1		AN ACT relating to the recognition and registration of professional employer
2	orga	nizations.
3	Be it	enacted by the General Assembly of the Commonwealth of Kentucky:
4		→SECTION 1. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
5	REA	AD AS FOLLOWS:
6	<u>The</u>	General Assembly finds and declares that:
7	<u>(1)</u>	Professional employer organizations provide a valuable service to commerce and
8		the citizens of this Commonwealth by increasing the opportunities of employers
9		to develop cost-effective methods of satisfying their personnel requirements and
10		providing employees with access to certain employment benefits which might not
11		otherwise be available; and
12	<u>(2)</u>	Professional employer organizations operating in this Commonwealth should be
13		properly recognized and regulated.
14		→SECTION 2. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
15	REA	AD AS FOLLOWS:
16	<u>As u</u>	sed in Sections 1 to 11 of this Act, unless the context requires otherwise:
17	<i>(1)</i>	"Client" means any person who enters into a professional employer agreement
18		with a professional employer organization;
19	<u>(2)</u>	"Co-employer" means either a professional employer organization or a client;
20	<i>(</i> 3 <i>)</i>	"Co-employment relationship" means a relationship which is intended to be an
21		ongoing relationship rather than a temporary or project-specific relationship
22		wherein the rights, duties, and obligations of an employer that arise out of an
23		employment relationship have been allocated between co-employers pursuant to a
24		professional employer agreement under Sections 1 to 11 of this Act, under which:
25		(a) The professional employer organization is entitled to enforce only those
26		employer rights and is subject to only those obligations specifically allocated
27		to the professional employer organization by the professional employer

Page 1 of 38
HB050610.100 - 823 - XXXX

1		agreement or Sections 1 to 11 of this Act;
2		(b) The client is entitled to enforce those rights, and obligated to provide and
3		perform those employer obligations, allocated to the client by the
4		professional employer agreement and Sections 1 to 11 of this Act; and
5		(c) The client is entitled to enforce any right and obligated to perform any
6		obligation of an employer not specifically obligated to the professional
7		employer organization by the professional employer agreement or Sections
8		1 to 11 of this Act;
9	<u>(4)</u>	"Covered employee" means an individual having a co-employment relationship
10		with a professional employer organization and a client who meets the following
11		<u>criteria:</u>
12		(a) The individual has received written notice of co-employment with the
13		professional employer organization; and
14		(b) The individual's co-employment relationship is pursuant to a professional
15		employer agreement under Sections 1 to 11 of this Act.
16		Individuals who are officers, directors, shareholders, partners, and managers of
17		the client will be covered employees, except to the extent the professional
18		employer organization and the client have expressly agreed in the professional
19		employer agreement that those individuals would not be covered employees,
20		provided the individuals meet the criteria of this subsection and act as operational
21		managers or perform day-to-day operational services for the client. A covered
22		employee shall not be considered a party to the professional employer agreement;
23	<u>(5)</u>	"Insurer" includes every person engaged as principal and as indemnitor, surety,
24		or contractor in the business of entering into contracts of insurance as defined in
25		<u>KRS 304.1-040;</u>
26	<u>(6)</u>	"Person" means any individual, partnership, corporation, limited liability
27		company, association, or any other form of legally recognized entity;

1	(7)	170	ofessional employer agreement means a written contract by and between a
2		<u>clier</u>	nt and a professional employer organization that provides for the:
3		<u>(a)</u>	Co-employment of covered employees;
4		<u>(b)</u>	Allocation of employer rights and obligations between the client and the
5			professional employer organization with respect to the covered employees;
6			<u>and</u>
7		<u>(c)</u>	Assumption of responsibilities required under Sections 1 to 11 of this Act by
8			the client and the professional employer organization;
9	<u>(8)</u>	(a)	"Professional employer organization" means any person engaged in the
10		<u>busi</u>	ness of providing professional employer services or conducting business as a
11		<u>staf</u> j	f leasing company, registered staff leasing company, employee leasing
12		<u>com</u>	pany, administrative employer, or other similar name.
13		<u>(b)</u>	The following shall not be considered to be a "professional employer
14			organization":
15			1. Persons providing temporary help services;
16			2. Independent contractor arrangements by which a person assumes
17			responsibility for the product produced or service performed by the
18			person or the person's agents and retains and exercises primary
19			direction and control over the work performed by the individuals
20			whose services are supplied under the arrangements; and
21			3. Arrangements wherein a person, whose principal business activity is
22			not entering into professional employer arrangements and which does
23			not hold itself out as a professional employer organization, shares
24			employees with a commonly owned company within the meaning of
25			Section 414(b) and (c) of the Internal Revenue Code of 1986, as
26			amended;
27	<u>(9)</u>	''Pro	ofessional employer organization group" means two (2) or more professional

Page 3 of 38
HB050610.100 - 823 - XXXX

I	employer organizations that are majority owned or commonly controlled by the
2	same entity, parent, or controlling person or persons;
3	(10) "Professional employer services" means the service of entering into a co-
4	employment relationship under Sections 1 to 11 of this Act in which all or a
5	majority of the employees providing services to a client or to a division or work
6	unit of a client are covered employees;
7	(11) "Registrant" means a professional employer organization registered under
8	Sections 1 to 11 of this Act; and
9	(12) "Temporary help service" means services consisting of a person:
10	(a) Recruiting and hiring its own employees;
11	(b) Finding other organizations that need the services of those employees;
12	(c) Assigning those employees to perform work at or services for the other
13	organizations to support or supplement the other organizations' workforce,
14	or to provide assistance in special work situations, including but not limited
15	to employee absences, skill shortages, seasonal workloads, or performing
16	special assignments or projects; and
17	(d) Customarily attempting to reassign the employees to other organizations
18	when they finish each assignment.
19	→SECTION 3. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
20	READ AS FOLLOWS:
21	(1) Nothing in any professional employer agreement, or in Sections 1 to 11 of this
22	Act, shall:
23	(a) Affect, modify, or amend any collective bargaining agreement, or the rights
24	or obligations of any covered employee, client, or professional employer
25	organization, covered by the federal Railway Labor Act or the National
26	Labor Relations Act;
27	(b) Affect, modify, or amend any contractual relationship or restrictive

1		covenant between a covered employee and any client in effect at the time a
2		professional employer agreement becomes effective or any contractual
3		relationship or restrictive covenant that is entered into subsequently
4		between a client and a covered employee. A professional employer
5		organization shall have no responsibility in connection with, or arising out
6		of, any existing or new contractual relationship or restrictive covenant
7		between the covered employee and client unless the professional employer
8		organization has specifically agreed otherwise in writing;
9	<u>(c)</u>	Diminish, abolish, or remove rights of covered employees to a client or
10		obligations of the client to a covered employee existing prior to the effective
11		date of the professional employer agreement;
12	<u>(d)</u>	Create any new or additional enforceable right of a covered employee
13		against a professional employer organization that is not specifically
14		provided by the professional employer agreement or Sections 1 to 11 of this
15		Act;
16	<u>(e)</u>	Affect, modify, or amend any state, local, or federal licensing, registration,
17		or certification requirement applicable to any client or covered employee. A
18		covered employee who must be licensed, registered, or certified according to
19		statute or regulation is deemed solely an employee of the client for purposes
20		of any such license, registration, or certification requirement. A
21		professional employer organization shall not be deemed to engage in any
22		occupation, trade, profession, or other activity that is subject to licensing,
23		registration, or certification requirements, or is otherwise regulated by a
24		governmental entity, solely by entering into and maintaining a co-
25		employment relationship with a covered employee who is subject to the
26		requirements or regulations. A client shall have the sole right of direction
27		and control of the professional or licensed activities of a covered employee

