HOUSE BILL 1725

State of Washington 62nd Legislature 2011 Regular Session

By Representatives Sells, Reykdal, Ormsby, Kenney, and Upthegrove; by request of Department of Labor & Industries

Read first time 02/01/11. Referred to Committee on Labor & Workforce Development.

AN ACT Relating to administrative efficiencies for the workers' compensation program; amending RCW 51.04.030, 51.04.082, 51.16.140, 51.24.060, 51.32.073, 51.32.240, 51.48.120, 51.48.150, and 51.52.050; and adding a new section to chapter 51.14 RCW.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 Sec. 1. RCW 51.04.030 and 2004 c 65 s 1 are each amended to read 7 as follows:

(1) The director shall supervise the providing of prompt and 8 9 efficient care and treatment, including care provided by physician 10 assistants governed by the provisions of chapters 18.57A and 18.71A 11 RCW, acting under a supervising physician, including chiropractic care, and including care provided by licensed advanced registered nurse 12 practitioners, to workers injured during the course of their employment 13 14 at the least cost consistent with promptness and efficiency, without 15 discrimination or favoritism, and with as great uniformity as the 16 various and diverse surrounding circumstances and locations of 17 industries will permit and to that end shall, from time to time, establish and adopt and supervise the administration of printed forms, 18 19 rules, regulations, and practices for the furnishing of such care and

treatment: PROVIDED, That the medical coverage decisions of the 1 2 department do not constitute a "rule" as used in RCW 34.05.010(16), nor are such decisions subject to the rule-making provisions of chapter 3 4 34.05 RCW except that criteria for establishing medical coverage decisions shall be adopted by rule after consultation with the workers' 5 б compensation advisory committee established in RCW 51.04.110: PROVIDED 7 FURTHER, That the department may recommend to an injured worker 8 particular health care services and providers where specialized 9 treatment is indicated or where cost effective payment levels or rates are obtained by the department: AND PROVIDED FURTHER, 10 That the 11 department may enter into contracts for goods and services including, 12 but not limited to, durable medical equipment so long as statewide 13 access to quality service is maintained for injured workers.

(2) The director shall, in consultation with interested persons, 14 15 establish and, in his or her discretion, periodically change as may be necessary, and make available a fee schedule of the maximum charges to 16 be made by any physician, surgeon, chiropractor, hospital, druggist, 17 licensed advanced registered nurse practitioner, physicians' assistants 18 19 as defined in chapters 18.57A and 18.71A RCW, acting under a 20 supervising physician or other agency or person rendering services to 21 injured workers. The department shall coordinate with other state 22 purchasers of health care services to establish as much consistency and 23 uniformity in billing and coding practices as possible, taking into 24 account the unique requirements and differences between programs. No service covered under this title, including services provided to 25 26 injured workers, whether aliens or other injured workers, who are not 27 residing in the United States at the time of receiving the services, 28 shall be charged or paid at a rate or rates exceeding those specified 29 in such fee schedule, and no contract providing for greater fees shall 30 be valid as to the excess. The establishment of such a schedule, exclusive of conversion factors, does not constitute "agency action" as 31 used in RCW 34.05.010(3), nor does such a fee schedule and its 32 associated billing or payment instructions and policies constitute a 33 "rule" as used in RCW 34.05.010(16). 34

35 (3) The director or self-insurer, as the case may be, shall make a 36 record of the commencement of every disability and the termination 37 thereof and, when bills are rendered for the care and treatment of 38 injured workers, shall approve and pay those which conform to the

adopted rules, regulations, established fee schedules, and practices of the director and may reject any bill or item thereof incurred in violation of the principles laid down in this section or the rules, regulations, or the established fee schedules and rules and regulations adopted under it.

6 Sec. 2. RCW 51.04.082 and 1986 c 9 s 2 are each amended to read as 7 follows:

Any notice or order required by this title to be mailed to any 8 9 employer may be served in the manner prescribed by law for personal 10 service of summons and complaint in the commencement of actions in the 11 superior courts of the state, but if the notice or order is mailed, it 12 shall be addressed to the address of the employer as shown by the 13 records of the department, or, if no such address is shown, to such address as the department is able to ascertain by reasonable effort. 14 If requested by the employer, any notice or order may be sent 15 16 electronically. Failure of the employer to receive such notice or 17 order whether served or mailed shall not release the employer from any tax or any increases or penalties thereon. 18

19 <u>NEW SECTION.</u> Sec. 3. A new section is added to chapter 51.14 RCW 20 to read as follows:

(1) When a self-insurer has determined to allow an industrial insurance claim, the self-insurer must issue an order to the injured worker, the last known attending medical provider, and the department within sixty days from the date of notice of a claim. If an allowance order is not issued within the required time, the claim will be deemed allowed.

