
ENGROSSED SUBSTITUTE HOUSE BILL 3188

State of Washington 58th Legislature 2004 Regular Session

By House Committee on Commerce & Labor (originally sponsored by Representatives Conway and Wood)

READ FIRST TIME 02/06/04.

- AN ACT Relating to liability to the department of labor and industries for premiums, overpayments, and penalties; amending RCW 51.08.177, 51.12.070, 51.36.110, 51.32.240, and 51.52.050; adding new sections to chapter 51.48 RCW; adding a new section to chapter 51.16
- 5 RCW; and creating new sections.
- 6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 7 Sec. 1. RCW 51.08.177 and 1986 c 9 s 3 are each amended to read as 8 follows:
- 9 "Successor" means any person to whom a taxpayer quitting, selling
- out, exchanging, or disposing of a business sells or otherwise conveys,
- 11 directly or indirectly, in bulk and not in the ordinary course of the
- 12 taxpayer's business, a major part of the ((materials, supplies,
- 13 merchandise, inventory, fixtures, or equipment)) property, whether real
- or personal, tangible or intangible, of the taxpayer.
- 15 **Sec. 2.** RCW 51.12.070 and 1981 c 128 s 4 are each amended to read 16 as follows:
- 17 The provisions of this title ((shall)) apply to all work done by
- 18 contract; the person, firm, or corporation who lets a contract for such

p. 1 ESHB 3188

work ((shall be)) <u>is</u> responsible primarily and directly for all premiums upon the work. The contractor and any subcontractor ((shall be)) <u>are</u> subject to the provisions of this title and the person, firm, or corporation letting the contract ((shall be)) <u>is</u> entitled to collect from the contractor the full amount payable in premiums and the contractor in turn ((shall be)) <u>is</u> entitled to collect from the subcontractor his or her proportionate amount of the payment.

For the purposes of this section, a contractor registered under chapter 18.27 RCW or licensed under chapter 19.28 RCW ((shall not be)) is not responsible for any premiums upon the work of any subcontractor if:

- (1) The subcontractor is currently engaging in a business which is registered under chapter 18.27 RCW or licensed under chapter 19.28 RCW;
- (2) The subcontractor has a principal place of business which would be eligible for a business deduction for internal revenue service tax purposes other than that furnished by the contractor for which the business has contracted to furnish services;
- (3) The subcontractor maintains a separate set of books or records that reflect all items of income and expenses of the business; ((and))
 - (4) The subcontractor has contracted to perform:

- (a) The work of a contractor as defined in RCW 18.27.010; or
- (b) The work of installing wires or equipment to convey electric current or installing apparatus to be operated by such current as it pertains to the electrical industry as described in chapter 19.28 $RCW_{\underline{i}}$ and
- (5) The subcontractor has an industrial insurance account in good standing with the department or is a self-insurer. For the purposes of this subsection, a contractor may consider a subcontractor's account to be in good standing if, within a year prior to letting the contract or master service agreement, and at least once a year thereafter, the contractor has verified with the department that the account is in good standing and the contractor has not received written notice from the department that the subcontractor's account status has changed. Acceptable documentation of verification includes a department document which includes an issued date or a dated printout of information from the department's internet web site showing a subcontractor's good standing. The department shall develop an approach to provide

contractors with verification of the date of inquiries validating that the subcontractor's account is in good standing.

It ((shall be)) <u>is</u> unlawful for any county, city, or town to issue a construction building permit to any person who has not submitted to the department an estimate of payroll and paid premium thereon as provided by chapter 51.16 RCW of this title or proof ((that such person has qualified)) of qualification as a self-insurer.

8 <u>NEW SECTION.</u> **Sec. 3.** A new section is added to chapter 51.48 RCW 9 to read as follows:

(1) Upon termination, dissolution, or abandonment of a corporate or limited liability company business, any officer, member, manager, or other person having control or supervision of payment and/or reporting of industrial insurance, or who is charged with the responsibility for the filing of returns, is personally liable for any unpaid premiums and interest and penalties on those premiums if such officer or other person willfully fails to pay or to cause to be paid any premiums due the department under chapter 51.16 RCW.

For purposes of this subsection "willfully fails to pay or to cause to be paid" means that the failure was the result of an intentional, conscious, and voluntary course of action.

