care center providing emergency treatment may [render] continue such medical care under this chapter while an injured employee remains a patient in such hospital or urgent care setting; and
- [(c)] (b) Under the [active and personal] direct supervision of an authorized [physician] provider, medical care may be rendered by a registered nurse or other person trained in laboratory or diagnostic techniques within the scope of such person's specialized training and qualifications. This supervision shall be evidenced by signed records of instructions for treatment and signed records of the patient's condition and progress. Reports of such treatment and supervision shall be made by such [physician] provider to the chair [on such forms and] in the format prescribed by the chair at such times as the chair may require.
- [(d) Upon the referral which may be directive as to treatment of an authorized physician physical therapy care may be rendered by a duly licensed physical therapist. Where physical therapy care is rendered records of the patient's condition and progress, together with records of instruction for treatment, if any, shall be maintained by the physical therapist and physician. Said records shall be submitted to the chair on such forms and at such times as the chair may require.
- (e) Upon the prescription or referral of an authorized physician occupational therapy care may be rendered by a duly licensed occupational

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therapist. Where occupational therapy care is rendered records of the patient's condition and progress, together with records of instruction for treatment, if any shall be maintained by the occupational therapist and physician. Said records shall be submitted to the chair on forms and at such times as the chair may require.

(f) (c) Where it would place an unreasonable burden upon the employer or carrier to arrange for, or for the claimant to attend, an independent medical examination by an authorized [physician] provider, the employer or carrier shall arrange for such examination to be performed by a qualified [physician] provider in a medical facility convenient to the claimant.

[2+] (d) Upon the prescription or referral of an authorized physician, or nurse practitioner acting within the scope of his or her practice, care or treatment may be rendered to an injured employee by an authorized physical therapist, occupational therapist or acupuncturist provided the conditions and the treatment performed are among the conditions that the physical therapist, occupational therapist or acupuncturist is authorized to treat pursuant to the education law or the regulations of the commissioner of education. Where any such care or treatment is rendered, records of the patient's condition and progress, together with records of instruction for treatment, if any, shall be maintained by the physical therapist, occupational therapist or acupuncturist rendering treatment and by the referring physician or nurse practitioner. Said records shall be submitted to the chair on forms and at such times as the chair may require.

(e) A record, report or opinion of a physical therapist, occupational therapist, acupuncturist or physician assistant shall not be considered as evidence of the causal relationship of any condition to a work related accident or occupational disease under this chapter. Nor may a record, report or opinion of a physical therapist, occupational therapist or acupuncturist be considered evidence of disability. Nor may a record, report or opinion of a physician assistant be considered evidence of the presence of a permanent or initial disability or the degree thereof. Nor may a physical therapist, occupational therapist, acupuncturist or physician assistant perform an independent medical examination concerning a claim under this chapter.

(f) A nurse practitioner, or licensed certified social worker, may perform an independent medical examination on behalf of an employer only to the extent that the examination concerns treatment rendered by an identical provider type, but may not perform an independent medical examination on behalf of the employer concerning (1) the causal relationship of any condition to a work related accident or occupational disease under this chapter or (2) the presence of a disability or the <u>degree thereof.</u>

3. A [physician licensed to practice medicine in the state of New York who is provider properly licensed or certified pursuant to the regulations of the commissioner of education and the requirements of the education law desirous of being authorized to render medical care under this chapter and/or to conduct independent medical examinations in accordance with paragraph (b) of subdivision four of section thirteen-a and section one hundred thirty-seven of this chapter shall [file an application for authorization under this chapter with the medical society in the county in which his or her office is located, or with a board 54 designated by such society, or with a board designated by the chair as provided in this section. In such application the applicant shall state his or her training and qualifications, and shall agree to limit his or

