1	H. B. 2396
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3 4 5	(By Delegates Fleischauer, Miley, Brown, Caputo, Longstreth and D. Poling)
6	[Introduced January 12, 2011; referred to the
7	Committee on the Judiciary then Finance.]
8	FISCAL
9	NOTE
10	A BILL to amend and reenact $\$23-5-7$ of the Code of West Virginia,
11	1931, as amended, relating to requiring review and approval of
12	final settlements of Workers' Compensation awards.
13	Be it enacted by the Legislature of West Virginia:
14	That §23-5-7 of the Code of West Virginia, 1931, as amended,
15	be amended and reenacted to read as follows:
16	ARTICLE 5. Review.
17	§23-5-7. Compromise and settlement.
18	(a) With the exception of medical benefits for nonorthopedic
19	occupational disease claims, the claimant, the employer and the
20	workers' compensation commission, <u>the</u> Insurance Commissioner, <del>the</del>
21	successor to the commission, other private insurance carriers
22	carrier and self-insured employers or self-insured employer,
23	whichever is applicable, and the claimant may negotiate a final
24	settlement of any and all issues in a claim, and any settlement
25	agreement may provide for a lump-sum payment or a structured

1 payment plan, or any combination thereof, or any other basis as the 2 parties may agree, including those settlements made pursuant to 3 article two-c of this chapter. Every settlement proposal must be 4 submitted to the compromise settlement division for review and 5 approval in accordance with this section and the rules promulgated 6 hereunder upon a finding that the settlement is in the best 7 interests of the claimant or, if the claimant is deceased, his or 8 her dependents, the employer and the state. wherever the claim is 9 in the administrative or appellate processes. If the employer is 10 not active in the claim, the commission, the successor to the 11 commission, other private insurance carriers and self-insured 12 employers, whichever is applicable, may negotiate a final 13 settlement of any and all issues in a claim except for medical 14 benefits for nonorthopedic occupational disease claims with the 15 claimant and said settlement shall be made a part of the claim 16 <del>record.</del>

17 (b) The Insurance Commissioner shall establish within the 18 office of judges a compromise settlement division to review each 19 settlement subject to approval and to issue a recommendation to the 20 chief administrative law judge.

21 (c) Every settlement proposal, including settlements involving 22 the Insurance Commissioner acting as administrator of claims 23 involving funds created in article two-c of this chapter, must be 24 on forms prescribed by the Insurance Commissioner.

1 (d) (1) Upon receipt of a completed application for approval
2 of a settlement proposal, the compromise settlement division shall,
3 after consideration of those factors contained herein and as
4 prescribed by rule, issue its recommendation to the chief
5 administrative law judge within thirty days.

6 (2) Upon review of such a recommendation, the chief 7 administrative law judge shall enter an order either:

8 (A) Adopting the recommendation as filed if he or she finds 9 that the settlement is in the best interests of the claimant and 10 his or her dependents, the employer and the state; or

11 <u>(B) Rejecting the recommendation and, if the chief judge deems</u> 12 <u>it advisable, remanding the matter to the settlement review</u> 13 <u>division with directions to resubmit the recommendation after</u> 14 reconsideration of any issues designated in the remand order.

(3) Settlements of claims or orders approving settlements issued pursuant to this section are not subject to further review, including a hearing or review under sections thirteen and fourteen, article two, chapter thirty-three of this code, respectively, and, except in cases of fraud, no issue that is the subject of <u>such a an</u> approved settlement agreement may be reopened by any party. including the commission, the successor to the commission, other private insurance carriers and self-insured employers, whichever is applicable. Any settlement agreement may provide for a lump-sum payment or a structured payment plan, or any combination thereof,

1 or any other basis as the parties may agree.

2 <u>(e)</u> If a self-insured employer later fails to make the agreed-3 upon payment, the commission <u>Insurance Commissioner</u> shall assume 4 the obligation to make the payments and shall recover the amounts 5 paid or to be paid from the self-insurer employer and its sureties 6 or guarantors or both as provided in section five and five-a, 7 article two of this chapter.

8 <u>(f) The Insurance Commissioner shall promulgate rules in</u> 9 <u>accordance with subsection (b), section ten, article two, chapter</u> 10 <u>thirty-three of this code, to establish standards and procedures</u> 11 <u>for the review and approval of all settlement proposals.</u>

12 Standards for review include at a minimum, the following:

13 <u>(1) The extent to which the proposal avoids undue expense,</u> 14 litigation or extreme hardship;

15 (2) The possible shifting of costs for future medical and 16 other expenses of the claimant to the state or other persons;

17 <u>(3) Verification that the claimant fully understands the</u> 18 <u>impact of the settlement on future insurance claims relating to the</u> 19 injury; and

20 <u>(4) Administrative penalties for noncompliance with this</u> 21 <u>section.</u>

Each settlement agreement shall provide the toll free number A of the West Virginia State Bar Association and shall provide the injured worker with five business days to revoke the executed

1 agreement. The Insurance Commissioner may void settlement 2 agreements entered into by an unrepresented injured worker which 3 are determined to be unconscionable pursuant to criteria 4 established by rule of the commissioner. 5 The amendments to this section enacted during the regular 6 session of the Legislature in the year one thousand nine hundred 7 ninety-nine shall apply to all settlement agreements executed after

8 the effective date.

NOTE: The purpose of this bill is to require review and approval of final settlements of Workers' Compensation awards.

Strike-throughs indicate language that would be stricken from the present law, and underscoring indicates new language that would be added.