No. 2021-6928

Official Order of the Texas Commissioner of Workers' Compensation

Date: 7/16/2021

Subject Considered:

Accident Fund General Insurance Company P.O. Box 40790 Lansing, Michigan 48901-7990

Consent Order
DWC Enforcement File No. 27178

General remarks and official action taken:

This is a consent order with Accident Fund General Insurance Company (Accident Fund). The commissioner of the Texas Department of Insurance, Division of Workers' Compensation (DWC) considers whether DWC should take disciplinary action against Accident Fund.

Waiver

Accident Fund acknowledges that the Texas Labor Code and other applicable laws provide certain rights. Accident Fund waives all of these rights, and any other procedural rights that apply, in consideration of the entry of this consent order.

Findings of Fact

1. Accident Fund holds a certificate of authority issued by the Texas Department of Insurance to transact the business of insurance pursuant to Tex. Ins. Code §§ 801.051-801.053 and is licensed to write multiple lines of insurance in Texas, including workers' compensation/employers' liability insurance.

2. Accident Fund was classified as "average" tier in the 2009, 2010, 2012, 2014, 2016, and 2018 Performance Based Oversight (PBO) assessments. Accident Fund was not selected to be tiered in the 2007 PBO assessment.

Failure to Timely Initiate Payment of Accrued Temporary Income Benefits

| 3. | Accident Fund was required to pay temporary income benefits (TIBs) | <u>to a</u> n injured |
|----|--|-----------------------|
| | employee for the period of through | The TIBs |
| | payment was due seven days after the first day of the pay period | d, which was |
| | Accident Fund issued payment on | which was 14 |
| | days late. | |
| | | |

| 4. | Accident Fund was required to pay | <u> [IBs to</u> an injured employee for the period of |
|----|---------------------------------------|---|
| | through | The TIBs payment was due seven days |
| | after the first day of the pay period | , which was Accident Fund |
| | issued payment on | which was seven days late. |

Assessment of Sanction

- 1. Failure to provide income benefits in a timely and cost-effective manner is harmful to injured employees and the Texas workers' compensation system.
- 2. In assessing the sanction for this case, DWC fully considered the following factors in Tex. Lab. Code § 415.021(c) and 28 Tex. Admin. Code § 180.26(e):
 - the seriousness of the violation, including the nature, circumstances, consequences, extent, and gravity of the prohibited act;
 - the history and extent of previous administrative violations;
 - the violator's demonstration of good faith, including actions it took to rectify the consequences of the prohibited act;
 - the penalty necessary to deter future violations;
 - whether the administrative violation had a negative impact on the delivery of benefits to an injured employee;
 - the history of compliance with electronic data interchange requirements;
 - to the extent reasonable, the economic benefit resulting from the prohibited act; and
 - other matters that justice may require, including, but not limited to:
 - PBO assessments;
 - o prompt and earnest actions to prevent future violations;

- o self-report of the violation;
- o the size of the company or practice;
- o the effect of a sanction on the availability of health care; and
- evidence of heightened awareness of the legal duty to comply with the Texas Workers' Compensation Act and DWC rules.
- 3. DWC found the following factors in Tex. LAB. CODE § 415.021(c) and 28 Tex. ADMIN. CODE § 180.26(e) to be aggravating: the seriousness of the violation, including the nature, circumstances, consequences, extent, and gravity of the prohibited act; the penalty necessary to deter future violations; and whether the administrative violation had a negative impact on the delivery of benefits to an injured employee.
- 4. DWC found the following factors in Tex. LAB. CODE § 415.021(c) and 28 Tex. ADMIN. CODE § 180.26(e) to be mitigating: promptness and earnestness in responding to DWC.
- 5. Accident Fund acknowledges it communicated with DWC about the relevant statutes and rules it violated; the facts establish that the administrative violation occurred; and the proposed sanction is appropriate, including the factors DWC considered under Tex. Lab. Code § 415.021(c) and 28 Tex. Admin. Code § 180.26(e).
- 6. Accident Fund acknowledges that, in assessing the sanction, DWC considered the factors in Tex. Lab. Code § 415.021(c) and 28 Tex. Admin. Code § 180.26(e).

