State of Misconsin



2015 Assembly Bill 724

Date of enactment: February 29, 2016 Date of publication*: March 1, 2016

2015 WISCONSIN ACT 180

AN ACT to repeal 102.07 (6); to renumber 46.2897; to renumber and amend 102.125, 102.18 (1) (b), 102.23 (1) (a), 102.28 (2) (c) and 102.28 (7) (b); to amend 20.445 (1) (ra), 46.27 (5) (i), 46.2897 (title), 101.654 (2) (b), 102.01 (2) (d), 102.03 (4), 102.04 (1) (a), 102.07 (1) (a), 102.07 (1) (b), 102.07 (3), 102.07 (7) (a), 102.07 (10), 102.11 (1) (intro.), 102.125 (title), 102.13 (2) (b), 102.13 (2) (c), 102.17 (1) (a) 3., 102.17 (4), 102.18 (3), 102.18 (4) (b), 102.21, 102.23 (1) (c), 102.23 (1) (cm), 102.28 (2) (a), 102.28 (2) (b) (title), 102.28 (2) (c) (title), 102.28 (2) (d), 102.28 (7) (a), 102.29 (1) (b) 2., 102.31 (1) (c) 2., 102.31 (2) (b) 2., 102.315 (2), 102.425 (3) (a) (intro.), 102.425 (1) (a), 102.81 (1) (a), 108.10 (4) and 165.60; and to create 46.27 (5m), 46.275 (4m), 46.277 (3r), 46.281 (1k), 46.2897 (1), 46.2897 (2) (title), 46.2897 (3), 46.995 (3), 102.07 (20), 102.125 (2), 102.175 (3), 102.28 (2) (e), 102.28 (7) (bm), 102.28 (7) (d), 102.29 (12), 102.425 (1) (cm), 102.43 (9) (e) and 102.44 (4m) of the statutes; relating to: various changes to the worker's compensation law, granting rule-making authority, and making an appropriation.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 20.445 (1) (ra) of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

20.445 (1) (ra) Worker's compensation operations fund; administration. From the worker's compensation operations fund, the amounts in the schedule for the administration of the worker's compensation program by the department, for assistance to the department of justice in investigating and prosecuting fraudulent activity related to worker's compensation, for transfer to the uninsured employers fund under s. 102.81 (1) (c), and for transfer to the appropriation accounts under par. (rp) and s. 20.427 (1) (ra). All moneys received under ss. 102.28 (2) (b) and 102.75 shall be credited to this appropriation account. From this appropriation, an amount not to exceed \$5,000 may be expended each fiscal year for pay-

ment of expenses for travel and research by the council on worker's compensation, an amount not to exceed \$500,000 may be transferred in each fiscal year to the uninsured employers fund under s. 102.81 (1) (c), the amount in the schedule under par. (rp) shall be transferred to the appropriation account under par. (rp), and the amount in the schedule under s. 20.427 (1) (ra) shall be transferred to the appropriation account under s. 20.427 (1) (ra).

SECTION 2. 46.27 (5) (i) of the statutes is amended to read:

46.27 (5) (i) In the instances in which an individual who is provided receives direct funding for long-term community support services under par. (b) for which the individual receives direct funding, serve directly as a fiscal agent or contract with a fiscal intermediary to serve as a fiscal agent for that individual for the purposes of performing the responsibilities and protecting the inter-

^{*} Section 991.11, WISCONSIN STATUTES: Effective date of acts. "Every act and every portion of an act enacted by the legislature over the governor's partial veto which does not expressly prescribe the time when it takes effect shall take effect on the day after its date of publication."

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ests of the individual under the unemployment insurance law. The county department or aging unit may elect to act as a fiscal agent or contract with a fiscal intermediary to serve as a fiscal agent for an individual who is provided long-term support services under s. 46.275, 46.277, 46.278, 46.2785, 46.495, 51.42, or 51.437. The fiscal agent under this paragraph is responsible for remitting any federal unemployment compensation taxes or state unemployment insurance contributions owed by the individual, including any interest and penalties which are owed by the individual; for serving as the representative of the individual in any investigation, meeting, hearing, or appeal involving ch. 108 or the federal unemployment tax act (26 Unemployment Tax Act, 26 USC 3301 to 3311) 3311, in which the individual is a party; and for receiving, reviewing, completing, and returning all forms, reports, and other documents required under ch. 108 or the federal unemployment tax act Unemployment Tax Act on behalf of the individual. An individual may make an informed, knowing, and voluntary election to waive the right to a fiscal agent under this paragraph. The waiver may be as to all or any portion of the fiscal agent's responsibilities. The waiver may be rescinded in whole or in part at any time.

SECTION 3. 46.27 (5m) of the statutes is created to read:

46.27 (**5m**) WORKER'S COMPENSATION COVERAGE. An individual who is performing services for a person receiving long-term care benefits under this section on a self-directed basis and who does not otherwise have worker's compensation coverage for those services is considered to be an employee of the entity that is providing financial management services for that person.

SECTION 4. 46.275 (4m) of the statutes is created to read:

46.275 (4m) WORKER'S COMPENSATION COVERAGE. An individual who is performing services for a person receiving long-term care benefits under this section on a self-directed basis and who does not otherwise have worker's compensation coverage for those services is considered to be an employee of the entity that is providing financial management services for that person.

SECTION 5. 46.277 (3r) of the statutes is created to read:

46.277 (**3r**) WORKER'S COMPENSATION COVERAGE. An individual who is performing services for a person receiving long-term care benefits under this section on a self-directed basis and who does not otherwise have worker's compensation coverage for those services is considered to be an employee of the entity that is providing financial management services for that person.

SECTION 6. 46.281 (1k) of the statutes is created to read:

46.281 (1k) WORKER'S COMPENSATION COVERAGE. An individual who is performing services for a person receiving the Family Care benefit, or benefits under Family Care Partnership, on a self-directed basis and who does not otherwise have worker's compensation coverage for those services is considered to be an employee of the entity that is providing financial management services for that person.

SECTION 7. 46.2897 (title) of the statutes is amended to read:

46.2897 (title) **Self-directed services option; advo**cacy services.

SECTION 8. 46.2897 of the statutes is renumbered 46.2897 (2).

SECTION 9. 46.2897 (1) of the statutes is created to read:

46.2897 (1) DEFINITION. In this section, "selfdirected services option" means the program that is operated under a waiver from the secretary of the federal department of health and human services under 42 USC 1396n (c) in which an enrolled individual selects his or her own services and service providers.

