



Washington State Department of
Labor & Industries

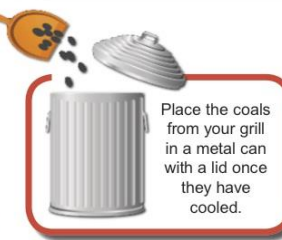
Self-Insurance

Self-Insurance Training Presents: Claim Validity

2025 Training



Safety Message



STAY FIRE-SAFE THIS SUMMER!

For more information and resources, visit www.usfa.fema.gov and www.nfpa.org.



Housekeeping

- Calling in?
 - Please put your name and phone number in the Q&A.
- Certification renewing soon?
 - Double check your SICATS credits.
 - Continuing Education/Certification renewal questions
SIContEdu@LNI.WA.GOV
- Course ID?
 - Will be provided at the end of training.

Resources

- **Claim Adjudication Guidelines** - Claim Validity
- **RCW's (Title 51)** - Revised Code of Washington
<https://apps.leg.wa.gov/rcw/default.aspx?Cite=51>
- **WAC's (Title 296)** – Washington Administrative Code
<https://apps.leg.wa.gov/WAC/default.aspx?cite=296-20>
- **Case Laws – BIIA**
<http://www.biia.wa.gov/BoardDecisions.html>

Filing A New Claim

- SIF-2 is **not required** by law to apply for benefits.
- The worker and provider **signatures are required** for legal claim filing.
- Any written and **signed** document may be considered an application from the worker.
 - SIF2: Self Insured Form
 - ROA: State Fund Report of Accident
 - PIR: Provider's Initial Report
 - Employer's Accident/Incident Report

WAC 296-15-320: Reporting of Injuries

- What must a SIE have in place to ensure reporting of injuries?
 - Establish procedures to assist workers in reporting and filing claims.
 - SIE/TPA must immediately provide SIF-2 upon the worker's request or first knowledge of injury/occ. disease.
 - Must ensure timely delivery of completed SIF-2.

WAC 296-15-405: Filing a Self-Insured Claim

- The SIF-2(F207-002-000) is used to report worker's injury or occupational disease to the department.
- The provider uses a PIR (F207-028-000).
 - Replacements are acceptable.
 - Only provider types eligible to be an attending provider can sign the PIR (WAC 296-20-01010).

WAC 296-15-420

- When requesting:
 - Allowance: Send CAR with SIF-2 and SIF-5A.
 - Interlocutory: Send IR with SIF-2, SIF-5A and the entire claim file.
 - Denial: Send CDR with SIF-2 and the entire claim file.
- Must submit within 60 days of notice of claim.

RCW 51.28.025: Duty of Employer

- Employers have the responsibility to report claims on the forms prescribed from the department.
- Which shall include:
 - Name, address, occupation of the worker.
 - Name, address, business of the employer.
 - Date, time, cause and nature of the injury or occ. disease.
 - If injury or occupational disease arose from employment.
 - All available information pertaining to nature of injury.

WAC 296-15-350: Handling of Claims

- Every person making claim decisions must be certified or in the process of becoming certified.
- Legibly date stamp incoming correspondence.
- Designate one address for mailing of all claims correspondence.
- Establish procedures to answer questions and concerns.
- Include department claim number in all claim communication.
- Ensure a means of communication with all injured workers.

SIF-2 Submissions

- Dept. prefers SIF-2s with all the fields completed.
- Minimum information:
 - Worker's first and last name
 - Mailing address
 - Date of birth
 - Employer name and address (not TPAs)
 - Description of injury
 - Claim Number
 - Date of injury/Date of manifestation

Timely Filing

- Injury claims must be filed within 1 year of the date of injury per RCW 51.28.050.
 - The department has no authority to waive or make exceptions for the 1 year time limit.
- Occ. disease/exposure claims must be filed within 2 years from the date the worker is notified in writing per RCW 51.28.055.
 - The medical provider must send notice to the department when given to the worker.

Claim Determination

- **WAC: 296-15-420** and **WAC 296-15-425**: The self-insurer has 60 days from claim notice to submit to department a request for one of the following:
 - Allowance
 - Interlocutory
 - Denial
- If no request is received within 60 days, the department has the authority to make a claim determination.

Necessity of Timely Claim Determination

- WAC 296-15-420
 - The department has the right to intervene if requests for allowance, interlocutory or denial are not submitted to the department within 60 days from claim notice.
- Delay in providing the required forms to the department could result in penalties, as a rule violation.

