
HOUSE BILL 1691

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By Representatives Grant, Conway, Campbell, Wood, Kenney, Morrell, Crouse, Rockefeller, Holmquist, McCoy and Pflug

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1 AN ACT Relating to authorizing advanced registered nurse
2 practitioners to examine, diagnose, and treat injured workers covered
3 by industrial insurance; amending RCW 51.04.030, 51.04.050, 51.28.010,
4 51.28.020, 51.28.025, 51.28.030, 51.28.055, 51.32.055, 51.32.095,
5 51.36.010, 51.36.060, 51.36.110, 51.48.060, and 51.52.010; reenacting
6 and amending RCW 51.32.090; and adding a new section to chapter 51.36
7 RCW.

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

9 **Sec. 1.** RCW 51.04.030 and 1998 c 230 s 1 are each amended to read
10 as follows:

11 (1) The director shall supervise the providing of prompt and
12 efficient care and treatment, including care provided by physician
13 assistants governed by the provisions of chapters 18.57A and 18.71A
14 RCW, acting under a supervising physician, (~~and~~) including
15 chiropractic care, and including care provided by licensed advanced
16 registered nurse practitioners, to workers injured during the course of
17 their employment at the least cost consistent with promptness and
18 efficiency, without discrimination or favoritism, and with as great
19 uniformity as the various and diverse surrounding circumstances and

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

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

37 (3) The director or self-insurer, as the case may be, shall make a
38 record of the commencement of every disability and the termination

1 thereof and, when bills are rendered for the care and treatment of
2 injured workers, shall approve and pay those which conform to the
3 adopted rules, regulations, established fee schedules, and practices of
4 the director and may reject any bill or item thereof incurred in
5 violation of the principles laid down in this section or the rules,
6 regulations, or the established fee schedules and rules and regulations
7 adopted under it.

8 **Sec. 2.** RCW 51.04.050 and 1961 c 23 s 51.04.050 are each amended
9 to read as follows:

10 In all hearings, actions or proceedings before the department or
11 the board of industrial insurance appeals, or before any court on
12 appeal from the board, any physician or licensed advanced registered
13 nurse practitioner having theretofore examined or treated the claimant
14 may be required to testify fully regarding such examination or
15 treatment, and shall not be exempt from so testifying by reason of the
16 relation of the physician or licensed advanced registered nurse
17 practitioner to patient.

18 **Sec. 3.** RCW 51.28.010 and 2001 c 231 s 1 are each amended to read
19 as follows:

20 (1) Whenever any accident occurs to any worker it shall be the duty
21 of such worker or someone in his or her behalf to forthwith report such
22 accident to his or her employer, superintendent, or supervisor in
23 charge of the work, and of the employer to at once report such accident
24 and the injury resulting therefrom to the department pursuant to RCW
25 51.28.025 where the worker has received treatment from a physician or
26 a licensed advanced registered nurse practitioner, has been
27 hospitalized, disabled from work, or has died as the apparent result of
28 such accident and injury.

29 (2) Upon receipt of such notice of accident, the department shall
30 immediately forward to the worker or his or her beneficiaries or
31 dependents notification, in nontechnical language, of their rights
32 under this title. The notice must specify the worker's right to
33 receive health services from a physician or a licensed advanced
34 registered nurse practitioner of the worker's choice under RCW
35 51.36.010, including chiropractic services under RCW 51.36.015, and
36 must list the types of providers authorized to provide these services.

1 **Sec. 4.** RCW 51.28.020 and 2001 c 231 s 2 are each amended to read
2 as follows:

3 (1)(a) Where a worker is entitled to compensation under this title
4 he or she shall file with the department or his or her self-insured
5 employer, as the case may be, his or her application for such, together
6 with the certificate of the physician or licensed advanced registered
7 nurse practitioner who attended him or her. An application form
8 developed by the department shall include a notice specifying the
9 worker's right to receive health services from a physician or licensed
10 advanced registered nurse practitioner of the worker's choice under RCW
11 51.36.010, including chiropractic services under RCW 51.36.015, and
12 listing the types of providers authorized to provide these services.

13 (b) The physician or licensed advanced registered nurse
14 practitioner who attended the injured worker shall inform the injured
15 worker of his or her rights under this title and lend all necessary
16 assistance in making this application for compensation and such proof
17 of other matters as required by the rules of the department without
18 charge to the worker. The department shall provide physicians with a
19 manual which outlines the procedures to be followed in applications for
20 compensation involving occupational diseases, and which describes
21 claimants' rights and responsibilities related to occupational disease
22 claims.