Conclusions of Law

- 1. The commissioner has jurisdiction over this matter pursuant to Tex. Lab. Code §§ 402.001, 402.00114, 402.00116, 402.00128, 414.002, 414.003, 415.002, and 415.021.
- 2. The commissioner has the authority to dispose of this case informally pursuant to Tex. Gov't Code § 2001.056, Tex. Lab. Code §§ 401.021 and 402.00128(b)(7), and 28 Tex. Admin. Code § 180.26(h).

- 3. Accident Fund has knowingly and voluntarily waived all procedural rights to which it may have been entitled regarding the entry of this order, including, but not limited to, issuance and service of notice of intent to institute disciplinary action, notice of hearing, a public hearing, a proposal for decision, a rehearing by the commissioner, and judicial review.
- 4. Pursuant to Tex. Lab. Code § 415.021, the commissioner may assess an administrative penalty against a person who commits an administrative violation.
- 5. Pursuant to Tex. Lab. Code § 415.002(a)(20), an insurance carrier or its representative commits an administrative violation each time it violates a DWC rule.
- 6. Pursuant to Tex. Lab. Code § 415.002(a)(22), an insurance carrier or its representative commits an administrative violation each time it fails to comply with a provision of the Texas Workers' Compensation Act.
- 7. Pursuant to Tex. LAB. Code §§ 408.081, 409.023, and 415.002(a)(16), an insurance carrier must pay benefits weekly, as and when the benefits accrue, without order from the commissioner.
- 8. Pursuant to Tex. Lab. Code §§ 408.081, 408.082, and 409.021 and 28 Tex. Admin. Code §§ 124.3 and 124.7, an insurance carrier is required to initiate payment of TIBs no later than the 15th day after it receives written notice of the injury or the seventh day after the accrual date, unless the insurance carrier notifies DWC and the injured employee in writing of its refusal to pay.
- 9. Accident Fund violated Tex. LAB. CODE §§ 409.021 and 415.002(a)(20) and (22) each time it failed to timely initiate payment of TIBs.

Order

It is ordered that Accident Fund General Insurance Company must pay an administrative penalty of \$6,500 within 30 days from the date of this order. Accident Fund General Insurance Company must pay the administrative penalty by company check, cashier's check, or money order and make it payable to the "State of Texas." Mail the administrative penalty to the Texas Department of Insurance, Attn: DWC Enforcement Section, MC AO-9999, P.O. Box 12030, Austin, Texas 78711-2030.

Cassie Brown

Commissioner of Workers' Compensation

Approved Form and Content:

Mackenzie Arthur

Staff Attorney, Enforcement

Compliance and Investigations

Division of Workers' Compensation

Mackenzie Arthur

Affidavit

| STATE OFWisconsin § | | | | |
|--|-----------------------------------|--|--|--|
| § | | | | |
| COUNTY OF Waukesha § | | | | |
| Before me, the undersigned authority, personally appeared, who being by me duly sworn, deposed as follows: | | | | |
| "My name is <u>Debbie Jaskolski</u> . I s statement, and have personal knowledge of the | | | | |
| I hold the office of Accident Fund General Insurance Company. I a execute this statement. | | | | |
| Accident Fund General Insurance Company has knowingly and voluntarily entered into this consent order and agrees with and consents to the issuance and service of this consent order." | | | | |
| Debbie Jaskolski | | | | |
| Affiant I attest that this signature is valid and confirm that the order was signed on 6/8/2021 SWORN TO AND SUBSCRIBED before me on, 2021. | | | | |
| (NOTARY SEAL) | | | | |
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| | Signature of Notary Public | | | |
| | Printed Name of Notary Public | | | |
| | Commission Expiration | | | |
| | Confidential Information Redacted | | | |

Texas Labor Code §§402.083 and 402.092