Knowledge Check



Abby slipped and fell at work on 8/1/24. She took the following day off and went to her doctor who diagnosed a sprain. She return to work a week later after being cleared by her doctor. She was talking with a friend about the incident on 12/20/24 and learned she may have a claim. She talked with her employer on 1/2/25 and completed an SIF-2.

Was this claim filed timely?

Yes

What must be requested when you need more time to make a claim determination?

Interlocutory order

When must this be requested by?

60 days from notice of claim

Which WAC addresses this?

WAC 296-15-420

Brian works in construction. On 5/6/23 he noticed a sharp pain in his right shoulder while using a nail gun but continued working. He noticed the pain would return whenever he used the nail gun. On 9/15/24 the pain had increased so he told his employer and left work to go to the doctor. The provider completed a PIR and took him off work.

Was this claim filed timely?

Yes

Prima Facie – What is it?

- Prima Facie is Latin for “at first view”.
- Prima Facie requirements.
 - Legal definition of an injury is met.
 - The worker was in the course of employment.
 - Causal opinion (51% or more).
- If Prima Facie is met the claim is likely allowable.

Definition of an Injury

- RCW 51.08.100:
 - “a sudden and tangible happening, of a traumatic nature, producing an immediate or prompt result, and occurring from without”

Course of Employment

- A worker is usually covered when acting at the discretion of employer or furthering the employer's business.
- A worker does not need to be doing the actual job they were hired to do.
- If course of employment is questionable several things must be considered.

Causal Relationship for injuries

- Causal opinion must be from a medical provider.
- Must be “more probable than not”.
- Objective findings are not required unless the medical opinion is questionable.
- A symptom is not an acceptable diagnosis.
 - Example: pain

Injury Claim Validity

- For a claim to be allowable, a “prima facie” case must be established.
- A claim should be allowed if evidence in file supports allowance, and there is no evidence to the contrary.
- Washington is a “no-fault” state, so an injury can be covered even if the worker was at fault.

Parking Lot Injuries

- Parking areas are specifically excluded from coverage per RCW 51.08.013(1).
- Numerous case laws have clarified what is considered a parking area and when a worker may be covered.
- If worker's job requires them to be in a parking lot or they are acting at employer's direction, the injury may be covered.

Parking Lots

- To determine if a claim is allowable, examine:
 - Worker's job duties or requirements.
 - Where the injury occurred in relation to the job site.
 - Route the worker took from vehicle to building entrance.
 - Any hazards that contributed to the injury.
- Map of parking area may be helpful.

Parking Lots – Case Laws

- *Boeing Co. v. Rooney* (2000)
 - Injury can be covered if it occurs next to, but not in, a parking lot.
- *Madera v. J.R. Simplot Co.* (2001)
 - A drive-through lane is not considered a parking area.
- *UW Harborview Medical Center v. Marengo* (2004)
 - A parking garage stairwell is not considered a parking area.

Coming and Going

- Going to or coming from a job site in a private vehicle is not usually in the course of employment.
- Once on a job site, workers are covered immediately before and after their shift until leaving the premises.
- Coverage also extends to company-controlled areas (except parking areas).
- Reporting early to change into uniform or other required clothing is covered.

Coming and Going

- A worker may be covered coming from or going to an employer-designated parking area if exposed to hazards not shared by the general public.
- Coverage also exists if the hazard arises from the employer's business, even if the general public is also exposed.
- A worker is covered if leaving the job site for to complete a task requested by employer.

Employer Provided Transportation

- Worker **may** be covered if employer provides transportation or compensation for travel.
- Coverage is not dependent upon the method of travel.
Employer may:
 - Provide a vehicle.
 - Reimburse a worker for cost of transportation.
 - Reimburse a worker for use of a private vehicle.
- Vanpools and carpools are generally not covered.

Travel Away from Employer Premises

- If a worker must travel for business, they are usually in the course of employment during the entire trip.
- Personal side trips (deviations) may not be covered.
- Review each claim on an individual basis to determine if the worker was in course of employment.

Deviations

- Workers may not be covered in employer-provided or reimbursed transportation if deviating from the business-related task.
- Some things to consider:
 - Employer's policy regarding company transportation.
 - Nature/purpose of the business travel and deviation.
 - Distance from expected travel route.