23 (2) If application for compensation is made to a self-insured
24 employer, he or she shall forthwith send a copy of the application to
25 the department.

26 **Sec. 5.** RCW 51.28.025 and 1987 c 185 s 32 are each amended to read
27 as follows:

28 (1) Whenever an employer has notice or knowledge of an injury or
29 occupational disease sustained by any worker in his or her employment
30 who has received treatment from a physician or a licensed advanced
31 registered nurse practitioner, has been hospitalized, disabled from
32 work or has died as the apparent result of such injury or occupational
33 disease, the employer shall immediately report the same to the
34 department on forms prescribed by it. The report shall include:

35 (a) The name, address, and business of the employer;

36 (b) The name, address, and occupation of the worker;

1 (c) The date, time, cause, and nature of the injury or occupational
2 disease;

3 (d) Whether the injury or occupational disease arose in the course
4 of the injured worker's employment;

5 (e) All available information pertaining to the nature of the
6 injury or occupational disease including but not limited to any visible
7 signs, any complaints of the worker, any time lost from work, and the
8 observable effect on the worker's bodily functions, so far as is known;
9 and

10 (f) Such other pertinent information as the department may
11 prescribe by regulation.

12 (2) Failure or refusal to file the report required by subsection
13 (1) shall subject the offending employer to a penalty determined by the
14 director but not to exceed two hundred fifty dollars for each offense,
15 to be collected in a civil action in the name of the department and
16 paid into the supplemental pension fund.

17 **Sec. 6.** RCW 51.28.030 and 1972 ex.s. c 43 s 17 are each amended to
18 read as follows:

19 Where death results from injury the parties entitled to
20 compensation under this title, or someone in their behalf, shall make
21 application for the same to the department or self-insurer as the case
22 may be, which application must be accompanied with proof of death and
23 proof of relationship showing the parties to be entitled to
24 compensation under this title, certificates of attending physician or
25 licensed advanced registered nurse practitioner, if any, and such proof
26 as required by the rules of the department.

27 Upon receipt of notice of accident under RCW 51.28.010, the
28 director shall immediately forward to the party or parties required to
29 make application for compensation under this section, notification, in
30 nontechnical language, of their rights under this title.

31 **Sec. 7.** RCW 51.28.055 and 1984 c 159 s 2 are each amended to read
32 as follows:

33 Claims for occupational disease or infection to be valid and
34 compensable must be filed within two years following the date the
35 worker had written notice from a physician or a licensed advanced
36 registered nurse practitioner: (1) Of the existence of his or her

1 occupational disease, and (2) that a claim for disability benefits may
2 be filed. The notice shall also contain a statement that the worker
3 has two years from the date of the notice to file a claim. The
4 physician or licensed advanced registered nurse practitioner shall file
5 the notice with the department. The department shall send a copy to
6 the worker and to the self-insurer if the worker's employer is self-
7 insured. However, a claim is valid if it is filed within two years
8 from the date of death of the worker suffering from an occupational
9 disease.

10 **Sec. 8.** RCW 51.32.055 and 1997 c 416 s 1 are each amended to read
11 as follows:

12 (1) One purpose of this title is to restore the injured worker as
13 nearly as possible to the condition of self-support as an able-bodied
14 worker. Benefits for permanent disability shall be determined under
15 the director's supervision, except as otherwise authorized in
16 subsection (9) of this section, only after the injured worker's
17 condition becomes fixed.

18 (2) All determinations of permanent disabilities shall be made by
19 the department, except as otherwise authorized in subsection (9) of
20 this section. Either the worker, employer, or self-insurer may make a
21 request or the inquiry may be initiated by the director or, as
22 authorized in subsection (9) of this section, by the self-insurer on
23 the director or the self-insurer's own motion. Determinations shall be
24 required in every instance where permanent disability is likely to be
25 present. All medical reports and other pertinent information in the
26 possession of or under the control of the employer or, if the self-
27 insurer has made a request to the department, in the possession of or
28 under the control of the self-insurer shall be forwarded to the
29 director with the request.

30 (3) A request for determination of permanent disability shall be
31 examined by the department or, if authorized in subsection (9) of this
32 section, the self-insurer, and the department shall issue an order in
33 accordance with RCW 51.52.050 or, in the case of a self-insured
34 employer, the self-insurer may: (a) Enter a written order,
35 communicated to the worker and the department self-insurance section in
36 accordance with subsection (9) of this section, or (b) request the
37 department to issue an order in accordance with RCW 51.52.050.

