

[Second Reprint]

**SENATE, No. 3036**

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**STATE OF NEW JERSEY**  
**218th LEGISLATURE**

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INTRODUCED OCTOBER 15, 2018

**Sponsored by:**

**Senator JOSEPH A. LAGANA**

**District 38 (Bergen and Passaic)**

**Senator NICHOLAS P. SCUTARI**

**District 22 (Middlesex, Somerset and Union)**

**Assemblyman RONALD S. DANCER**

**District 12 (Burlington, Middlesex, Monmouth and Ocean)**

**Assemblywoman JOANN DOWNEY**

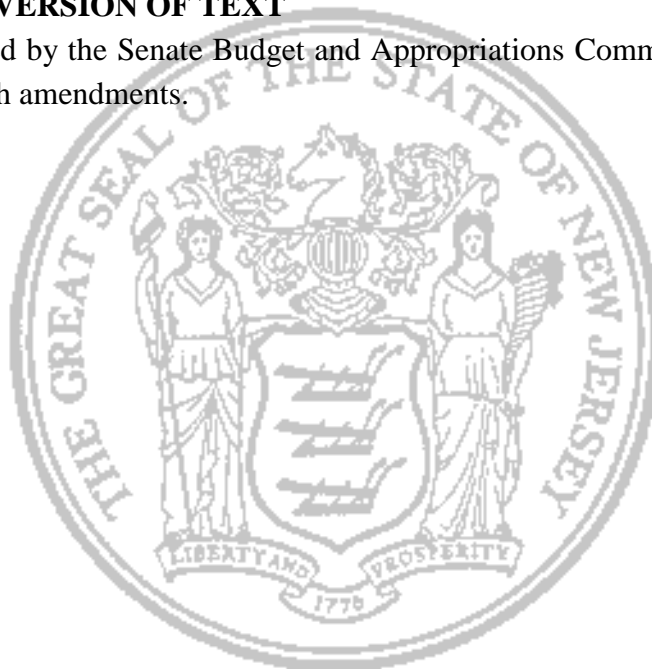
**District 11 (Monmouth)**

**SYNOPSIS**

Prohibits medical providers from reporting certain workers' compensation medical charges to collection and credit reporting agencies.

**CURRENT VERSION OF TEXT**

As reported by the Senate Budget and Appropriations Committee on March 18, 2019, with amendments.



**(Sponsorship Updated As Of: 1/14/2020)**

1 AN ACT concerning medical claims in connection with work-related  
2 injuries and illnesses and amending R.S.34:15-15.

3

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

6

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  
10 be necessary to cure and relieve the worker of the effects of the  
11 injury and to restore the functions of the injured member or organ  
12 where such restoration is possible; provided, however, that the  
13 employer shall not be liable to furnish or pay for physicians' or  
14 surgeons' services in excess of \$50.00 and in addition to furnish  
15 hospital service in excess of \$50.00, unless the injured worker or  
16 the worker's physician who provides treatment, or any other person  
17 on the worker's behalf, shall file a petition with the Division of  
18 Workers' Compensation stating the need for physicians' or surgeons'  
19 services in excess of \$50.00, as aforesaid, and such hospital service  
20 or 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  
28 of 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  
34 for any amount expended by the employee or by any third person on  
35 the employee's behalf for any such physicians' treatment and  
36 hospital services, unless such employee or any person on the  
37 employee's behalf shall have requested the employer to furnish the  
38 same and the employer shall have refused or neglected so to do, or  
39 unless the nature of the injury required such services, and the  
40 employer or the superintendent or foreman of the employer, having  
41 knowledge of such injury shall have neglected to provide the same,  
42 or unless the injury occurred under such conditions as make  
43 impossible the notification of the employer, or unless the  
44 circumstances are so peculiar as shall justify, in the opinion of the

**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.

Matter enclosed in superscript numerals has been adopted as follows:

<sup>1</sup>Senate SCM committee amendments adopted March 4, 2019.

<sup>2</sup>Senate SBA committee amendments adopted March 18, 2019.

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

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

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

15 Fees for <sup>2</sup> treatments or ]<sup>2</sup> medical <sup>2</sup> ,surgical, other treatment, or  
16 hospital<sup>2</sup> services that have been authorized by the employer or its  
17 carrier or its third party administrator or determined by the Division  
18 of Workers' Compensation to be the responsibility of the employer,  
19 its carrier or third party administrator, or have been paid by the  
20 employer, its carrier or third party administrator pursuant to the  
21 workers' compensation law, R.S.34:15-1 et seq., shall not be  
22 charged against or collectible from the injured worker. Exclusive  
23 jurisdiction for any disputed medical charge arising from any claim  
24 for compensation for a work-related injury or illness shall be vested  
25 in the division. The treatment of an injured worker or the payment  
26 of workers' compensation to an injured worker or dependent of an  
27 injured or deceased worker shall not be delayed because of a claim  
28 by a medical provider.

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

- 1 addition to such other provisions under the workers' compensation  
2 law, R.S.34:15-1 et seq., may:
- 3 a. order the non-compliant <sup>1</sup>[party] <sup>2</sup>[medical]<sup>2</sup> provider<sup>1</sup> to  
4 retract the medical <sup>2</sup>, surgical, other treatment, or hospital service<sup>2</sup>  
5 charges reported to the collection or credit reporting agency,  
6 bureau, or data collection facility;
- 7 b. impose a fine on the non-compliant <sup>1</sup>[party] <sup>2</sup>[medical]<sup>2</sup>  
8 provider<sup>1</sup>, not to exceed \$5,000, payable to the Second Injury Fund;
- 9 c. order <sup>2</sup>the non-compliant provider to pay<sup>2</sup> a reasonable  
10 counsel fee in connection with a claimant for <sup>2</sup>[medical]<sup>2</sup> payments  
11 who has suffered damage to credit rating due to the reporting of  
12 unpaid medical<sup>2</sup>, surgical, other treatment, or hospital service<sup>2</sup>  
13 charges to a collection or credit reporting agency, bureau, or data  
14 collection facility;
- 15 d. order the non-compliant <sup>1</sup>[party] <sup>2</sup>[medical]<sup>2</sup> provider<sup>1</sup> to  
16 take such steps as are necessary, within 30 days of the order, to  
17 rehabilitate the credit record of a claimant, with a showing made to  
18 the court of the efforts made in that regard; and
- 19 e. order <sup>1</sup>the non-compliant <sup>2</sup>[medical]<sup>2</sup> provider to pay<sup>1</sup> an  
20 award of damages to the claimant not to exceed 25 percent of the  
21 medical<sup>2</sup>, surgical, other treatment, or hospital service<sup>2</sup> charges  
22 reported by the non-compliant <sup>1</sup>[party] <sup>2</sup>[medical]<sup>2</sup> provider<sup>1</sup> to  
23 the collection or credit reporting agency, bureau, or data collection  
24 facility, the minimum award being \$350.00.  
25 (cf: P.L.2012, c.67, s.1)
- 26
- 27 2. This act shall take effect immediately.