- (2) The officer, member, manager, or other person is liable only for premiums that became due during the period he or she had the control, supervision, responsibility, or duty to act for the corporation described in subsection (1) of this section, plus interest and penalties on those premiums.
- (3) The officer, member, manager, or other person is not liable if that person is not exempt from mandatory coverage under RCW 51.12.020 and was directed not to pay the employer's premiums by someone who is exempt.
- (4) The officer, member, manager, or other person is not liable if all of the assets of the corporation or limited liability company have been applied to its debts through bankruptcy or receivership.
- (5) Any person having been issued a notice of assessment under this section is entitled to the appeal procedures under RCW 51.48.131.
- 35 (6) This section does not relieve the corporation or limited 36 liability company of its liabilities under Title 51 RCW or otherwise 37 impair other tax collection remedies afforded by law.

p. 3 ESHB 3188

- 1 (7) Collection authority and procedures prescribed in this chapter 2 apply to collections under this section.
- 3 <u>NEW SECTION.</u> **Sec. 4.** A new section is added to chapter 51.16 RCW 4 to read as follows:

5

7

8

17

18 19

2021

22

2324

25

26

2728

29

30

31

32

33

34

35

- The department shall, working with business associations and other employer and employee groups when practical, publish information and provide training to promote understanding of the premium liability that may be incurred under this chapter.
- 9 <u>NEW SECTION.</u> **Sec. 5.** A new section is added to chapter 51.48 RCW to read as follows:
- The department shall, working with business associations and other employer and employee groups when practical, publish information and provide training to promote understanding of the premium liability that may be incurred under this chapter.
- 15 **Sec. 6.** RCW 51.36.110 and 1994 c 154 s 312 are each amended to 16 read as follows:
 - The director of the department of labor and industries or the director's authorized representative shall have the authority to:
 - (1) Conduct audits and investigations of providers of medical, chiropractic, dental, vocational, and other health services furnished to industrially injured workers pursuant to Title 51 RCW. conduct of such audits or investigations, the director or the director's authorized representatives may examine all records, or portions thereof, including patient records, for which services were rendered by a health services provider and reimbursed by the department, notwithstanding the provisions of any other statute which may make or purport to make such records privileged or confidential: PROVIDED, That no original patient records shall be removed from the premises of the health services provider, and that the disclosure of any records or information obtained under authority of this section by the department of labor and industries is prohibited and constitutes a violation of RCW 42.52.050, unless such disclosure is directly connected to the official duties of the department: AND PROVIDED FURTHER, That the disclosure of patient information as required under this section shall not subject any physician or other health services

provider to any liability for breach of any confidential relationships between the provider and the patient: AND PROVIDED FURTHER, That the director or the director's authorized representative shall destroy all copies of patient medical records in their possession upon completion of the audit, investigation, or proceedings;

1 2

3

4 5

17

18

19 20

21

2223

24

2526

27

28

29

30

31

32

3334

- 6 (2) Approve or deny applications to participate as a provider of services furnished to industrially injured workers pursuant to Title 51 RCW; ((and))
- 9 (3) Terminate or suspend eligibility to participate as a provider 10 of services furnished to industrially injured workers pursuant to Title 11 51 RCW; and
- 12 (4) Pursue collection of unpaid overpayments and/or penalties plus
 13 interest accrued from health care providers pursuant to RCW
 14 51.32.240(6).
- 15 **Sec. 7.** RCW 51.32.240 and 2001 c 146 s 10 are each amended to read 16 as follows:
 - (1)(a) Whenever any payment of benefits under this title is made because of clerical error, mistake of identity, innocent misrepresentation by or on behalf of the recipient thereof mistakenly acted upon, or any other circumstance of a similar nature, all not induced by ((fraud)) willful misrepresentation, the recipient thereof shall repay it and recoupment may be made from any future payments due to the recipient on any claim with the state fund or self-insurer, as the case may be. The department or self-insurer, as the case may be, must make claim for such repayment or recoupment within one year of the making of any such payment or it will be deemed any claim therefor has been waived.
 - (b) Except as provided in subsections (3), (4), and (5) of this section, the department may only assess an overpayment of benefits because of adjudicator error when the order upon which the overpayment is based is not yet final as provided in RCW 51.52.050 and 51.52.060. "Adjudicator error" includes the failure to consider information in the claim file, failure to secure adequate information, or an error in judgment.
- 35 <u>(c)</u> The director, pursuant to rules adopted in accordance with the 36 procedures provided in the administrative procedure act, chapter 34.05

p. 5 ESHB 3188

RCW, may exercise his discretion to waive, in whole or in part, the amount of any such timely claim where the recovery would be against equity and good conscience.