1 (4) The department or, in cases authorized in subsection (9) of
2 this section, the self-insurer may require that the worker present
3 himself or herself for a special medical examination by a physician or
4 physicians selected by the department, and the department or, in cases
5 authorized in subsection (9) of this section, the self-insurer may
6 require that the worker present himself or herself for a personal
7 interview. The costs of the examination or interview, including
8 payment of any reasonable travel expenses, shall be paid by the
9 department or self-insurer, as the case may be.

10 (5) The director may establish a medical bureau within the
11 department to perform medical examinations under this section.
12 Physicians hired or retained for this purpose shall be grounded in
13 industrial medicine and in the assessment of industrial physical
14 impairment. Self-insurers shall bear a proportionate share of the cost
15 of the medical bureau in a manner to be determined by the department.

16 (6) Where a dispute arises from the handling of any claim before
17 the condition of the injured worker becomes fixed, the worker,
18 employer, or self-insurer may request the department to resolve the
19 dispute or the director may initiate an inquiry on his or her own
20 motion. In these cases, the department shall proceed as provided in
21 this section and an order shall issue in accordance with RCW 51.52.050.

22 (7)(a) If a claim (i) is accepted by a self-insurer after June 30,
23 1986, and before August 1, 1997, (ii) involves only medical treatment
24 and the payment of temporary disability compensation under RCW
25 51.32.090 or only the payment of temporary disability compensation
26 under RCW 51.32.090, (iii) at the time medical treatment is concluded
27 does not involve permanent disability, (iv) is one with respect to
28 which the department has not intervened under subsection (6) of this
29 section, and (v) the injured worker has returned to work with the self-
30 insured employer of record, whether at the worker's previous job or at
31 a job that has comparable wages and benefits, the claim may be closed
32 by the self-insurer, subject to reporting of claims to the department
33 in a manner prescribed by department rules adopted under chapter 34.05
34 RCW.

35 (b) All determinations of permanent disability for claims accepted
36 under this subsection (7) by self-insurers shall be made by the self-
37 insured section of the department under subsections (1) through (4) of
38 this section.

1 (c) Upon closure of a claim under (a) of this subsection, the self-
2 insurer shall enter a written order, communicated to the worker and the
3 department self-insurance section, which contains the following
4 statement clearly set forth in bold face type: "This order constitutes
5 notification that your claim is being closed with medical benefits and
6 temporary disability compensation only as provided, and with the
7 condition you have returned to work with the self-insured employer. If
8 for any reason you disagree with the conditions or duration of your
9 return to work or the medical benefits or the temporary disability
10 compensation that has been provided, you must protest in writing to the
11 department of labor and industries, self-insurance section, within
12 sixty days of the date you received this order."

13 (8)(a) If a claim (i) is accepted by a self-insurer after June 30,
14 1990, and before August 1, 1997, (ii) involves only medical treatment,
15 (iii) does not involve payment of temporary disability compensation
16 under RCW 51.32.090, and (iv) at the time medical treatment is
17 concluded does not involve permanent disability, the claim may be
18 closed by the self-insurer, subject to reporting of claims to the
19 department in a manner prescribed by department rules adopted under
20 chapter 34.05 RCW. Upon closure of a claim, the self-insurer shall
21 enter a written order, communicated to the worker, which contains the
22 following statement clearly set forth in bold-face type: "This order
23 constitutes notification that your claim is being closed with medical
24 benefits only, as provided. If for any reason you disagree with this
25 closure, you must protest in writing to the Department of Labor and
26 Industries, Olympia, within 60 days of the date you received this
27 order. The department will then review your claim and enter a further
28 determinative order."

29 (b) All determinations of permanent disability for claims accepted
30 under this subsection (8) by self-insurers shall be made by the self-
31 insured section of the department under subsections (1) through (4) of
32 this section.

33 (9)(a) If a claim: (i) Is accepted by a self-insurer after July
34 31, 1997; (ii)(A) involves only medical treatment, or medical treatment
35 and the payment of temporary disability compensation under RCW
36 51.32.090, and a determination of permanent partial disability, if
37 applicable, has been made by the self-insurer as authorized in this
38 subsection; or (B) involves only the payment of temporary disability

1 compensation under RCW 51.32.090 and a determination of permanent
2 partial disability, if applicable, has been made by the self-insurer as
3 authorized in this subsection; (iii) is one with respect to which the
4 department has not intervened under subsection (6) of this section; and
5 (iv) concerns an injured worker who has returned to work with the self-
6 insured employer of record, whether at the worker's previous job or at
7 a job that has comparable wages and benefits, the claim may be closed
8 by the self-insurer, subject to reporting of claims to the department
9 in a manner prescribed by department rules adopted under chapter 34.05
10 RCW.

