No. 2024-8536

Official Order of the Texas Commissioner of Workers' Compensation

Date: 2/20/2024

Subject Considered:

Ace American Insurance Company 115 Wild Basin Road, Suite 207 West Lake Hills, Texas 78746-3347

Consent Order DWC Enforcement File Nos. 32819, 32886, & 32931

General remarks and official action taken:

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

Waiver

Respondent acknowledges that the Texas Labor Code and other applicable laws provide certain rights. Respondent 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. Respondent 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. Respondent was classified as "average" tier in the 2018, 2020, and 2022 Performance Based Oversight (PBO) assessments.

Failure to Timely Pay Accrued Impairment Income Benefits

File No. 32819

3. Respondent was required to pay impairment income benefits (IIBs) to an injured employee from the second and the pay period. Respondent failed to timely pay \$ in IIBs, as follows:

, ,	Payment Period	Date Due	Date Paid	Days Late
a.	to			11
b.	to			4

Failure to Timely Pay Accrued Temporary Income Benefits

File No. 32886

4. Respondent was required to pay temporary income benefits (TIBs) to an injured employee from the temporary income benefits (TIBs) to an injured after the first day of the pay period. Respondent failed to timely pay \$ 100 min TIBs, as follows:

	Payment Period	Date Due	Date Paid	Days Late
a.	to			22
b.	to			91
C.	to			84
d.	to			77
e.	to			70
f.	to		~ ~ ~	63
g.	to			56
h.	to			49
i.	to			42
j.	to			35
k.	to			28
I .	to			21
m.	to			14
n.	to			7

File No. 32931

5. Respondent was required to pay TIBs to an injured employee from through through the time of the TIBs were due seven days after the first day of the pay period. Respondent failed to timely pay **\$** and the time of time of time of the time of time of the time of time of the time of time of

	Payment Period		Date Due	Date Paid	Days Late
a.		to			5
b.		to			49
с.		to			4

6. For the benefit period of **Base 100**, through **Base 100**, Respondent partially paid TIBs 10 days late for six out of seven days for this period. However, Respondent failed to pay TIBs for the seventh day for 49 days.

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:
 - o 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;

- \circ 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 history and extent of previous administrative violations; the penalty necessary to deter future violations; whether the administrative violation had a negative impact on the delivery of benefits to an injured employee; and other matters that justice may require, including the size of the company or practice.
- 4. DWC is aware of no mitigating factors pursuant to Tex. Lab. Code § 415.021(c) and 28 Tex. Admin. Code § 180.26(e).
- 5. Respondent acknowledges communicating with DWC about the relevant statute and rule violations alleged; that the facts establish that the administrative violation(s) occurred; and that 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. Respondent 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, and 414.003.
- 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)(6)-(7), and 28 Tex. Admin. Code § 180.26(h) and (i).
- 3. Respondent 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) and (22), an insurance carrier or its representative commits an administrative violation each time it fails to comply with a DWC rule or a provision of the Texas Workers' Compensation Act.
- 6. 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.

Failure to Timely Pay Accrued IIBs

- 7. Pursuant to Tex. Lab. Code § 408.121(a), an employee's entitlement to IIBs begins the day after the employee reaches maximum medical improvement (MMI).
- 8. Respondent violated Tex. Lab. Code §§ 408.121(a); 409.023; and 415.002(a)(16) and (22); each time Respondent failed to timely pay accrued IIBs.

Failure to Pay Accrued TIBs

- 9. Pursuant to 28 Tex. Admin. Code § 124.7, an insurance carrier is required to pay TIBs no later than the seventh day after the accrual date.
- 10. Respondent violated Tex. Lab. Code §§ 409.023; 415.002(a)(16), (20), and (22); and 28 Tex. Admin. Code § 124.7 each time Respondent failed to timely pay accrued TIBs.

Commissioner's Order Ace American Insurance Company DWC Enforcement File Nos. 32819, 32886, & 32931 Page 6 of 7

Order

It is ordered that Ace American Insurance Company must pay an administrative penalty of \$26,700 within 30 days from the date the Commissioner signs the order.

After receiving an invoice, Ace American Insurance Company must pay the administrative penalty by electronic transfer using the State Invoice Payment Service, 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, PO Box 12030, Austin, Texas 78711-2030.

Jeff Nelson

Commissioner TDI, Division of Workers' Compensation

Approved Form and Content:

Connor Ambrosini Staff Attorney, Enforcement Compliance and Investigations TDI, Division of Workers' Compensation

Unsworn Declaration

STATE OF Delaware	§
	§
COUNTY OF New Castle	§

I am executing this declaration as part of my assigned duties and responsibilities. I declare under penalty of perjury that the facts stated in this document are true and correct.

Daniel S. Hawthorns

Declarant

Executed on______ January 19___, 2024.