## 1 HB 1797 - H AMD 2 By Representative Conway

Strike everything after the enacting clause and insert the following:

- "Sec. 1. RCW 51.28.055 and 1984 c 159 s 2 are each amended to read as follows:
- (1) Except as provided in subsection (2) of this section, claims for occupational disease or infection to be valid and compensable must be filed within two years following the date the worker had written notice from a physician:  $((\langle 1 \rangle))$  (a) Of the existence of his or her occupational disease, and  $((\langle 1 \rangle))$  (b) that a claim for disability benefits may be filed. The notice shall also contain a statement that the worker has two years from the date of the notice to file a claim. The physician shall file the notice with the department. The department shall send a copy to the worker and to the self-insurer if the worker's employer is self-insured. However, a claim is valid if it is filed within two years from the date of death of the worker suffering from an occupational disease.
- (2)(a) Except as provided in (b) of this subsection, to be valid and compensable, claims for hearing loss due to prolonged or repeated exposure to occupational noise must be filed within the earlier of the following:
- (i) The time limits specified in subsection (1) of this section; or
- (ii) The later of two years after the date that the worker attains the age of sixty-five or one year after the effective date of this section.
- (b)A claimforhearingossdue to prolonged or repeated exposure to occupational noise that is not timely filed under (a) of this subsection may be allowed only for medical aid benefits under chapter 51.36 RCW.
  - (3) The department may adopt rules to implement this section.

- Sec. 2. RCW 51.36.020 and 1999 c 395 s 1 are each amended to read as follows:
- (1) When the injury to any worker is so serious as to require his or her being taken from the place of injury to a place of treatment, his or her employer shall, at the expense of the medical aid fund, or self-insurer, as the case may be, furnish transportation to the nearest place of proper treatment.
- (2) Every worker whose injury results in the loss of one or more limbs or eyes shall be provided with proper artificial substitutes and every worker, who suffers an injury to an eye producing an error of refraction, shall be once provided proper and properly equipped lenses to correct such error of refraction and his or her disability rating shall be based upon the loss of sight before correction.
- (3) Every worker whose accident results in damage to or destruction of an artificial limb, eye, or tooth, shall have same repaired or replaced.
- (4) Every worker whose hearing aid or eyeglasses or lenses are damaged, destroyed, or lost as a result of an industrial accident shall have the same restored or replaced. The department or self-insurer shall be liable only for the cost of restoring damaged hearing aids or eyeglasses to their condition at the time of the accident.
- (5)(a) All mechanical appliances necessary in the treatment of an injured worker, such as braces, belts, casts, and crutches, shall be provided and all mechanical appliances required as permanent equipment after treatment has been completed shall continue to be provided or replaced without regard to the date of injury or date treatment was completed, notwithstanding any other provision of law.
- (b) The department shall assess the benefits to workers and the costs of emerging technologies in determining which hearing devices are provided to workers under this title. Such new technology shall be made available to workers requiring new or replacement devices as deemed appropriate based on the department's assessment.
- (6) A worker, whose injury is of such short duration as to bring him or her within the time limit provisions of RCW 51.32.090, shall nevertheless receive during the omitted period medical,

surgical, and hospital care and service and transportation under the provisions of this chapter.

- (7) Whenever in the sole discretion of the supervisor it is reasonable and necessary to provide residence modifications necessary to meet the needs and requirements of the worker who has sustained catastrophic injury, the department or self-insurer may be ordered to pay an amount not to exceed the state's average annual wage for one year as determined under RCW 50.04.355, as now existing or hereafter amended, toward the cost of such modifications or construction. Such payment shall only be made for the construction or modification of a residence in which the injured worker resides. Only one residence of any worker may be modified or constructed under this subsection, although the supervisor may order more than one payment for any one home, up to the maximum amount permitted by this section.
- (8)(a) Whenever in the sole discretion of the supervisor it is reasonable and necessary to modify a motor vehicle owned by a worker who has become an amputee or becomes paralyzed because of an industrial injury, the supervisor may order up to fifty percent of the state's average annual wage for one year, as determined under RCW 50.04.355, to be paid by the department or self-insurer toward the costs thereof.
- (b) In the sole discretion of the supervisor after his or her review, the amount paid under this subsection may be increased by no more than four thousand dollars by written order of the supervisor.
- (9) The benefits provided by subsections (7) and (8) of this section are available to any otherwise eligible worker regardless of the date of industrial injury.
- **Sec. 3.** RCW 51.32.080 and 1993 c 520 s 1 are each amended to read as follows:
- (1)(a) Until July 1, 1993, for the permanent partial disabilities here specifically described, the injured worker shall receive compensation as follows:

## LOSS BY AMPUTATION

1 2 3	Of leg above the knee joint with short thigh stump (3" or less below the tuberosity of ischium)	\$54,000.0 0
4 5	Of leg at or above knee joint with functional stump	48,600.00
6	Of leg below knee joint	43,200.00
7	Of leg at ankle (Syme)	37,800.00
8	Of foot at mid-metatarsals	18,900.00
9	Of great toe with resection of metatarsal	
10	bone	11,340.00
11	Of great toe at metatarsophalangeal	
12	joint	6,804.00
13	Of great toe at interphalangeal joint	3,600.00
14	Of lesser toe (2nd to 5th) with resection of	
15	metatarsal bone	4,140.00
16	Of lesser toe at metatarsophalangeal	
17	joint	2,016.00
18	Of lesser toe at proximal interphalangeal	
19	joint	1,494.00
20	Of lesser toe at distal interphalangeal	
21	joint	378.00
22	Of arm at or above the deltoid insertion or	
23	by disarticulation at the shoulder	54,000.00
24	Of arm at any point from below the	
25	deltoid	
26	insertion to below the elbow joint at	
27	the insertion of the biceps tendon	51,300.00
28	Of arm at any point from below the elbow	
29	joint distal to the insertion of the	
30	biceps tendon to and including	
31	mid-metacarpal amputation of the	
32	hand	48,600.00

1	Of all fingers except the thumb at	
2	metacarpophalangeal joints	29,160.00
3	Of thumb at metacarpophalangeal joint or	
4	with resection of carpometacarpal	
5	bone	19,440.00
6	Of thumb at interphalangeal joint	9,720.00
7	Of index finger at metacarpophalangeal	
8	joint or with resection of metacarpal	
9	bone	12,150.00
10	Of index finger at proximal	
11	interphalangeal joint	9,720.00
12	Of index finger at distal interphalangeal	
13	joint	5,346.00
14	Of middle finger at metacarpophalangeal	
15	joint or with resection of metacarpal	
16	bone	9,720.00
17	Of middle finger at proximal	
18	interphalangeal joint	7,776.00
19	Of middle finger at distal interphalangeal	
20	joint	4,374.00
21	Of ring finger at metacarpophalangeal	
22	joint or with resection of metacarpal	
23	bone	4,860.00
24	Of ring finger at proximal interphalangeal	
25	joint	3,888.00
26	Of ring finger at distal interphalangeal	
27	joint	2,430.00
28	Of little finger at metacarpophalangeal	
29	joint or with resection of metacarpal	
30	bone	2,430.00
31	Of little finger at proximal interphalangeal	
32	joint	1,944.00
		,

1	Of little finger at distal interphalangeal	
2	joint	972.00
34 5	MISCELLANEOUS	
6	Loss of one eye by enucleation	21,600.00
7	Loss of central visual acuity in one eye .	18,000.00
8	Complete loss of hearing in both ears	43,200.00
9	Complete loss of hearing in one ear	7,200.00

- (b) Beginning on July 1, 1993, compensation under this subsection shall be computed as follows:
- (i) Beginning on July 1, 1993, the compensation amounts for the specified disabilities listed in (a) of this subsection shall be increased by thirty-two percent; and
- (ii) Beginning on July 1, 1994, and each July 1 thereafter, the compensation amounts for the specified disabilities listed in (a) of this subsection, as adjusted under (b)(i) of this subsection, shall be readjusted to reflect the percentage change in the consumer price index, calculated as follows: The index for the calendar year preceding the year in which the July calculation is made, to be known as "calendar year A," is divided by the index for the calendar year preceding calendar year A, and the resulting ratio is multiplied by the compensation amount in effect on June 30 immediately preceding the July 1st on which the respective calculation is made. For the purposes of this subsection, "index" means the same as the definition in RCW 2.12.037(1).
- (c) For occupational disease claims filed on or after the effective date of this section, compensation for permanent partial disabilities for hearing loss due to prolonged or repeated exposure to occupational noise shall be paid at an amount equal to seventy-five percent of the monetary value of such disability under this section.
- (2) Compensation for amputation of a member or part thereof at a site other than those specified in subsection (1) of this section, and for loss of central visual acuity and loss of hearing other than complete, shall be in proportion to that which such other amputation or partial loss of visual acuity or hearing most closely resembles and approximates. Compensation shall be calculated based on the adjusted schedule of compensation in effect for the respective time period as prescribed in subsection (1) of this section.