11 (b) If a physician or licensed advanced registered nurse
12 practitioner submits a report to the self-insurer that concludes that
13 the worker's condition is fixed and stable and supports payment of a
14 permanent partial disability award, and if within fourteen days from
15 the date the self-insurer mailed the report to the attending or
16 treating physician or licensed advanced registered nurse practitioner,
17 the worker's attending or treating physician or licensed advanced
18 registered nurse practitioner disagrees in writing that the worker's
19 condition is fixed and stable, the self-insurer must get a supplemental
20 medical opinion from a provider on the department's approved examiner's
21 list before closing the claim. In the alternative, the self-insurer
22 may forward the claim to the department, which must review the claim
23 and enter a final order as provided for in RCW 51.52.050.

24 (c) Upon closure of a claim under this subsection (9), the self-
25 insurer shall enter a written order, communicated to the worker and the
26 department self-insurance section, which contains the following
27 statement clearly set forth in bold-face type: "This order constitutes
28 notification that your claim is being closed with such medical benefits
29 and temporary disability compensation as provided to date and with such
30 award for permanent partial disability, if any, as set forth below, and
31 with the condition that you have returned to work with the self-insured
32 employer. If for any reason you disagree with the conditions or
33 duration of your return to work or the medical benefits, temporary
34 disability compensation provided, or permanent partial disability that
35 has been awarded, you must protest in writing to the Department of
36 Labor and Industries, Self-Insurance Section, within sixty days of the
37 date you received this order. If you do not protest this order to the
38 department, this order will become final."

1 (d) All determinations of permanent partial disability for claims
2 accepted by self-insurers under this subsection (9) may be made by the
3 self-insurer or the self-insurer may request a determination by the
4 self-insured section of the department. All determinations shall be
5 made under subsections (1) through (4) of this section.

6 (10) If the department receives a protest of an order issued by a
7 self-insurer under subsections (7) through (9) of this section, the
8 self-insurer's closure order must be held in abeyance. The department
9 shall review the claim closure action and enter a further determinative
10 order as provided for in RCW 51.52.050. If no protest is timely filed,
11 the closing order issued by the self-insurer shall become final and
12 shall have the same force and effect as a department order that has
13 become final under RCW 51.52.050.

14 (11) If within two years of claim closure under subsections (7)
15 through (9) of this section, the department determines that the self-
16 insurer has made payment of benefits because of clerical error, mistake
17 of identity, or innocent misrepresentation or the department discovers
18 a violation of the conditions of claim closure, the department may
19 require the self-insurer to correct the benefits paid or payable. This
20 subsection (11) does not limit in any way the application of RCW
21 51.32.240.

22 (12) For the purposes of this section, "comparable wages and
23 benefits" means wages and benefits that are at least ninety-five
24 percent of the wages and benefits received by the worker at the time of
25 injury.

26 **Sec. 9.** RCW 51.32.090 and 1993 c 521 s 3, 1993 c 299 s 1, and 1993
27 c 271 s 1 are each reenacted and amended to read as follows:

28 (1) When the total disability is only temporary, the schedule of
29 payments contained in RCW 51.32.060 (1) and (2) shall apply, so long as
30 the total disability continues.

31 (2) Any compensation payable under this section for children not in
32 the custody of the injured worker as of the date of injury shall be
33 payable only to such person as actually is providing the support for
34 such child or children pursuant to the order of a court of record
35 providing for support of such child or children.

36 (3)(a) As soon as recovery is so complete that the present earning
37 power of the worker, at any kind of work, is restored to that existing

1 at the time of the occurrence of the injury, the payments shall cease.
2 If and so long as the present earning power is only partially restored,
3 the payments shall:

4 (i) For claims for injuries that occurred before May 7, 1993,
5 continue in the proportion which the new earning power shall bear to
6 the old; or

7 (ii) For claims for injuries occurring on or after May 7, 1993,
8 equal eighty percent of the actual difference between the worker's
9 present wages and earning power at the time of injury, but: (A) The
10 total of these payments and the worker's present wages may not exceed
11 one hundred fifty percent of the average monthly wage in the state as
12 computed under RCW 51.08.018; (B) the payments may not exceed one
13 hundred percent of the entitlement as computed under subsection (1) of
14 this section; and (C) the payments may not be less than the worker
15 would have received if (a)(i) of this subsection had been applicable to
16 the worker's claim.

17 (b) No compensation shall be payable under this subsection (3)
18 unless the loss of earning power shall exceed five percent.