- (2) Whenever the department or self-insurer fails to pay benefits because of clerical error, mistake of identity, or innocent misrepresentation, all not induced by recipient ((fraud)) willful misrepresentation, the recipient may request an adjustment of benefits to be paid from the state fund or by the self-insurer, as the case may be, subject to the following:
- (a) The recipient must request an adjustment in benefits within one year from the date of the incorrect payment or it will be deemed any claim therefore has been waived.
- (b) The recipient may not seek an adjustment of benefits because of adjudicator error. Adjustments due to adjudicator error are addressed by the filing of a written request for reconsideration with the department of labor and industries or an appeal with the board of industrial insurance appeals within sixty days from the date the order is communicated as provided in RCW 51.52.050. "Adjudicator error" includes the failure to consider information in the claim file, failure to secure adequate information, or an error in judgment.
- (3) Whenever the department issues an order rejecting a claim for benefits paid pursuant to RCW 51.32.190 or 51.32.210, after payment for temporary disability benefits has been paid by a self-insurer pursuant to RCW 51.32.190(3) or by the department pursuant to RCW 51.32.210, the recipient thereof shall repay such benefits and recoupment may be made from any future payments due to the recipient on any claim with the state fund or self-insurer, as the case may be. The director, under rules adopted in accordance with the procedures provided in the administrative procedure act, chapter 34.05 RCW, may exercise discretion to waive, in whole or in part, the amount of any such payments where the recovery would be against equity and good conscience.
- (4) Whenever any payment of benefits under this title has been made pursuant to an adjudication by the department or by order of the board or any court and timely appeal therefrom has been made where the final decision is that any such payment was made pursuant to an erroneous adjudication, the recipient thereof shall repay it and recoupment may be made from any future payments due to the recipient on any claim with

- the state fund or self-insurer, as the case may be. The director, pursuant to rules adopted in accordance with the procedures provided in the administrative procedure act, chapter 34.05 RCW, may exercise his discretion to waive, in whole or in part, the amount of any such payments where the recovery would be against equity and good conscience.
- (5)(a) Whenever any payment of benefits under this title has been induced by ((fraud)) willful misrepresentation the recipient thereof shall repay any such payment together with a penalty of fifty percent of the total of any such payments and the amount of such total sum may be recouped from any future payments due to the recipient on any claim with the state fund or self-insurer against whom the ((fraud)) willful misrepresentation was committed, as the case may be, and the amount of such penalty shall be placed in the supplemental pension fund. Such repayment or recoupment must be demanded or ordered within three years of the discovery of the ((fraud)) willful misrepresentation.
- (b) For purposes of this subsection (5), it is willful misrepresentation for a person to obtain payments or other benefits under this title in an amount greater than that to which the person otherwise would be entitled. Willful misrepresentation includes:
 - (i) Willful false statement; or

- (ii) Willful misrepresentation, omission, or concealment of any material fact.
 - (c) For purposes of this subsection (5), "willful" means a conscious or deliberate false statement, misrepresentation, omission, or concealment of a material fact with the specific intent of obtaining, continuing, or increasing benefits under this title.
 - (d) For purposes of this subsection (5), failure to disclose a work-type activity must be willful in order for a misrepresentation to have occurred.
 - (e) For purposes of this subsection (5), a material fact is one which would result in additional, increased, or continued benefits, including but not limited to facts about physical restrictions, or work-type activities which either result in wages or income or would be reasonably expected to do so. Wages or income include the receipt of any goods or services. For a work-type activity to be reasonably expected to result in wages or income, a pattern of repeated activity must exist. For those activities that would reasonably be expected to

p. 7 ESHB 3188

result in wages or produce income, but for which actual wage or income information cannot be reasonably determined, the department shall impute wages pursuant to RCW 51.08.178(4).

1

2

3

4 5

6

7

8

9

10

11 12

13

14

15 16

17

18

19

2021

22

2324

25

2627

28

29

30

3132

3334

35

3637

38

(6) The worker, beneficiary, or other person affected thereby shall have the right to contest an order assessing an overpayment pursuant to this section in the same manner and to the same extent as provided under RCW 51.52.050 and 51.52.060. In the event such an order becomes final under chapter 51.52 RCW and notwithstanding the provisions of subsections (1) through (5) of this section, the director, director's designee, or self-insurer may file with the clerk in any county within the state a warrant in the amount of the sum representing the unpaid overpayment and/or penalty plus interest accruing from the date the order became final. The clerk of the county in which the warrant is filed shall immediately designate a superior court cause number for such warrant and the clerk shall cause to be entered in the judgment docket under the superior court cause number assigned to the warrant, the name of the worker, beneficiary, or other person mentioned in the warrant, the amount of the unpaid overpayment and/or penalty plus interest accrued, and the date the warrant was filed. The amount of the warrant as docketed shall become a lien upon the title to and interest in all real and personal property of the worker, beneficiary, or other person against whom the warrant is issued, the same as a judgment in a civil case docketed in the office of such clerk. sheriff shall then proceed in the same manner and with like effect as prescribed by law with respect to execution or other process issued against rights or property upon judgment in the superior court. Such warrant so docketed shall be sufficient to support the issuance of writs of garnishment in favor of the department or self-insurer in the manner provided by law in the case of judgment, wholly or partially unsatisfied. The clerk of the court shall be entitled to a filing fee under RCW 36.18.012(10), which shall be added to the amount of the warrant. A copy of such warrant shall be mailed to the worker, beneficiary, or other person within three days of filing with the clerk.