1		and of the client's business. Covered employees and clients shall remain
2		subject to regulation by the regulatory agency responsible for licensing,
3		registration, or certification of the covered employees or clients; or
4		(f) Include language in a professional employer agreement or be construed in
5		Sections 1 to 11 of this Act to abrogate any constitutional, statutory, or
6		common law cause of action of persons not a party to the professional
7		employer agreement.
8	<u>(2)</u>	For purposes of determining tax credits or other economic incentives provided by
9		the Commonwealth based on employment, covered employees shall be deemed
10		employees solely of the client. A client shall be entitled to the benefit of any tax
11		credit, economic incentive, or other benefit arising as the result of the
12		employment of a covered employee of the client. Notwithstanding that the
13		professional employer organization is the federal form W-2 wage and tax
14		statement reporting employer, the client shall continue to qualify for the tax
15		credit, economic incentive, or benefit. If the grant or amount of any incentive is
16		based on the number of employees, then each client shall be treated as employing
17		only those covered employees that are co-employed by each client. Covered
18		employees working for other clients of the professional employer organization
19		shall not be counted. Each professional employer organization shall provide,
20		upon request by a client or any state agency responsible for administration of any
21		tax credit, economic incentive, or benefit, information reasonably required to
22		support any request, claim, application, or any other action by a client seeking
23		the tax credit, economic incentive, or benefit, including wage information, and
24		locations and duties of covered employees.
25	<u>(3)</u>	With respect to a bid, contract, purchase order, or agreement entered into with
26		the Commonwealth or any political subdivision of the Commonwealth, a client
27		company's status or certification as a small, minority-owned, disadvantaged, or

1	woman-owned business enterprise or as a historically underutilized business
2	shall not be affected because the client company has entered into an agreement
3	with or uses the services of a professional employer organization.
4	→SECTION 4. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
5	READ AS FOLLOWS:
6	(1) A person engaged in providing professional employer services pursuant to a co-
7	employment relationship in which all or a majority of the employees of a client
8	are covered employees shall be registered under Sections 1 to 11 of this Act. A
9	person who is not registered under Sections 1 to 11 of this Act shall not offer or
10	provide professional employer services in this Commonwealth and shall not use
11	the names professional employer organization, PEO, staff leasing company,
12	employee leasing company, administrative employer, or any other name or title
13	representing professional employer services.
14	(2) Each applicant for registration under Sections 1 to 11 of this Act shall provide
15	the Department of Workers' Claims with the following:
16	(a) The name or names under which the professional employer organization
17	conducts business;
18	(b) The address of the principal place of business of the professional employer
19	organization and the address of each office it maintains in this
20	Commonwealth;
21	(c) The professional employer organization's taxpayer identification number or
22	federal and state employer identification number;
23	(d) A list, by jurisdiction, of each name under which the professional employer
24	organization has operated in the preceding five (5) years, including any
25	alternative names, names of predecessors, and, if known, successor
26	business entities;
27	(e) A statement of ownership, which shall include the name and evidence of the

Page 7 of 38 HB050610.100 - 823 - XXXX

1		business experience of any person that, individually or acting in concert
2		with one (1) or more other persons, owns or controls, directly or indirectly,
3		twenty-five percent (25%) or more of the equity interest in the professional
4		employer organization; and
5	<u>(f)</u>	1. A financial statement setting forth the financial condition of the
6		professional employer organization or professional employer
7		organization group.
8		2. At the time of the initial application for a new registration, the
9		applicant shall submit the most recent audit of the applicant, which
10		shall not be older than thirteen (13) months. Thereafter, a
11		professional employer organization or professional employer
12		organization group shall file a succeeding audit on an annual basis
13		within one hundred eighty (180) days after the end of the fiscal year.
14		3. An applicant may apply for an extension with the Department of
15		Workers' Claims, but any extension request shall be accompanied by a
16		letter from the auditors stating the reasons for the delay and the
17		anticipated date for completion of the audit.
18		4. The financial statement shall be prepared in accordance with
19		generally accepted accounting principles and audited by an
20		independent certified public accountant licensed to practice in the
21		jurisdiction in which the accountant is located, and shall be without
22		qualification as to the going concern status of the professional
23		employer organization.
24		5. A professional employer organization group may submit combined or
25		consolidated audited financial statements to meet the requirements of
26		this paragraph.
27		6. A professional employer organization that has not had sufficient

Page 8 of 38
HB050610.100 - 823 - XXXX

1		operating history to have audited financial statements based on at
2		least twelve (12) months of operating history shall meet the
3		requirements in Section 6 of this Act and present financial statements
4		reviewed by a certified public accountant.
5	<u>(3)</u>	Each professional employer organization operating within this Commonwealth
6		as of the effective date of this Act shall complete its initial registration no later
7		than one hundred eighty (180) days after the effective date of this Act. The initial
8		registration shall be valid until one hundred eighty (180) days from the end of the
9		professional employer organization's first fiscal year that is more than one (1)
10		fiscal year after the effective date of this Act.
11	<u>(4)</u>	Each professional employer organization not operating within this
12		Commonwealth as of the effective date of this Act shall complete its initial
13		registration prior to initiating operations within this Commonwealth. If a
14		professional employer organization not operating within this Commonwealth
15		becomes aware that an existing client that is not based in this Commonwealth
16		had employees and operations in this Commonwealth, the professional employer
17		organization shall either decline to provide professional employer services for
18		those employees or notify the Department of Workers' Claims within five (5)
19		business days of its knowledge of this fact and file a limited registration
20		application or file a full business registration if there are more than fifty (50)
21		covered employees. The Department of Workers' Claims may issue an interim
22		operating permit for the period the registration applications are pending if the
23		professional employer organization is currently registered or licensed by another
24		state and the Department of Workers' Claims determines it to be in the best
25		interests of the potential covered employees.
26	<u>(5)</u>	Within one hundred eighty (180) days after the end of the fiscal year, a registrant
27		shall renew its registration by notifying the Department of Workers' Claims of

1		any changes in the information provided in the registrant's most recent
2		registration or renewal. A registrant's existing registration shall remain in effect
3		during the pendency of a renewal application.
4	<u>(6)</u>	Professional employer organizations in a professional employer organization
5		group may satisfy the reporting and financial requirements of Sections 1 to 11 of
6		this Act on a combined or consolidated basis provided that each member of the
7		professional employer organization group guarantees the financial capacity
8		obligations under Sections 1 to 11 of this Act of each other member of the
9		professional employer organization group. In the case of a professional employer
10		organization group that submits a combined or consolidated audited financial
11		statement that includes entities that are not professional employer organizations
12		or that are not in the professional employer organization group, the controlling
13		entity of the professional employer organization group under the consolidated or
14		combined statement shall guarantee the obligations of the professional employer
15		organizations in the professional employer organization group.
16	<u>(7)</u>	(a) A professional employer organization is eligible for a limited registration
17		under Sections 1 to 11 of this Act if the professional employer organization:
18		1. Submits a properly executed request for limited registration on a form
19		provided by the Department of Workers' Claims;
20		2. Is domiciled outside this Commonwealth and is licensed or registered
21		as a professional employer organization in another state;
22		3. Does not maintain an office in this Commonwealth or directly solicit
23		clients located or domiciled within this Commonwealth; or
24		4. Does not have more than fifty (50) covered employees domiciled or
25		employed in this Commonwealth on any given day.
26		(b) A limited registration is valid for one (1) year and may be renewed.
27		(c) A professional employer organization seeking limited registration under

