

**WAC 296-20-097 Reopenings.** When a claim has been closed by the department or self-insurer by written order and notice for sixty days, submission of a formal "application to reopen claim for aggravation of condition" form # F242-079-000 is necessary. The department or self-insurer is responsible for customary charges for examinations, diagnostic studies, and determining whether or not time-loss is payable regardless of the final action taken on the reopening application. Reopening applications should be submitted immediately. When reopening is granted, the department or self-insurer can pay time loss and treatment benefits only for a period not to exceed sixty days prior to date the application is received by the department or self-insurer. Necessary treatment should not be deferred pending a department or self-insurer adjudication decision. However, should reopening be denied treatment costs become the financial responsibility of the worker.

[Statutory Authority: RCW 51.04.020, 51.04.030, and Title 51 RCW. WSR 08-24-047, § 296-20-097, filed 11/25/08, effective 12/26/08. Statutory Authority: RCW 51.32.190 and 51.32.210. WSR 90-22-054, § 296-20-097, filed 11/5/90, effective 12/6/90. Statutory Authority: RCW 51.04.020(4), 51.04.030, and 51.16.120(3). WSR 81-24-041 (Order 81-28), § 296-20-097, filed 11/30/81, effective 1/1/82; WSR 81-01-100 (Order 80-29), § 296-20-097, filed 12/23/80, effective 3/1/81; Order 71-6, § 296-20-097, filed 6/1/71; Order 70-12, § 296-20-095 (codified as WAC 296-20-097), filed 12/1/70, effective 1/1/71. Formerly WAC 296-20-090.]