her professional activities under this chapter to such medical care and independent medical examinations, as his or her experience and training qualify him or her to render. The applicant shall further agree to 3 4 refrain sign an authorization agreement. Prior to receiving authori-5 zation, a physician must, together with submission of an application to 6 the chair, submit such application to the medical society of the county 7 in which the physician's office is located or of a board designated by 8 such county society or of a board representing duly licensed physicians 9 of any other school of medical practice in such county, and submit the 10 recommendation to the board. In the event such county society or board fails to take action upon a physician's application within forty-five 11 days, the chair may complete review of the application without such 12 approval. Upon approval of the agreement by the chair or chair's desig-13 14 nee the physician agrees to abide by the terms, conditions, and limitations outlined in the authorization agreement, including, but not limit-15 16 ed to refraining from subsequently treating for remuneration, as a 17 private patient, any person seeking medical treatment, or submitting to 18 an independent medical examination, in connection with, or as a result of, any injury compensable under this chapter, if he or she has been 19 20 removed from the list of [physicians] providers authorized to render 21 medical care or to conduct independent medical examinations under this chapter, or if the person seeking such treatment, or submitting to an 22 independent medical examination, has been transferred from his or her 23 care in accordance with the provisions of this chapter. This agreement 24 25 shall run to the benefit of the injured person so treated or examined, 26 and shall be available to him or her as a defense in any action by such 27 [physician] provider for payment for treatment rendered by a [physician] 28 provider after he or she has been removed from the list of [physicians] 29 providers authorized to render medical care or to conduct independent 30 medical examinations under this chapter, or after the injured person was 31 transferred from his or her care in accordance with the provisions of 32 this chapter. [The medical society or the board designated by it, or the board as otherwise provided under this section, if it deems such 33 licensed physician duly qualified, shall recommend to the chair that 34 35 such physician be authorized to render medical care and/or conduct independent medical examinations under this chapter, and such recommendation 36 and authorization shall specify the character of the medical care or 37 38 independent medical examination which such physician is qualified and 39 authorized to render under this chapter. Such recommendations shall be advisory to the chair only and shall not be binding or conclusive upon 40 41 him or her. The licensed physician may present to the medical society or 42 board, evidences of additional qualifications at any time subsequent to his or her original application. If the medical society or board fails 43 44 to recommend to the chair that a physician be authorized to render 45 medical care and/or to conduct independent medical examinations under 46 this chapter, the physician may appeal to the medical appeals unit. The 47 medical society or the board designated by it, or the board as otherwise provided under this section, may upon its own initiative, or shall upon 48 request of the chair, review at any time the qualifications of any 49 50 physician as to the character of the medical care or independent medical 51 examinations which such physician has theretofore been authorized to render under this chapter and may recommend to the chair that such 52 53 physician be authorized to render medical care or to conduct independent 54 medical examinations thereafter of the character which such physician is 55 then qualified to render. On such advisory recommendation the chair may review and after reasonable investigation may revise the authorization

of a physician in respect to the character of medical care and/or to conduct independent medical examinations which he or she is authorized to render. If the medical society or board recommends to the chair that a physician be authorized to render medical care and/or to conduct independent medical examinations under this chapter of a character different from the character of medical care or independent medical examinations he or she has been theretofore authorized to render, such physician may appeal from such recommendation to the medical appeals unit.

3. Laboratories and bureaus engaged in x-ray diagnosis or treatment or in physiotherapy or other therapeutic procedures and which participate in the diagnosis or treatment of injured [workmen] workers under this chapter shall be operated or supervised by [qualified physicians duly] providers authorized under this chapter and shall be subject to the provisions of section thirteen-c of this article. The person in charge of diagnostic clinical laboratories duly authorized under this chapter shall possess the qualifications established by the public health and health planning council for approval by the state commissioner of health or, in the city of New York, the qualifications approved by the board of health of said city and shall maintain the standards of work required for such approval.

