Members present: Chairman Banner

Mr. Bennett
Mr. Brady
Mr. Fielding
Mr. Jeffrey
Mr. Rhoads

Mr. Webb

Members absent:

Mr. Bremner Mr. Robinson

Guests present:

See attached list

A.B. 84 - Permits self-insurance of workmen's compensation risks; modifies administrative procedures.

Chairman Banner called the meeting to order at 3:05 p.m. He explained the committee heard discussions on this bill on January 29, and at the time several people asked it be delayed because of a report requested by the Nevada Industrial Commission from the Stanford Research Institute. He said the committee did get a fiscal note from NIC. He stated this is a comprehensive bill and that it be broken down to 17 parts. At the first meeting the self-insurance part of the bill was discussed, but not much enthusiasm was shown because the people concerned were not present.

Mr. Banner felt the way to approach the self-insurance part of the bill is to appoint a sub-committee that will work with the insurance commissioner. They should go over the bill and write a law in such a manner that when it comes back the Committee could either pass it or not. He appointed the following: Assemblymen Robinson, Bennett and Brady; Chuck King, Central Telephone Co.; Norman Anthonisen, Summa Corp.; and John D. Taylor, MGM-Las Vegas, and later added Mark Solomon, Hilton Hotel, Las Vegas.

Chairman Banner called on Patricia Becker to testify, giving her 30 minutes to spend on her presentation.

Patricia Becker, industrial attorney for NIC, gave a general overview of what the NIC is like, and what the worker's compensation system is like; as well as the hearing process. She stated the worker's compensation system was created whereby the employee gave up the right to sue, and the employer gave up the defense. She said we do not have a negligence system anymore. When an employee is injured on the job, he is covered by a worker's compensation system. There are three basic types of systems -- state funds, self-insurance, and private insurance carriers. Only three states in the Union have monopolistic funds, such as Nevada. Three other states have state funds and self-insurance; twelve states have state funds, self-insurance and private insurance carriers. The other 31 states just have self-insurance and private insurance carriers.



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Assembly (	Committee on	Labor	and	Management	 	
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She said the reason she was here was to try to get an easier, speedier system to help claimants. Patty Becker asked her deputy, Jack Godfrey, to explain the statistics on the charts. These were on temporary total disability compensation, permanent partial and permanent total disability. (Charts are attached to these minutes as Exhibit "A".)

Ms. Becker went on to explain the need for a new hearing system. She said the claimants and the employer should have an opportunity to be heard. The claims that cost the most money are people that miss over 100 days of work. There were 1700 such claims last year; and perhaps there will be 2800 this year. She felt those claims account for about 50% of the premium dollar, and will probably cost about \$100 million this year. She also said that cases go on for from two, three to four years.

She urged a statute be passed because NIC's regulation has created a system that is causing so many problems. She gave as an example the receipt and award form that states: death of the employee terminates entitlement to permanent partial disability compensation. That was amended two years ago and it goes to the surviving spouse and children upon death. Anyone that has taken a lump sum award in the last two years has been misinformed. The form should not have been used.

Ms. Becker referred to the chart on the board showing the procedure of the present hearing system (a copy is attached to these minutes as Exhibit "B"). She explained a claim is accepted and it is paid, and one receives compensation until such time as NIC decides they are ready for a hearing. There is no way a claimant can request or obtain a hearing; NIC makes that determination. She referred to a letter dated Jan. 18, 1979 (referring to the folder she supplied committee members). The letter was from an NIC claims examiner telling a claimant he couldn't have a hearing; that it was not ready for a hearing. NIC determines when that hearing begins.

She took 30 case histories she has handled -- the first 15 were the cases she took on when she was appointed, and the last 15 cases. She said one of the most obvious problems is requesting for a reopening. A request is made. It goes straight to the NIC Commission level. If the commissioner denies the reopening, the claimant must appeal, and they go back to the claims level hearing. When the claimant is denied there, the claimant appeals again, and he goes back to the commission level hearing where it had already been denied. After the second denial, it goes back to the appeals officer. That is just one example of why it doesn't work. The appeals officer has 90 days to set a hearing, 120 days to come out with a decision -- that's 7 months.

