S-4520.1			

SENATE BILL 6750

State of Washington 60th Legislature 2008 Regular Session

By Senators Kohl-Welles, Roach, Kline, Keiser, Pridemore, McDermott, and Franklin

Read first time 01/23/08. Referred to Committee on Labor, Commerce, Research & Development.

- 1 AN ACT Relating to industrial insurance benefits on appeal; and 2 amending RCW 51.52.050.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

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- 4 **Sec. 1.** RCW 51.52.050 and 2004 c 243 s 8 are each amended to read 5 as follows:
 - (1) Whenever the department has made any order, decision, or award, it shall promptly serve the worker, beneficiary, employer, or other person 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 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 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, decision, or award shall become final within sixty days from the date the order is communicated to the parties unless a written request for reconsideration is filed with the department of labor and industries, Olympia, or an appeal is filed with the board of industrial insurance appeals, Olympia((: PROVIDED, That)). However, a department order or decision making demand, whether with or without penalty, for repayment

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of sums paid to a provider of medical, dental, vocational, or other health services rendered to an industrially injured worker, shall state that such order or decision shall become final within twenty days from the date the order or decision is communicated to the parties unless a written request for reconsideration is filed with the department of labor and industries, Olympia, or an appeal is filed with the board of industrial insurance appeals, Olympia.

(2)(a) 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. In an 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)).

(b) An order by the department awarding benefits shall become effective and benefits due on the date issued. Subject to (b)(i) and (ii) of this subsection, if the department order is appealed the order shall not be stayed pending a final decision on the merits unless ordered by the board. Any party may move for a stay of the order on appeal, in whole or in part. The motion must be filed within fifteen days of the order granting appeal. Within thirty days of a motion for stay and receipt of the claim file from the department, the board shall conduct an expedited review of the claim file as it existed on the date of the department order. The board shall issue a final decision within forty days of the filing of the motion for stay. The board's final decision may be appealed to superior court in accordance with RCW 51.52.110. The board shall grant a motion to stay if the moving party demonstrates that it is more likely than not to prevail on the facts as they existed at the time of the order on appeal, with a presumption given that the department's order was correct. The board shall not consider the likelihood of recoupment of benefits as a basis to grant or deny a motion to stay.

(i) If upon reconsideration requested by a worker or medical provider, the department has ordered an increase in a permanent partial disability award from the amount reflected in an earlier order, the award reflected in the earlier order shall not be stayed pending a final decision on the merits. However, the increase is stayed without further action by the board pending a final decision on the merits.

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(ii) If a self-insured employer appeals an order setting the claimant's time loss rate, the claimant shall receive any time loss or pension benefits based upon the rate calculation that the employer most recently submitted to the department and payment of benefits at this rate shall not be stayed pending a final decision on the merits. However, payment of time loss or pension benefits at the increased rate in the order on appeal is stayed without further action by the board pending a final decision on the merits.

(c) In an appeal from an order of the department that alleges willful misrepresentation, the department or self-insured employer shall 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.

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