§ 2. Section 13-g of the workers' compensation law, as added by chapter 258 of the laws of 1935, subdivision 1 as amended by chapter 674 of the laws of 1994, subdivisions 2 and 3 as amended by section 4 of part GG of chapter 57 of the laws of 2013, subdivision 4 as amended by section 3 of part D of chapter 55 of the laws of 2015, subdivision 5 as amended by chapter 578 of the laws of 1959 and subdivision 6 as amended by chapter 639 of the laws of 1996, is amended to read as follows:

§ 13-g. Payment of bills for medical care. (1) Within forty-five days after a bill for medical care or supplies delivered pursuant to section thirteen of this article has been rendered to the employer [by the hospital, physician or self-employed physical or occupational therapist who has rendered treatment pursuant to a referral from the injured employee's authorized physician or authorized podiatrist for treatment to the injured employee], such employer must pay the bill or notify the [hospital, physician or self-employed physical or occupational therapist in writing medical care provider or supplier in the format prescribed by the chair that the bill is not being paid and explain the reasons for non-payment. In the event that the employer fails to make payment or notify the [hospital, physician or self-employed physical or occupational therapist medical care provider or supplier within such fortyfive day period that payment is not being made, the [hospital, physician, self-employed physical therapist or self-employed occupational therapist medical care provider or supplier may notify the board in the format prescribed by the chair [in writing] that the bill has not been paid and request that the board make an award for payment of such bill. The board or the chair may make an award not in excess of the established fee schedules for any such bill or part thereof which remains unpaid after said forty-five day period or thirty days after all other questions duly and timely raised in accordance with the provisions of this chapter, relating to the employer's liability for the payment of such amount, shall have been finally determined adversely to the employer, whichever is later, in accordance with rules promulgated by the chair, and such award may be collected in like manner as an award of compensation. The chair shall assess the sum of fifty dollars against the employer for each such award made by the board, which sum shall be paid into the state treasury.

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In the event that the employer has provided an explanation in writing why the bill has not been paid, in part or in full, within the aforesaid time period, and the parties can not agree as to the value of medical aid rendered under this chapter, such value shall be decided by arbitration [if requested by the hospital, physician or self-employed physical or occupational therapist, in accordance with the provisions of subdivision two or subdivision three of this section, as appropriate, and] as set forth in rules and regulations promulgated by the chair.

Where a [physician, physical or occupational therapist] bill for medical care or supplies has been determined to be due and owing in accordance with the provisions of this section the board shall include in the amount of the award interest of not more than one and one-half [per dent] percent (1 1/2%) per month payable to the [physician, physical or occupational therapist | medical care provider or supplier, in accordance with the rules and regulations promulgated by the board. Interest shall be calculated from the forty-fifth day after the bill was rendered or from the thirtieth day after all other questions duly and timely raised in accordance with the provisions of this chapter, relating to the employer's liability for the payment of such amount, shall have been finally determined adversely to the employer, whichever later, in accordance with rules promulgated by the chair.

(2) (a) If the parties fail to agree to the value of medical aid rendered under this chapter and the amount of the disputed bill is one thousand dollars or less, or if the amount of the disputed medical bill exceeds one thousand dollars and the [health] medical care provider or supplier expressly so requests, such value shall be decided by a single arbitrator process, pursuant to rules promulgated by the chair. [The chair shall appoint a physician who is a member in good standing of the medical society of the state of New York to determine the value of such disputed medical bill. Where the physician whose charges are being arbitrated is a member in good standing of the New York osteopathic society, the value of such disputed bill shall be determined by a member in good standing of the New York osteopathic society appointed by the chair. Where the physician whose charges are being arbitrated is a member in good standing of the New York homeopathic society, the value of such disputed bill shall be determined by a member in good standing of the New York homeopathic society appointed by the chair. Where the value of physical therapy services or occupational therapy services is at issue, such value shall be determined by a member in good standing of recognized professional association representing its respective profession in the state of New York appointed by the chair. Decisions rendered under the single arbitrator process shall be conclusive upon the parties as to the value of the services in dispute.