SECTION 10. 46.2897 (2) (title) of the statutes is created to read:

46.2897 (2) (title) ADVOCACY SERVICES.

SECTION 11. 46.2897 (3) of the statutes is created to read:

46.2897 (3) WORKER'S COMPENSATION COVERAGE. An individual who is performing services for a person participating in the self-directed services option and who does not otherwise have worker's compensation coverage for those services is considered to be an employee of the entity that is providing financial management services for that person.

SECTION 12. 46.995 (3) of the statutes is created to read:

46.995 (3) An individual who is performing services for a person receiving long-term care benefits under any children's long-term support waiver program on a selfdirected basis and who does not otherwise have worker's compensation coverage for those services is considered to be an employee of the entity that is providing financial management services for that person.

SECTION 13. 101.654 (2) (b) of the statutes is amended to read:

101.654 (2) (b) If the applicant is required under s. 102.28 (2) (a) to have in force a policy of worker's compensation insurance or if the applicant is self-insured in accordance with s. 102.28 (2) (b) <u>or (bm)</u>, that the applicant has in force a policy of worker's compensation insurance issued by an insurer authorized to do business in this state or is self-insured in accordance with s. 102.28 (2) (b) <u>or (bm)</u>.

SECTION 14. 102.01 (2) (d) of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

102.01 (2) (d) <u>"Municipality" includes a county, city,</u> town, village, school district, sewer district, drainage district and long-term care district and <u>"Local governmen-</u> tal unit" means a political subdivision of this state; a special purpose district or taxing jurisdiction, as defined in s. 70.114 (1) (f), in this state; an instrumentality, corporation, combination, or subunit of any of the foregoing; or any other public or quasi-public corporations corporation.

SECTION 15. 102.03 (4) of the statutes is amended to read:

102.03 (4) The right to compensation and the amount of the compensation shall in all cases be determined in accordance with the provisions of law in effect as of the date of the injury except as to employees whose rate of compensation is changed as provided in ss. s. 102.43 (5) (c) or (7) or 102.44 (1) or (5) or, before May 1, 2014, as provided in s. 102.43 (5) (c) and employees who are eligible to receive private rehabilitative counseling and rehabilitative training under s. 102.61 (1m) and except as provided in s. 102.555 (12) (b).

SECTION 16. 102.04 (1) (a) of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

102.04 (1) (a) The state, <u>and</u> each county, city, town, village, school district, sewer district, drainage district, long-term care district and other public or quasi-public corporations therein <u>local governmental unit in this state</u>.

SECTION 17. 102.04 (2m) of the statutes is amended to read:

102.04 (2m) A temporary help agency is the employer of an employee whom the temporary help agency has placed with or leased to another employer that compensates the temporary help agency for the employee's services. A temporary help agency is liable under s. 102.03 for all compensation and other payments payable under this chapter to or with respect to that employee, including any payments required under s. 102.16 (3), 102.18 (1) (b) <u>3</u> or (bp), 102.22 (1), 102.35 (3), 102.57, or 102.60. Except as permitted under s. 102.29, a temporary help agency may not seek or receive reimbursement from another employer for any payments made as a result of that liability.

SECTION 18. 102.07 (1) (a) of the statutes is amended to read:

102.07 (1) (a) Every person, including all officials, in the service of the state, or of any municipality therein local governmental unit in this state, whether elected or under any appointment, or contract of hire, express or implied, and whether a resident of the state or employed or injured within or without the state. The state and any municipality local governmental unit may require a bond from a contractor to protect the state or municipality local governmental unit against compensation to employees of such the contractor. This paragraph does not apply beginning on the first day of the first July beginning after the day that the secretary files the certificate under s. 102.80 (3) (a), except that if the secretary files the certificate under s. 102.80 (3) (ag) this paragraph does apply to claims for compensation filed on or after the date specified in that certificate.

SECTION 19. 102.07 (1) (b) of the statutes is amended to read:

102.07 (1) (b) Every person, including all officials, in the service of the state, or of any municipality therein local governmental unit in this state, whether elected or under any appointment, or contract of hire, express or implied, and whether a resident <u>of the state</u> or employed or injured within or without the state. This paragraph first applies on the first day of the first July beginning after the day that the secretary files the certificate under s. 102.80 (3) (a), except that if the secretary files the certificate under s. 102.80 (3) (ag) this paragraph does apply to claims for compensation filed on or after the date specified in that certificate.

SECTION 20. 102.07 (3) of the statutes is amended to read:

102.07 (3) Nothing herein contained shall prevent municipalities in this chapter prevents a local governmental unit from paying teachers, police officers, fire fighters and other employees a teacher, police officer, fire fighter, or any other employee his or her full salaries salary during a period of disability, nor interfere interferes with any pension funds fund, nor prevent prevents payment to teachers, police officers or fire fighters therefrom a teacher, police officer, fire fighter, or any other employee from a pension fund.

SECTION 20m. 102.07 (6) of the statutes is repealed. SECTION 21. 102.07 (7) (a) of the statutes is amended to read:

102.07 (7) (a) Every member of a volunteer fire company or fire department organized under ch. 213, a legally organized rescue squad, or a legally organized diving team is considered to be an employee of that company, department, squad, or team. Every member of a company, department, squad, or team described in this paragraph, while serving as an auxiliary police officer at an emergency, is also considered to be an employee of that company, department, squad, or team. If a company, department, squad, or team described in this paragraph has not insured its liability for compensation to its employees, the municipality or county political subdivision within which that company, department, squad, or team was organized shall be liable for that compensation.

SECTION 22. 102.07 (10) of the statutes is amended to read:

102.07 (10) Further to effectuate the policy of the state that the benefits of this chapter shall extend and be granted to employees in the service of the state, or of any municipality therein local governmental unit in this state, on the same basis, in the same manner, under the same conditions, and with like right of recovery as in the case of employees of persons, firms, or private corporations, any question whether any person is an employee under

this chapter shall be governed by and determined under the same standards, considerations, and rules of decision in all cases under subs. (1) to (9). Any statutes, ordinances, or administrative regulations which statute, ordinance, or rule that may be otherwise applicable to the classes of employees enumerated in sub. (1) shall not be controlling in deciding whether any person is an employee for the purposes of this chapter.