(2) When a self-insurer determines that a claim should be denied, the self-insurer must forward the claim to the department with a request for denial within sixty days from the date of notice of a claim. If the denial request is not received within the required time, the claim will be deemed allowed.

32 (3) When a self-insurer has determined to reopen an industrial 33 insurance claim, the self-insurer must issue an order to the injured 34 worker, the medical provider named on the worker's reopening 35 application, and the department within ninety days of receipt of the 36 worker's request by the self-insurer. If a reopening order is not

1 issued within the required time, the application will be deemed 2 granted. This authority is limited to those reopening applications 3 made within seven years from the date the first closing order became 4 final.

(4) When a self-insurer determines that an application for 5 б reopening should be denied, the self-insurer must forward the claim to the department with a request for denial within seventy days from the 7 8 date the reopening application is received. The department requires a 9 minimum of twenty days to review the request and issue a further order. If the denial order is not issued within the required time, the 10 11 reopening application will be deemed granted in accordance with RCW 12 51.32.160.

(5) The self-insurer may extend the time for issuing the orders in this section by an additional sixty days for good cause by providing written notice to both the injured worker and the department prior to the expiration of the initial time limit.

(6) A self-insurer may issue an order to establish a worker's monthly wage at the time of injury in accordance with RCW 51.08.178.
When a self-insurer issues a wage order, the self-insurer must send a copy of the order and the documentation used to calculate the wage to the worker and the department. A wage order is not required for the payment of temporary disability compensation under RCW 51.32.090. The department will not issue wage orders on behalf of self-insurers.

(7) The department will, for each order listed in subsections (1) through (6) of this section, develop the form and content of the order to be used by self-insurers. All orders issued by self-insurers must be substantially similar to the order developed by the department. Self-insurers who fail to use substantially similar orders will be subject to penalty. The department may develop additional information that must accompany orders including explanatory letters.

(8) Protests to orders of self-insurers shall be reviewed by the department. The department will issue a further determinative order as provided in RCW 51.52.050. If no protest is timely filed, any order issued by the self-insurer that is substantially similar to the order developed by the department will become final and will have the same force and effect as a department order that has become final under RCW 51.52.050.

1 (9) The department may intervene in any open claim to resolve a 2 dispute at the request of an interested party, or may initiate an 3 inquiry independently. In these cases, the department may issue orders 4 in accordance with RCW 51.52.050.

5 (10) If the self-insurer does not issue timely orders as required 6 by this section, they will be subject to penalties payable to the 7 worker. The department is authorized to establish in rule the penalty 8 schedule for violations of this section.

9 Sec. 4. RCW 51.16.140 and 1989 c 385 s 3 are each amended to read 10 as follows:

(1) Every employer who is not a self-insurer ((shall)) may deduct 11 12 from the pay of each of his or her workers one-half of the amount he or 13 she is required to pay, for medical benefits within each risk 14 classification. Such amount shall be periodically determined by the director and reported by him or her to all employers under this title: 15 16 PROVIDED, That the state governmental unit shall pay the entire amount into the medical aid fund for volunteers, as defined in RCW 51.12.035, 17 and the state apprenticeship council shall pay the entire amount into 18 the medical aid fund for registered apprentices or trainees, for the 19 20 purposes of RCW 51.12.130. The deduction under this section is not 21 authorized for premiums assessed under RCW 51.16.210.

(2) It shall be unlawful for the employer, unless specifically authorized by this title, to deduct or obtain any part of the premium or other costs required to be by him or her paid from the wages or earnings of any of his or her workers, and the making of or attempt to make any such deduction shall be a gross misdemeanor.