(b) If the parties fail to agree as to the value of medical aid rendered under this chapter and the amount of the disputed bill exceeds one thousand dollars, such value shall be decided by an arbitration committee unless the [health] medical care provider or supplier expressly requests a single arbitrator process in accordance with paragraph (a) The arbitration committee shall [consist of one this subdivision. physician designated by the president of the medical society of the county in which the medical services were rendered, one physician who is a member of the medical society of the state of New York, appointed by the employer or carrier, and one physician, also a member of the medical 54 society of the state of New York, appointed by the chair of the workers! 55 compensation board. If the physician whose charges are being arbitrated 56 is a member in good standing of the New York osteopathic society or the

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New York homeopathic society, the members of such arbitration committee shall be physicians of such organization, one to be appointed by the 3 president of that organization, one by the employer or carrier and the third by the chair of the workers' compensation board. Where the value 4 5 of physical therapy services is at issue and the amount of the disputed 6 bill exceeds one thousand dollars, the arbitration committee shall 7 consist of a member in good standing of a recognized professional asso-8 ciation representing physical therapists in the state of New York 9 appointed by the president of such organization, a physician designated 10 by the employer or carrier and a physician designated by the chair of the workers' compensation board provided however, that the chair finds 11 that there are a sufficient number of physical therapy arbitrations in a 12 13 geographical area comprised of one or more counties to warrant a committee so comprised. In all other cases where the value of physical therapy 14 services is at issue and the amount of the disputed bill exceeds one 15 16 thousand dollars, the arbitration committee shall be similarly selected and identical in composition, provided that the physical therapist 17 member shall serve without remuneration, and provided further that in 18 19 the event a physical therapist is not available, the committee shall be 20 comprised of three physicians designated in the same manner as in cases 21 where the value of medical aid is at issue.

(c) Where the value of occupational therapy services is at issue the arbitration committee shall consist of a member in good standing of a recognized professional association representing occupational therapists in the state of New York appointed by the president of such organization; a physician designated by the employer or carrier and a physician designated by the chair of the workers' compensation board provided, however, that the chair finds that there are a sufficient number of occupational therapy arbitrations in a geographical area comprised of one or more counties to warrant a committee so comprised. In all other cases where the value of occupational therapy services is at issue and the amount of the disputed bill exceeds one thousand dollars, the arbitration committee shall be similarly selected and identical in composition, provided that the occupational therapist member shall serve without remuneration, and provided further that in the event an occupational therapist is not available, the committee shall be comprised of three physicians designated in the same manner as in cases where the value of medical aid is at issue.] have three members designated by the chair in consultation with the medical director's office of the workers' compensation board. The majority decision of any such arbitration committee shall be conclusive upon the parties as to the value of the services in dispute.

(3) [(a) If an employer shall have notified the hospital in writing, as provided in subdivision one of this section, why the bill has not been paid, in part or in full, and the amount of the disputed bill is one thousand dollars or less, or where the amount of the disputed medical bill exceeds one thousand dollars and the hospital expressly so requests, such value shall be decided by a single arbitrator process, pursuant to rules promulgated by the chair. The chair shall appoint a physician in good standing licensed to practice in New York state to determine the value of such disputed bill. Decisions rendered under the administrative resolution procedure shall be conclusive upon the parties as to the value of the services in dispute.

(b) If an employer shall have notified the hospital in writing, as provided in subdivision one of this section, why the bill has not been paid, in part or in full, and the amount of the disputed bill exceeds

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one thousand dollars, the value of such bill shall be determined by an arbitration committee appointed by the chair for that purpose, which committee shall consider all of the charges of the hospital, unless the hospital expressly requests a single arbitrator process pursuant to paragraph (a) of this subdivision. The committee shall consist of three physicians. One member of the committee may be nominated by the chair upon recommendation of the president of the hospital association of New York state and one member may be nominated by the employer or insurance carrier. The majority decision of any such committee shall be conclusive upon the parties as to the value of the services rendered. The chair may make reasonable rules and regulations consistent with the provisions of this section.