SECTION 23. 102.07 (20) of the statutes is created to read:

102.07 (20) An individual who is performing services for a person participating in the self-directed services option, as defined in s. 46.2897 (1), for a person receiving long-term care benefits under s. 46.27, 46.275, or 46.277 or under any children's long-term support waiver program on a self-directed basis, or for a person receiving the Family Care benefit, as defined in s. 46.2805 (4), or benefits under the Family Care Partnership program, as described in s. 49.496 (1) (bk) 3., on a self-directed basis and who does not otherwise have worker's compensation coverage for those services is considered to be an employee of the entity that is providing financial management services for that person.

SECTION 24. 102.11 (1) (intro.) of the statutes is amended to read:

102.11 (1) (intro.) The average weekly earnings for temporary disability, permanent total disability, or death benefits for injury in each calendar year on or after January 1, 1982, shall be not less than \$30 nor more than the wage rate that results in a maximum compensation rate of 110 percent of the state's average weekly earnings as determined under s. 108.05 as of June 30 of the previous year. The average weekly earnings for permanent partial disability shall be not less than \$30 and, for permanent partial disability for injuries occurring on or after April 17, 2012, and before January 1, 2013, not more than \$468, resulting in a maximum compensation rate of \$312, and, for permanent partial disability for injuries occurring on or after January 1, 2013, not more than \$483, resulting in a maximum compensation rate of \$322, except as provided in 2011 Wisconsin Act 183, section 30 (2) (a) the effective date of this subsection [LRB inserts date], and before January 1, 2017, not more than \$513, resulting in a maximum compensation rate of \$342, and, for permanent partial disability for injuries occurring on or after January 1, 2017, not more than \$543, resulting in a maximum compensation rate of <u>\$362</u>. Between such limits the average weekly earnings shall be determined as follows:

SECTION 25. 102.125 (title) of the statutes is amended to read:

102.125 (title) Fraudulent claims Fraud reporting and, investigation, and prosecution.

SECTION 26. 102.125 of the statutes is renumbered 102.125 (1) and amended to read:

102.125 (1) FRAUDULENT CLAIMS REPORTING AND INVESTIGATION. If an insurer or self-insured employer has evidence that a claim is false or fraudulent in violation of s. 943.395 and if the insurer or self-insured employer is satisfied that reporting the claim to the department will not impede its ability to defend the claim, the insurer or self-insured employer shall report the claim to the department. The department may require an insurer or self-insured employer to investigate an allegedly false or fraudulent claim and may provide the insurer or selfinsured employer with any records of the department relating to that claim. An insurer or self-insured employer that investigates a claim under this section <u>sub-</u> <u>section</u> shall report on the results of that investigation to the department.

(3) PROSECUTION. If based on the an investigation under sub. (1) or (2) the department has a reasonable basis to believe that a violation of s. 943.20, 943.38, 943.39, 943.392, 943.395, 943.40, or any other criminal law has occurred, the department shall refer the results of the investigation to the department of justice or to the district attorney of the county in which the alleged violation occurred for prosecution.

SECTION 27. 102.125 (2) of the statutes is created to read:

102.125 (2) ASSISTANCE BY DEPARTMENT OF JUSTICE. The department of workforce development may request the department of justice to assist the department of workforce development in an investigation under sub. (1) or in the investigation of any other suspected fraudulent activity on the part of an employer, employee, insurer, health care provider, or other person related to worker's compensation.

SECTION 28. 102.13 (2) (b) of the statutes is amended to read:

102.13 (2) (b) A physician, chiropractor, podiatrist, psychologist, dentist, physician assistant, advanced practice nurse prescriber, hospital, or health service provider shall furnish a legible, certified duplicate of the written material requested under par. (a) in paper format upon payment of the actual costs of preparing the certified duplicate, not to exceed the greater of 45 cents per page or \$7.50 per request, plus the actual costs of postage, or shall furnish a legible, certified duplicate of that material in electronic format upon payment of \$26 per request. Any person who refuses to provide certified duplicates of written material in the person's custody that is requested under par. (a) shall be liable for reasonable and necessary costs and, notwithstanding s. 814.04 (1), reasonable attorney fees incurred in enforcing the requester's right to the duplicates under par. (a).

SECTION 29. 102.13 (2) (c) of the statutes is amended to read:

102.13 (2) (c) Except as provided in this paragraph, if an injured employee has a period of temporary disabil-

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ity that exceeds 3 weeks or a permanent disability, if the injured employee has undergone surgery to treat his or her injury, other than surgery to correct a hernia, or if the injured employee sustained an eye injury requiring medical treatment on 3 or more occasions off the employer's premises, the department may by rule require the insurer or self-insured employer to submit to the department a final report of the employee's treating practitioner. The department may not require an insurer or self-insured employer to submit to the department a final report of an employee's treating practitioner when the insurer or selfinsured employer denies the employee's claim for compensation in its entirety and the employee does not contest that denial. A treating practitioner shall complete a final report on a timely basis and may charge a reasonable fee for the completion of the final report, not to exceed \$100, but may not require prepayment of that fee. An insurer or self-insured employer that disputes the reasonableness of a fee charged for the completion of a treatment practitioner's final report may submit that dispute to the department for resolution under s. 102.16 (2).

SECTION 30. 102.17 (1) (a) 3. of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

102.17 (1) (a) 3. If a party in interest claims that the employer or insurer has acted with malice or bad faith as described in s. 102.18 (1) (b) $\underline{3}$ or (bp), that party shall provide written notice stating with reasonable specificity the basis for the claim to the employer, the insurer, the department, and the division before the division schedules a hearing on the claim of malice or bad faith.

SECTION 31. 102.17 (4) of the statutes is amended to read:

102.17 (4) Except as provided in this subsection and s. 102.555 (12) (b), in the case of occupational disease, the right of an employee, the employee's legal representative, or a dependent to proceed under this section shall not extend beyond 12 years after the date of the injury or death or after the date that compensation, other than for treatment or burial expenses, was last paid, or would have been last payable if no advancement were made, whichever date is latest, and in the case of traumatic injury, that right shall not extend beyond 6 years after that date. In the case of occupational disease; a traumatic injury resulting in the loss or total impairment of a hand or any part of the rest of the arm proximal to the hand or of a foot or any part of the rest of the leg proximal to the foot, any loss of vision, or any permanent brain injury; or a traumatic injury causing the need for an artificial spinal disc or a total or partial knee or hip replacement, there shall be no statute of limitations, except that benefits or treatment expense for an occupational disease becoming due 12 years after the date of injury or death or last payment of compensation, other than for treatment or burial expenses, shall be paid from the work injury supplemental benefit fund under s. 102.65 and in the manner provided in s. 102.66 and benefits or treatment expense for such a

traumatic injury becoming due 42 6 years after that date shall be paid from that fund and in that manner if the date of injury or death or last payment of compensation, other than for treatment or burial expenses, is before April 1, 2006. Payment of wages by the employer during disability or absence from work to obtain treatment shall be considered payment of compensation for the purpose of this section if the employer knew of the employee's condition and its alleged relation to the employment.