27 Sec. 5. RCW 51.24.060 and 2001 c 146 s 9 are each amended to read 28 as follows:

(1) If the injured worker or beneficiary elects to seek damages from the third person, any recovery made shall be distributed as follows:

(a) The costs and reasonable attorneys' fees shall be paid
 proportionately by the injured worker or beneficiary and the department
 and/or self-insurer: PROVIDED, That the department and/or self-insurer
 may require court approval of costs and attorneys' fees or may petition

1 a court for determination of the reasonableness of costs and attorneys'
2 fees;

3 (b) The injured worker or beneficiary shall be paid twenty-five 4 percent of the balance of the award: PROVIDED, That in the event of a 5 compromise and settlement by the parties, the injured worker or 6 beneficiary may agree to a sum less than twenty-five percent;

7 (c) The department and/or self-insurer shall be paid the balance of
8 the recovery made, but only to the extent necessary to reimburse the
9 department and/or self-insurer for benefits paid;

10 (i) The department and/or self-insurer shall bear its proportionate share of the costs and reasonable attorneys' fees incurred by the 11 12 worker or beneficiary to the extent of the benefits paid under this 13 title: PROVIDED, That the department's and/or self-insurer's proportionate share shall not exceed one hundred percent of the costs 14 and reasonable attorneys' fees; 15

16 (ii) The department's and/or self-insurer's proportionate share of 17 the costs and reasonable attorneys' fees shall be determined by 18 dividing the gross recovery amount into the benefits paid amount and 19 multiplying this percentage times the costs and reasonable attorneys' 20 fees incurred by the worker or beneficiary;

(iii) The department's and/or self-insurer's reimbursement share shall be determined by subtracting their proportionate share of the costs and reasonable attorneys' fees from the benefits paid amount;

24 (d) Any remaining balance shall be paid to the injured worker or 25 beneficiary; and

26 (e) Thereafter no payment shall be made to or on behalf of a worker 27 or beneficiary by the department and/or self-insurer for such injury 28 until the amount of any further compensation and benefits shall equal 29 any such remaining balance minus the department's and/or self-insurer's 30 proportionate share of the costs and reasonable attorneys' fees in regards to the remaining balance. This proportionate share shall be 31 32 determined by dividing the gross recovery amount into the remaining balance amount and multiplying this percentage times the costs and 33 reasonable attorneys' fees incurred by the worker or beneficiary. 34 35 Thereafter, such benefits shall be paid by the department and/or self-36 insurer to or on behalf of the worker or beneficiary as though no 37 recovery had been made from a third person.

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1 (2) The recovery made shall be subject to a lien by the department 2 and/or self-insurer for its share under this section.

3 (3) The department or self-insurer has sole discretion to 4 compromise the amount of its lien. In deciding whether or to what 5 extent to compromise its lien, the department or self-insurer shall 6 consider at least the following:

7 (a) The likelihood of collection of the award or settlement as may
8 be affected by insurance coverage, solvency, or other factors relating
9 to the third person;

10 (b) Factual and legal issues of liability as between the injured 11 worker or beneficiary and the third person. Such issues include but 12 are not limited to possible contributory negligence and novel theories 13 of liability; and

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(c) Problems of proof faced in obtaining the award or settlement.

(4) In an action under this section, the self-insurer may act on
behalf and for the benefit of the department to the extent of any
compensation and benefits paid or payable from state funds.

18 (5) It shall be the duty of the person to whom any recovery is paid 19 before distribution under this section to advise the department or 20 self-insurer of the fact and amount of such recovery, the costs and 21 reasonable attorneys' fees associated with the recovery, and to 22 distribute the recovery in compliance with this section.

(6) The distribution of any recovery made by award or settlement of 23 24 the third party action shall be confirmed by department order, served by ((registered or certified mail)) a method for which receipt can be 25 26 confirmed or tracked, and shall be subject to chapter 51.52 RCW. In 27 the event the order of distribution becomes final under chapter 51.52 28 RCW, the director or the director's designee may file with the clerk of any county within the state a warrant in the amount of the sum 29 representing the unpaid lien plus interest accruing from the date the 30 order became final. The clerk of the county in which the warrant is 31 32 filed shall immediately designate a superior court cause number for such warrant and the clerk shall cause to be entered in the judgment 33 docket under the superior court cause number assigned to the warrant, 34 35 the name of such worker or beneficiary mentioned in the warrant, the 36 amount of the unpaid lien plus interest accrued and the date when the 37 warrant was filed. The amount of such warrant as docketed shall become a lien upon the title to and interest in all real and personal property 38

of the injured worker or beneficiary against whom the warrant is 1 2 issued, the same as a judgment in a civil case docketed in the office of such clerk. The sheriff shall then proceed in the same manner and 3 4 with like effect as prescribed by law with respect to execution or other process issued against rights or property upon judgment in the 5 Such warrant so docketed shall be sufficient to superior court. 6 support the issuance of writs of garnishment in favor of the department 7 8 in the manner provided by law in the case of judgment, wholly or partially unsatisfied. The clerk of the court shall be entitled to a 9 filing fee under RCW 36.18.012(10), which shall be added to the amount 10 of the warrant. A copy of such warrant shall be mailed to the injured 11 12 worker or beneficiary within three days of filing with the clerk.