(4) A provider or supplier initiating an arbitration, including a single arbitrator process, pursuant to this section shall not pay a fee to cover the costs related to the conduct of such arbitration. [Each member of an arbitration committee for medical bills, and each member of an arbitration committee for hospital bills shall be entitled to receive and shall be paid a fee for each day's attendance at an arbitration session in any one count in an amount fixed by the chair of the workers! compensation board.

(5) In claims where the employer has failed to secure compensation to his employees as required by section fifty of this chapter, the board may make an award for the value of medical [and podiatry] services, supplies or treatment rendered to such employees, in accordance with the schedules of fees and charges prepared and established under the provisions of [section thirteen, subdivision a, and section thirteen k, subdivision two, of this chapter[, and for the reasonable value of hospital care in accordance with the charges currently in force in hospitals in the same community for cases coming within the provisions of this chapter]. Such award shall be made to the [physician, podiatrist, or hospital medical care provider or supplier entitled thereto. A default in the payment of such award may be enforced in the manner provided for the enforcement of compensation awards as set forth in section twenty-six of this [chapter] article.

In all cases coming under this subdivision the payment of the claim [of the physician, podiatrist, or hospital for medical, podiatry, or surgical services or treatment] for medical care or supplies shall be subordinate to that of the claimant or his or her beneficiaries.

[(6) Notwithstanding any inconsistent provision of law, arbitration regarding payments for inpatient hospital services for any patient discharged on or after January first, nineteen hundred ninety-one and prior to December thirty-first, nineteen hundred ninety-six shall be resolved in accordance with paragraph (d) of subdivision three of section twenty-eight hundred seven-c of the public health law.]

- § 3. Subdivisions 1 and 2 and paragraph (b) of subdivision 3 of section 13-k of the workers' compensation law, subdivision 1 as added by chapter 787 of the laws of 1952 and subdivision 2 and paragraph (b) of subdivision 3 as amended by chapter 473 of the laws of 2000, are amended to read as follows:
- 1. When the term "chairman" is hereinafter used, it shall be deemed to mean the [chairman] chair of the [workmen's] workers' compensation board of the state of New York.
- 2. An employee injured under circumstances which make such injury 54 compensable under this article, when care is required for an injury to the foot which injury or resultant condition therefrom may lawfully be treated by a duly registered and licensed podiatrist of the state of New

York, may select to treat him or her any podiatrist authorized by the chair to render [podiatry] podiatric medical care, as hereinafter provided. If the injury or condition is one which is without the limits 3 prescribed by the education law for [podiatry] podiatric medical care and treatment, or the injuries involved affect other parts of the body in addition to the foot, the said podiatrist must so advise the said 7 injured employee and instruct him or her to consult a physician of said employee's choice for appropriate care and treatment. Such physician 9 shall thenceforth have overall supervision of the treatment of said 10 patient including the future treatment to be administered to the patient by the podiatrist. If for any reason during the period when [podiatry] 11 podiatric medical treatment and care is required, the employee wishes to 12 13 transfer his or her treatment and care to another authorized podiatrist 14 he or she may do so, in accordance with rules prescribed by the chair, 15 provided however that the employer shall be liable for the proper fees 16 of the original podiatrist for the care and treatment he or she shall 17 have rendered. [A podiatrist licensed and registered to practice podiatry in the state of New York who is desirous of being authorized to 18 render podiatry care under this section and/or to conduct independent 19 20 medical examinations in accordance with paragraph (b) of subdivision 21 three of this section shall file an application for authorization under this section with the podiatry practice committee. In such application 22 he or she shall agree to refrain from subsequently treating for remuner-23 24 ation, as a private patient, any person seeking podiatry treatment, or submitting to an independent medical examination, in connection with, or 25 26 as a result of, any injury compensable under this chapter, if he or she 27 has been removed from the list of podiatrists authorized to render podiatry care or to conduct independent medical examinations under this 28 chapter, or if the person seeking such treatment has been transferred 29 30 from his or her care in accordance with the provisions of this section. 31 This agreement shall run to the benefit of the injured person so treated 32 or examined, and shall be available to him or her as a defense in any 33 action by such podiatrist for payment for treatment rendered by a podiatrist after he or she has been removed from the list of podiatrists 34 35 authorized to render podiatry care or to conduct independent medical 36 examinations under this section, or after the injured person was trans-37 ferred from his or her care in accordance with the provisions of this section. The podiatry practice committee if it deems such licensed 38 podiatrist duly qualified shall recommend to the chair that such podia-39 trist be authorized to render podiatry care and/or to conduct independ-40 ent medical examinations under this section. Such recommendation shall 41 42 be advisory to the chair only and shall not be binding or conclusive upon him or her.] The chair shall prepare and establish a schedule for 43 44 the state, or schedules limited to defined localities, of charges and 45 fees for [podiatry] podiatric medical treatment and care, to be deter-46 mined in accordance with and to be subject to change pursuant to rules 47 promulgated by the chair. Before preparing such schedule for the state or schedules for limited localities the chair shall request the [podia-48 49 try podiatric medicine practice committee to submit to him or her a 50 report on the amount of remuneration deemed by such committee to be fair 51 and adequate for the types of [podiatry] podiatric medical care to be 52 rendered under this chapter, but consideration shall be given to the view of other interested parties. The amounts payable by the employer 54 for such treatment and services shall be the fees and charges estab-55 lished by such schedule.

