SENATE BILL REPORT ESHB 1833

As Reported By Senate Committee On: Labor, Commerce, Research & Development, March 29, 2007

Title: An act relating to occupational diseases affecting firefighters.

Brief Description: Expanding the presumption of occupational disease for firefighters.

Sponsors: House Committee on Commerce & Labor (originally sponsored by Representatives Conway, Pettigrew, Seaquist, Upthegrove, Morrell, Kessler, P. Sullivan, Williams, Kenney, Haler, Ericksen, Moeller, Sells, Dunn, Rolfes, Lantz, McCoy, Lovick, Jarrett, Strow, Hurst, Springer, Campbell, Goodman, Simpson, Pearson, Curtis, Rodne, Schual-Berke, McDermott, Ormsby and Chase).

Brief History: Passed House: 3/13/07, 83-12.

Committee Activity: Labor, Commerce, Research & Development: 3/27/07, 3/29/07[DPA-

WM, DNP].

SENATE COMMITTEE ON LABOR, COMMERCE, RESEARCH & DEVELOPMENT

Majority Report: Do pass as amended and be referred to Committee on Ways & Means. Signed by Senators Kohl-Welles, Chair; Keiser, Vice Chair; Clements, Ranking Minority Member; Franklin, Hewitt, Murray and Prentice.

Minority Report: Do not pass. Signed by Senator Holmquist.

Staff: Kathleen Buchli (786-7488)

Background: A worker who, in the course of employment, is injured or suffers a disability from an occupational disease is entitled to benefits under Washington's industrial insurance act. To prove an occupational disease, the injured worker must show that the disease arose naturally and proximately out of employment.

In 1987, the Legislature created a rebuttable presumption that respiratory diseases in fire fighters are occupationally related. In 2002, the Legislature extended this presumption to include heart problems if they are experienced within 72 hours of exposure to smoke, fumes, and toxic or chemical substances; certain types of cancer if the worker has served as a fire fighter for ten or more years and showed no evidence of cancer upon becoming a fire fighter; and certain infectious diseases, including HIV/AIDS, hepatitis, meningitis, and tuberculosis.

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This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Summary of Engrossed Substitute Bill: The presumption that, for fire fighters, certain diseases are occupationally related is extended to include any heart problems experienced within 72 hours of exposure to smoke, fumes, or toxic substances, or experienced within 24 hours of strenuous physical exertion due to firefighting activities; and prostate cancer if diagnosed prior to the age of 50, colorectal cancer, multiple myeloma, and testicular cancer if the worker has served as a fire fighter for ten or more years and showed no evidence of cancer upon becoming a fire fighter.

When a determination that a fire fighter's disease is occupationally related is appealed to the Board of Industrial Appeals or a court, and the decision allows the claim for benefits, the opposing party must pay reasonable costs of the appeal to the fire fighter.

If an order allowing benefits is appealed and the fire fighter has been diagnosed as terminally ill, the benefits granted to the fire fighter by the order must continue while the reconsideration is pending.

EFFECT OF CHANGES MADE BY RECOMMENDED AMENDMENT(S) AS PASSED COMMITTEE (Labor, Commerce, Research & Development): Language in the intent section is clarified. Provisions allowing a fire fighter who is determined to be terminally ill to receive temporary total disability compensation or medical aid benefits if the fire fighter's employer appeals the order allowing benefits are removed.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: There have been many changes to the bill as a result of meetings between the stakeholders. The types of cancers covered by the bill have been reduced to those cancers where there is evidence of higher cancer rates among fire fighters.

CON: The payment on appeal section should be removed. It was added on the floor and was not part of the stakeholder discussions. The age limit for coverage of prostate cancer should be reduced to 40 because there is evidence that there is a higher incidence of this type of cancer during the first 10 to 15 years of employment as a fire fighter.

Persons Testifying: PRO: Kelly Fox, Washington State Council of Fire Fighters.

CON: Kathleen Collins, Washington Self-Insurers Association; Jim Justin, Association of Washington Cities.

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