2 SHB 1911 - H AMD 009 NOT CONSIDERED 1-19-96

By Representative Lisk

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- 5 Strike everything after the enacting clause and insert the 6 following:
- 7 "NEW SECTION. Sec. 1. A new section is added to chapter 51.16 RCW 8 to read as follows:
- 9 (1) The department shall offer a retrospective rating plan to 10 qualified employers and groups of employers. The plan shall be available on a voluntary basis for the period of one coverage period 11 12 and may be renewed at the end of the year. The retrospective rating plan shall be consistent with recognized insurance principles and shall 13 be administered according to rules, schedules, and factors adopted by 14 15 the department. Rules adopted under this section should encourage the 16 broadest possible participation by employers and groups consistent with The director is authorized to establish and 17 insurance principles. adopt all necessary rules governing the administration of this section. 18
- 19 (2) In addition to those general powers and rights deemed 20 appropriate by the department, retrospective rating plan employers and their plans with an authorized 21 groups who administer administrator shall have the authority to assist the department in the 22 23 processing of claims with the date of injury on or after January 1, 24 The authority shall include implementation of administrative 25 functions that are necessary to the timely management of a claim. 26 department shall adopt rules detailing such authority, which shall be 27 comprehensive and include, but not be limited to, the following:
- 28 (a) Authorization to schedule medical examinations and 29 consultations, provided that only qualified persons from the department 30 list may be selected.
- 31 (b) Authorization to initiate any rehabilitation services and 32 select vocational rehabilitation providers from the department's 33 contracted provider list or use department providers. The time 34 limitation on the expenditure of three thousand dollars in any fifty-35 two week period established in RCW 51.32.095 shall not apply to the 36 provision of vocational rehabilitation approved by a retrospective 37 rating plan employer or group, and the supervisor of industrial

insurance may at any time, in the supervisor's sole discretion, 1 authorize the expenditure of a sum not to exceed six thousand dollars 2 for the costs of vocational rehabilitation. If consistent with the 3 4 discretion of the supervisor and department rules regarding vocational 5 rehabilitation services, when both the employer or group and the worker sign an agreement for vocational rehabilitation services, the agreement 6 7 is deemed approved. Vocational rehabilitation services may include job 8 placement services, skill enhancement services, vocational 9 rehabilitation plans, or other accepted services.

10 (3) Retrospective rating plan employers and groups who administer their plans with an authorized claims administrator shall have the 11 authority to close claims as authorized in this subsection. If a claim 12 13 with the date of injury on or after January 1, 1997, (a) involves only treatment and/or the payment of temporary disability 14 medical 15 compensation under RCW 51.32.090, (b) at the time medical treatment is 16 concluded, does not involve permanent disability, (c) is one with 17 respect to which the department has not intervened under subsection (4) of this section, and (d) the injured worker has returned to work with 18 19 the retrospective rating plan employer or group at the worker's 20 previous job or at a job that has comparable wages and benefits, the claim may be closed by the retrospective rating plan employer or group, 21 22 subject to reporting of claims to the department in a manner prescribed 23 by the department rules adopted under chapter 34.05 RCW. Upon closure 24 of a claim under this subsection, the retrospective rating plan 25 employer or group shall enter a written order, communicated to the 26 worker, the attending physician, and the department, which contains the 27 following statement clearly set forth in bold face type: constitutes notification that your claim is being closed with medical 28 benefits and temporary disability compensation only as provided, and 29 30 with the condition you have returned to work. If for any reason you disagree with the conditions or duration of your return to work or the 31 medical benefits or the temporary disability compensation that has been 32 provided, you may protest in writing to the department of labor and 33 34 industries within sixty days of the date you received this order." If 35 the department receives such a protest, the closure order shall be held in abeyance. The department shall review the claim closure action and 36 37 enter a determinative order as provided for in RCW 51.52.050. within two years of claim closure the department determines that a 38 39 violation of the conditions of claim closure have occurred, the

- 1 department may correct the benefits paid or payable. This subsection 2 does not limit in any way the application of RCW 51.32.240.
- 3 (4) If a dispute arises from the handling of any claim under this 4 section before the condition of the injured worker becomes fixed, the 5 department shall intervene to resolve any dispute.

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- (5) Exercise of any authority authorized by this section may require prior notification to the department, but rules adopted under this section shall minimize the department's need to respond and ensure that a failure to respond or delay in response by the department does not impede the timely administration of the claim. A retrospective rating plan employer or group may exceed department medical fee or other fee schedules but shall be required to pay any difference.
- (6) The department shall conduct a study of all retrospective 13 rating plan employers or groups who exercise the authority authorized 14 15 under subsections (2) and (3) of this section and report to the legislature by December 1, 1999. The study plan shall be approved by 16 17 the workers' compensation advisory committee and shall include, but not be limited to, examination of injured worker vocational outcomes, 18 19 worker complaints, litigation rates, and employer claims management problems with the department. The study shall also include a review of 20 return-to-work and long-term wage replacement outcomes for workers of 21 the employers in the study compared with workers of state fund 22 employers in similar risk classifications. 23
 - (7) For purposes of this section, "authorized claims administrator" means a person who meets department qualifications as defined by rules adopted by the department. The department shall also establish by rule procedures for approval and disapproval of authorized claims administrators.
- (8) If the outcome of the study under subsection (6) of this section demonstrates that retrospective rating plan employers or groups who exercise the authority authorized under subsections (2) and (3) of this section are not achieving better overall injured worker outcomes than their state fund counterparts, this section shall expire on July 1, 2000."

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