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- (b) Upon receipt of the notice provided for by paragraph (a) of this subdivision, the employer, the carrier and the claimant each shall be entitled to have the claimant examined by a qualified podiatrist authorized by the chair in accordance with [subdivision two of this] section thirteen-b and section one hundred thirty-seven of this chapter, at a medical facility convenient to the claimant and in the presence of the claimant's podiatrist, and refusal by the claimant to submit to such independent medical examination at such time or times as may reasonably be necessary in the opinion of the board shall bar the claimant from recovering compensation for any period during which he or she has refused to submit to such examination.
- 4. Subdivisions 1 and 2 and paragraph (b) of subdivision 3 of section 13-1 of the workers' compensation law, subdivision 1 as added by chapter 940 of the laws of 1973 and subdivision 2 and paragraph (b) of subdivision 3 as amended by chapter 473 of the laws of 2000, are amended to read as follows:
- 1. Where the term "chairman" is hereinafter used, it shall be deemed to mean the [chairman] chair of the [workmen's] workers' compensation board of the state of New York.
- 2. An employee injured under circumstances which make such injury compensable under this article, when care is required for an injury which consists solely of a condition which may lawfully be treated by a chiropractor as defined in section sixty-five hundred fifty-one of the education law may select to treat him or her, any duly registered and licensed chiropractor of the state of New York, authorized by the chair to render chiropractic care as hereinafter provided. If the injury or condition is one which is outside the limits prescribed by the education law for chiropractic care and treatment, the said chiropractor must so advise the said injured employee and instruct him or her to consult a physician of said employee's choice for appropriate care and treatment. Such physician shall thenceforth have supervision of the treatment of said condition including the future treatment to be administered to the patient by the chiropractor. [A chiroprastor licensed and registered to practice chiropractic in the state of New York, who is desirous of being authorized to render chiropractic care under this section and/or to conduct independent medical examinations in accordance with paragraph (b) of subdivision three of this section shall file an application for authorization under this section with the chiropractic practice committee. In such application he or she shall agree to refrain from subsequently treating for remuneration, as a private patient, any person seeking chiropractic treatment, or submitting to an independent medical examination, in connection with, or as a result of, any injury compensable under this chapter, if he or she has been removed from the list of chiropractors authorized to render chiropractic care or to conduct independent medical examinations under this chapter, or if the person seeking such treatment has been transferred from his or her care in accordance with the provisions of this section. This agreement shall run to the benefit of the injured person so treated, or examined, and shall be available to him or her as a defense in any action by such chiropractor for payment rendered by a chiropractor after he or she has been removed from the list of chiropractors authorized to render chiropractic care or to conduct independent medical examinations under this section, or after the injured person was transferred from his or her care in accordance 54 with the provisions of this section. The chiropractic practice committee 55 if it deems such licensed chiropractor duly qualified shall recommend to 56 the chair that such be authorized to render chiropractic care and/or to

