

# Workers Compensation Claim State Environmental Guide - Washington

WASHINGTON -HTTPS://LNI.WA.GOV/INSURANCE/SELF-INSURANCE/ABOUT-SELF-INSURANCE/

#### **Temporary Total Benefits**

For dates of injuries 07/01/96-06/30/22, the maximum daily time loss rate is \$275.02. The rates a published yearly by L&I. This is the current chart - https://lni.wa.gov/insurance/\_docs/maxtlrates.pdf

The minimum time loss rate for dates of injury or occupational disease on or after July 2, 2008 is 15% of the state's average monthly wage plus \$10 if the worker has a spouse and \$10 for each dependent child up to five children. If the workers gross monthly wage is less than 15% of the state's average monthly wage then the worker is entitled to a time loss rate equal to 100% of their gross monthly wage or the minimum rate in effect prior to July 2, 2008 whichever is greater.

Min Daily is 15% of State Average Monthly wage (\$41.25/day) or the minimum in effect prior to 7/2/08 (\$6.17 to \$11.73/day)—whichever is higher.

Rates are based on marital and dependent status and will adjust with the discontinuation of health, dental, and vision premiums paid by the employer at the time of injury.

Waiting period is 3 days from the date of injury. After 14 days of total disability, waiting period is owed.

Cost of Living Adjustment:

- No Cost of Living Adjustment was paid 7/1/11
- Reinstated 7/1/12 and thereafter
- For claims with date of injury on or after 7/1/11, no COLA paid until the second July 1 after date of injury (RCW 51.32.075).
- Since the cumulative COLA depends on the date of injury it is best to consult L&Is chart https://lni.wa.gov/insurance/ docs/colachart5.pdf

TTD is payable when certified by attending physician or until IW is declared capable of being gainfully employed via preponderance of medical and vocational findings. TTD must be certified by the attending provider at 60-day intervals unless IW enrolled in formal vocational retraining program.



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Temporary Partial Benefits (Loss of Earning Power (LEP)	Payable when a worker returns to modified duty making less than 95% the wage at injury.
Permanent Partial Benefits	Based on AMA guidelines for % of disability per body part, some of which equate to state-defined categories of impairment, not whole person impairment. Schedule of benefits owe for applicable percentage is based on date of injury. The State updates the PPD schedule every July 1.
Permanent Total Benefits	TTD rate with offsets for Social Security (if applicable) with benefits paid for life or life of spouse pending payment option. Second Injury Fund Relief is available for certain cases.
Fatality Benefits	Where death results from the injury the expenses of burial not to exceed two hundred percent of the average monthly wage in the state.  Surviving spouse of a deceased worker eligible for benefits under this title shall receive monthly for life or until remarriage. Surviving minor children eligible for death benefits in some cases.
Vocational Rehabilitation	Evaluation required if not released to job of injury or return to permanent modified position. If worker possesses transferable skills for another occupation, then retraining services are not owed. Vocational "Option 2" permits worker to forego formal retraining services for payment of 9 months of time loss and maintain access to retraining funds for five years.
Settlement Allowed	Claim Resolution Settlement Agreement (CRSA): Available to IWs 50+ years of age with claims more than 180 days old. Allows parties to resolve all aspects of a claim or claims except future medical.  Stipulations: Allows for parties to stipulate to essential facts at closure when Department closure is requested, and all parties are represented. Must have medical, vocational, or factual support for stipulations.
Cap on benefits, exceptions	None

# **Medical issues**

Initial Choice of Provider	Employee. Employer/TPA cannot direct care
Change of Provider	Employer/TPA cannot direct medical care. All changes in treating provider must be approved by the Department of Labor and Industry (DLI) or self-insured employer.  Effective 1/1/13, all attending physicians must be part of the State's Provider
	Network. These initial rules govern attending physicians only and include a definition for "risk of harm" to help assist the Department in weeding out problematic providers.
Medical Fee Schedule	Washington implemented its first medical fee schedule in 1971. The DLI adopted the Medicare Resource Based Relative Value Scale (RBRVS) in 1993. Brand name and generic prescription drugs reimbursed at average wholesale

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## **Medical issues**

	price less 10% plus a dispensing fee.
	Medical Fee Schedule percent over Medicare: Unknown
Managed Care	None. Washington is an employee choice State for medical care. For more information, please refer to the WC Managed Care Quick Reference Chart by State Guide.
Utilization Review	Not a URAC State.
Treatment Guidelines	The Office of the Medical Director works closely with the provider community to develop medical treatment guidelines on a wide range of topics relevant to injured workers. Guidelines cover areas such as lumbar fusion, indications for lumbar MRI, and the prescribing of controlled substances. The process of developing guidelines includes review of medical literature, as well as consideration of the community standard of practice
Generic Drug Substitution	The state mandates generic substitution.
Medical Mileage Reimbursement Rate	\$0.65 per mile as of 01/01/2023
Network Information	Coventry
Ability to Terminate Medical Treatment	Medical benefits cease when an attending physician agrees the worker is fixed and stable (MMI) or when the Department issues a closing order. Benefits cannot be terminated unilaterally by the claim administrator.
Settlement Allowed	Medical cannot be settled Full & Final.
Cap on benefits, exceptions	None.

### **Other Issues**

Other issues	
WC Hearing Docket Speed	12 months average. The first 3 months are spent in mediation conference and then 9 to 12 months for the litigation.
	Outcome of hearings: depends on geographic location and assigned judge. State is pro-claimant.
Staff Counsel	No staff counsel option exists.
	Panel Counsel
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Hearings require attorney or claim handler participation	A self-insured employer must be represented by an attorney at hearing.
Occupational Diseases	No unique issues.
Second Injury Fund availability	Yes.
Other Offset Opportunities	Apportionment is applied to pre-existing conditions that combine with a work-related injury/occupational disease to create permanent impairment.
EDI	State reporting using SIEDRS for medical EDI
In-State Adjusting Required	No

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## **Other Issues**

License or Certification Required	Yes, A certified Washington Workers' Compensation adjuster must be
	physically present in each location that manages Washington Workers'
	Compensation claims. For out of state handling of Washington Workers'
	Compensation, each claim professional handling Washington must be certified.