(SEE ALSO PROPOSED 2ND SUB)

Provides that, at any time that an examining or attending physician or licensed advanced registered nurse practitioner is contacted by the employer, or a representative of the employer, a written report must be generated by the person or entity initiating contact which fully discloses all subjects discussed and responses given. This report must be completed within five days of the meeting, and a copy must be mailed to the worker no later than the fifth day. Failure to comply with this provision constitutes a violation of RCW 51.48.080 and the penalty shall be paid to the worker.

Provides that, in any circumstance in which an attorney, counselor, vocational nurse case manager, or representative of the employer seeks to meet with an examining or attending physician or licensed advanced registered nurse practitioner to discuss the worker's physical capacities, medical treatment, permanent partial disability, ability to work, or other issues pertaining to the claim, that person shall give at least seven days' prior written notice to the worker or the worker's designated representative. The worker and representative have the right to attend and participate in the conference.

Requires that, within five days of the completion of the meeting, the employer or representative shall create a complete report of the meeting, including all questions asked and information provided. A copy of this report must be mailed to the worker or the worker's designated representative, no later than the fifth day following the meeting.

Provides that, once an appeal has been filed with the board, the department and the employer, as well as the representatives of each, may not have ex parte contact, to discuss the facts or issues in question in the appeal, with any medical provider who has provided treatment to the claimant unless written authorization for such contact is given by the claimant or the claimant's representative. This also applies to medical providers who examined the claimant for consultative purposes at the request of either the claimant or a treating medical provider unless the examination request was initiated by the department.