The director, director's designee, or self-insurer may issue to any person, firm, corporation, municipal corporation, political subdivision of the state, public corporation, or agency of the state, a notice to withhold and deliver property of any kind if there is reason to believe

that there is in the possession of such person, firm, corporation, 1 2 municipal corporation, political subdivision of the state, public corporation, or agency of the state, property that is due, owing, or 3 belonging to any worker, beneficiary, or other person upon whom a 4 warrant has been served for payments due the department or self-5 insurer. The notice and order to withhold and deliver shall be served 6 by certified mail accompanied by an affidavit of service by mailing or 7 served by the sheriff of the county, or by the sheriff's deputy, or by 8 any authorized representative of the director, director's designee, or 9 10 self-insurer. Any person, firm, corporation, municipal corporation, political subdivision of the state, public corporation, or agency of 11 the state upon whom service has been made shall answer the notice 12 13 within twenty days exclusive of the day of service, under oath and in writing, and shall make true answers to the matters inquired or in the 14 15 notice and order to withhold and deliver. In the event there is in the possession of the party named and served with such notice and order, 16 17 any property that may be subject to the claim of the department or self-insurer, such property shall be delivered forthwith to the 18 director, the director's authorized representative, or self-insurer 19 upon demand. If the party served and named in the notice and order 20 21 fails to answer the notice and order within the time prescribed in this 22 section, the court may, after the time to answer such order has expired, render judgment by default against the party named in the 23 24 notice for the full amount, plus costs, claimed by the director, director's designee, or self-insurer in the notice. In the event that 25 26 a notice to withhold and deliver is served upon an employer and the 27 property found to be subject thereto is wages, the employer may assert in the answer all exemptions provided for by chapter 6.27 RCW to which 28 the wage earner may be entitled. 29

This subsection shall only apply to orders assessing an overpayment which are issued on or after July 28, 1991: PROVIDED, That this subsection shall apply retroactively to all orders assessing an overpayment resulting from fraud, civil or criminal.

30

31

32

33

3435

36

(7) Orders assessing an overpayment which are issued on or after July 28, 1991, shall include a conspicuous notice of the collection methods available to the department or self-insurer.

p. 9 ESHB 3188

1 **Sec. 8.** RCW 51.52.050 and 1987 c 151 s 1 are each amended to read 2 as follows:

Whenever the department has made any order, decision, or award, it 3 shall promptly serve the worker, beneficiary, employer, or other person 4 5 affected thereby, with a copy thereof by mail, which shall be addressed to such person at his or her last known address as shown by the records 6 7 of the department. The copy, in case the same is a final order, decision, or award, shall bear on the same side of the same page on 8 9 which is found the amount of the award, a statement, set in black faced type of at least ten point body or size, that such final order, 10 decision, or award shall become final within sixty days from the date 11 the order is communicated to the parties unless a written request for 12 13 reconsideration is filed with the department of labor and industries, Olympia, or an appeal is filed with the board of industrial insurance 14 appeals, Olympia: PROVIDED, That a department order or decision making 15 16 demand, whether with or without penalty, for repayment of sums paid to 17 a provider of medical, dental, vocational, or other health services rendered to an industrially injured worker, shall state that such order 18 or decision shall become final within twenty days from the date the 19 20 order or decision is communicated to the parties unless a written 21 request for reconsideration is filed with the department of labor and 22 industries, Olympia, or an appeal is filed with the board of industrial 23 insurance appeals, Olympia.

Whenever the department has taken any action or made any decision relating to any phase of the administration of this title the worker, beneficiary, employer, or other person aggrieved thereby may request reconsideration of the department, or may appeal to the board. appeal before the board, the appellant shall have the burden of proceeding with the evidence to establish a prima facie case for the relief sought in such appeal: PROVIDED, That in an appeal from an order of the department that alleges ((fraud)) willful misrepresentation, the department or self-insured employer initially introduce all evidence in its case in chief. Any such person aggrieved by the decision and order of the board may thereafter appeal to the superior court, as prescribed in this chapter.

36 <u>NEW SECTION.</u> **Sec. 9.** Section 7 of this act applies to willful misrepresentation determinations issued on or after July 1, 2004.

ESHB 3188 p. 10

24

25

2627

28

2930

31

32

33

3435

- 1 <u>NEW SECTION.</u> **Sec. 10.** The department shall adopt rules to
- 2 implement this act.

--- END ---

p. 11 ESHB 3188