1		this subsection shall provide the Department of Workers' Claims with
2		information and documentation necessary to show that the professional
3		employer organization qualifies for a limited registration.
4		(d) Section 6 of this Act does not apply to applicants for limited registration.
5	<u>(8)</u>	The Department of Workers' Claims shall maintain a list of professional
6		employer organizations registered pursuant to Sections 1 to 11 of this Act that is
7		readily available to the public by electronic or other means.
8	<u>(9)</u>	The Department of Workers' Claims shall to the extent practical permit by
9		administrative regulation the acceptance of electronic filings, including
10		applications, documents, reports, and other filings required under Sections 1 to
11		11 of this Act. The Department of Workers' Claims may provide for the
12		acceptance of electronic filings and other assurance by an independent and
13		qualified assurance organization approved by the secretary that provides
14		satisfactory assurance of compliance acceptable to the Department of Workers'
15		Claims consistent with or in lieu of the requirements of this section and Section 6
16		of this Act, and other requirements of Sections 1 to 11 of this Act. The secretary
17		shall permit a professional employer organization to authorize an approved
18		assurance organization to act on behalf of the professional employer
19		organization in complying with the registration requirements of Sections 1 to 11
20		of this Act, including electronic filings of information and payment of
21		registration fees. Use of an approved assurance organization shall be optional for
22		a registrant. Nothing in this subsection shall limit or change the Department of
23		Workers' Claims' authority to register or terminate registration of a professional
24		employer organization or to investigate or enforce any provision of Sections 1 to
25		11 of this Act.
26	<u>(10)</u>	All records, reports, and other information obtained from a professional
27		employer organization under Sections 1 to 11 of this Act, except to the extent

1	necessary for the proper administration of Sections 1 to 11 of this Act by the
2	Department of Workers' Claims, shall be confidential and shall not be published
3	or open to public inspection other than to public employees in the performance of
4	their public duties.
5	(11) The Department of Workers' Claims may promulgate administrative regulations
6	and prescribe forms necessary to promote the efficient administration of this
7	section.
8	→ SECTION 5. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
9	READ AS FOLLOWS:
10	(1) Upon filing an initial registration statement pursuant to Sections 1 to 11 of this
11	Act, a professional employer organization shall pay an initial registration fee not
12	to exceed five hundred dollars (\$500) to the Department of Workers' Claims.
13	(2) Upon each annual renewal of a registration statement filed under Sections 1 to
14	11 of this Act, a professional employer organization shall pay a renewal fee not to
15	exceed two hundred fifty dollars (\$250) to the Department of Workers' Claims.
16	(3) Each professional employer organization seeking limited registration under
17	Section 4 of this Act shall pay a fee in the amount not to exceed two hundred fifty
18	dollars (\$250) to the Department of Worker's Claim upon initial application for
19	the limited registration and upon each annual renewal of limited registration.
20	→ SECTION 6. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
21	READ AS FOLLOWS:
22	Except as provided in Section 4 of this Act, each professional employer organization or
23	collectively each professional employer organization group shall either:
24	(1) Maintain positive working capital as indicated by current assets minus current
25	liabilities and defined by generally accepted accounting principles at registration
26	as reflected in the financial statements submitted to the Department of Workers'
27	Claims with the initial registration; or

Page 12 of 38
HB050610.100 - 823 - XXXX GA

1	<u>(2)</u>	Pro	vide a bond, irrevocable letter of credit, or securities with a minimum market
2		<u>valu</u>	ve equaling the deficiency plus one hundred thousand dollars (\$100,000) to
3		the .	Department of Workers' Claims if the professional employer organization or
4		<u>prof</u>	fessional employer organization group does not have positive working capital.
5		<u>The</u>	bond shall be held by a depository designated by the Department of Workers'
6		<u>Clai</u>	ims, securing payment by the professional employer organization of all taxes,
7		wag	es, benefits, or other entitlement due to or with respect to covered employees
8		sho	uld the professional employer organization fail to make payments when due.
9		→ S	ECTION 7. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
10	REA	AD AS	S FOLLOWS:
11	<u>(1)</u>	Exc	ept as specifically provided in Sections 1 to 11 of this Act, or in a professional
12		<u>emp</u>	loyer agreement, in each co-employment relationship:
13		<u>(a)</u>	The client shall be entitled to exercise all rights, and shall be obligated to
14			perform all duties and responsibilities, otherwise applicable to an employer
15			in an employment relationship;
16		<u>(b)</u>	The professional employer organization shall be entitled to exercise only
17			those rights, and shall be obligated to perform only those duties and
18			responsibilities, specifically required by Sections 1 to 11 of this Act or set
19			forth in the professional employer agreement. The rights, duties, and
20			obligations of the professional employer organization as co-employer with
21			respect to any covered employee shall be limited to those arising out of the
22			professional employer agreement and Sections 1 to 11 of this Act during the
23			term of co-employment by the professional employer organization of the
24			covered employee; and
25		<u>(c)</u>	Unless otherwise expressly agreed by the professional employer
26			organization and the client in a professional employer agreement, the client
27			retains the exclusive right to direct and control the covered employees as

1	necessary to conduct the client's business, to discharge any of the client's
2	fiduciary responsibilities, or to comply with any licensure requirements
3	applicable to the client of the covered employees.
4	(2) Except as otherwise provided in Sections 1 to 11 of this Act, the co-employment
5	relationship between the client and the professional employer organization, and
6	between each co-employer and each covered employee, shall be governed by the
7	professional employer agreement. Each professional employer agreement shall:
8	(a) Include the allocation of rights, duties, and obligations as set forth in
9	subsection (1) of this section;
10	(b) Provide that the professional employer organization shall have
11	responsibility to pay wages to covered employees; to withhold, collect, report
12	and remit payroll and unemployment taxes; and, to the extent the
13	professional employer organization has assumed responsibility in the
14	professional employer agreement, to make payments for employee benefits
15	for covered employees as a result of the outsourcing of payroll duty to the
16	professional employer organization by the client. As used in this paragraph,
17	"wages" does not include any obligation between a client and a covered
18	employee for payments beyond or in addition to the covered employee's
19	salary, draw, or regular rate of pay such as bonuses, commissions,
20	severance pay, deferred compensation, profit sharing, or vacation, sick, or
21	other paid time off, unless the professional employer organization has
22	expressly agreed to assume liability for payments in the professional
23	employer agreement;
24	(c) Provide that the professional employer organization shall have a right to
25	hire, discipline, and terminate a covered employee as may be necessary to
26	fulfill the professional employer organization's responsibilities under
27	Section 1 to 11 of this Act and the professional employer agreement. The