Of the 30 case histories summarized, 24 out of the 30 times the commission upheld what the claims level had done. They did not change anything. Two of the cases did not have claims level hearings, so they could not uphold them. Only 4 times out of the 30 did they change anything. And they never put the person back on compensation. Another problem is that there is no time limit. She feels a 30-day limit should be imposed to set a hearing. best part of A.B. 84, she said, is that a claimant or an employer can request a hearing and start the system going. The proposed hearing procedure amendment she submitted will allow NIC to have one hearing. It gives them 5 days to set the hearing, 30 days to have the hearing, 15 days to come out with the decision. Basically it shortens the time frame. She pointed out NIC should have 90 days to accept or reject a claim. There are claims sitting there for 6 to 8 months. In fact, she believes 30 days is sufficient time.

Regarding funding, one of the recommendations is that they have separate budgets, which will be administered by the Budget At present the appeals officers and the industrial attorney receive NIC checks. What you have then is the prosecution paying the public defender.

A copy of the complete presentation made by Ms. Becker is filed with the Chairman of this Committee.

John D. Taylor, MGM-Las Vegas, also representing Summa Corp., Hilton Hotel, Airport Marina, Caesar's Palace, Union, Plaza, as well as the Las Vegas Chamber of Commerce. He said they brought some expert witnesses, notably Joe Markey, who is the manager of California's self-insurance association. He said his ad hoc committee believes self-insurance is important, both to workers and employers in Nevada. He quoted a Chamber of Commerce article that advocates employers be permitted to buy private insurance, be self-insurers; that insurance is an integral part of private enterprise and should not be regarded as a function of government. He said they are firmly in accord with such a position.

Joe Markey, manager of the California Self-Insurers Association, who managed self-insurance for 21 years, offered to answer questions. He said employers save money by self-insurance plan through better loss control, better claims handling, and accident prevention. The objectives of employer and employee are the same -to reduce disability to the least loss of income.

Chairman Banner asked what Mr. Markey's suggestions would be to get this committee moving. Mr. Markey replied that the 10 or 11 sections in A.B. 84 have adequate language. He said Mr. Taylor has some suggested amendments the committee might want to consider.

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Minutes of the Nevada State Legislature

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Mr. Markey stated that in the self-insurance program there is a mechanism for assuring that any self-insured who might become insolvent has provided for surety bonds, cash or securities for protection of the injured worker. It is provided that only qualified employers are permitted to self-insure, and a mechanism for reporting, so that the modicum of oversight is on the self-insurers themselves.

Replying to questions regarding administration of self-insurance in California, Mr. Markey explained the self-insurers portion reports through the Department of Industrial Relations. The insurance commissioner is an entirely separate function; as is the State fund. State fund is just one of 50 or 80 carriers that are permitted to wirte insurance in the State.

Regarding the \$500,000 minimum amount, Assemblyman Brady asked if that is comparable to the minimum in California. Mr. Markey replied they have a \$100,000 minimum. He suggested Nevada consider the \$100,000 minimum for the reason that the criteria should be in their ability to meet their obligations, not on the size of the bond.

Claude Evans, AFL-CIO, said he had no comment on self-insurance but would like to talk about the matter in Sec. 20, page 6, regarding retroactive benefits. He said there are about 700 in the State who are permanently and totally disabled, and survivors of fatally injured workers. He quoted figures he picked at random, from a list he obtained from NIC. These figures showed widows of injured workers receiving benefits during the last ten years ranging in monthly amounts from \$208, \$232, \$256 and \$488. He said the Legislature did nothing for these people in 1977. He believes some law can be enacted to help these people.

Jack Campbell, vice president for finance of the MGM Grand Hotel, said employrs in 47 states are allowed a choice in the coverage of their workmen's compensation insurance. He is against the non-competitive situation because they have to pay whatever premium NIC charges. He said he had been studying the NIC financial statements for the last five years, andduring that time the build up in reserves increased 220%. At the same time the claims actually paid out increased 108%. He feels they are out of proportion. He said he is not interested whether it is self-insurance, 3-way system, as being proposed, or whatever. He thinks employers are entitled to a choice and to do it in the most economical fashion they can. He handed a copy of his statement and the figures he quoted to members of the Committee. (A copy is attached as Exhibit "C".)

Minutes of the Nevada State Legislature Assembly Committee on Labor and Management

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Warren Goedert, Nevada Trial Lawyers Association, represented their subcommittee dealing with NIC matters. He echoed the sentiments expressed by Claude Evans, and said the people that hurt the worst are those on NIC benefits. He said the answer to that is to build in a factor that will increase the benefits on an annual He stated this was attempted before, but was passed over because the fiscal note attached was expensive.