19 (4)(a) Whenever the employer of injury requests that a worker who
20 is entitled to temporary total disability under this chapter be
21 certified by a physician or licensed advanced registered nurse
22 practitioner as able to perform available work other than his or her
23 usual work, the employer shall furnish to the physician or licensed
24 advanced registered nurse practitioner, with a copy to the worker, a
25 statement describing the work available with the employer of injury in
26 terms that will enable the physician or licensed advanced registered
27 nurse practitioner to relate the physical activities of the job to the
28 worker's disability. The physician or licensed advanced registered
29 nurse practitioner shall then determine whether the worker is
30 physically able to perform the work described. The worker's temporary
31 total disability payments shall continue until the worker is released
32 by his or her physician or licensed advanced registered nurse
33 practitioner for the work, and begins the work with the employer of
34 injury. If the work thereafter comes to an end before the worker's
35 recovery is sufficient in the judgment of his or her physician or
36 licensed advanced registered nurse practitioner to permit him or her to
37 return to his or her usual job, or to perform other available work
38 offered by the employer of injury, the worker's temporary total

1 disability payments shall be resumed. Should the available work
2 described, once undertaken by the worker, impede his or her recovery to
3 the extent that in the judgment of his or her physician or licensed
4 advanced registered nurse practitioner he or she should not continue to
5 work, the worker's temporary total disability payments shall be resumed
6 when the worker ceases such work.

7 (b) Once the worker returns to work under the terms of this
8 subsection (4), he or she shall not be assigned by the employer to work
9 other than the available work described without the worker's written
10 consent, or without prior review and approval by the worker's physician
11 or licensed advanced registered nurse practitioner.

12 (c) If the worker returns to work under this subsection (4), any
13 employee health and welfare benefits that the worker was receiving at
14 the time of injury shall continue or be resumed at the level provided
15 at the time of injury. Such benefits shall not be continued or resumed
16 if to do so is inconsistent with the terms of the benefit program, or
17 with the terms of the collective bargaining agreement currently in
18 force.

19 (d) In the event of any dispute as to the worker's ability to
20 perform the available work offered by the employer, the department
21 shall make the final determination.

22 (5) No worker shall receive compensation for or during the day on
23 which injury was received or the three days following the same, unless
24 his or her disability shall continue for a period of fourteen
25 consecutive calendar days from date of injury: PROVIDED, That attempts
26 to return to work in the first fourteen days following the injury shall
27 not serve to break the continuity of the period of disability if the
28 disability continues fourteen days after the injury occurs.

29 (6) Should a worker suffer a temporary total disability and should
30 his or her employer at the time of the injury continue to pay him or
31 her the wages which he or she was earning at the time of such injury,
32 such injured worker shall not receive any payment provided in
33 subsection (1) of this section during the period his or her employer
34 shall so pay such wages.

35 (7) In no event shall the monthly payments provided in this section
36 exceed the applicable percentage of the average monthly wage in the
37 state as computed under the provisions of RCW 51.08.018 as follows:

	AFTER	PERCENTAGE
1		
2	June 30, 1993	105%
3	June 30, 1994	110%
4	June 30, 1995	115%
5	June 30, 1996	120%

6 (8) If the supervisor of industrial insurance determines that the
7 worker is voluntarily retired and is no longer attached to the work
8 force, benefits shall not be paid under this section.

9 **Sec. 10.** RCW 51.32.095 and 1999 c 110 s 1 are each amended to read
10 as follows:

11 (1) One of the primary purposes of this title is to enable the
12 injured worker to become employable at gainful employment. To this
13 end, the department or self-insurers shall utilize the services of
14 individuals and organizations, public or private, whose experience,
15 training, and interests in vocational rehabilitation and retraining
16 qualify them to lend expert assistance to the supervisor of industrial
17 insurance in such programs of vocational rehabilitation as may be
18 reasonable to make the worker employable consistent with his or her
19 physical and mental status. Where, after evaluation and recommendation
20 by such individuals or organizations and prior to final evaluation of
21 the worker's permanent disability and in the sole opinion of the
22 supervisor or supervisor's designee, whether or not medical treatment
23 has been concluded, vocational rehabilitation is both necessary and
24 likely to enable the injured worker to become employable at gainful
25 employment, the supervisor or supervisor's designee may, in his or her
26 sole discretion, pay or, if the employer is a self-insurer, direct the
27 self-insurer to pay the cost as provided in subsection (3) of this
28 section.