SECTION 32. 102.175 (3) of the statutes is created to read:

102.175 (3) (a) If it is established by the certified report of a physician, podiatrist, surgeon, psychologist, or chiropractor under s. 102.17 (1) (d) 1., a record of a hospital or sanitorium under s. 102.17 (1) (d) 2., or other competent evidence that an injured employee has incurred permanent disability, but that a percentage of that disability was caused by an accidental injury sustained in the course of employment with the employer against whom compensation is claimed and a percentage of that disability was caused by other factors, whether occurring before or after the time of the accidental injury, the employer shall be liable only for the percentage of permanent disability that was caused by the accidental injury. If, however, previous permanent disability is attributable to occupational exposure with the same employer, the employer is also liable for that previous permanent disability so established.

(b) A physician, podiatrist, surgeon, psychologist, or chiropractor who prepares a certified report under s. 102.17 (1) (d) 1. relating to a claim for compensation for an accidental injury causing permanent disability that was sustained in the course of employment with the employer against whom compensation is claimed shall address in the report the issue of causation of the disability and shall include in the report an opinion as to the percentage of permanent disability that was caused by the accidental injury and the percentage of permanent disability that was caused by other factors, including occupational exposure with the same employer, whether occurring before or after the time of injury.

(c) Upon request of the department, the division, the employer, or the employer's worker's compensation insurer, an injured employee who claims compensation for an injury causing permanent disability shall disclose all previous findings of permanent disability or other impairments that are relevant to that injury.

SECTION 33. 102.18 (1) (b) of the statutes, as affected by 2015 Wisconsin Act 55, is renumbered 102.18 (1) (b) 1. and amended to read:

102.18 (1) (b) 1. Within 90 days after the final hearing and close of the record, the division shall make and file its findings upon the ultimate facts involved in the controversy, and its order, which shall state the division's determination as to the rights of the parties. Pending the final determination of any controversy before it, the division, after any hearing, may, in its discretion, make interlocutory findings, orders, and awards, which may be enforced in the same manner as final awards.

2. The division may include in any interlocutory or final award or order an order directing the employer or insurer to pay for any future treatment that may be necessary to cure and relieve the employee from the effects of the injury or to pay for a future course of instruction or other rehabilitation training services provided under a rehabilitation training program developed under s. 102.61 (1) or (1m).

3. If the division finds that the employer or insurer has not paid any amount that the employer or insurer was directed to pay in any interlocutory order or award and that the nonpayment was not in good faith, the division may include in its final award a penalty not exceeding 25 percent of each amount that was not paid as directed.

4. When there is a finding that the employee is in fact suffering from an occupational disease caused by the employment of the employer against whom the application is filed, a final award dismissing the application upon the ground that the applicant has suffered no disability from the disease shall not bar any claim the employee may have for disability sustained after the date of the award.

SECTION 34. 102.18 (3) of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

102.18 (3) A party in interest may petition the commission for review of an examiner's decision awarding or denying compensation if the department, the division, or the commission receives the petition within 21 days after the department or the division mailed a copy of the examiner's findings and order to the last-known addresses of the parties in interest. The commission shall dismiss a petition that is not timely filed within those 21 days unless the petitioner shows probable good cause that the petition was filed late for a reason for failure to timely file that was beyond the petitioner's control. If no petition is filed within those 21 days after the date on which a copy of the findings or order of the examiner is mailed to the last-known addresses of the parties in interest, the findings or order shall be considered final unless set aside, reversed, or modified by the examiner within that time. If the findings or order are set aside by the examiner, the status shall be the same as prior to the setting aside of the findings or order. If the findings or order are reversed or modified by the examiner, the time for filing a petition commences on the date on which notice of the reversal or modification is mailed to the last-known addresses of the parties in interest. The commission shall either affirm, reverse, set aside, or modify the findings or order, in whole or in part, or direct the taking of additional evidence. The commission's action shall be based on a review of the evidence submitted.

SECTION 35. 102.18 (4) (b) of the statutes is amended to read:

102.18 (4) (b) Within 28 days after <u>the date of</u> a decision of the commission is <u>mailed</u> to the last-known address of each party in interest, the commission may, on its own motion, set aside the decision for further consideration.

SECTION 36. 102.21 of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

102.21 Payment of awards by municipalities local governmental units. Whenever When an award is made under this chapter or s. 66.191, 1981 stats., against any municipality local governmental unit, the person in whose favor the award is made shall file a certified copy of the award with the municipal clerk of the local governmental unit. Unless an appeal is taken, within 20 days after that filing, the municipal clerk shall draw an order on the municipal treasurer of the local governmental unit for the payment of the award. If upon appeal the award is affirmed in whole or in part, the municipal clerk shall draw an order for payment of the award within 10 days after a certified copy of the judgment affirming the award is filed with that clerk. If the award or judgment provides for more than one payment, the municipal clerk shall draw orders for payment as the payments become due. No statute relating to the filing of claims against, or the auditing, allowing, and payment of claims by, a municipality local governmental unit applies to the payment of an award or judgment under this section.

SECTION 37. 102.23 (1) (a) of the statutes, as affected by 2015 Wisconsin Act 55, is renumbered 102.23 (1) (a) 1. and amended to read:

102.23 (1) (a) 1. The findings of fact made by the commission acting within its powers shall, in the absence of fraud, be conclusive. The order or award granting or denying compensation, either interlocutory or final, whether judgment has been rendered on the order or award or not, is subject to review only as provided in this section and not under ch. 227 or s. 801.02. The commission shall identify in the order or award the persons that must be made parties to an action for review of the order or award.

2. Within 30 days after the date of an order or award made by the commission either originally or after the filing of a petition for review with the department, the division, or the commission under s. 102.18, any party aggrieved by the order or award may commence an action in circuit court for review of the order or award by serving a complaint as provided in par. (b) and filing the summons and complaint with the clerk of the circuit court commence, in circuit court, an action against the commission for the review of the order or award, in which action the adverse party shall also be made a defendant. The summons and complaint shall name the party commencing the action as the plaintiff and shall name as defendants the commission and all persons identified by the commission under subd. 1. If the circuit court determines that any other person is necessary for the proper resolution of the action, the circuit court may join that person as a party to the action, unless joinder of the person would unduly delay the resolution of the action. If the circuit court is satisfied that a party in interest has been prejudiced because of an exceptional delay in the receipt of a copy of any finding or order, the circuit court may extend the time in within which an action may be commenced by an additional 30 days.