1		client shall have a right to hire, discipline, and terminate a covered
2		employee; and
3		(d) Provide that the responsibility to obtain and maintain workers
4		compensation coverage for covered employees from an insurer licensed to
5		do business in this Commonwealth and otherwise in compliance with all
6		applicable requirements shall be specifically allocated to either the client or
7		the professional employer organization in the professional employment
8		agreement.
9	<u>(3)</u>	A professional employer organization shall provide written notice to each covered
10		employee affected by a professional employer agreement entered into by a
11		professional employer organization. The notice shall set forth the general nature
12		of the co-employment relationship between and among the professional employer
13		organization, the client, and the covered employees. Nothing in this subsection
14		shall create a presumption of liability against a professional employer
15		organization for the acts, errors, or omissions of the covered employees.
16		Notwithstanding any provision to the contrary, the statute of limitations for a
17		claim of a covered employee against a professional employer organization shall
18		not begin to run until the covered employee knew or should have known about
19		the professional employer organization agreement and the identity of the
20		professional employer organization, but in no event shall the statute of
21		limitations be more than one (1) year from the date the original lawsuit was
22		timely filed by the covered employee. Nothing in this subsection shall limit the
23		existing statute of limitations for any causes of action contained in the original
24		lawsuit for the covered employee.
25	<i>(4)</i>	Except to the extent otherwise expressly provided by the applicable professional
26		employer agreement:
27		(a) A client shall be solely responsible for workplace safety and for the quality

1		and adequacy of the goods and services produced or sold in the client's
2		business. Nothing in Sections 1 to 11 of this Act shall limit an injured
3		workers' ability to recover increased compensation under KRS 342.165
4		from the co-employer;
5	<u>(b)</u>	A client shall be solely responsible for directing, supervising, training,
6		retaining, and controlling the work of the covered employees with respect to
7		the business activities of the client and solely responsible for the acts,
8		errors, or omissions of the covered employees with regard to these activities.
9		Nothing in this subsection shall create a presumption of liability against a
10		professional employer organization for the acts, errors, or omissions of the
11		covered employees. Notwithstanding any provision to the contrary, the
12		statute of limitations for a claim of an injured party who is not a covered
13		employee against a professional organization shall not begin to run until
14		the injured party who is not a covered employee knew or should have
15		known about the professional employer organization agreement and the
16		identity of the professional employer organization, but in no event shall the
17		statute of limitations be more than one (1) year from the date the original
18		lawsuit was timely filed by the injured party who is not a covered employee.
19		Nothing in this paragraph shall limit the existing statute of limitations for
20		any causes of action contained in the original lawsuit for the injured party
21		who is not a covered employee.
22	<u>(c)</u>	A client shall not be liable for the acts, errors, or omissions of a
23		professional employer organization, or of any covered employee of the client
24		and a professional employer organization when the covered employee is
25		acting under the express direction and control of the professional employer
26		organization;
27	(d)	A professional employer organization shall not be liable for the acts, errors,

1	<u>or</u>	omissions of a cuent or of any coverea employee of the cuent when the
2	<u>co</u>	vered employee is acting under the express direction and control of the
3	<u>cli</u>	ent;
4	(e) No	othing in this subsection shall serve to limit any contractual liability or
5	<u>ob</u>	ligation specifically provided in the written professional employer
6	ag	reement; and
7	(f) A	covered employee is not, solely as a result of being a covered employee of
8	<u>a</u>	professional employer organization, an employee of the professional
9	em	ployer organization for the purposes of general liability insurance,
10	fid	lelity bonds, surety bonds, employer's liability which is not covered by
11	<u>wo</u>	orkers' compensation, or liquor liability insurance carried by the
12	pro	ofessional employer organization unless the covered employees are
13	inc	cluded by specific reference in the professional employer agreement and
14	<u>ap</u>	plicable prearranged employment contract, insurance contract, or bond.
15	(5) A profes	ssional employer organization under Sections 1 to 11 of this Act is not
16	engagea	in the sale of insurance or in acting as a third-party administrator by
17	providin	g professional employer services which include services and employee
18	<u>benefit j</u>	plans for covered employees.
19	(6) For put	rposes of the Commonwealth or any city, county, or other political
20	<u>subdivis</u>	ion thereof:
21	<u>(a) Co</u>	overed employees whose services are subject to sales tax shall be deemed
22	<u>the</u>	e employees of the client for purposes of collecting and levying sales tax
23	<u>on</u>	the services performed by the covered employee. Nothing contained in
24	<u>Se</u>	ctions 1 to 11 of this Act shall relieve a client of any sales tax liability
25	<u>wi</u>	th respect to its goods or services;
26	(b) An	ny tax or assessment imposed upon professional employer services or any
27	<u>bu</u>	siness license or other fee which is based upon gross receipts shall allow

1	a deduction for the gross income or receipts of the business derived from
2	performing professional employer services that is equal to that portion of
3	the fee charged to a client that represents the actual cost of wages and
4	salaries, benefits, workers' compensation, payroll taxes, withholding, or
5	other assessments paid to or on behalf of a covered employee by the
6	professional employer organization under a professional employer
7	agreement;
8	(c) Any tax or assessment or mandated expenditure on a per capita or per
9	employee basis shall be assessed against the client for covered employees
10	and against the professional employer organization for its employees who
11	are not covered employees co-employed with a client. Benefits or monetary
12	consideration that meet the requirements of mandates imposed on a client
13	and that are received by covered employees through the professional
14	employer organization either through payroll or through benefit plans
15	sponsored by the professional employer organization shall be credited
16	against the client's obligation to fulfill the mandates; and
17	(d) In the case of a tax or assessment imposed or calculated upon the basis of
18	total payroll, the professional employer organization shall be eligible to
19	apply any small business allowance or exemption available to the client for
20	the covered employees for purpose of commuting the tax.
21	→SECTION 8. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
22	READ AS FOLLOWS:
23	(1) Any professional employer organization whose workers' compensation insurance
24	has been terminated within the past five (5) years in any jurisdiction due to a
25	determination that a professional employer organization arrangement was being
26	utilized to avoid premiums, taxes, or assessments otherwise payable by clients
27	shall be ineligible to register with the Department of Workers' Claims or to

1	remain registered, if previously registered.
2	(2) A client shall fulfill its statutory responsibility to secure benefits for covered
3	employees under this chapter by purchasing and maintaining a standard
4	workers' compensation policy approved by the commissioner of the Department
5	of Workers' Claims. A client may fulfill that responsibility by contracting with a
6	professional employer organization to secure coverage. Where a client contracts
7	with a professional employer organization to secure coverage for a portion of its
8	employees, a client shall obtain and maintain workers' compensation coverage in
9	compliance with KRS Chapter 342 for all employees not covered in the co-
10	employment relationship. In either event, it shall be the responsibility of the client
11	to maintain in its files, at all times, the certificate of insurance, or a copy thereof,
12	evidencing the existence of the required insurance. The exposure and experience
13	of the client shall be used in determining the premium for the policy and shall
14	include coverage for all covered employees.
15	(3) A temporary help service shall be deemed the employer of a temporary worker
16	and shall be subject to this chapter.
17	→SECTION 9. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
18	READ AS FOLLOWS:
19	(1) A client and a registered professional employer organization shall each be
20	deemed an employer under the laws of this Commonwealth for purposes of
21	sponsoring retirement and welfare benefit plans for its covered employees.
22	(2) A fully insured welfare benefit plan offered to the covered employees of a
23	professional employer organization shall be treated for the purposes of state law
24	as a single employer welfare benefit plan.
25	(3) For purposes of sponsoring retirement and welfare benefit plans for its covered
26	employees, a professional employer organization shall be considered the
27	employer of all of its covered employees, and all covered employees of one (1) or

