**1902-S AMS LCTA S4907.1 - NOT FOR FLOOR USE**

**SHB 1902** - S COMM AMD

By Committee on Labor, Commerce & Tribal Affairs

**ADOPTED 03/04/2022**

Strike everything after the enacting clause and insert the following:

**"Sec.**  RCW 51.28.040 and 1977 ex.s. c 199 s 1 are each amended to read as follows:

(1)(a) If change of circumstances warrants an increase or rearrangement of compensation, like application shall be made therefor. Where the application has been granted, compensation and other benefits if in order shall be allowed for periods of time up to ((~~sixty~~)) 60 days prior to the receipt of such application, except as provided in (b) of this subsection.

(b) Compensation and other benefits under (a) of this subsection shall be allowed for periods of time beyond 60 days, up to and including the time period covering the change of circumstances warranting an increase or rearrangement of compensation or other benefits, subject to a maximum of 120 days prior to the receipt of the application, where:

(i) The application was not received by the department or self-insurer within 60 days of the provision of medical services made necessary by the change in circumstances, due to a failure of the treating provider to timely complete or submit the provider information section of the application; and

(ii) The worker demonstrates that the worker information section of the application was completed and submitted via certified mail or electronic verification of receipt to the department, self-insurer, or the treating provider within 30 days of the provision of medical services made necessary by the change in circumstances.

(2) Any forms provided by the department or self-insurer as the application to reopen a claim under subsection (1)(a) of this section, must:

(a) Encourage the worker to submit the form to the treating provider within 30 days of the provision of any medical services made necessary by the change in circumstances; and

(b) Provide notice to both the worker and the medical provider that the application must be received by the department or self-insurer within 60 days of the provision of any medical services made necessary by the change in circumstances."

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On page 1, line 3 of the title, after "manner;" strike the remainder of the title and insert "and amending RCW 51.28.040."

EFFECT: Limits the maximum days for allowance of compensation and other benefits in a reopened claim under certain circumstances to 120 days prior to the receipt of the application.