

SENATE, No. 3905

STATE OF NEW JERSEY 220th LEGISLATURE

INTRODUCED JUNE 1, 2023

Sponsored by:

Senator GORDON M. JOHNSON

District 37 (Bergen)

Co-Sponsored by:

Senator Cruz-Perez

SYNOPSIS

Reduces statute of limitations from six years to two years in medical fee disputes in workers' compensation matters.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 11/27/2023)

S3905 JOHNSON

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1 AN ACT concerning the statute of limitations for medical fee disputes
2 in workers' compensation matters and amending R.S.34:15-15.

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4 **BE IT ENACTED** by the Senate and General Assembly of the State
5 of New Jersey:

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7 1. R.S.34:15-15 is amended to read as follows:

8 34:15-15. The employer shall furnish to the injured worker such
9 medical, surgical and other treatment, and hospital service as shall be
10 necessary to cure and relieve the worker of the effects of the injury
11 and to restore the functions of the injured member or organ where
12 such restoration is possible; provided, however, that the employer
13 shall not be liable to furnish or pay for physicians' or surgeons'
14 services in excess of \$50.00 and in addition to furnish hospital
15 service in excess of \$50.00, unless the injured worker or the worker's
16 physician who provides treatment, or any other person on the
17 worker's behalf, shall file a petition with the Division of Workers'
18 Compensation stating the need for physicians' or surgeons' services
19 in excess of \$50.00, as aforesaid, and such hospital service or
20 appliances in excess of \$50.00, as aforesaid, and the Division of
21 Workers' Compensation after investigating the need of the same and
22 giving the employer an opportunity to be heard, shall determine that
23 such physicians' and surgeons' treatment and hospital services are or
24 were necessary, and that the fees for the same are reasonable and
25 shall make an order requiring the employer to pay for or furnish the
26 same. The mere furnishing of medical treatment or the payment
27 thereof by the employer shall not be construed to be an admission of
28 liability.

29 If the employer shall refuse or neglect to comply with the
30 foregoing provisions of this section, the employee may secure such
31 treatment and services as may be necessary and as may come within
32 the terms of this section, and the employer shall be liable to pay
33 therefor; provided, however, that the employer shall not be liable for
34 any amount expended by the employee or by any third person on the
35 employee's behalf for any such physicians' treatment and hospital
36 services, unless such employee or any person on the employee's
37 behalf shall have requested the employer to furnish the same and the
38 employer shall have refused or neglected so to do, or unless the
39 nature of the injury required such services, and the employer or the
40 superintendent or foreman of the employer, having knowledge of
41 such injury shall have neglected to provide the same, or unless the
42 injury occurred under such conditions as make impossible the
43 notification of the employer, or unless the circumstances are so
44 peculiar as shall justify, in the opinion of the Division of Workers'

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

S3905 JOHNSON

1 Compensation, the expenditures assumed by the employee for such
2 physicians' treatment and hospital services, apparatus and appliances.

3 All fees and other charges for such physicians' and surgeons'
4 treatment and hospital treatment shall be reasonable and based upon
5 the usual fees and charges which prevail in the same community for
6 similar physicians', surgeons' and hospital services.

7 When an injured employee may be partially or wholly relieved of
8 the effects of a permanent injury, by use of an artificial limb or other
9 appliance, which phrase shall also include artificial teeth or glass eye,
10 the Division of Workers' Compensation, acting under competent
11 medical advice, is empowered to determine the character and nature
12 of such limb or appliance, and to require the employer or the
13 employer's insurance carrier to furnish the same.

14 Fees for medical, surgical, other treatment, or hospital services
15 that have been authorized by the employer or its carrier or its third
16 party administrator or determined by the Division of Workers'
17 Compensation to be the responsibility of the employer, its carrier or
18 third party administrator, or have been paid by the employer, its
19 carrier or third party administrator pursuant to the workers'
20 compensation law, R.S.34:15-1 et seq., shall not be charged against
21 or collectible from the injured worker. Exclusive jurisdiction for any
22 disputed medical charge arising from any claim for compensation for
23 a work-related injury or illness shall be vested in the division. For
24 services rendered on or after the effective date of P.L. , c. (pending
25 before the Legislature as this bill), a dispute shall be filed with the
26 Division of Workers' Compensation no later than two years after the
27 date that any payment or notice of denial of payment was received.
28 The treatment of an injured worker or the payment of workers'
29 compensation to an injured worker or dependent of an injured or
30 deceased worker shall not be delayed because of a claim by a medical
31 provider.

32 No provider to the injured worker of medical, surgical, other
33 treatment, or hospital service pursuant to the workers' compensation
34 law, R.S.34:15-1 et seq., shall report any portion of their charges
35 which are alleged to be unpaid, to any collection or credit reporting
36 agency, bureau, or data collection facility until: (1) a judge of
37 compensation within the Division of Workers' Compensation has
38 fully adjudicated the rights and liabilities of all parties, including the
39 rights of the claimant for payments pursuant to this section, section
40 1 of P.L.1953, c.207 (C.34:15-15.1), and section 1 of P.L.1966, c.115
41 (C.34:15-15.2), regarding the payment of these charges; or (2) a
42 notice of a stipulation settlement or an order approving settlement
43 regarding the payment of these charges has been filed with the court.
44 Upon a finding that non-compliance with this paragraph has
45 occurred, a judge of compensation, in summary fashion, and in
46 addition to such other provisions under the workers' compensation
47 law, R.S.34:15-1 et seq., may:

S3905 JOHNSON

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- 1 a. order the non-compliant provider to retract the medical,
2 surgical, other treatment, or hospital service charges reported to the
3 collection or credit reporting agency, bureau, or data collection
4 facility;
- 5 b. impose a fine on the non-compliant provider, not to exceed
6 \$5,000, payable to the Second Injury Fund;
- 7 c. order the non-compliant provider to pay a reasonable counsel
8 fee in connection with a claimant for payments who has suffered
9 damage to credit rating due to the reporting of unpaid medical,
10 surgical, other treatment, or hospital service charges to a collection
11 or credit reporting agency, bureau, or data collection facility;
- 12 d. order the non-compliant provider to take such steps as are
13 necessary, within 30 days of the order, to rehabilitate the credit
14 record of a claimant, with a showing made to the court of the efforts
15 made in that regard; and
- 16 e. order the non-compliant provider to pay an award of damages
17 to the claimant not to exceed 25 percent of the medical, surgical,
18 other treatment, or hospital service charges reported by the non-
19 compliant provider to the collection or credit reporting agency,
20 bureau, or data collection facility, the minimum award being
21 \$350.00.

22 (cf: P.L.2019, c.416, s.1)

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24 2. This act shall take effect immediately.

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STATEMENT

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29 This bill provides that the statute of limitations for a medical fee
30 dispute in a workers' compensation matter will be two years from the
31 date that a payment or notice of denial of payment was received by a
32 claimant. The current statute of limitations for these matters, as
33 interpreted by State courts, is six years from the date that a payment
34 or notice of denial of payment was received by a claimant.