13 (7) The director, or the director's designee, may issue to any 14 person, firm, corporation, municipal corporation, political subdivision of the state, public corporation, or agency of the state, a notice and 15 order to withhold and deliver property of any kind if he or she has 16 17 reason to believe that there is in the possession of such person, firm, 18 corporation, municipal corporation, political subdivision of the state, 19 public corporation, or agency of the state, property which is due, owing, or belonging to any worker or beneficiary upon whom a warrant 20 21 has been served by the department for payments due to the state fund. 22 The notice and order to withhold and deliver shall be served by the 23 sheriff of the county or by the sheriff's deputy; by ((certified mail, return receipt requested)) a method for which receipt can be confirmed 24 25 or tracked; or by any authorized representatives of the director. Any 26 person, firm, corporation, municipal corporation, political subdivision of the state, public corporation, or agency of the state upon whom 27 service has been made shall answer the notice within twenty days 28 exclusive of the day of service, under oath and in writing, and shall 29 30 make true answers to the matters inquired of in the notice and order to withhold and deliver. In the event there is in the possession of the 31 32 party named and served with such notice and order, any property which may be subject to the claim of the department, such property shall be 33 delivered forthwith to the director or the director's authorized 34 If the party served and named in the 35 representative upon demand. 36 notice and order fails to answer the notice and order within the time 37 prescribed in this section, the court may, after the time to answer 38 such order has expired, render judgment by default against the party

named in the notice for the full amount claimed by the director in the notice together with costs. In the event that a notice to withhold and deliver is served upon an employer and the property found to be subject thereto is wages, the employer may assert in the answer to all exemptions provided for by chapter 6.27 RCW to which the wage earner may be entitled.

7 Sec. 6. RCW 51.32.073 and 1989 c 385 s 4 are each amended to read 8 as follows:

9 (1) Except as provided in subsection (2) of this section, each employer ((shall)) may retain from the earnings of each worker one-half 10 11 of that amount as shall be fixed from time to time by the director, the 12 basis for measuring said amount to be determined by the director. 13 ((The money so retained shall be matched in an equal amount by each employer, and all such moneys)) All moneys retained from workers and 14 the remaining amount owed by employers shall be remitted to the 15 16 department in such manner and at such intervals as the department 17 directs and shall be placed in the supplemental pension fund: PROVIDED, That the state apprenticeship council shall pay the entire 18 amount into the supplemental pension fund for registered apprentices or 19 20 trainees during their participation in supplemental and related 21 instruction classes. The moneys so collected shall be used exclusively 22 for the additional payments from the supplemental pension fund prescribed in this title and for the amount of any increase payable 23 under the provisions of RCW 51.32.075, as now or hereafter amended, and 24 25 shall be no more than necessary to make such payments on a current 26 basis. The department may require a self-insurer to make any 27 additional payments which are payable from the supplemental pension fund and thereafter such self-insurer shall be reimbursed therefrom. 28

(2) None of the amount assessed for the supplemental pension fund
 under RCW 51.16.210 may be retained from the earnings of workers
 covered under RCW 51.16.210.

32 Sec. 7. RCW 51.32.240 and 2008 c 280 s 2 are each amended to read 33 as follows:

(1)(a) Whenever any payment of benefits under this title is made
 because of clerical error, mistake of identity, innocent
 misrepresentation by or on behalf of the recipient thereof mistakenly

acted upon, or any other circumstance of a similar nature, all not 1 2 induced by willful misrepresentation, the recipient thereof shall repay it and recoupment may be made from any future payments due to the 3 recipient on any claim with the state fund or self-insurer, as the case 4 5 may be. The department or self-insurer, as the case may be, must make claim for such repayment or recoupment within one year of the making of 6 7 any such payment or it will be deemed any claim therefor has been 8 waived.

9 (b) Except as provided in subsections (3), (4), and (5) of this 10 section, the department may only assess an overpayment of benefits 11 because of adjudicator error when the order upon which the overpayment 12 is based is not yet final as provided in RCW 51.52.050 and 51.52.060. 13 "Adjudicator error" includes the failure to consider information in the 14 claim file, failure to secure adequate information, or an error in 15 judgment.

16 (c) The director, pursuant to rules adopted in accordance with the 17 procedures provided in the administrative procedure act, chapter 34.05 18 RCW, may exercise his or her discretion to waive, in whole or in part, 19 the amount of any such timely claim where the recovery would be against 20 equity and good conscience.