<u>3.</u> The proceedings shall be in the circuit court of the county where the plaintiff resides, except that if the plaintiff is a state agency, the proceedings shall be in the circuit court of the county where the defendant resides. The proceedings may be brought in any circuit court if all parties stipulate and that court agrees.

SECTION 38. 102.23 (1) (c) of the statutes is amended to read:

102.23 (1) (c) Except as provided in par. (cm), the <u>The</u> commission shall serve its answer to the complaint within 20 days after the service of the complaint, and, within the like time, the adverse party. Except as provided in par. (cm), any other defendant may serve an answer to the complaint within 20 days after the service of the complaint, which answer may, by way of counterclaim or cross complaint, ask for the review of the order or award referred to in the complaint, with the same effect as if the party defendant had commenced a separate action for the review thereof of the order or award.

SECTION 39. 102.23 (1) (cm) of the statutes is amended to read:

102.23 (1) (cm) If an adverse party to the proceeding a defendant in an action brought under par. (a) is an insurance company, the insurance company may serve an answer to the complaint within 45 days after the service of the complaint.

SECTION 40. 102.28 (2) (a) of the statutes is amended to read:

102.28 (2) (a) Duty to insure payment for compensation. Unless exempted by the department under par. (b) or (bm) or sub. (3), every employer, as described in s. 102.04 (1), shall insure payment for that compensation <u>under this chapter</u> in an insurer authorized to do business in this state. A joint venture may elect to be an employer under this chapter and obtain insurance for payment of compensation. If a joint venture that is subject to this chapter only because the joint venture elected to be an employer under this chapter is dissolved and cancels or terminates its contract for the insurance of compensation under this chapter, that joint venture is deemed to have effected withdrawal, which shall be effective on the day after the contract is canceled or terminated.

SECTION 41. 102.28 (2) (b) (title) of the statutes is amended to read:

102.28 (2) (b) (title) *Exemption from duty to insure:* <u>employers generally</u>.

SECTION 42. 102.28 (2) (bm) of the statutes is created to read:

102.28 (2) (bm) *Exemption from duty to insure; governmental employers.* 1. Subject to subds. 2. to 4., if the state or a local governmental unit that has independent taxing authority is not partially insured or fully insured for its liability for the payment of compensation under this chapter, or to the extent that the state or a local governmental unit that has independent taxing authority is not partially insured for that liability under one or more contracts issued with the consent of the department under s. 102.31 (1) (b), and if the state or local governmental unit agrees to report faithfully all compensable injuries and to comply with this chapter and all rules of the department, the state or local governmental unit may elect to self–insure that liability without further order of the department.

2. Notwithstanding the absence of an order of exemption from the duty to insure under par. (a), the state or a local governmental unit that elects to self-insure as provided in subd. 1. is exempt from that duty. Notwithstanding that exemption, if the state or a local governmental unit that elects to self-insure as provided in subd. 1. desires partial insurance or divided insurance, the state or local governmental unit shall obtain the consent of the department under s. 102.31 (1) (b) to the issuance of a contract providing such insurance.

3. a. A local governmental unit that elects to selfinsure its liability for the payment of compensation under this chapter shall notify the department of that election in writing before commencing to self-insure that liability and shall notify the department of its intent to continue to self-insure that liability every 3 years after that initial notice. A local government unit that wishes to withdraw that election shall notify the department of that withdrawal not less than 30 days before the effective date of that withdrawal.

b. A notice under subd. 3. a. shall be accompanied by a resolution adopted by the governing body of the local governmental unit and signed by the elected or appointed chief executive of the local governmental unit stating that the governing body intends and agrees to self–insure the liability of the local governmental unit for the payment of compensation under this chapter and that the local government unit agrees to report faithfully all compensable injuries and to comply with this chapter and all rules of the department.

4. An election to self-insure under subd. 1. is subject to revocation under par. (c) 2. Once such an election is revoked, the employer whose election is revoked may not elect to self-insure its liability for the payment of compensation under this chapter unless at least 3 calendar years have elapsed since the revocation and the department finds that the employer's financial condition is adequate to pay its employees' claims for compensation, that the employer has not received an excessive number of claims for compensation, and that the employer has faithfully discharged its obligations under this chapter and the rules of the department.

SECTION 43. 102.28 (2) (c) (title) of the statutes is amended to read:

102.28 (2) (c) (title) *Revocation of exemption <u>or elec-</u> tion*.

SECTION 44. 102.28 (2) (c) of the statutes is renumbered 102.28 (2) (c) 1. and amended to read:

102.28 (2) (c) 1. The department, after seeking the advice of the self-insurers council, may revoke an exemption granted to an employer under par. (b), upon giving the employer 10 days' written notice, if the department finds that the employer's financial condition is inadequate to pay its employees' claims for compensation, that the employer has received an excessive number of claims for compensation, or that the employer has failed to discharge faithfully its obligations according to the agreement contained in the application for exemption. The employer may, within

3. Within 10 days after receipt of the a notice of revocation, under subd. 1. or 2., the employer may request in writing a review of the revocation by the secretary or the secretary's designee and the secretary or the secretary's designee shall review the revocation within 30 days after receipt of the request for review. If the employer is aggrieved by the determination of the secretary or the secretary's designee, the employer may, within 10 days after receipt of notice of that determination, request a hearing under s. 102.17. If the secretary or the secretary's designee determines that the employer's exemption or election should be revoked, the employer shall obtain insurance coverage as required under par. (a) immediately upon receipt of notice of that determination and, notwithstanding the pendency of proceedings under ss. 102.17 to 102.25, shall keep that coverage in force until another exemption under par. (b) is granted or another election under par. (bm) is made.

SECTION 45. 102.28 (2) (c) 2. of the statutes is created to read:

102.28 (2) (c) 2. The department may revoke an election made by an employer under par. (bm), upon giving the employer 10 days' written notice, if the department finds that the employer's financial condition is inadequate to pay its employees' claims for compensation, that the employer has received an excessive number of claims for compensation, or that the employer has failed to discharge faithfully its obligations under this chapter and the rules of the department.