Page 19 of 38 HB050610.100 - 823 - XXXX GA

1	more clients participating in a health benefit plan sponsored by a professional
2	employer organization shall be considered employees of that professional
3	employer organization.
4	→SECTION 10. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
5	READ AS FOLLOWS:
6	For the purposes of KRS Chapter 341:
7	(1) Covered employees of a registered professional employer organization shall be
8	considered employees of the professional employer organization, which shall be
9	responsible for the payment of contributions, penalties, and interest on wages
10	paid by the professional employer organization to its covered employees during
11	the term of the applicable professional employer agreement;
12	(2) The professional employer organization shall report and pay all required
13	contributions to the unemployment insurance fund using the state employer
14	identification number and the contribution rate of the professional employer
15	organization; and
16	(3) Upon the termination of a contract between a professional employer organization
17	and a client or the failure of a professional employer organization to submit
18	reports or make tax payments as required by Sections 1 to 11 of this Act, the
19	client shall be treated as a new employer without a previous experience record
20	unless that client is otherwise eligible for an experience rating.
21	→ SECTION 11. A NEW SECTION OF KRS CHAPTER 336 IS CREATED TO
22	READ AS FOLLOWS:
23	(1) A person shall not knowingly:
24	(a) Offer or provide professional employer services or use the names
25	professional employer organization, PEO, staff leasing, employee leasing,
26	administrative employer, or other title representing professional employer
27	services without first becoming registered under Sections 1 to 11 of this Act;

Page 20 of 38
HB050610.100 - 823 - XXXX GA

1		<u>or</u>
2		(b) Provide false or fraudulent information to the Department of Workers'
3		Claims in conjunction with any registration, renewal, or in any report
4		required under Sections 1 to 11 of this Act.
5	<u>(2)</u>	Action may be taken by the Department of Workers' Claims against:
6		(a) Any person for violation of subsection (1) of this section;
7		(b) A professional employer organization or the controlling person of a
8		professional employer organization upon the conviction of a professional
9		employer organization or the controlling person of a professional employer
10		organization of a crime that relates to the operation of the professional
11		employer organization or the ability of the registrant or the controlling
12		person of the registrant to operate the professional employer organization;
13		(c) A professional employer organization or the controlling person of a
14		professional employer organization for knowingly making a material
15		misrepresentation to the Department of Workers' Claims or any other state
16		agency; or
17		(d) A professional employer organization or the controlling person of a
18		professional employer organization for a willful violation of Sections 1 to 11
19		of this Act or any order or administrative regulation issued by the
20		Department of Workers' Claims under Sections 1 to 11 of this Act.
21	<u>(3)</u>	Upon finding that a professional employer organization or the controlling person
22		of a professional employer organization has violated any provision of Sections 1
23		to 11 this Act, the Department of Workers' Claims may:
24		(a) Deny an application for a registration;
25		(b) Revoke, restrict, or refuse a registration;
26		(c) Impose a civil penalty not to exceed one thousand dollars (\$1,000) for each
27		violation;

(d) Place a registration on probation and subject to conditions specified by the

2 <u>Department of Workers' Claims; or</u>

(e) Issue a cease and desist order.

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- → Section 12. KRS 342.0011 is amended to read as follows:
- 5 As used in this chapter, unless the context otherwise requires:
- 6 (1) "Injury" means any work-related traumatic event or series of traumatic events, 7 including cumulative trauma, arising out of and in the course of employment which 8 is the proximate cause producing a harmful change in the human organism 9 evidenced by objective medical findings. "Injury" does not include the effects of the 10 natural aging process, and does not include any communicable disease unless the 11 risk of contracting the disease is increased by the nature of the employment. 12 "Injury" when used generally, unless the context indicates otherwise, shall include 13 an occupational disease and damage to a prosthetic appliance, but shall not include 14 a psychological, psychiatric, or stress-related change in the human organism, unless 15 it is a direct result of a physical injury;
- 16 (2) "Occupational disease" means a disease arising out of and in the course of the employment;
 - (3) An occupational disease as defined in this chapter shall be deemed to arise out of the employment if there is apparent to the rational mind, upon consideration of all the circumstances, a causal connection between the conditions under which the work is performed and the occupational disease, and which can be seen to have followed as a natural incident to the work as a result of the exposure occasioned by the nature of the employment and which can be fairly traced to the employment as the proximate cause. The occupational disease shall be incidental to the character of the business and not independent of the relationship of employer and employee. An occupational disease need not have been foreseen or expected but, after its contraction, it must appear to be related to a risk connected with the employment

1		and to have flowed from that source as a rational consequence;
2	(4)	Injurious exposure" shall mean that exposure to occupational hazard which would,
3		ndependently of any other cause whatsoever, produce or cause the disease for
4		which the claim is made;
5	(5)	Death" means death resulting from an injury or occupational disease;
6	(6)	Carrier" means any insurer, or legal representative thereof, authorized to insure the
7		iability of employers under this chapter and includes a self-insurer;
8	(7)	Self-insurer" is an employer who has been authorized under the provisions of this
9		chapter to carry his own liability on his employees covered by this chapter;
10	(8)	Department" means the Department of Workers' Claims in the Labor Cabinet;
11	(9)	'Commissioner" means the commissioner of the Department of Workers' Claims
12		under the direction and supervision of the secretary of the Labor Cabinet;
13	(10)	Board" means the Workers' Compensation Board;
14	(11)	a) "Temporary total disability" means the condition of an employee who has not
15		reached maximum medical improvement from an injury and has not reached a
16		level of improvement that would permit a return to employment;
17		b) "Permanent partial disability" means the condition of an employee who, due to
18		an injury, has a permanent disability rating but retains the ability to work; and
19		c) "Permanent total disability" means the condition of an employee who, due to
20		an injury, has a permanent disability rating and has a complete and permanent
21		inability to perform any type of work as a result of an injury, except that total
22		disability shall be irrebuttably presumed to exist for an injury that results in:
23		1. Total and permanent loss of sight in both eyes;
24		2. Loss of both feet at or above the ankle;
25		3. Loss of both hands at or above the wrist;
26		4. Loss of one (1) foot at or above the ankle and the loss of one (1) hand at

Page 23 of 38
HB050610.100 - 823 - XXXX

or above the wrist;

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1		5. Permanent and complete paralysis of both arms, both legs, or one (1)
2		arm and one (1) leg;
3		6. Incurable insanity or imbecility; or
4		7. Total loss of hearing;
5	(12)	"Income benefits" means payments made under the provisions of this chapter to the
6		disabled worker or his dependents in case of death, excluding medical and related
7		benefits;
8	(13)	"Medical and related benefits" means payments made for medical, hospital, burial,
9		and other services as provided in this chapter, other than income benefits;
10	(14)	"Compensation" means all payments made under the provisions of this chapter
11		representing the sum of income benefits and medical and related benefits;
12	(15)	"Medical services" means medical, surgical, dental, hospital, nursing, and medical
13		rehabilitation services, medicines, and fittings for artificial or prosthetic devices;
14	(16)	"Person" means any individual, partnership, limited partnership, limited liability
15		company, firm, association, trust, joint venture, corporation, or legal representative
16		thereof;
17	(17)	"Wages" means, in addition to money payments for services rendered, the
18		reasonable value of board, rent, housing, lodging, fuel, or similar advantages
19		received from the employer, and gratuities received in the course of employment
20		from persons other than the employer as evidenced by the employee's federal and
21		state tax returns;
22	(18)	"Agriculture" means the operation of farm premises, including the planting,
23		cultivation, producing, growing, harvesting, and preparation for market of
24		agricultural or horticultural commodities thereon, the raising of livestock for food
25		products and for racing purposes, and poultry thereon, and any work performed as
26		an incident to or in conjunction with the farm operations, including the sale of

Page 24 of 38 HB050610.100 - 823 - XXXX

produce at on-site markets and the processing of produce for sale at on-site markets.