21 (2) Whenever the department or self-insurer fails to pay benefits 22 because of clerical error, mistake of identity, or innocent 23 misrepresentation, all not induced by recipient willful 24 misrepresentation, the recipient may request an adjustment of benefits 25 to be paid from the state fund or by the self-insurer, as the case may 26 be, subject to the following:

(a) The recipient must request an adjustment in benefits within one
year from the date of the incorrect payment or it will be deemed any
claim therefore has been waived.

30 (b) The recipient may not seek an adjustment of benefits because of adjudicator error. Adjustments due to adjudicator error are addressed 31 32 by the filing of a written request for reconsideration with the department of labor and industries or an appeal with the board of 33 industrial insurance appeals within sixty days from the date the order 34 35 is communicated as provided in RCW 51.52.050. "Adjudicator error" 36 includes the failure to consider information in the claim file, failure 37 to secure adequate information, or an error in judgment.

(3) Whenever the department issues an order rejecting a claim for 1 2 benefits paid pursuant to RCW 51.32.190 or 51.32.210, after payment for temporary disability benefits has been paid by a self-insurer pursuant 3 4 to RCW 51.32.190(3) or by the department pursuant to RCW 51.32.210, the recipient thereof shall repay such benefits and recoupment may be made 5 from any future payments due to the recipient on any claim with the 6 7 state fund or self-insurer, as the case may be. The director, under 8 rules adopted in accordance with the procedures provided in the administrative procedure act, chapter 34.05 9 RCW, may exercise 10 discretion to waive, in whole or in part, the amount of any such 11 payments where the recovery would be against equity and qood 12 conscience.

(4) Whenever any payment of benefits under this title has been made pursuant to an adjudication by the department or by order of the board or any court and timely appeal therefrom has been made where the final decision is that any such payment was made pursuant to an erroneous adjudication, the recipient thereof shall repay it and recoupment may be made from any future payments due to the recipient on any claim whether state fund or self-insured.

20 (a) The director, pursuant to rules adopted in accordance with the 21 procedures provided in the administrative procedure act, chapter 34.05 22 RCW, may exercise discretion to waive, in whole or in part, the amount 23 of any such payments where the recovery would be against equity and good conscience. However, if the director waives in whole or in part 24 any such payments due a self-insurer, the self-insurer shall be 25 26 reimbursed the amount waived from the self-insured employer overpayment 27 reimbursement fund.

(b) The department shall collect information regarding self-insured 28 29 claim overpayments resulting from final decisions of the board and the 30 courts, and recoup such overpayments on behalf of the self-insurer from any open, new, or reopened state fund or self-insured claims. 31 The department shall forward the amounts collected to the self-insurer to 32 33 whom the payment is owed. The department may provide information as needed to any self-insurers from whom payments may be collected on 34 35 behalf of the department or another self-insurer. Notwithstanding RCW 36 51.32.040, any self-insurer requested by the department to forward 37 payments to the department pursuant to this subsection shall pay the

department directly. The department shall credit the amounts recovered
 to the appropriate fund, or forward amounts collected to the
 appropriate self-insurer, as the case may be.

4 (c) If a self-insurer is not fully reimbursed within twenty-four 5 months of the first attempt at recovery through the collection process 6 pursuant to this subsection and by means of processes pursuant to 7 subsection (6) of this section, the self-insurer shall be reimbursed 8 for the remainder of the amount due from the self-insured employer 9 overpayment reimbursement fund.

10 (d) For purposes of this subsection, "recipient" does not include 11 health service providers whose treatment or services were authorized by 12 the department or self-insurer.

(e) The department or self-insurer shall first attempt recovery of overpayments for health services from any entity that provided health insurance to the worker to the extent that the health insurance entity would have provided health insurance benefits but for workers' compensation coverage.

(5)(a) Whenever any payment of benefits under this title has been 18 19 induced by willful misrepresentation the recipient thereof shall repay any such payment together with a penalty of fifty percent of the total 20 21 of any such payments and the amount of such total sum may be recouped 22 from any future payments due to the recipient on any claim with the 23 state fund or self-insurer against whom the willful misrepresentation 24 was committed, as the case may be, and the amount of such penalty shall 25 be placed in the supplemental pension fund. Such repayment or 26 recoupment must be demanded or ordered within three years of the 27 discovery of the willful misrepresentation.