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conduct independent medical examinations under this section. Such recommendations shall be advisory to the chair only and shall not be binding 3 or conclusive upon him or her. The chair shall prepare and establish a schedule for the state, or schedules limited to defined localities of charges and fees for chiropractic treatment and care, to be determined in accordance with and to be subject to change pursuant to rules promulgated by the chair. Before preparing such schedule for the state or schedules for limited localities the chair shall request the chiropractic practice committee to submit to him or her a report on the amount of remuneration deemed by such committee to be fair and adequate for the types of chiropractic care to be rendered under this chapter, but consideration shall be given to the view of other interested parties, the amounts payable by the employer for such treatment and services shall be the fees and charges established by such schedule.

- (b) Upon receipt of the notice provided for by paragraph (a) of this subdivision, the employer, the carrier, and the claimant each shall be entitled to have the claimant examined by a qualified chiropractor authorized by the chair in accordance with [subdivision two of this] section thirteen-b and section one hundred thirty-seven of this chapter at a medical facility convenient to the claimant and in the presence of the claimant's chiropractor, and refusal by the claimant to submit to such independent medical examination at such time or times as may reasonably be necessary in the opinion of the board shall bar the claimant from recovering compensation, for any period during which he or she has refused to submit to such examination.
- § 5. Subdivisions 1, 2 and 3 and paragraph (b) of subdivision 4 of section 13-m of the workers' compensation law, subdivisions 1 and 2 as added by chapter 589 of the laws of 1989 and subdivision 3 and paragraph (b) of subdivision 4 as amended by chapter 473 of the laws of 2000, are amended to read as follows:
- Where the term "chairman" is hereinafter used, it shall be deemed to mean the [chairman] chair of the workers' compensation board of state of New York.
- 2. (a) An injured employee, injured under circumstances which make such injury compensable under this article, may lawfully be treated[7 upon the referral of an authorized physician, by a psychologist, duly registered and licensed by the state of New York, authorized by the [chairman] chair to render psychological care pursuant to [this] section thirteen-b of this article. Such services shall be within the scope of such psychologist's specialized training and qualifications as defined in article one hundred fifty-three of the education law.
- (b) Medical bureaus, medical centers jointly operated by labor and management representatives, hospitals and health maintenance organizations, authorized to provide medical care pursuant to section thirteen-c this [chapter] article, may provide psychological services when required[, upon the referral of an authorized physician, provided such care is rendered by a duly registered, licensed and authorized psychologist, as required by this section].
- (c) A psychologist rendering service pursuant to this section shall maintain records of the patient's psychological condition and treatment, and such records or reports shall be submitted to the [chairman] chair on such forms and at such times as the [chairman] chair may require.
- 3. [A psychologist, licensed and registered to practice psychology in 54 the state of New York, who is desirous of being authorized to render psychological care under this section and/or to conduct independent medical examinations in accordance with paragraph (b) of subdivision

four of this section shall file an application for authorization under this section with the psychology practice committee. The applicant shall agree to refrain from subsequently treating for remuneration, as a private patient, any person seeking psychological treatment, or submit-ting to an independent medical examination, in connection with, or as a result of, any injury compensable under this chapter, if he or she has been removed from the list of psychologists authorized to render psycho-logical care under this chapter. This agreement shall run to the benefit of the injured person so treated, and shall be available as a defense in any action by such psychologist for payment for treatment rendered by such psychologist after being removed from the list of psychologists authorized to render psychological care or to conduct independent medical examinations under this section. The psychology practice commit-tee if it deems such ligensed psychologist duly qualified shall recommend to the chair that such person be authorized to render psychological care and/or to conduct independent medical examinations under this section. Such recommendations shall be only advisory to the chair and shall not be binding or conclusive. The chair shall prepare and estab-lish a schedule for the state or schedules limited to defined localities charges and fees for psychological treatment and care, to be deter-mined in accordance with and be subject to change pursuant to rules promulgated by the chair. Before preparing such schedule for the state or schedules for limited localities the chair shall request the psychol-ogy practice committee to submit to such chair a report on the amount of remuneration deemed by such committee to be fair and adequate for the types of psychological care to be rendered under this chapter, but consideration shall be given to the view of other interested parties. The amounts payable by the employer for such treatment and services shall be the fees and charges established by such schedule.