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1		It shall not include the commercial processing, packing, drying, storing, or canning
2		of such commodities for market, or making cheese or butter or other dairy products
3		for market;
4	(19)	"Beneficiary" means any person who is entitled to income benefits or medical and
5		related benefits under this chapter;
6	(20)	"United States," when used in a geographic sense, means the several states, the
7		District of Columbia, the Commonwealth of Puerto Rico, the Canal Zone, and the
8		territories of the United States;
9	(21)	"Alien" means a person who is not a citizen, a national, or a resident of the United
10		States or Canada. Any person not a citizen or national of the United States who
11		relinquishes or is about to relinquish his residence in the United States shall be
12		regarded as an alien;
13	(22)	"Insurance carrier" means every insurance carrier or insurance company authorized
14		to do business in the Commonwealth writing workers' compensation insurance
15		coverage and includes the Kentucky Employers Mutual Insurance Authority and
16		every self-insured group operating under the provisions of this chapter;
17	(23)	(a) "Severance or processing of coal" means all activities performed in the
18		Commonwealth at underground, auger, and surface mining sites; all activities
19		performed at tipple or processing plants that clean, break, size, or treat coal;
20		and all activities performed at coal loading facilities for trucks, railroads, and
21		barges. Severance or processing of coal shall not include acts performed by a
22		final consumer if the acts are performed at the site of final consumption.
23		(b) "Engaged in severance or processing of coal" shall include all individuals,
24		partnerships, limited partnerships, limited liability companies, corporations,
25		joint ventures, associations, or any other business entity in the Commonwealth
26		which has employees on its payroll who perform any of the acts stated in
27		paragraph (a) of this subsection, regardless of whether the acts are performed

Page 25 of 38
HB050610.100 - 823 - XXXX

as owner of the coal or on a contract or fee basis for the actual owner of the coal. A business entity engaged in the severance or processing of coal, including but not limited to administrative or selling functions, shall be considered wholly engaged in the severance or processing of coal for the purpose of this chapter. However, a business entity which is engaged in a separate business activity not related to coal, for which a separate premium charge is not made, shall be deemed to be engaged in the severance or processing of coal only to the extent that the number of employees engaged in the severance or processing of coal bears to the total number of employees. Any employee who is involved in the business of severing or processing of coal and business activities not related to coal shall be prorated based on the time involved in severance or processing of coal bears to his total time;

(24) "Premium" for every self-insured group means any and all assessments levied on its members by such group or contributed to it by the members thereof. For special fund assessment purposes, "premium" also includes any and all membership dues, fees, or other payments by members of the group to associations or other entities used for underwriting, claims handling, loss control, premium audit, actuarial, or other services associated with the maintenance or operation of the self-insurance group;

(25) (a) "Premiums received" for policies effective on or after January 1, 1994, for insurance companies means direct written premiums as reported in the annual statement to the Department of Insurance by insurance companies, except that "premiums received" includes premiums charged off or deferred, and, on insurance policies or other evidence of coverage with provisions for deductibles, the calculated cost for coverage, including experience modification and premium surcharge or discount, prior to any reduction for deductibles. The rates, factors, and methods used to calculate the cost for

coverage under this paragraph for insurance policies or other evidence of
coverage with provisions for deductibles shall be the same rates, factors, and
methods normally used by the insurance company in Kentucky to calculate the
cost for coverage for insurance policies or other evidence of coverage without
provisions for deductibles, except that, for insurance policies or other
evidence of coverage with provisions for deductibles effective on or after
January 1, 1995, the calculated cost for coverage shall not include any
schedule rating modification, debits, or credits. For policies with provisions
for deductibles with effective dates on or after January 1, 1995, assessments
shall be imposed on premiums received as calculated by the deductible
program adjustment. The cost for coverage calculated under this paragraph by
insurance companies that issue only deductible insurance policies in Kentucky
shall be actuarially adequate to cover the entire liability of the employer for
compensation under this chapter, including all expenses and allowances
normally used to calculate the cost for coverage. For policies with provisions
for deductibles with effective dates of May 6, 1993, through December 31,
1993, for which the insurance company did not report premiums and remit
special fund assessments based on the calculated cost for coverage prior to the
reduction for deductibles, "premiums received" includes the initial premium
plus any reimbursements invoiced for losses, expenses, and fees charged
under the deductibles. The special fund assessment rates in effect for
reimbursements invoiced for losses, expenses, or fees charged under the
deductibles shall be those percentages in effect on the effective date of the
insurance policy. For policies covering <u>covered</u> [leased] employees <u>having a</u>
co-employment relationship with a professional employer organization and
a client as defined in KRS Chapter 336 [KRS 342.615], "premiums received"
means premiums calculated using the experience modification factor of each

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<u>client</u>[lessee] as defined in <u>KRS Chapter 336</u>[KRS 342.615] for each <u>covered</u>[leased] employee for that portion of the payroll pertaining to the <u>covered</u>[leased] employee.

- (b) "Direct written premium" for insurance companies means the gross premium written less return premiums and premiums on policies not taken but including policy and membership fees.
- "Premium," for policies effective on or after January 1, 1994, for insurance (c) companies means all consideration, whether designated as premium or otherwise, for workers' compensation insurance paid to an insurance company or its representative, including, on insurance policies with provisions for deductibles, the calculated cost for coverage, including experience modification and premium surcharge or discount, prior to any reduction for deductibles. The rates, factors, and methods used to calculate the cost for coverage under this paragraph for insurance policies or other evidence of coverage with provisions for deductibles shall be the same rates, factors, and methods normally used by the insurance company in Kentucky to calculate the cost for coverage for insurance policies or other evidence of coverage without provisions for deductibles, except that, for insurance policies or other evidence of coverage with provisions for deductibles effective on or after January 1, 1995, the calculated cost for coverage shall not include any schedule rating modifications, debits, or credits. For policies with provisions for deductibles with effective dates on or after January 1, 1995, assessments shall be imposed as calculated by the deductible program adjustment. The cost for coverage calculated under this paragraph by insurance companies that issue only deductible insurance policies in Kentucky shall be actuarially adequate to cover the entire liability of the employer for compensation under this chapter, including all expenses and allowances normally used to calculate

the cost for coverage. For policies with provisions for deductibles with effective dates of May 6, 1993, through December 31, 1993, for which the insurance company did not report premiums and remit special fund assessments based on the calculated cost for coverage prior to the reduction for deductibles, "premium" includes the initial consideration plus any reimbursements invoiced for losses, expenses, or fees charged under the deductibles.