29 (2) When in the sole discretion of the supervisor or the
30 supervisor's designee vocational rehabilitation is both necessary and
31 likely to make the worker employable at gainful employment, then the
32 following order of priorities shall be used:

33 (a) Return to the previous job with the same employer;

34 (b) Modification of the previous job with the same employer
35 including transitional return to work;

36 (c) A new job with the same employer in keeping with any
37 limitations or restrictions;

1 (d) Modification of a new job with the same employer including
2 transitional return to work;

3 (e) Modification of the previous job with a new employer;

4 (f) A new job with a new employer or self-employment based upon
5 transferable skills;

6 (g) Modification of a new job with a new employer;

7 (h) A new job with a new employer or self-employment involving on-
8 the-job training;

9 (i) Short-term retraining and job placement.

10 (3)(a) Except as provided in (b) of this subsection, costs for
11 vocational rehabilitation benefits allowed by the supervisor or
12 supervisor's designee under subsection (1) of this section may include
13 the cost of books, tuition, fees, supplies, equipment, transportation,
14 child or dependent care, and other necessary expenses for any such
15 worker in an amount not to exceed three thousand dollars in any fifty-
16 two week period except as authorized by RCW 51.60.060, and the cost of
17 continuing the temporary total disability compensation under RCW
18 51.32.090 while the worker is actively and successfully undergoing a
19 formal program of vocational rehabilitation.

20 (b) Beginning with vocational rehabilitation plans approved on or
21 after July 1, 1999, costs for vocational rehabilitation benefits
22 allowed by the supervisor or supervisor's designee under subsection (1)
23 of this section may include the cost of books, tuition, fees, supplies,
24 equipment, child or dependent care, and other necessary expenses for
25 any such worker in an amount not to exceed four thousand dollars in any
26 fifty-two week period except as authorized by RCW 51.60.060, and the
27 cost of transportation and continuing the temporary total disability
28 compensation under RCW 51.32.090 while the worker is actively and
29 successfully undergoing a formal program of vocational rehabilitation.

30 (c) The expenses allowed under (a) or (b) of this subsection may
31 include training fees for on-the-job training and the cost of
32 furnishing tools and other equipment necessary for self-employment or
33 reemployment. However, compensation or payment of retraining with job
34 placement expenses under (a) or (b) of this subsection may not be
35 authorized for a period of more than fifty-two weeks, except that such
36 period may, in the sole discretion of the supervisor after his or her
37 review, be extended for an additional fifty-two weeks or portion
38 thereof by written order of the supervisor.

1 (d) In cases where the worker is required to reside away from his
2 or her customary residence, the reasonable cost of board and lodging
3 shall also be paid.

4 (e) Costs paid under this subsection shall be chargeable to the
5 employer's cost experience or shall be paid by the self-insurer as the
6 case may be.

7 (4) In addition to the vocational rehabilitation expenditures
8 provided for under subsection (3) of this section, an additional five
9 thousand dollars may, upon authorization of the supervisor or the
10 supervisor's designee, be expended for: (a) Accommodations for an
11 injured worker that are medically necessary for the worker to
12 participate in an approved retraining plan; and (b) accommodations
13 necessary to perform the essential functions of an occupation in which
14 an injured worker is seeking employment, consistent with the retraining
15 plan or the recommendations of a vocational evaluation. The injured
16 worker's attending physician or licensed advanced registered nurse
17 practitioner must verify the necessity of the modifications or
18 accommodations. The total expenditures authorized in this subsection
19 and the expenditures authorized under RCW 51.32.250 shall not exceed
20 five thousand dollars.

21 (5) The department shall establish criteria to monitor the quality
22 and effectiveness of rehabilitation services provided by the
23 individuals and organizations used under subsection (1) of this
24 section. The state fund shall make referrals for vocational
25 rehabilitation services based on these performance criteria.

26 (6) The department shall engage in, where feasible and cost-
27 effective, a cooperative program with the state employment security
28 department to provide job placement services under this section.

29 (7) The benefits in this section shall be provided for the injured
30 workers of self-insured employers. Self-insurers shall report both
31 benefits provided and benefits denied under this section in the manner
32 prescribed by the department by rule adopted under chapter 34.05 RCW.
33 The director may, in his or her sole discretion and upon his or her own
34 initiative or at any time that a dispute arises under this section,
35 promptly make such inquiries as circumstances require and take such
36 other action as he or she considers will properly determine the matter
37 and protect the rights of the parties.

1 (8) Except as otherwise provided in this section, the benefits
2 provided for in this section are available to any otherwise eligible
3 worker regardless of the date of industrial injury. However, claims
4 shall not be reopened solely for vocational rehabilitation purposes.