(b) For purposes of this subsection (5), it is willful misrepresentation for a person to obtain payments or other benefits under this title in an amount greater than that to which the person otherwise would be entitled. Willful misrepresentation includes:

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(i) Willful false statement; or

33 (ii) Willful misrepresentation, omission, or concealment of any 34 material fact.

35 (c) For purposes of this subsection (5), "willful" means a 36 conscious or deliberate false statement, misrepresentation, omission, 37 or concealment of a material fact with the specific intent of 38 obtaining, continuing, or increasing benefits under this title. (d) For purposes of this subsection (5), failure to disclose a
 work-type activity must be willful in order for a misrepresentation to
 have occurred.

4 (e) For purposes of this subsection (5), a material fact is one which would result in additional, increased, or continued benefits, 5 including but not limited to facts about physical restrictions, or 6 work-type activities which either result in wages or income or would be 7 8 reasonably expected to do so. Wages or income include the receipt of 9 any goods or services. For a work-type activity to be reasonably 10 expected to result in wages or income, a pattern of repeated activity must exist. For those activities that would reasonably be expected to 11 12 result in wages or produce income, but for which actual wage or income 13 information cannot be reasonably determined, the department shall 14 impute wages pursuant to RCW 51.08.178(4).

(6) The worker, beneficiary, or other person affected thereby shall 15 have the right to contest an order assessing an overpayment pursuant to 16 17 this section in the same manner and to the same extent as provided under RCW 51.52.050 and 51.52.060. In the event such an order becomes 18 19 final under chapter 51.52 RCW and notwithstanding the provisions of subsections (1) through (5) of this section, the director, director's 20 21 designee, or self-insurer may file with the clerk in any county within 22 the state a warrant in the amount of the sum representing the unpaid 23 overpayment and/or penalty plus interest accruing from the date the 24 order became final. The clerk of the county in which the warrant is 25 filed shall immediately designate a superior court cause number for 26 such warrant and the clerk shall cause to be entered in the judgment 27 docket under the superior court cause number assigned to the warrant, the name of the worker, beneficiary, or other person mentioned in the 28 warrant, the amount of the unpaid overpayment and/or penalty plus 29 30 interest accrued, and the date the warrant was filed. The amount of the warrant as docketed shall become a lien upon the title to and 31 32 interest in all real and personal property of the worker, beneficiary, or other person against whom the warrant is issued, the same as a 33 judgment in a civil case docketed in the office of such clerk. 34 The 35 sheriff shall then proceed in the same manner and with like effect as 36 prescribed by law with respect to execution or other process issued 37 against rights or property upon judgment in the superior court. Such warrant so docketed shall be sufficient to support the issuance of 38

writs of garnishment in favor of the department or self-insurer in the manner provided by law in the case of judgment, wholly or partially unsatisfied. The clerk of the court shall be entitled to a filing fee under RCW 36.18.012(10), which shall be added to the amount of the warrant. A copy of such warrant shall be mailed to the worker, beneficiary, or other person within three days of filing with the clerk.

8 The director, director's designee, or self-insurer may issue to any person, firm, corporation, municipal corporation, political subdivision 9 10 of the state, public corporation, or agency of the state, a notice to withhold and deliver property of any kind if there is reason to believe 11 12 that there is in the possession of such person, firm, corporation, 13 municipal corporation, political subdivision of the state, public 14 corporation, or agency of the state, property that is due, owing, or belonging to any worker, beneficiary, or other person upon whom a 15 warrant has been served for payments due the department or self-16 The notice and order to withhold and deliver shall be served 17 insurer. by ((certified mail)) a method for which receipt can be confirmed or 18 tracked accompanied by an affidavit of service by mailing or served by 19 the sheriff of the county, or by the sheriff's deputy, or by any 20 21 authorized representative of the director, director's designee, or 22 self-insurer. Any person, firm, corporation, municipal corporation, 23 political subdivision of the state, public corporation, or agency of 24 the state upon whom service has been made shall answer the notice within twenty days exclusive of the day of service, under oath and in 25 26 writing, and shall make true answers to the matters inquired or in the 27 notice and order to withhold and deliver. In the event there is in the possession of the party named and served with such notice and order, 28 29 any property that may be subject to the claim of the department or 30 self-insurer, such property shall be delivered forthwith to the director, the director's authorized representative, or self-insurer 31 32 upon demand. If the party served and named in the notice and order fails to answer the notice and order within the time prescribed in this 33 section, the court may, after the time to answer such order has 34 35 expired, render judgment by default against the party named in the 36 notice for the full amount, plus costs, claimed by the director, 37 director's designee, or self-insurer in the notice. In the event that a notice to withhold and deliver is served upon an employer and the 38

property found to be subject thereto is wages, the employer may assert in the answer all exemptions provided for by chapter 6.27 RCW to which the wage earner may be entitled.