SECTION 46. 102.28 (2) (d) of the statutes is amended to read:

102.28 (2) (d) Effect of insuring with unauthorized insurer. An employer who procures an exemption under par. (b) and thereafter If an employer that is exempted under par. (b) or (bm) from the duty to insure under par. (a) enters into any agreement for excess insurance coverage with an insurer not authorized to do business in this

state, the employer shall report that agreement to the department immediately. The placing of such coverage shall not by itself be grounds for revocation of the exemption.

SECTION 47. 102.28 (2) (e) of the statutes is created to read:

102.28 (2) (e) *Rules*. The department shall promulgate rules to implement this subsection.

SECTION 48. 102.28 (7) (a) of the statutes is amended to read:

102.28 (7) (a) If an employer who is currently or was formerly exempted by written order of the department under sub. (2) (b) is unable to pay an award, judgment is rendered in accordance with s. 102.20 against that employer, and execution is levied and returned unsatisfied in whole or in part, payments for the employer's liability shall be made from the fund established under sub. (8). If a currently or formerly exempted employer files for bankruptcy and not less than 60 days after that filing the department has reason to believe that compensation payments due are not being paid, the department in its discretion may make payment for the employer's liability from the fund established under sub. (8). The secretary of administration shall proceed to recover such those payments from the employer or the employer's receiver or trustee in bankruptcy, and may commence an action or proceeding or file a claim therefor for those payments. The attorney general shall appear on behalf of the secretary of administration in any such action or proceeding. All moneys recovered in any such action or proceeding shall be paid into the fund established under sub. (8).

SECTION 49. 102.28 (7) (b) of the statutes is renumbered 102.28 (7) (b) 1. and amended to read:

102.28 (7) (b) 1. Each employer exempted by written order of the department under sub. (2) (b) shall pay into the fund established by sub. (8) -a sum equal to that assessed against each of the other such exempt employers upon the issuance of an initial order. The order an initial assessment based on orders of the department as provided in subd. 2. An order of the department requiring exempt employers to pay into that fund shall provide for -a sum an amount that is sufficient to secure estimated payments of the an insolvent exempt employer due for the period up to the date of the order and for one year following the date of the order and to pay the estimated cost of insurance carrier or insurance service organization services under par. (c). Payments ordered to be made to the fund shall be paid to the department within 30 days after the date of the order. If additional moneys are required, further assessments shall be made based on orders of the department with as provided under subd. 2.

2. An initial or further assessment under subd. 1. shall <u>be</u> prorated on the basis of the gross payroll for this state of the exempt employer, <u>as</u> reported to the department for the previous calendar year for unemployment insurance purposes under ch. 108. If the <u>or</u>, if an exempt employer

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is not covered under ch. 108, then the department shall determine on the basis of the comparable gross payroll for the exempt employer as determined by the department. If payment of any assessment made under this subsection subd. 1. is not made within 30 days of after the date of the order of the department, the attorney general may appear on behalf of the state to collect the assessment.

SECTION 50. 102.28 (7) (bm) of the statutes is created to read:

102.28 (7) (bm) The department may not do any of the following:

1. Require an employer that elects under sub. (2) (bm) to self-insure its liability for the payment of compensation under this chapter to pay into the fund established under sub. (8).

2. Make any payments from the fund established under sub. (8) for the liability under this chapter of an employer that elects under sub. (2) (bm) to self-insure its liability for the payment of compensation under this chapter, whether currently or formerly exempt from the duty to insure under sub. (2) (a).

SECTION 51. 102.28 (7) (d) of the statutes is created to read:

102.28 (7) (d) The department shall promulgate rules to implement this subsection.

SECTION 52. 102.29 (1) (b) 2. of the statutes is amended to read:

102.29 (1) (b) 2. Out of the balance remaining after the deduction and payment specified in subd. 1., the employer, the insurance carrier, or, if applicable, the uninsured employers fund or the work injury supplemental benefit fund shall be reimbursed for all payments made by the employer, insurance carrier, or department, or which the employer, insurance carrier, or department may be obligated to make in the future, under this chapter, except that the employer, insurance carrier, or department shall not be reimbursed for any payments made or to be made under s. 102.18 (1) (b) 3. or (bp), 102.22, 102.35 (3), 102.57, or 102.60.

SECTION 53. 102.29 (12) of the statutes is created to read:

102.29 (12) No individual who is an employee of an entity described in s. 102.07 (20) for purposes of this chapter and who makes a claim for compensation under this chapter may make a claim or maintain an action in tort against the person described in s. 102.07 (20) who received the services from which the claim arose.

SECTION 53m. 102.31 (1) (c) 2. of the statutes is amended to read:

102.31 (1) (c) 2. An intermediate agency or publisher referred to in s. 102.07 (6) of a newspaper or magazine may, under its own contract of insurance, cover liability of employees as defined in s. 102.07 (6) persons selling or distributing the newspaper or magazine on the street or from house to house for an intermediate or independent

news agency, if the contract of insurance of the publisher or intermediate agency is endorsed to cover those persons. If the publisher so covers, the intermediate or independent news agency need not cover liability for those persons.

SECTION 54. 102.31 (2) (b) 2. of the statutes is amended to read:

102.31 (2) (b) 2. Regardless of whether the notices required under par. (a) have been given, a cancellation or termination is effective upon the effective date of replacement insurance coverage obtained by the employer Θr , the effective date of an order under s. 102.28 (2) (b) exempting the employer from carrying the duty to carry insurance under s. 102.28 (2) (a), or the effective date of an election by an employer under s. 102.28 (2) (bm) to self–insure its liability for the payment of compensation under this chapter.

SECTION 55. 102.315 (2) of the statutes is amended to read:

102.315 (2) EMPLOYEE LEASING COMPANY LIABLE. An employee leasing company is liable under s. 102.03 for all compensation payable under this chapter to a leased employee, including any payments required under s. 102.16 (3), 102.18 (1) (b) <u>3</u>. or (bp), 102.22 (1), 102.35 (3), 102.57, or 102.60. Except as permitted under s. 102.29, an employee leasing company may not seek or receive reimbursement from another employer for any payments made as a result of that liability. An employee leasing company is not liable under s. 102.03 for any compensation payable under this chapter to an employee of a client who is not a leased employee.

SECTION 56. 102.425 (1) (cm) of the statutes is created to read:

102.425 (1) (cm) "Licensed pharmacy" means a pharmacy licensed under s. 450.06 or 450.065.

