H-3046.1

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**HOUSE BILL 2336**

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**State of Washington 64th Legislature 2016 Regular Session**

**By** Representatives Manweller, Haler, Condotta, Chandler, and Van Werven

AN ACT Relating to implementing joint legislative audit and review committee recommendations to improve claims management and efficiencies in workers' compensation; amending RCW 51.14.120; and creating a new section.

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

NEW SECTION. **Sec.**  The joint legislative audit and review committee, in its report "Workers' Compensation Claims Management," concluded that the department of labor and industries could improve workers' compensation claim outcomes by improving claims management efficiencies. The legislature finds that ensuring timely review of claim closure requests from self-insurers will decrease unnecessary additional medical examinations for injured workers, result in more efficient claims management, and decrease costs for self-insurers.

**Sec.**  RCW 51.14.120 and 2001 c 152 s 1 are each amended to read as follows:

(1) The self-insurer shall provide, when authorized under RCW 51.28.070, a copy of the employee's claim file at no cost within fifteen days of receipt of a request by the employee or the employee's representative, and shall provide the physician performing an examination with all relevant medical records from the worker's claim file, but only to the extent required of the department under RCW 51.36.070. If the self-insured employer determines that release of the claim file to an unrepresented worker in whole or in part, may not be in the worker's best interests, the employer must submit a request for denial with an explanation along with a copy of that portion of the claim file not previously provided within twenty days after the request from the worker. In the case of second or subsequent requests, a reasonable charge for copying may be made. The self-insurer shall provide the entire contents of the claim file unless the request is for only a particular portion of the file. Any new material added to the claim file after the initial request shall be provided under the same terms and conditions as the initial request.

(2) The self-insurer shall transmit notice to the department of any protest or appeal by an employee relating to the administration of an industrial injury or occupational disease claim under this chapter within five working days of receipt. The date that the protest or appeal is received by the self-insurer shall be deemed to be the date the protest is received by the department for the purpose of RCW 51.52.050.

(3) The self-insurer shall submit a medical report with the request for closure of a claim under this chapter. The department shall adjudicate the request for closure of a claim within ninety days of receipt of the medical report and request for claim closure from the self-insurer.

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