- (d) "Return premiums" for insurance companies means amounts returned to insureds due to endorsements, retrospective adjustments, cancellations, dividends, or errors.
- (e) "Deductible program adjustment" means calculating premium and premiums received on a gross basis without regard to the following:
 - 1. Schedule rating modifications, debits, or credits;
 - 2. Deductible credits; or

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- 3. Modifications to the cost of coverage from inception through and including any audit that are based on negotiated retrospective rating arrangements, including but not limited to large risk alternative rating options;
- (26) "Insurance policy" for an insurance company or self-insured group means the term of insurance coverage commencing from the date coverage is extended, whether a new policy or a renewal, through its expiration, not to exceed the anniversary date of the renewal for the following year;
- 23 (27) "Self-insurance year" for a self-insured group means the annual period of 24 certification of the group created pursuant to KRS 342.350(4) and 304.50-010;
- 25 (28) "Premium" for each employer carrying his own risk pursuant to KRS 342.340(1) 26 shall be the projected value of the employer's workers' compensation claims for the 27 next calendar year as calculated by the commissioner using generally-accepted

actuarial methods as follows:

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The base period shall be the earliest three (3) calendar years of the five (5) (a) calendar years immediately preceding the calendar year for which the calculation is made. The commissioner shall identify each claim of the employer which has an injury date or date of last injurious exposure to the cause of an occupational disease during each one (1) of the three (3) calendar years to be used as the base, and shall assign a value to each claim. The value shall be the total of the indemnity benefits paid to date and projected to be paid, adjusted to current benefit levels, plus the medical benefits paid to date and projected to be paid for the life of the claim, plus the cost of medical and vocational rehabilitation paid to date and projected to be paid. Adjustment to current benefit levels shall be done by multiplying the weekly indemnity benefit for each claim by the number obtained by dividing the statewide average weekly wage which will be in effect for the year for which the premium is being calculated by the statewide average weekly wage in effect during the year in which the injury or date of the last exposure occurred. The total value of the claims using the adjusted weekly benefit shall then be calculated by the commissioner. Values for claims in which awards have been made or settlements reached because of findings of permanent partial or permanent total disability shall be calculated using the mortality and interest discount assumptions used in the latest available statistical plan of the advisory rating organization defined in Subtitle 13 of KRS Chapter 304. The sum of all calculated values shall be computed for all claims in the base period;

(b) The commissioner shall obtain the annual payroll for each of the three (3) years in the base period for each employer carrying his own risk from records of the department and from the records of the Department of Workforce

Investment, Education and Workforce Development Cabinet. The commissioner shall multiply each of the three (3) years of payroll by the number obtained by dividing the statewide average weekly wage which will be in effect for the year in which the premium is being calculated by the statewide average weekly wage in effect in each of the years of the base period;

- (c) The commissioner shall divide the total of the adjusted claim values for the three (3) year base period by the total adjusted payroll for the same three (3) year period. The value so calculated shall be multiplied by 1.25 and shall then be multiplied by the employer's most recent annualized payroll, calculated using records of the department and the Department of Workforce Investment data which shall be made available for this purpose on a quarterly basis as reported, to obtain the premium for the next calendar year for assessment purposes under KRS 342.122;
- (d) For November 1, 1987, through December 31, 1988, premium for each employer carrying its own risk shall be an amount calculated by the board pursuant to the provisions contained in this subsection and such premium shall be provided to each employer carrying its own risk and to the funding commission on or before January 1, 1988. Thereafter, the calculations set forth in this subsection shall be performed annually, at the time each employer applies or renews its application for certification to carry its own risk for the next twelve (12) month period and submits payroll and other data in support of the application. The employer and the funding commission shall be notified at the time of the certification or recertification of the premium calculated by the commissioner, which shall form the employer's basis for assessments pursuant to KRS 342.122 for the calendar year beginning on January 1 following the date of certification or recertification;

(e)	If an employer having fewer than five (5) years of doing business in this state
	applies to carry its own risk and is so certified, its premium for the purposes of
	KRS 342.122 shall be based on the lesser number of years of experience as
	may be available including the two (2) most recent years if necessary to create
	a three (3) year base period. If the employer has less than two (2) years of
	operation in this state available for the premium calculation, then its premium
	shall be the greater of the value obtained by the calculation called for in this
	subsection or the amount of security required by the commissioner pursuant to
	KRS 342.340(1);

- (f) If an employer is certified to carry its own risk after having previously insured the risk, its premium shall be calculated using values obtained from claims incurred while insured for as many of the years of the base period as may be necessary to create a full three (3) year base. After the employer is certified to carry its own risk and has paid all amounts due for assessments upon premiums paid while insured, the employer shall be assessed only upon the premium calculated under this subsection;
- (g) "Premium" for each employer defined in KRS 342.630(2) shall be calculated as set forth in this subsection; and
- (h) Notwithstanding any other provision of this subsection, the premium of any employer authorized to carry its own risk for purposes of assessments due under this chapter shall be no less than thirty cents (\$0.30) per one hundred dollars (\$100) of the employer's most recent annualized payroll for employees covered by this chapter;
- (29) "SIC code" as used in this chapter means the Standard Industrial Classification

 Code contained in the latest edition of the Standard Industrial Classification Manual

 published by the Federal Office of Management and Budget;
- 27 (30) "Investment interest" means any pecuniary or beneficial interest in a provider of

Page 32 of 38 HB050610.100 - 823 - XXXX

1		medical services or treatment under this chapter, other than a provider in which that				
2		pecuniary or investment interest is obtained on terms equally available to the public				
3		through trading on a registered national securities exchange, such as the New York				
4		Stock Exchange or the American Stock Exchange, or on the National Association of				
5		Securities Dealers Automated Quotation System;				
6	(31)	"Managed health care system" means a health care system that employs gatekeeper				
7		providers, performs utilization review, and does medical bill audits;				
8	(32)	"Physician" means physicians and surgeons, psychologists, optometrists, dentists,				
9		podiatrists, and osteopathic and chiropractic practitioners acting within the scope of				
10		their license issued by the Commonwealth;				
11	(33)	"Objective medical findings" means information gained through direct observation				
12		and testing of the patient applying objective or standardized methods;				
13	(34)	"Work" means providing services to another in return for remuneration on a regular				
14		and sustained basis in a competitive economy;				
15	(35)	"Permanent impairment rating" means percentage of whole body impairment caused				
16		by the injury or occupational disease as determined by the "Guides to the Evaluation				
17		of Permanent Impairment";				
18	(36)	"Permanent disability rating" means the permanent impairment rating selected by an				
19		administrative law judge times the factor set forth in the table that appears at KRS				
20		342.730(1)(b); and				
21	(37)	"Guides to the Evaluation of Permanent Impairment" means, except as provided in				
22		KRS 342.262:				
23		(a) The fifth edition published by the American Medical Association; and				
24		(b) For psychological impairments, Chapter 12 of the second edition published by				
25		the American Medical Association.				
26		→ Section 13. KRS 342.990 is amended to read as follows:				

Page 33 of 38 HB050610.100 - 823 - XXXX

(1) The commissioner shall initiate enforcement of civil and criminal penalties imposed

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When the commissioner receives information that he or she deems sufficient to determine that a violation of this chapter has occurred, he or she shall seek civil penalties pursuant to subsections (3) to (7) of this section, criminal penalties pursuant to subsections (8) and (9) of this section, or both.