5 **Sec. 11.** RCW 51.36.010 and 1986 c 58 s 6 are each amended to read
6 as follows:

7 Upon the occurrence of any injury to a worker entitled to
8 compensation under the provisions of this title, he or she shall
9 receive proper and necessary medical and surgical services at the hands
10 of a physician or licensed advanced registered nurse practitioner of
11 his or her own choice, if conveniently located, and proper and
12 necessary hospital care and services during the period of his or her
13 disability from such injury, but the same shall be limited in point of
14 duration as follows:

15 In the case of permanent partial disability, not to extend beyond
16 the date when compensation shall be awarded him or her, except when the
17 worker returned to work before permanent partial disability award is
18 made, in such case not to extend beyond the time when monthly
19 allowances to him or her shall cease; in case of temporary disability
20 not to extend beyond the time when monthly allowances to him or her
21 shall cease: PROVIDED, That after any injured worker has returned to
22 his or her work his or her medical and surgical treatment may be
23 continued if, and so long as, such continuation is deemed necessary by
24 the supervisor of industrial insurance to be necessary to his or her
25 more complete recovery; in case of a permanent total disability not to
26 extend beyond the date on which a lump sum settlement is made with him
27 or her or he or she is placed upon the permanent pension roll:
28 PROVIDED, HOWEVER, That the supervisor of industrial insurance, solely
29 in his or her discretion, may authorize continued medical and surgical
30 treatment for conditions previously accepted by the department when
31 such medical and surgical treatment is deemed necessary by the
32 supervisor of industrial insurance to protect such worker's life or
33 provide for the administration of medical and therapeutic measures
34 including payment of prescription medications, but not including those
35 controlled substances currently scheduled by the state board of
36 pharmacy as Schedule I, II, III, or IV substances under chapter 69.50
37 RCW, which are necessary to alleviate continuing pain which results

1 from the industrial injury. In order to authorize such continued
2 treatment the written order of the supervisor of industrial insurance
3 issued in advance of the continuation shall be necessary.

4 The supervisor of industrial insurance, the supervisor's designee,
5 or a self-insurer, in his or her sole discretion, may authorize
6 inoculation or other immunological treatment in cases in which a work-
7 related activity has resulted in probable exposure of the worker to a
8 potential infectious occupational disease. Authorization of such
9 treatment does not bind the department or self-insurer in any
10 adjudication of a claim by the same worker or the worker's beneficiary
11 for an occupational disease.

12 **Sec. 12.** RCW 51.36.060 and 1991 c 89 s 3 are each amended to read
13 as follows:

14 Physicians or licensed advanced registered nurse practitioners
15 examining or attending injured workers under this title shall comply
16 with rules and regulations adopted by the director, and shall make such
17 reports as may be requested by the department or self-insurer upon the
18 condition or treatment of any such worker, or upon any other matters
19 concerning such workers in their care. Except under RCW 49.17.210 and
20 49.17.250, all medical information in the possession or control of any
21 person and relevant to the particular injury in the opinion of the
22 department pertaining to any worker whose injury or occupational
23 disease is the basis of a claim under this title shall be made
24 available at any stage of the proceedings to the employer, the
25 claimant's representative, and the department upon request, and no
26 person shall incur any legal liability by reason of releasing such
27 information.

28 **Sec. 13.** RCW 51.36.110 and 1994 c 154 s 312 are each amended to
29 read as follows:

30 The director of the department of labor and industries or the
31 director's authorized representative shall have the authority to:

32 (1) Conduct audits and investigations of providers of medical,
33 chiropractic, dental, vocational, and other health services furnished
34 to industrially injured workers pursuant to Title 51 RCW. In the
35 conduct of such audits or investigations, the director or the
36 director's authorized representatives may examine all records, or

1 portions thereof, including patient records, for which services were
2 rendered by a health services provider and reimbursed by the
3 department, notwithstanding the provisions of any other statute which
4 may make or purport to make such records privileged or confidential:
5 PROVIDED, That no original patient records shall be removed from the
6 premises of the health services provider, and that the disclosure of
7 any records or information obtained under authority of this section by
8 the department of labor and industries is prohibited and constitutes a
9 violation of RCW 42.52.050, unless such disclosure is directly
10 connected to the official duties of the department: AND PROVIDED
11 FURTHER, That the disclosure of patient information as required under
12 this section shall not subject any physician, licensed advanced
13 registered nurse practitioner, or other health services provider to any
14 liability for breach of any confidential relationships between the
15 provider and the patient: AND PROVIDED FURTHER, That the director or
16 the director's authorized representative shall destroy all copies of
17 patient medical records in their possession upon completion of the
18 audit, investigation, or proceedings;

19 (2) Approve or deny applications to participate as a provider of
20 services furnished to industrially injured workers pursuant to Title 51
21 RCW; and

22 (3) Terminate or suspend eligibility to participate as a provider
23 of services furnished to industrially injured workers pursuant to Title
24 51 RCW.