One concern he touched upon was the proposed amendment on SEC. 23 dealing with the rehabilitation program. He thinks the bill will give more power to NIC. He said the NIC handled the rehabilitation program in a deplorable manner. He claims the premium dollar was wasted, that the best place for such a program would be with the State Rehabilitation Division. He said the entire section of 616.222 should be repealed. He said the amendment gives the NIC physician more power that will cause a lot of He beleives Ms. Becker's proposed amendments are good. But we need to go a little further in the way the appeals officers are set up. He said they are closely allied with the industrial commission, especially in self-insurance. It is imperative they become totally independent, that they have a separate budget.

Norman Anthonisen, Summa Corp., thanked Mr. Banner for the confidence he showed by naming him to the subcommittee that will work on the amendments to self-insurance. He wanted to go on record that they are in favor of the self-insurance system.

Don Hill, Safety Compensation Energy, Inc., a consulting firm, said he had some information on cumulative trauma. He said incidents of cumulative injury increased threefold in 1974. Cumulative injury losses of insured employers are expected to exceed \$200 million. He believes self-insurance is great, and said the Legislature did very well in giving a good self-rater program in 1973. He expressed the feeling that our cumulative trauma problem will develop if we open the door to any insurance company.

Assemblyman Bennett asked Mr. Hill whether he was opposed to, or for the bill. Mr. Hill replied he signed both pro and con, but is asking for a little bit more time. He expressed the feeling that it will not be effective for people in selfrater or self-insurance unless they have a \$10 million payroll.

Richard Bortolin, NIC appeals officer, commented on procedural matters. He said he proposed amendments in the Jan. 29 meeting, and was happy to see Ms. Becker's proposals parallel to his, except for a few points. He suggests that Sec. 14, subsection 2 be changed to 7 days rather than 5, saying five days is not functional because of weekends. Right now he has 68 cases to be set, showing 5 days is not practical.

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Regarding continuances, Mr. Bortolin said that is one of the biggest problems for delays. He thanked Mr. Banner for providing him with the packet containing Ms. Becker's case histories where he found some gross error, and wants to correct them. He would like to clean up the area of continuances, saying the appeals officer should be ordered to have continuances. On Sec. 15, subparagraph 5, the language he previously proposed should be 60 days, from date of submission. He volunteered to help draft the amendment.

Frank A. "Skip" King, general counsel for NIC in Las Vegas, addressed Sections 12 thrugh 17. He also had some objections to Mrs. Becker's proposals, but because they do not pertain to A.B. 84, this is not the time to respond. His comments were given to the committee members in writing. (Copy is attached as Exhibit "D"). He said he would like to volunteer in drafting the amendments, and thinks he could offer a different perspective from those of Ms. Becker's.

Assemblyman Joe Dini expalined why they went to self-insured instead of the 3-way system, and the \$500,000 bond. He said the decision was based on the testimony received by his subcommittee. In the 3-way system the problem would be with the small employer who would have to pay considerable increased premiums based on a built-in cost factor. He said it would be about \$50-100 an account. Secondly, they didn't want to hurt the NIC fund at this time. The self-insurance is intended to be a pilot project, and the \$500,000 figure is not sacred, saying the Committee can raise or lower it, depending on what will be most beneficial to the people of Nevada. There are advantages for the large corporations who can be given considerable savings. They felt they could do better in the rates because they have thousands of employees.

On Sec. 20 regarding retroactive benefits, he said it worked well in Oregon. It took a few years to catch the people up on it. The people working with the employer contributed the money and didn't rate the insurance fund. He expressed his hope that the Committee consider it.

Regarding Sec. 23 - he said the language may not be quite right. He suggested taking the brackets out after "may" and add "including", saying it won't take anything from anybody. He said the Commission should handle it, saying there are many employees who do not want to go back to work. He gave as an example an employee who injured his back, then goes to work as a 21 dealer. He said standing 8 hours is not good for the injured back, that NIC should recognize that fact, but should have found something compatible with the injury. He said that is what was meant for that section.