- 6 (3) The commissioner shall initiate enforcement of a civil penalty by simultaneously citing the appropriate party for the offense and stating the civil penalty to be paid.
- 8 (4) If, within fifteen (15) working days from the receipt of the citation, a cited party
 9 fails to notify the commissioner that he or she intends to contest the citation, then
 10 the citation shall be deemed final.
- 11 (5) If a cited party notifies the commissioner that he or she intends to challenge a 12 citation issued under this section, the commissioner shall cause the matter to be 13 heard as soon as practicable by an administrative law judge and in accordance with 14 the provisions of KRS Chapter 13B. The burden of proof shall be upon the attorney 15 representing the commissioner to prove the offense stated in the citation by a 16 preponderance of the evidence. The parties shall stipulate to uncontested facts and 17 issues prior to the hearing before the administrative law judge. The administrative 18 law judge shall issue a ruling within sixty (60) days following the hearing.
- 19 (6) A party may appeal the ruling of the administrative law judge to the Franklin Circuit Court in conformity with KRS 13B.140.
- 21 (7) The following civil penalties shall be applicable for violations of particular 22 provisions of this chapter:
- 23 (a) Any employer, insurer, or payment obligor subject to this chapter who fails to
 24 make a report required by KRS 342.038 within fifteen (15) days from the date
 25 it was due, shall be fined not less than one hundred dollars (\$100) nor more
 26 than one thousand dollars (\$1,000) for each offense;
- 27 (b) Any employer, insurer, or payment obligor acting on behalf of an employer

who fails to make timely payment of a statement for services under KRS 342.020(4) without having reasonable grounds to delay payment may be fined not less than one hundred dollars (\$100) nor more than one thousand dollars (\$1,000) for each offense;

- Any person who violates KRS 342.020(12), 342.035(2), 342.040, 342.340, (c) 342.400, 342.420, or 342.630 shall be fined not less than one hundred dollars (\$100) nor more than one thousand dollars (\$1,000) for each offense. With respect to employers who fail to maintain workers' compensation insurance coverage on their employees, each employee of the employer and each day of violation shall constitute a separate offense. With respect to KRS 342.040, any employer's insurance carrier or other party responsible for the payment of workers' compensation benefits shall be fined for failure to notify the commissioner of a failure to make payments when due if a report indicating the reason payment of income benefits did not commence within twenty-one (21) days of the date the employer was notified of an alleged work-related injury or disease is not filed with the commissioner within twenty-one (21) days of the date the employer received notice, and if the employee has not returned to work within that period of time. The date of notice indicated in the report filed with the department pursuant to KRS 342.038(1), shall raise a rebuttable presumption of the date on which the employer received notice;
- (d) Any person who violates any of the provisions of KRS 342.165(2), 342.335, 342.395, 342.460, 342.465, or 342.470 shall be fined not less than two hundred dollars (\$200) nor more than two thousand dollars (\$2,000) for each offense. With respect to KRS 342.395, each required notice of rejection form executed by an employee or potential employee of an employer shall constitute a separate offense;
- (e) Any person who fails to comply with the data reporting provisions of

Page 35 of 38 HB050610.100 - 823 - XXXX

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administrative regulations promulgated by the commissioner pursuant to KRS 342.039, or with utilization review and medical bill audit administrative regulations promulgated pursuant to KRS 342.035(5), shall be fined not less than one hundred dollars (\$100) nor more than one thousand dollars (\$1,000) for each violation;

- (f) Except as provided in paragraph (g) of this subsection, a person who violates any of the provisions of KRS 342.335(1) or (2) where the claim, compensation, benefit, or money referred to in KRS 342.335(1) or (2) is less than or equal to three hundred dollars (\$300) shall be fined per occurrence not more than one thousand dollars (\$1,000) per individual nor five thousand dollars (\$5,000) per corporation, or twice the amount of gain received as a result of the violation, whichever is greater;
- (g) Any person who violates any of the provisions of KRS 342.335(1) or (2) where the claim, compensation, benefit, or money referred to in KRS 342.335(1) or (2) exceeds three hundred dollars (\$300) shall be fined per occurrence not more than five thousand dollars (\$5,000) per individual nor ten thousand dollars (\$10,000) per corporation, or twice the amount of gain received as a result of the violation, whichever is greater;
- (h) Any person who violates the employee leasing provision of this chapter shall be fined not less than five hundred dollars (\$500) nor more than five thousand dollars (\$5,000) for each violation;
- (i) Any violation of the provisions of this chapter relating to self-insureds shall constitute grounds for decertification of such self-insured, a fine of not less than five hundred dollars (\$500) nor more than five thousand dollars (\$5,000) per occurrence, or both; and
- (j) Actions to collect the civil penalties imposed under this subsection shall be instituted in the Franklin District Court and the Franklin Circuit Court.

(8)	The commissioner shall initiate enforcement of a criminal penalty by causing a
	complaint to be filed with the appropriate local prosecutor. If the prosecutor fails to
	act on the violation within twenty (20) days following the filing of the complaint,
	the commissioner shall certify the inaction by the local prosecutor to the Attorney
	General who shall initiate proceedings to prosecute the violation. The provisions of
	KRS 15.715 shall not apply to this section.

- (9) The following criminal penalties shall be applicable for violations of particular provisions of this chapter:
 - (a) Any person who violates KRS 342.020(12), 342.035(2), 342.040, 342.400, 342.420, or 342.630, shall, for each offense, be fined not less than one hundred dollars (\$100) nor more than one thousand dollars (\$1,000), or imprisoned for not less than thirty (30) days nor more than one hundred eighty (180) days, or both;
 - (b) Any person who violates any of the provisions of KRS 342.165(2), 342.335, 342.460, 342.465, or 342.470 shall, for each offense, be fined not less than two hundred dollars (\$200) nor more than two thousand dollars (\$2,000), or imprisoned for not less than thirty (30) days nor more than one hundred and eighty (180) days, or both; *and*
 - (c) [Any corporation, partnership, sole proprietorship, or other form of business entity and any officer, general partner, agent, or representative of the foregoing who knowingly utilizes or participates in any employee leasing arrangement or mechanism as defined in KRS 342.615 for the purpose of depriving one (1) or more insurers of premium otherwise properly payable or for the purpose of depriving the Commonwealth of any tax or assessment due and owing and based upon said premium shall upon conviction thereof be subject to a fine of not less than five hundred dollars (\$500) nor more than five thousand dollars (\$5,000), or imprisonment for not more than one

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(d)—Notwithstanding any other provisions of this chapter to the contrary, when any employer, insurance carrier, or individual self-insured fails to comply with this chapter for which a penalty is provided in subparagraphs (7), (8), and (9) above, such person, if the person is an owner in the case of a sole proprietorship, a partner in the case of a partnership, a principal in the case of a limited liability company, or a corporate officer in the case of a corporation, who knowingly authorized, ordered, or carried out the violation, failure, or refusal shall be personally and individually liable, both jointly and severally, for the penalties imposed in the above cited subparagraphs. Neither the dissolution nor withdrawal of the corporation, partnership, or other entity from the state, nor the cessation of holding status as a proprietor, partner, principal, or officer shall discharge the foregoing liability of any person.

- (10) Fines paid pursuant to KRS 342.267 and subsections (7) and (9) of this section shall be paid into the self-insurance fund established in KRS 342.920.
- (11) In addition to the penalties provided in this section, the commissioner and any administrative law judge or court of jurisdiction may order restitution of a benefit secured through conduct proscribed by this chapter.
- → Section 14. The following KRS section is repealed:
- 20 342.615 Registration of employee leasing companies -- Coverage requirements for lessees -- Status of temporary help service.
- Section 15. If any provisions of this Act or the application thereof to any person or circumstance is held invalid, the invalidity shall not affect other provisions or applications of the Act that can be given effect without the invalid provision or application, and to this end the provisions of this Act are severable.