This subsection shall only apply to orders assessing an overpayment which are issued on or after July 28, 1991: PROVIDED, That this subsection shall apply retroactively to all orders assessing an overpayment resulting from fraud, civil or criminal.

8 (7) Orders assessing an overpayment which are issued on or after 9 July 28, 1991, shall include a conspicuous notice of the collection 10 methods available to the department or self-insurer.

11 **Sec. 8.** RCW 51.48.120 and 1995 c 160 s 5 are each amended to read 12 as follows:

13 If any employer should default in any payment due to the state fund the director or the director's designee may issue a notice of 14 15 assessment certifying the amount due, which notice shall be served upon 16 the employer by mailing such notice to the employer by ((certified 17 mail)) a method for which receipt can be confirmed or tracked to the employer's last known address or served in the manner prescribed for 18 the service of a summons in a civil action. Such notice shall contain 19 20 the information that an appeal must be filed with the board of 21 industrial insurance appeals and the director by mail or personally within thirty days of the date of service of the notice of assessment 22 23 in order to appeal the assessment unless a written request for 24 reconsideration is filed with the department of labor and industries.

25 **Sec. 9.** RCW 51.48.150 and 1995 c 160 s 6 are each amended to read 26 as follows:

27 The director or the director's designee is hereby authorized to issue to any person, firm, corporation, municipal corporation, 28 political subdivision of the state, a public corporation, or any agency 29 30 of the state, a notice and order to withhold and deliver property of any kind whatsoever when he or she has reason to believe that there is 31 32 in the possession of such person, firm, corporation, municipal corporation, political subdivision of the state, public corporation, or 33 34 any agency of the state, property which is or shall become due, owing, 35 or belonging to any employer upon whom a notice of assessment has been 36 served by the department for payments due to the state fund. The

effect of a notice and order to withhold and deliver shall be 1 2 continuous from the date such notice and order to withhold and deliver is first made until the liability out of which such notice and order to 3 4 withhold and deliver arose is satisfied or becomes unenforceable because of lapse of time. The department shall release the notice and 5 б order to withhold and deliver when the liability out of which the notice and order to withhold and deliver arose is satisfied or becomes 7 8 unenforceable by reason of lapse of time and shall notify the person 9 against whom the notice and order to withhold and deliver was made that such notice and order to withhold and deliver has been released. 10

11 The notice and order to withhold and deliver shall be served by the 12 sheriff of the county or by the sheriff's deputy, by ((certified mail, 13 return receipt requested)) a method for which receipt can be confirmed or tracked, or by any duly authorized representatives of the director. 14 Any person, firm, corporation, municipal corporation, 15 political subdivision of the state, public corporation or any agency of the state 16 17 upon whom service has been made is hereby required to answer the notice 18 within twenty days exclusive of the day of service, under oath and in 19 writing, and shall make true answers to the matters inquired of in the 20 notice and order to withhold and deliver. In the event there is in the 21 possession of the party named and served with a notice and order to 22 withhold and deliver, any property which may be subject to the claim of 23 the department, such property shall be delivered forthwith to the 24 director or the director's duly authorized representative upon service of the notice to withhold and deliver which will be held in trust by 25 26 the director for application on the employer's indebtedness to the 27 department, or for return without interest, in accordance with a final determination of a petition for review, or in the alternative such 28 29 party shall furnish a good and sufficient surety bond satisfactory to 30 the director conditioned upon final determination of liability. Should any party served and named in the notice to withhold and deliver fail 31 to make answer to such notice and order to withhold and deliver, within 32 the time prescribed herein, it shall be lawful for the court, after the 33 time to answer such order has expired, to render judgment by default 34 against the party named in the notice to withhold and deliver for the 35 36 full amount claimed by the director in the notice to withhold and 37 deliver together with costs. In the event that a notice to withhold 38 and deliver is served upon an employer and the property found to be

subject thereto is wages, then the employer shall be entitled to assert in the answer to all exemptions provided for by chapter 6.27 RCW to which the wage earner may be entitled.