SECTION 57. 102.425 (3) (a) (intro.) of the statutes is amended to read:

102.425 (3) (a) (intro.) The liability of an employer or insurer for the cost of a prescription drug dispensed under sub. (2) for outpatient use by an injured employee, including a prescription drug dispensed outside of a licensed pharmacy, is limited to the sum of all of the following:

SECTION 58. 102.425 (3) (a) 1. of the statutes is amended to read:

102.425 (3) (a) 1. The average wholesale price of the prescription drug as of the date on which the prescription drug is dispensed, as quoted in the Drug Topics Red Book, published by Medical Economics Company, Inc., or its successor, or, if that book is discontinued and becomes unavailable, as quoted in another nationally recognized pricing source determined by the department.

SECTION 59. 102.425 (4m) (b) of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

102.425 (4m) (b) An employer or insurer that disputes the reasonableness of the amount charged for a pre-

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scription drug dispensed under sub. (2) for outpatient use by an injured employee or the department or division under sub. (4) (b) or s. 102.16 (1m) (c) or 102.18 (1) (bg) 3. shall provide, within 30 days after receiving a completed bill for the prescription drug, reasonable written notice to the pharmacist or practitioner that the charge is being disputed. After receiving reasonable written notice under this paragraph or under sub. (4) (b) or s. 102.16 (1m) (c) or 102.18 (1) (bg) $1 \cdot 3$. that a prescription drug charge is being disputed, a pharmacist or practitioner may not collect the disputed charge from, or bring an action for collection of the disputed charge against, the employee who received the prescription drug.

SECTION 60. 102.43 (5) (c) of the statutes is amended to read:

102.43(5)(c) Compensation for temporary disability on account of receiving instruction under s. 102.61 (1) or (1m) shall not be reduced under sub. (2) on account of any wages earned for the first 24 hours worked by an employee during a week in which the employee is receiving that instruction. If an employee performs more than 24 hours of work during a week in which the employee is receiving that instruction, all wages earned for hours worked in excess of 24 during that week shall be offset against the employee's average weekly wage in calculating compensation for temporary disability under sub. (2). An employee who is receiving compensation for temporary disability on account of receiving instruction under s. 102.61 (1) or (1m) shall report any wages earned during the period in which the employee is receiving that instruction to the insurance carrier or self-insured employer paying that compensation. This paragraph does not apply after April 30, 2014.

SECTION 61. 102.43 (9) (e) of the statutes is created to read:

102.43 (9) (e) The employee's employment with the employer has been suspended or terminated due to misconduct, as defined in s. 108.04 (5), or substantial fault, as defined in s. 108.04 (5g) (a), by the employee connected with the employee's work.

SECTION 62. 102.44 (1) (ag) of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

102.44 (1) (ag) Notwithstanding any other provision of this chapter, every employee who is receiving compensation under this chapter for permanent total disability or continuous temporary total disability more than 24 months after the date of injury resulting from an injury that occurred prior to January 1, 2001 2003, shall receive supplemental benefits that shall be payable by the employer or the employer's insurance carrier, or in the case of benefits payable to an employee under s. 102.66, shall be paid by the department out of the fund created under s. 102.65. Those supplemental benefits shall be paid only for weeks of disability occurring after January 1, 2003 2005, and shall continue during the period of such total disability subsequent to that date.

SECTION 63. 102.44 (1) (am) of the statutes is amended to read:

102.44 (1) (am) If the employee is receiving the maximum weekly benefits in effect at the time of the injury, the supplemental benefit for a week of disability occurring after May 1, 2010 the effective date of this paragraph [LRB inserts date], shall be an amount that, when added to the regular benefit established for the case, shall equal \$582 \$669.

SECTION 64. 102.44 (1) (b) of the statutes is amended to read:

102.44 (1) (b) If the employee is receiving a weekly benefit that is less than the maximum benefit that was in effect on the date of the injury, the supplemental benefit for a week of disability occurring after May 1, 2010 the effective date of this paragraph [LRB inserts date], shall be an amount sufficient to bring the total weekly benefits to the same proportion of \$582 \$669 as the employee's weekly benefit bears to the maximum in effect on the date of injury.

SECTION 65. 102.44 (4m) of the statutes is created to read:

102.44 (4m) (a) The department shall promulgate rules establishing minimum permanent disability ratings for amputation levels, losses of motion, sensory losses, and surgical procedures resulting from injuries for which permanent partial disability is claimed under sub. (3) or (4). At least once every 8 years the department shall review and revise those minimum permanent disability ratings as necessary to reflect advances in the science of medicine. Before the department may revise those ratings, the department shall appoint a medical advisory committee under s. 227.13, composed of physicians practicing in one or more areas of specialization or treating disciplines within the medical profession, to review and recommend revision of those ratings, based on typical loss of function, to the department and the council on worker's compensation.

(b) In considering an individual for appointment to the medical advisory committee under par. (a), the department shall consider the individual's training and experience, the number of years the individual has been practicing in the individual's area of specialization or treating discipline, any certifications by a recognized medical speciality board or other agency held by the individual, any recommendations made by organizations that regulate or promote profession standards in the area of specialization or treating discipline in which the individual practices, and any other factors that the department determines are relevant to the individual's knowledge and ability to serve as a member of the medical advisory committee.

SECTION 66. 102.58 of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

102.58 Decreased compensation. If injury is caused by the failure of the employee to use safety

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devices that are provided in accordance with any statute, rule, or order of the department of safety and professional services and that are adequately maintained, and the use of which is reasonably enforced by the employer, or if injury results from the employee's failure to obey any reasonable rule adopted and reasonably enforced by the employer for the safety of the employee and of which the employee has notice, or if injury results from the intoxication of the employee by alcohol beverages, as defined in s. 125.02 (1), or use of a controlled substance, as defined in s. 961.01 (4), or a controlled substance analog, as defined in s. 961.01 (4m), the compensation and death benefit provided in this chapter shall be reduced by 15 percent but the total reduction may not exceed \$15,000. If an employee violates the employer's policy concerning employee drug or alcohol use and is injured, and if that violation is causal to the employee's injury, no compensation or death benefits shall be payable to the injured employee or a dependent of the injured employee. Nothing in this section shall reduce or eliminate an employer's liability for incidental compensation under s. 102.42 (1) to (8) or drug treatment under s. 102.425.

SECTION 66m. 102.60 (7) of the statutes is amended to read:

102.60 (7) This section does not apply to an employee, as defined in s. 102.07 (6), a person selling or distributing newspapers or magazines on the street or from house to house if the agency or publisher for whom the person sells or distributes newspapers or magazines establishes by affirmative proof that at the time of the injury the employee person was not employed with the actual or constructive knowledge of the agency or publisher.