- (3)(a) Compensation for any other permanent partial disability not involving amputation shall be in the proportion which the extent of such other disability, called unspecified disability, shall bear to the disabilities specified in subsection (1) of this section, which most closely resembles and approximates in degree of disability such other disability, and compensation for any other unspecified permanent partial disability shall be in an amount as measured and compared to total bodily To reduce litigation and establish more certainty and uniformity in the rating of unspecified permanent partial disabilities, the department shall enact rules having the force of law classifying such disabilities in the proportion which the department shall determine such disabilities reasonably bear to total bodily impairment. In enacting such rules, the department shall give consideration to, but need not necessarily adopt, any nationally recognized medical standards or quides for determining various bodily impairments.
- (b) Until July 1, 1993, for purposes of calculating monetary benefits under (a) of this subsection, the amount payable for total bodily impairment shall be deemed to be ninety thousand dollars. Beginning on July 1, 1993, for purposes of calculating monetary benefits under (a) of this subsection, the amount payable for total bodily impairment shall be adjusted as follows:
- (i) Beginning on July 1, 1993, the amount payable for total bodily impairment under this section shall be increased to one hundred eighteen thousand eight hundred dollars; and
- (ii) Beginning on July 1, 1994, and each July 1 thereafter, the amount payable for total bodily impairment prescribed in (b)(i) of this subsection shall be adjusted as provided in subsection (1)(b)(ii) of this section.
- (c) Until July 1, 1993, the total compensation for all unspecified permanent partial disabilities resulting from the same injury shall not exceed the sum of ninety thousand dollars. Beginning on July 1, 1993, total compensation for all unspecified permanent partial disabilities resulting from the same injury shall not exceed a sum calculated as follows:
- (i) Beginning on July 1, 1993, the sum shall be increased to one hundred eighteen thousand eight hundred dollars; and
- (ii) Beginning on July 1, 1994, and each July 1 thereafter, the sum prescribed in (b)(i) of this subsection shall be adjusted as provided in subsection (1)(b)(ii) of this section.

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- (4) If permanent partial disability compensation is followed by permanent total disability compensation, any portion of the permanent partial disability compensation which exceeds the amount that would have been paid the injured worker if permanent total disability compensation had been paid in the first instance, shall be deducted from the pension reserve of such injured worker and his or her monthly compensation payments shall be reduced accordingly.
- (5) Should a worker receive an injury to a member or part of his or her body already, from whatever cause, permanently partially disabled, resulting in the amputation thereof or in an aggravation or increase in such permanent partial disability but not resulting in the permanent total disability of such worker, his or her compensation for such partial disability shall be adjudged with regard to the previous disability of the injured member or part and the degree or extent of the aggravation or increase of disability thereof.
- (6) When the compensation provided for in subsections (1) through (3) of this section exceeds three times the average monthly wage in the state as computed under the provisions of RCW 51.08.018, payment shall be made in monthly payments in accordance with the schedule of temporary total disability payments set forth in RCW 51.32.090 until such compensation is paid to the injured worker in full, except that the first monthly payment shall be in an amount equal to three times the average monthly wage in the state as computed under the provisions of RCW 51.08.018, and interest shall be paid at the rate of eight percent on the unpaid balance of such compensation commencing with the second monthly payment. However, upon application of the injured worker or survivor the monthly payment may be converted, in whole or in part, into a lump sum payment, in which event the monthly payment shall cease in whole or in part. Such conversion may be made only upon written application of the injured worker or survivor to the department and shall rest in the discretion of the department depending upon the merits of each individual application. Upon the death of a worker all unpaid installments accrued shall be paid according to the payment schedule established prior to the death of the worker to the widow or widower, or if there is no widow or widower surviving, to the dependent children of such claimant, and if there are no such dependent children, then to such other dependents as defined by this title.
- (7) Except as otherwise provided in this section, awards payable under this section are governed by the schedule in effect on the date of injury.

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NEW SECTION. Sec. 4. A new section is added to chapter 51.32 RCW to read as follows:

A claim for hearing loss due to prolonged or repeated exposure to occupational noise is allowed under this title only if it otherwise satisfies the definition of "occupational disease" under RCW 51.08.140.

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<u>NEW SECTION.</u> **Sec. 5.** Section 1 of this act applies to all claims filed on or after the effective date of this section for hearing loss due to prolonged or repeated exposure to occupational noise regardless of the date of injurious exposure."

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Correct the title.

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**EFFECT:** The amendment (1) requires that claims for hearing loss due to occupational noise exposure be filed within the later of two years after the date the worker attains age 65 or one year after the bill takes effect; and (2) makes the bill apply to hearing loss that is due to prolonged or repeated exposure to occupational noise and requires a claim for such hearing loss to satisfy the current definition of "occupational disease."