(Committee Minutes)

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And commenting on the concept of the appeals officer, he said the stigma of being under the NIC is very important. That can be done through the appropriations act, that he not be under the NIC control, because he reversed decisions that they made. His committee did quite a bit of investigation in that aspect. He reiterated the most important part was the appeals process built into this bill. He said they found it was one of the biggest gripes of the working man.

Mr. Dini said if there is anything he can do to help, that he has all the records of the hearings if they want to look at it. He feels the concept is good, but that if the Committee chooses the 3-way concept that they are going to have additional problems. He said our system looks great, compared to Oregon. He expressed the opinion that with the few modification presented here, most employers and employees will be satisfied.

David Gamble, Nevada Trial Lawyers Association, stated he wanted to respond to the comments made by different people. He pointed out that what Mrs. Becker said was very necessary to A.B. Addressing Mr. King's comments, he said Mr. Dini's committee has spent many months and took several hours of testimony from many claimants, and that there was tremendous opportunity for everyone to make inputs to Mr. Dini's committee. Regarding Mr. Goedert's statement on the rehabilitation program, he agrees that the decision made by NIC is not made by the claims examiner, nor the treating physican, but by the doctors retained by NIC. These consist of a plastic surgeon and two semi-retired general practitioners. The terms in this statute would allow NIC to simply ask their own doctors. He agreed with Mr. Goedert that rehabilitation should not be a function of NIC, but should be by the State Rehabilitation, because they are concerned about the working man. He also agrees with Mr. Dini that the hearing system is the most important part. He thinks Patty Becker's proposed amendments would further streamline the system.

N. C. Anthonisen, Summa Corp., had a question saying that his understanding was that only self-insurance part of the bill would be discussed at this meeting. Mr. Banner replied it will be discussed next week. He said the subject of private carrier just crept up in the discussion. He asked whether the other matters discussed would come as separate bills or whether they are actually being covered at this time. Chairman Banner said if no other bills come out, they will be amended out of the bill. He said there are three bills to be heard next week that touch on the same general area.

There being no further discussion the meeting was adjourned at 4:46 p.m.

Respectfully submitted,

Sylvia Mays Sylvia Mays, Assembly Attache

#### TEMPORARY TOTAL DISABILITY COMPENSATION

Paid while a claimant cannot physically work.

Terminated when any doctor releases claimant to return to work.

Temporary Total Disability Compensation is 66-2/3% of 150% of the State Average Monthly Wage or 66-2/3% of the actual wage being earned on the date of injury, whichever is less.

The maximum compensation for 1979 fiscal year = \$918.05/mo.

 $$918.05 \times 150\% = $1,377.08 \times 66-2/3 = $918.05$ 

The maximum compensation for 1978 fiscal year = \$858.29/mo. (injuries occurring between July 1, 1977 to June 30, 1978)

 $$858.29 \times 150\% = $1,287.44 \times 66-2/3 = $858.29$ 

The maximum compensation for 1977 fiscal year = \$807.33/mo. (injuries occurring between July 1, 1976 to June 30, 1977)

 $$807.33 \times 150\% = $1,211.00 \times 66-2/3 = $807.33$ 

The maximum compensation for 1976 fiscal year = \$761.47/mo. (injuries occurring between July 1, 1975 to June 30, 1976)

 $$761.47 \times 150\% = $1,142.21 \times 66-2/3 = $761.47$ 

The maximum compensation for 1975 fiscal year = \$484.99/mo. (injuries occurring between July 1, 1974 to June 30, 1975)

 $$484.99 \times 150\% = $727.48 \times 66-2/3 = $484.99$ 

#### PERMANENT PARTIAL DISABILITY AWARD

Permanent Partial Disability is the percentage of impairment which a claimant suffers as the result of the injury. All percentages of disability are rated according to the A.M.A. Guides.

Assume that the injury occurred on June 17, 1976. Claimant was earning \$563.00/mo., female, born on Jan. 10, 1932. Temporary Total Disability Compensation was terminated on April 10, 1977 and a 5% Permanent Partial Disability has been assessed.