- (b) Upon receipt of the notice provided for by paragraph (a) of this subdivision, the employer, the carrier, and the claimant each shall be entitled to have the claimant examined by a qualified psychologist, authorized by the chair in accordance with [subdivision three of this] section thirteen-b and section one hundred thirty-seven of this chapter, at a medical facility convenient to the claimant and in the presence of the claimant's psychologist, and refusal by the claimant to submit to such independent medical examination at such time or times as may reasonably be necessary in the opinion of the board shall bar the claimant from recovering compensation, for any period during which he or she has refused to submit to such examination.
- § 6. Section 54-b of the workers' compensation law, as amended by chapter 6 of the laws of 2007, is amended to read as follows:
- § 54-b. Enforcement on failure to pay award or judgment. In case of default by a carrier or self-insured employer in the payment of any compensation due under an award for the period of thirty days after payment is due and payable, or in the case of failure by a carrier or self-insured employer to make full payment of an award for medical care or supplies issued by the board or the chair pursuant to section thirteen-g of this chapter, the chair in any such case or on the chair's consent any party to an award may file with the county clerk for the county in which the injury occurred or the county in which the carrier or self-insured employer has his or her principal place of business, (1) a certified copy of the decision of the board awarding compensation or ending, diminishing or increasing compensation previously awarded, from which no appeal has been taken within the time allowed therefor, or if an appeal has been taken by a carrier or self-insured employer who has

1 not complied with the provisions of section fifty of this article, where he or she fails to deposit with the chair the amount of the award as security for its payment within ten days after the same is due and paya-3 ble, or (2) a certified copy of the award for medical care or supplies issued pursuant to section thirteen-g of this chapter, and thereupon judgment must be entered in the supreme court by the clerk of such coun-7 ty in conformity therewith immediately upon such filing. If the payment in default be an installment, the board may declare the entire award due 9 and judgment may be entered in accordance with the provisions of this 10 section. Such judgment shall be entered in the same manner, have the 11 same effect and be subject to the same proceedings as though rendered in a suit duly heard and determined by the supreme court, except that no 12 13 appeal may be taken therefrom. The court shall vacate or modify such 14 judgment to conform to any later award or decision of the board upon 15 presentation of a certified copy of such award or decision. The award 16 may be so compromised by the board as in the discretion of the board may 17 best serve the interest of the persons entitled to receive the compen-18 sation or benefits. Where an award has been made against a carrier or self-insured employer in accordance with the provisions of subdivision 19 20 nine of section fifteen, or of section twenty-five-a of this chapter, 21 such an award may be similarly compromised by the board, upon notice to a representative of the fund to which the award is payable, but if there 22 23 be no representative of any such fund, notice shall be given to such representative as may be designated by the chair of the board; and 25 notwithstanding any other provision of law, such compromise shall be 26 effective without the necessity of any approval by the state comptroller. Neither the chair nor any party in interest shall be required 27 28 to pay any fee to any public officer for filing or recording any paper 29 instrument or for issuing a transcript of any judgment executed in 30 pursuance of this section. The carrier or self-insured employer shall be 31 liable for all costs and attorneys fees necessary to enforce the award. 32 For the purposes of this section, the term "carrier" shall include the 33 state insurance fund and any stock corporation, mutual corporation or 34 reciprocal insurer authorized to transact the business of workers' 35 compensation insurance in this state.

 \S 7. This act shall take effect on the ninetieth day after it shall 37 have become a law.