Deviation Coverage

- Coverage normally exists if:
 - Injury sustained before or after the deviation.
 - Worker is furthering the interests of the employer.
 - Worker is performing duties as directed by the employer.

Personal Comfort Doctrine

- Covers workers injured during a personal comfort activity.
 - Worker must be on employer premises or using facilities near job site.
 - Injury must be sustained during paid working hours or during lunch break on job site.
 - Offsite activity must be directed by the employer.
 - Activity must assist employer by helping worker efficiently perform the job.

Personal Comfort and Lunches

- Workers are covered during lunch breaks while on the employer premises or while on a business lunch away from premises.
- Damage to teeth or dentures are covered if personal comfort doctrine is met.
- Workers are not covered if during break or lunch if leaving the job site for personal reasons.

Recreational Activities

- Workers aren't in course of employment during recreational activities, whether or not the cost is covered by employer.
- Three exceptions:
 - Activity occurs during work hours.
 - Worker is paid by the employer to participate.
 - Worker was directed, ordered, or reasonably believed they were directed or ordered to participate.

Horseplay

- Usually covered as long as the worker is not significantly removed from course of employment (*Tilly v. Dept. of L&I* (1958)).
- Things to consider:
 - Extent, duration, and completeness of deviation.
 - Extent to which practice is accepted part of employment.
 - Extent to which idleness on job could be expected to include horseplay.

Altercations and Assaults

- The same factors as horseplay apply.
- The worker who assaults a coworker **may** be removed from course of employment.
- The worker who was assaulted is still covered, as long as they do not leave the job site.
- Leaving job site to fight is not covered (*Blankenship v. Dept. of L&I* (1934)).

Felonies and Intentional Injuries

- A worker, spouse, child, or dependent is not entitled to compensation if the worker is injured or killed while committing a felony.
- A worker who intentionally injures or kills himself or herself is not covered.
 - Gross negligence is not considered intentional.

Goodwill Actions

- There is very little guidance from the courts.
- Injury sustained by worker who assists in a life-threatening emergency may be covered if:
 - Employment brought them in contact with the situation.
 - Situation was proximate to the worker's job.
 - Employer derives some benefit from the act.

Syncope and Seizures

- If a worker faints or has a seizure and no physical injury is sustained, the claim is not allowable.
- If a claim is for syncope/seizure and the worker was also injured, the claim should be allowed solely for the injury sustained.
- Seizure disorder may be appropriate to accept if the condition arises from a work-related head injury.

Pre-existing Conditions

- The presence of a pre-existing condition does not disqualify a worker from receiving benefits (*Miller v. Department of L&I* (1939)).
- Aggravated if:
 - It would not have occurred if not for workplace incident or exposure.
 - Medical treatment was necessitated by workplace event or exposure that would not have been needed prior to injury or illness.
- If an injury occurred the claim is allowable regardless if there is a pre-existing condition.

Knowledge Check



Brian is a delivery driver. He was rushing to his next delivery speeding and ran a red light causing a MVA. He injured his back and neck. Police arrived and confirmed he was the cause of the accident and ticketed for running the red light.

Is this an allowable claim?

Yes

Amy works as a RN who injured her right shoulder playing softball 3 years ago. She was helping a patient into bed when she felt a sharp pain from her right shoulder into her neck. She went to the doctor who diagnosed a right shoulder strain and cervical strain.

Is this an allowable claim?

Yes

If so, for what condition(s)?

Right shoulder strain and cervical strain

Megan was asked by her supervisor to pick up donuts at a nearby shop during her lunch break for a team meeting that afternoon. She decided to stop at a café 1 mile in the opposite direction for lunch while she was out. She chipped a tooth while eating her sandwich in the café.

Is this an allowable claim?

No

Joseph is a dishwasher who became lightheaded and went to sit down and rest. As he went to take a seat he fainted falling back into the chair. He went to the doctor who diagnosed syncope.

Is this an allowable claim?

No

Definition of an Occupational Disease

- **RCW 51.08.140:**
 - “disease or infection that arises naturally and proximately out of employment.”

Occupational Disease Claim Validity

- Legal requirement meets the definition of an occupational disease.
- Causal relationship on a more probable-than-not basis from a medical provider.
- Objective medical findings to support the medical diagnosis.