		<pre>installment payment = % of impairment X . wage.</pre>	005 X average
	&	of impairment X .005 X =	
	X	12 =	
Clai	mant	receives a year until age 65.	
		OR	
		Calculation of PPD Lump Sum Award	
(1)	Eff	ective Date of Award (year, month)	**************************************
(2)	Dat	e of Birth (year, month)	
(3)		<pre>imant's Age at Award Effective Date 1) minus (2) (year, months)</pre>	
(4)	Mon	thly Award = X .005 X 8 BB = mo. wage	\$
(5)		tor From Table Corresponding to Age and of Claimant	-
(6)	Cal	culation of Lump Sum:	
	a)	$(4) \times (5) =$	\$
	b)	Minimum lump sum = 1/2 X % of disability X average monthly wage * =	
		1/2 X =	\$
	c)	greater of (a) and (b) =	\$
	d)	overpayments, advance payments, and lump sums previously paid	\$
	e)	Net Lump Sum Payable = (c) - (d) =	\$

#### PERMANENT TOTAL DISABILITY COMPENSATION

Paid when a claimant is 100% or totally disabled as a result of the industrial injury and will never work again. Permanent Total Disability Compensation is also paid to the surviving spouse of a fatally injured worker.

Permanent Total Disability = Paid for Life

66-2/3% of 150% of average state wage	)	
•	)	Whichever
· or	)	is
	)	Less
66-2/3% of salary on date of injury	)	

#### Most claimant could receive:

If	injured	from	July	1,	1978	to	June	30,	1979	=	\$918.05/mo.
If	injured	from	July	1,	1977	to	June	30,	1978	=	\$858.29/mo.
If	injured	from	July	1,	1976	to	June	30,	1977	=	\$807.33/mo.
If	injured	from	July	1,	1975	to	June	30,	1976	=	\$761.47/mo.
Ιf	injured	from	July	1,	1974	to	June	30,	1975	=	\$484.99/mo.

#### Exhibit "B"

#### PRESENT HEARING SYSTEM

INJURY

#### CLAIM FILED

No time limit for acceptance or denial of claim by N.I.C.

DENIED

ACCEPTED

REQUEST FOR PROPENING

N.I.C. DISABILITY PREVENTION TEAM

30 days to appeal

30 days to appeal

N.I.C. CLAIMS LEVEL HEARING

(Now called Hearings Examiner.)

30 days to appeal

N.I.C. COMMISSION LEVEL

Commissioners have 30 days to have hearing or review.

HEARING

OR

REVIEW

- 1. Decision rendered within 30 days of hearing or review.
- 2. Only final determinations can be appealed.

#### Commission orders:

- 1. Medical Review Board or
- Further medical investgation or
   Out of state medical evaluation.

30 days to appeal

#### APPEALS OFFICER

- 1. Hearing held within 90 days of receipt of notice of appeal.
- 2. Decision rendered within 120 days from date of hearing.

Appeals Officer orders:

- 1. Medical review Board or
- 2. Further medical
  - investigation or
- Out of state medical
- evaluation or

4. Rehabilitation

30 days to appeal

DISTRICT COURT

March 5, 1979

# PROPOSAL TO ALLOW NEVADA EMPLOYERS TO SELF INSURE WORKMEN'S COMPENSATION RISKS (PORTION OF AB - 84)

#### FACTORS FOR CONSIDERATION

- (1) Employers in 47 of 50 states allow some choice in covering workmens compensation risks North Dakota, Wyoming and Nevada are the only states with mandatory state funds. All other states allow either self insurance, commercial insurance, or both.
- (2) The non-competitive situation in Nevada has allowed the N.I.C. to charge whatever premium it deems warranted, and employers have no choice but to pay such charges.
- (3) Following are some pertinent data with respect to N.I.C. operations for the five year period from July 1, 1973 to June 30, 1978:
  - (a) Reserves (mostly cash and investments) increased from \$58,981,000 to \$188,958,000 an increase of 220%.
  - (b) Claims paid (exclusive of reserve increases) increased from \$19,858,000 in fiscal year 1974 to \$41,251,000 in fiscal year 1978, an increase of only 108%.
  - (c) Reserves at June 30, 1978 were 4.58 times fiscal 1978 expenses and claim payments.
- (4) Employer's who believe they could self insure workmen's compensation risks more economically than through the N.I.C. should be allowed to do so.