4 Sec. 10. RCW 51.52.050 and 2008 c 280 s 1 are each amended to read 5 as follows:

б (1) Whenever the department has made any order, decision, or award, 7 it shall promptly serve the worker, beneficiary, employer, or other person affected thereby, with a copy thereof by mail, ((which shall be 8 9 addressed to such person at his or her last known address as shown by 10 the records of the department)) or if the worker, beneficiary, 11 employer, or other person affected thereby chooses, the department may 12 send correspondence and other legal notices by secure electronic means. Correspondence and notices must be addressed to such a person at his or 13 her last known postal or electronic address as shown by the records of 14 the department. Correspondence and notices sent electronically are 15 considered received on the date sent by the department. 16 The copy, in case the same is a final order, decision, or award, shall bear on the 17 same side of the same page on which is found the amount of the award, 18 a statement, set in black faced type of at least ten point body or 19 20 size, that such final order, decision, or award shall become final 21 within sixty days from the date the order is communicated to the 22 parties unless a written request for reconsideration is filed with the 23 department of labor and industries, Olympia, or an appeal is filed with 24 the board of industrial insurance appeals, Olympia. However, a 25 department order or decision making demand, whether with or without penalty, for repayment of sums paid to a provider of medical, dental, 26 vocational, or other health services rendered to an industrially 27 injured worker, shall state that such order or decision shall become 28 29 final within twenty days from the date the order or decision is written 30 communicated to the parties unless a request for 31 reconsideration is filed with the department of labor and industries, 32 Olympia, or an appeal is filed with the board of industrial insurance 33 appeals, Olympia.

34 (2)(a) Whenever the department has taken any action or made any 35 decision relating to any phase of the administration of this title the 36 worker, beneficiary, employer, or other person aggrieved thereby may 37 request reconsideration of the department, or may appeal to the board. In an appeal before the board, the appellant shall have the burden of proceeding with the evidence to establish a prima facie case for the relief sought in such appeal.

4 (b) An order by the department awarding benefits shall become effective and benefits due on the date issued. Subject to (b)(i) and 5 (ii) of this subsection, if the department order is appealed the order 6 shall not be stayed pending a final decision on the merits unless 7 8 ordered by the board. Upon issuance of the order granting the appeal, 9 the board will provide the worker with notice concerning the potential of an overpayment of benefits paid pending the outcome of the appeal 10 and the requirements for interest on unpaid benefits pursuant to RCW 11 12 51.52.135. A worker may request that benefits cease pending appeal at 13 any time following the employer's motion for stay or the board's order The request must be submitted in writing to the 14 granting appeal. employer, the board, and the department. Any employer may move for a 15 stay of the order on appeal, in whole or in part. 16 The motion must be filed within fifteen days of the order granting appeal. 17 The board shall conduct an expedited review of the claim file provided by the 18 department as it existed on the date of the department order. 19 The board shall issue a final decision within twenty-five days of the 20 21 filing of the motion for stay or the order granting appeal, whichever 22 is later. The board's final decision may be appealed to superior court 23 in accordance with RCW 51.52.110. The board shall grant a motion to 24 stay if the moving party demonstrates that it is more likely than not to prevail on the facts as they existed at the time of the order on 25 26 appeal. The board shall not consider the likelihood of recoupment of 27 benefits as a basis to grant or deny a motion to stay. If a self-insured employer prevails on the merits, any benefits paid may be 28 29 recouped pursuant to RCW 51.32.240.

(i) If upon reconsideration requested by a worker or medical provider, the department has ordered an increase in a permanent partial disability award from the amount reflected in an earlier order, the award reflected in the earlier order shall not be stayed pending a final decision on the merits. However, the increase is stayed without further action by the board pending a final decision on the merits.

36 (ii) If any party appeals an order establishing a worker's wages or 37 the compensation rate at which a worker will be paid temporary or 1 permanent total disability or loss of earning power benefits, the 2 worker shall receive payment pending a final decision on the merits 3 based on the following:

4 (A) When the employer is self-insured, the wage calculation or
5 compensation rate the employer most recently submitted to the
6 department; or

7 (B) When the employer is insured through the state fund, the
8 highest wage amount or compensation rate uncontested by the parties.

9 Payment of benefits or consideration of wages at a rate that is 10 higher than that specified in (b)(ii)(A) or (B) of this subsection is 11 stayed without further action by the board pending a final decision on 12 the merits.

(c) In an appeal from an order of the department that alleges willful misrepresentation, the department or self-insured employer shall initially introduce all evidence in its case in chief. Any such person aggrieved by the decision and order of the board may thereafter appeal to the superior court, as prescribed in this chapter.

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