Arise Naturally and Distinct to Employment

- Dennis v. DLI (1987) expanded the definition to include work-related aggravation of a pre-existing condition and clarified distinctive conditions of employment.
- Diagnosed condition must be a natural consequence of distinctive conditions of employment rather than merely the workplace or everyday life.
- Distinctive conditions may fall under these categories:
 - Unique to employment
 - Increased risk
 - Continuous and specific activity

Causal Relationship for Occupational Disease

- Medical opinion must state condition is related to work activities on a more probable than not basis.
- Job description (JD) or job analysis (JA) may be needed to verify worker's job duties.

Proximate Cause

- Conditions of employment need only to be **ONE** of the proximate causes of the disease.
- *Simpson Logging Co. v. DLI* (1949) established “but for” limitation.
 - But for the distinctive conditions of employment, the disease wouldn’t exist.
- A claim shouldn’t be denied solely because non-work activities may have contributed to the condition.

Date of Manifestation

- **RCW 51.32.180:** “the date the disease requires medical treatment or becomes totally or partially disabling, whichever occurs first.”
- **WAC 296-15-350:** liable insurer is the insurer of last injurious exposure.
- Benefits are based on the date of manifestation, but the employer of last injurious exposure is responsible for the entire claim.
- Affected benefits include:
 - Cost of living adjustments
 - Permanent partial disability awards
 - Time loss rates

PTSD Presumption in Firefighters and LEOs

- PTSD is presumed to be an occupational disease for firefighters and LEOs if the worker:
 - Served at least 10 years prior to development of PTSD.
 - Had a mental health exam at time of hire which ruled out PTSD.
- Not considered an occupational disease if attributed to disciplinary action, layoff, etc.

PTSD Presumption in Direct Care RNs

- PTSD is presumed to be an occupational disease for RNs:
 - Licensed as a nurse under chapter 18.79 RCW who provide direct care to patients.
 - Employed on a fully compensated basis in WA for at least 90 consecutive days.
- Not considered if related to evaluations, disciplinary or similar actions.

Other Presumptions

- RCW 51.32.185:
 - Respiratory Disease in Firefighters
 - Cancer in Firefighters
 - Heart Problems in Firefighters and LEOs
- Radiological Hazardous Waste Facilities Presumption (RCW 51.32.187)
- Health Emergency Labor Standards Act (HELSEA) (RCW 51.32.181 and RCW 51.32.390)

Challenge to the Presumption

- Presumptions established by RCW 51.32.185 and RCW 51.32.395 may be rebutted by a preponderance of evidence which may include:
 - Lifestyle
 - Hereditary factors
 - Use of tobacco products
 - Physical fitness and weight
 - Exposure from other activities

Knowledge Check



Max is a mechanic who frequently works overhead. He began having pain in his shoulders on 8/5/22 but continued to work. On 8/9/22 the pain got worse and he told his supervisor he needed the next few days off to rest. He return to work on 8/14/22. A month later on 9/12/22 the pain got so bad he went back to his supervisor saying he needed to file a claim. He went to the doctor on 9/13/22 who diagnosed bilateral shoulder strains do to repetitive use.

Is this an allowable claim? Yes

What is the date of injury or manifestation? 8/9/22

Tina has worked as a hairdresser for 35 years. She recently noticed pain in her wrists notified her supervisor on 6/4/22. She continued to work until 6/15/22 when she called out due to the pain. She went to the doctor the next day on 6/16/22. After testing she was diagnosed with carpal tunnel syndrome. Her attending provider indicated that there were multiple contributing factors to her diagnosis, including: age, diabetes and repetitively gripping scissors and other tools at work.

Is this an allowable claim? **Yes**

What is the date of injury or manifestation? **6/15/22**

Judy has been an RN 30 years. She had worked in the emergency department at her local hospital since moving to WA a years ago until she retired on 7/31/24. She had been experiencing some panicked moments and had trouble sleeping so she decided to go to the doctor on 12/6/24. Her doctor referred her for a psych evaluation. The evaluation results determined that she had PTSD attributed to her work as an RN in the emergency department. She contacted her previous employer to file a claim.

Is this an allowable claim?

No

Resources

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- **Case Laws – BIIA**
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Questions?

- Claim-specific questions:
 - Contact the adjudicator assigned to the claim.
or
 - Call 360-902-6901 and ask for the adjudicator assigned to the claim.
- General claim questions:
 - Email us at SITrainerquestions@Lni.wa.gov
- Course ID: **004-1224-0351**