#### NEVADA INDUSTRIAL COMMISSION

EXHIBIT C

# RESERVES AND CLAIMS EXPERIENCE 000 Omitted

	RESERVE BALANCES AT JUNE 30					
	1973	1974	1975	1976	<u> 1977 </u>	1978
Reserves:						
Compensation benefits	\$40,824	\$55,184	\$69,968	\$ 87,223	\$109,663	\$121,402
Medical benefits	8,335	9,337	10,995	17,506	29,489	35,283
Occupational disease	•	•	•			
benefits	1,153	873	1,374	2,405	3,099	3,452
Self-rater excess loss			128	422	684	1,151
Claim administration	1,046	1,308	1,621	4,635	6,280	7,111
Contingencies	7,623	12,537	15,015	11,856	12,439	20,559
TOTAL RESERVES Retroactive adjustment	\$58 <b>,</b> 981	\$79,239	\$99,101	\$124,047	\$161,654 <u>19,922</u> \$141,732	\$188,958 (A

#### EXCESS OF PREMIUMS EARNED OVER EXPENSES AND CLAIMS PAID OUT

curred claims and					
dministrative expenses	\$40,116	\$43,720	\$59,680	\$ 71,581	\$ 88,477
Add beginning reserves	58,981	79,239	99,101	124,047	141,732
	\$ 99,097	\$122,959	\$158,781	\$195,628	\$ 230,209
Less ending reserve	79,239	99,101	124,047	161,654	188,958
Expenses and claims paid out	\$ 19,858	\$23,858	\$34,734	\$ 33,974	\$ 41,251
Premiums earned	\$ <u>43,630</u>	\$43,115	\$53,627	\$72,469	\$ 92,492
Excess of premiums earned over expenses and claims paid out	\$23,772	\$19,257	\$18,893	\$38,495	\$51,241

<sup>(</sup>A) After deducting \$20,000 dividend declared (but not yet paid) to be refunded to employers based on accident experience record.

AL G. CURTIS

JAMES S. LORIGAN

WM. J. CROWELL LEGAL ADVISOR

GENERAL COUNSEL FRANK A. (SKIP) KING

GENERAL COUNSEL

WARD M. SUTCLIFFE GENERAL COUNSEL

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#### NEVADA INDUSTRIAL COMMISSION

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LEGAL DEPARTMENT

ADDRESS ALL CORRESPONDENCE TO NEVADA INDUSTRIAL COMMISSION

REPLY TO

P.O. Box 42729 Las Vegas, Nevada 89104

March 2, 1979

COMMISSIONER REPRESENTING LABOR

COMMISSIONER REPRESENTING INDUSTRY

Assembly Committee on Labor and Management

Re: AB 84 - Sections 12 through 17

#### Gentlemen:

It is commendable that you have addressed the problem of delay in administrative hearings. I feel that the current hearings system can and should be speeded up for the benefit of employees and employers. However, I feel that some of the provisions of AB 94 are unworkable and would result in (1) greater delays and (2) more litigation over procedural technicalities.

For example, Section 12, subsection 2 requires the Commission to send out notice of hearing within three days after receiving notice of appeal, but is silent as to when the hearing must be held. More time should be given to allow an orderly scheduling of hearings, and there should be a time-limit for setting the hearing. Thirty (30) days would be a reasonable time-limit. Likewise, thirty (30) days would be a reasonable time-period for issuance of the findings of fact and written decision. Although most decisions can be issued sooner, experience has shown that employee and employer representatives often request additional time in order to submit additional evidence following the hearing.

Likewise, Section 14 is unworkable in that hearings cannot be cancelled, continued or adjourned except by mutual agreement. The present practice is to discourage continuances or cancellations but to allow them if good cause is shown, such as unavailability of witnesses, attorneys, business agents and employer representatives. Such a rigid requirement defeats the purpose of Section 13 which mandates that these hearings be informal and further defeats the primary objective of all hearings, fact finding.

The scheme for Commission review set forth in Section 15 is too complicated and would give rise to procedural issues on appeal.

Assembly Committee on Labor and Management March 2, 1979 -page 2-

The ninety (90) day period for filing notice of appeal to the Appeals Officer, Section 16, is far too long. If the Committee's goal is to shorten the overall administrative process, then there appears to be no reason whatsoever for tripling the current time-limit for filing an appeal. The current thrity (30) day period set by regulation is a traditional time-period.

Enclosed is a proposed amendment to NRS 616.542. This would cut in half the current 120 day time-period for writing the Appeals Officer decision, and it would not have a disruptive effect on the current system.