25 **Sec. 14.** RCW 51.48.060 and 1985 c 347 s 6 are each amended to read
26 as follows:

27 Any physician or licensed advanced registered nurse practitioner
28 who fails, neglects or refuses to file a report with the director, as
29 required by this title, within five days of the date of treatment,
30 showing the condition of the injured worker at the time of treatment,
31 a description of the treatment given, and an estimate of the probable
32 duration of the injury, or who fails or refuses to render all necessary
33 assistance to the injured worker, as required by this title, shall be
34 subject to a civil penalty determined by the director but not to exceed
35 two hundred fifty dollars.

1 **Sec. 15.** RCW 51.52.010 and 1999 c 149 s 1 are each amended to read
2 as follows:

3 There shall be a "board of industrial insurance appeals,"
4 hereinafter called the "board," consisting of three members appointed
5 by the governor, with the advice and consent of the senate, as
6 hereinafter provided. One shall be a representative of the public and
7 a lawyer, appointed from a mutually agreed to list of not less than
8 three active members of the Washington state bar association, submitted
9 to the governor by the two organizations defined below, and such member
10 shall be the chairperson of said board. The second member shall be a
11 representative of the majority of workers engaged in employment under
12 this title and selected from a list of not less than three names
13 submitted to the governor by an organization, statewide in scope, which
14 through its affiliates embraces a cross section and a majority of the
15 organized labor of the state. The third member shall be a
16 representative of employers under this title, and appointed from a list
17 of at least three names submitted to the governor by a recognized
18 statewide organization of employers, representing a majority of
19 employers. The initial terms of office of the members of the board
20 shall be for six, four, and two years respectively. Thereafter all
21 terms shall be for a period of six years. Each member of the board
22 shall be eligible for reappointment and shall hold office until his or
23 her successor is appointed and qualified. In the event of a vacancy
24 the governor is authorized to appoint a successor to fill the unexpired
25 term of his or her predecessor. All appointments to the board shall be
26 made in conformity with the foregoing plan. In the event a board
27 member becomes incapacitated in excess of thirty days either due to his
28 or her illness or that of an immediate family member as determined by
29 a request for family leave or as certified by the affected member's
30 treating physician or licensed advanced registered nurse practitioner,
31 the governor shall appoint an acting member to serve pro tem. Such an
32 appointment shall be made in conformity with the foregoing plan, except
33 that the list of candidates shall be submitted to the governor not more
34 than fifteen days after the affected organizations are notified of the
35 incapacity and the governor shall make the appointment within fifteen
36 days after the list is submitted. The temporary member shall serve
37 until such time as the affected member is able to reassume his or her
38 duties by returning from requested family leave or as determined by the

1 treating physician or licensed advanced registered nurse practitioner
2 or until the affected member's term expires, whichever occurs first.
3 Whenever the workload of the board and its orderly and expeditious
4 disposition shall necessitate, the governor may appoint two additional
5 pro-tem members in addition to the regular members. Such appointments
6 shall be for a definite period of time, and shall be made from lists
7 submitted respectively by labor and industry as in the case of regular
8 members. One pro-tem member shall be a representative of labor and one
9 shall be a representative of industry. Members shall devote their
10 entire time to the duties of the board and shall receive for their
11 services a salary as fixed by the governor in accordance with the
12 provisions of RCW 43.03.040 which shall be in addition to travel
13 expenses in accordance with RCW 43.03.050 and 43.03.060 as now existing
14 or hereafter amended. Headquarters for the board shall be located in
15 Olympia. The board shall adopt a seal which shall be judicially
16 recognized.

17 NEW SECTION. **Sec. 16.** A new section is added to chapter 51.36 RCW
18 to read as follows:

19 Licensed advanced registered nurse practitioners are recognized as
20 independent practitioners and, subject to the provisions of this title,
21 the health services available to an injured worker under RCW 51.36.010
22 include health services provided by licensed advanced registered nurse
23 practitioners within their scope of practice.

24 NEW SECTION. **Sec. 17.** If any provision of this act or its
25 application to any person or circumstance is held invalid, the
26 remainder of the act or the application of the provision to other
27 persons or circumstances is not affected.

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