SECTION 67. 102.75 (1) of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

102.75(1) The department shall assess upon and collect from each licensed worker's compensation insurance carrier and from each employer exempted under s. 102.28 (2) by special order or by rule, (b) or (bm) from the duty to carry insurance under s. 102.28 (2) (a) the proportion of total costs and expenses incurred by the council on worker's compensation for travel and research and by the department, the division, and the commission in the administration of this chapter for the current fiscal year, plus any deficiencies in collections and anticipated costs from the previous fiscal year, that the total indemnity paid or payable under this chapter by each such carrier and exempt employer in worker's compensation cases initially closed during the preceding calendar year, other than for increased, double, or treble compensation, bore to the total indemnity paid in cases closed the previous calendar year under this chapter by all carriers and exempt employers, other than for increased, double, or treble compensation. The council on worker's compensation, the division, and the commission shall annually certify any costs and expenses for worker's compensation activities to the department at such time as the secretary requires.

SECTION 68. 102.75 (2) of the statutes, as affected by 2015 Wisconsin Act 55, is amended to read:

102.75 (2) The department shall require each licensed worker's compensation insurance carrier and employer exempted under s. 102.28 (2) (b) or (bm) from the duty to insure under s. 102.28 (2) (a) to make the payments required under sub. (1) for each fiscal year on such dates as the department prescribes. The department shall also require each licensed worker's compensation insurance carrier to make the payments required under sub. (1g) for each fiscal year on those dates. Each such payment shall be a sum equal to a proportionate share of the annual costs and expenses assessed upon each carrier and employer as estimated by the department. Interest shall accrue on amounts not paid within 30 days after the date prescribed by the department under this subsection at the rate of 1 percent per month. All interest payments received under this subsection shall be deposited in the fund established under s. 102.65.

SECTION 69. 102.75 (4) of the statutes is amended to read:

102.75 (4) From the appropriation under s. 20.445 (1) (ra), the department shall allocate the amounts that it collects in application fees from employers applying for exemption under s. 102.28 (2) (b) and the annual amount that it collects from employers that have been exempted under s. 102.28 (2) (b) to fund the activities of the department under s. 102.28 (2) (b) and (c) with respect to those employers.

SECTION 70. 102.81 (1) (a) of the statutes is amended to read:

102.81 (1) (a) If an employee of an uninsured employer, other than an employee who is eligible to receive alternative benefits under s. 102.28 (3), suffers an injury for which the uninsured employer is liable under s. 102.03, the department or the department's reinsurer shall pay to or on behalf of the injured employee or to the employee's dependents an amount equal to the compensation owed them by the uninsured employer under this chapter except penalties and interest due under ss. 102.16 (3), 102.18 (1) (b) <u>3.</u> and (bp), 102.22 (1), 102.35 (3), 102.57, and 102.60.

SECTION 71. 108.10 (4) of the statutes is amended to read:

108.10 (4) The department or the employing unit may commence action for the judicial review of a commission decision under this section, provided the department, or the employing unit, after exhausting the remedies provided under this section, has commenced such action within 30 days after such decision was mailed to the employing unit's last-known address. The scope of judicial review, and the manner thereof insofar as applicable, shall be the same as that provided in s. 108.09 (7). In an action commenced by an employing unit under this section, the department shall be an adverse party <u>a</u> defendant under s. 102.23 (1) (a) and shall be named as a party <u>defendant</u> in the <u>summons and</u> complaint commencing the action.

SECTION 72. 165.60 of the statutes is amended to read:

165.60 Law enforcement. The department of justice is authorized to enforce ss. 101.123 (2), (2m), and (8), 175.60 (17) (e), 944.30 (1m), 944.31, 944.33, 944.34, 945.02 (2), 945.03 (1m), and 945.04 (1m) and ch. 108 and, with respect to a false statement submitted or made under s. 175.60 (7) (b) or (15) (b) 2. or as described under s. 175.60 (17) (c), to enforce s. 946.32, is authorized to assist the department of workforce development in the investigation and prosecution of suspected fraudulent activity related to worker's compensation as provided in s. 102.125, and is invested with the powers conferred by law upon sheriffs and municipal police officers in the performance of those duties. This section does not deprive or relieve sheriffs, constables, and other local police officers of the power and duty to enforce those sections, and those officers shall likewise enforce those sections.

SECTION 73. Nonstatutory provisions.

(1) FRAUD INVESTIGATION AND PROSECUTION; DEPART-MENT OF JUSTICE POSITION AUTHORIZATION. The authorized FTE positions for the department of justice are increased by 1.0 PR-S position, to be funded from the appropriation under section 20.455 (2) (k) of the statutes, for the purpose of investigating and prosecuting fraudulent activity related to worker's compensation.

SECTION 74. Fiscal changes.

(1) REPLACEMENT OF UNINSURED EMPLOYERS FUND COMPUTER SYSTEM. In the schedule under section 20.005 (3) of the statutes for the appropriation to the department of workforce development under section 20.445 (1) (ra) of the statutes, as affected by the acts of 2015, the dollar amount for fiscal year 2015–16 is increased by \$200,000, and the dollar amount for fiscal year 2016–17 is increased by \$796,000, to replace the computer system used for the accounting of collections and other moneys received for the uninsured employers fund and of payments made from that fund.

SECTION 75. Initial applicability.

(1) JUDICIAL REVIEW OF WORKER'S COMPENSATION DECISIONS. The treatment of sections 102.23 (1) (a), (c), and (cm) and 108.10 (4) of the statutes first applies to an action for the review of an order or award of the labor and industry review commission commenced in circuit court on the effective date of this subsection.

(2) ADMINISTRATIVE REVIEW OF WORKER'S COMPENSA-TION DECISIONS. The treatment of section 102.18 (3) and (4) (b) of the statutes first applies to a petition for the review of a decision of a department of workforce development hearing examiner filed with the labor and industry review commission on the effective date of this subsection.

SECTION 76. Effective dates. This act takes effect on the day after publication, except as follows:

(1) JUDICIAL REVIEW OF WORKER'S COMPENSATION DECISIONS. The treatment of sections 102.23 (1) (a), (c), and (cm) and 108.10 (4) of the statutes and SECTION 75 (1) of this act take effect on July 1, 2016.

(2) ADMINISTRATIVE REVIEW OF WORKER'S COMPENSA-TION DECISIONS. The treatment of section 102.18 (3) and (4) (b) of the statutes and SECTION 75 (2) of this act take effect on July 1, 2016.