In summary, this Legislature has in the past simplified the administrative hearings process and has thereby created perhaps the best workmen's compensation appeals system in the country. What you are proposing to do with AB 84 would complicate the administrative hearings process, would result in more litigation, more complicated issues on litigation, more attorney involvement, and no great savings of time, if any.

Respectfully submitted,

NEVADA INDUSTRIAL COMMISSION

FRANK A. "SKIP" KING General Counsel

FAK:cs enclosure

#### PROPOSED AMENDMENT TO A.B.-84

- SECTION 12. 1. Any person subject to the jurisdiction of the Nevada industrial commission pursuant to chapter 616 or chapter 617 of the Nevada Revised Statutes may request a hearing before the commission by filing a notice of request for a hearing.
- 2. The Nevada industrial commission is required to supply a "notice of request for hearing" form to any person who requests said form.
- SECTION 13. 1. Within five days after the receipt of the notice of request for hearing the commission must cause the matter to be set and the hearing must be held within 30 days. This hearing may be held before the commission or whomever the commission designates but only one hearing or review on any issue may be held by the Nevada industrial commission.
- 2. Written notice of any hearing must be served upon or mailed to all interested parties at least 15 days before the matter is to be heard.
- 3. The hearing held by the Nevada industrial commission must be informal and a record need not be made. The rules of evidence shall not apply but testimony which is immaterial or irrelevant to the proceedings may be excluded.
- 4. Upon conclusion of the hearing the Nevada industrial commission must make written findings of facts and render a decision within 15 days. A copy of said findings of facts and decision and a right to appeal form must be served upon or mailed to all interested parties. Upon proper service this decision is binding on all parties.
- SECTION 14. 1. Any aggrieved party may appeal a decision of the Nevada industrial commission by filing a notice of appeal with the appeals officer within 60 days after the decision is filed.
- 2. Within five days after notice of appeal is filed the matter must be set for a hearing and the hearing must be held within 45 days. A matter may be continued upon written stipulation of all parties but must be reset for a hearing to be held within 45 days after the stipulation. Immediately upon setting the hearing notice shall be sent to all interested parties.
- SECTION 15. 1. The hearing before the appeals officer must be recorded and the rules of evidence apply.

- 2. Any relevant matter raised at the hearing before the appeals officer must be heard on its merits and new evidence may be introduced on any subject before the appeals officer.
- 3. Upon request of any party or the appeals officer the record must be transcribed and a transcript filed within 30 days after any request for filing.
- 4. The appeals officer shall have seven days after the hearing in which to order a transcript.
- 5. The appeals officer shall render a decision within 30 days after the transcript has been filed. If no transcript was ordered within the 7-day period following the hearing the appeals officer has 30 days from the date of hearing to render a decision.
- 6. The appeals officer may affirm, modify or reverse any decision made by the Nevada industrial commission and issue any necessary and proper order to effectuate his decision. The decision of the appeals officer becomes binding when filed with all parties.
- 7. An order of the appeals officer is enforceable upon application to the district court.

SECTION 16. This act shall become effective upon passage and approval.

SECTION 17 - deleted.

# PROPOSED AMENDMENT TO A.B.-84

Submitted by Patricia Becker on behalf of the Office of the State Industrial Attorney.

Amend Section 24, subsection 2 to read as follows:

"The state industrial attorney shall prepare and submit a budget for the maintenance and operation of said office in the same manner as other state agencies. Said budget is to be administered by the state budget division."

#### PROPOSED AMENDMENT TO A.B.-84

Submitted by Patricia Becker on behalf of the Office of the State Industrial Attorney.

Amend Section Section 39, subsection 2 to read as follows:

"The appeals officers shall jointly prepare and submit a budget for the maintenance and operation of their office in the same manner as other state agencies. All salaries and other expenses of their office must be paid from the state insurance fund and administered by the state budget division, within the limit of the legislative appropriation for this purpose."

#### PROPOSED AMENDMENT TO A.B.-84

Submitted by Patricia Becker on behalf of the Office of the State Industrial Attorney.

Amend Section 35, subsection 7 to read as follows:

"The commission or the self-insured employer must either accept or deny responsibility for compensation under this chapter or chapter 617 of NRS within 30 days after the notice provided for in this section is received."

Date	3-6-79	į

### LABOR & MANAGEMENT COMMITTEE

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# LABOR & MANAGEMENT COMMITTEE

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