

WSR 21-24-011
PERMANENT RULES
DEPARTMENT OF
CHILDREN, YOUTH, AND FAMILIES

[Filed November 18, 2021, 3:55 p.m., effective December 19, 2021]

Effective Date of Rule: Thirty-one days after filing.

Purpose: Apply the early achievers quality standards to outdoor nature-based early learning programs and establish the licensing terms and conditions, application process, and enforcement procedures for these programs.

Citation of Rules Affected by this Order: New WAC 110-300E-0001, 110-300E-0005, 110-300E-0015, 110-300E-0020, and 110-300E-0400.

Statutory Authority for Adoption: Section 28, chapter 304, Laws of 2021.

Adopted under notice filed as WSR 21-18-109 and 21-20-001 on August 31 and September 22, 2021.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 5, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 18, 2021.

Brenda Villarreal
Rules Coordinator

Chapter 110-300E WAC

OUTDOOR NATURE-BASED PROGRAMS

NEW SECTION

WAC 110-300E-0001 Authority. (1) Chapter 43.216 RCW establishes the responsibility and authority for the department of children, youth, and families to set and enforce licensing requirements and standards for licensed child care agencies in Washington state, including the authority to adopt rules to implement chapter 43.216 RCW.

(2) Pursuant to section 28, chapter 304, Laws of 2021:

(a) The department must establish a licensed outdoor nature-based child care program.

(b) The department must adopt rules to implement the outdoor nature-based child care program and may waive or adapt licensing requirements when necessary to allow for the operation of outdoor classrooms in Washington state.

(c) The department must apply the early achievers program to the outdoor nature-based child care program to assess quality in outdoor learning environments and may

waive or adapt early achievers requirements when necessary to allow for the operation of outdoor classrooms.

(d) A child care or early learning program operated by a federally recognized tribe may participate in the outdoor nature-based child care program through an interlocal agreement between the tribe and the department. The interlocal agreement must reflect the government-to-government relationship between the state and the tribe, including recognition of tribal sovereignty.

(3) Pursuant to RCW 43.216.250 (2)(b), the provisions of this chapter governing the physical facility, including buildings and other physical structures attached to buildings and premises, do not apply to licensed school-age programs that operate in facilities used by public or private schools. The department regulates only health, safety, and quality standards that do not relate to the physical facility for programs operating in facilities used by public or private schools.

NEW SECTION

WAC 110-300E-0005 Definitions. The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.

"Agency" has the same meaning as described in RCW 43.216.010.

"Department" means the Washington state department of children, youth, and families (DCYF).

"Early learning" has the same meaning as described in RCW 43.216.010.

"Enforcement action" means denial, suspension, revocation, modification, or nonrenewal of a license pursuant to RCW 43.216.325(1) or assessment of civil monetary penalties (fines) pursuant to RCW 43.216.325(3).

"Outdoor nature-based program" has the same meaning as "outdoor nature-based child care" in RCW 43.216.010 (1)(e), which is an agency or an agency-offered program that:

(a) Enrolls preschool or school-age children;

(b) Provides early learning services to the enrolled children in an outdoor natural space approved by the department for not less than four hours per day or 50 percent of the daily program hours, whichever is less; and

(c) Teaches a nature-based curriculum to enrolled children.

"Provider" as used in this chapter means an early learning program that offers outdoor nature-based early learning services, and is licensed under and subject to the provisions of this chapter (also "licensee").

NEW SECTION

WAC 110-300E-0015 Outdoor nature-based licensing agreement—Uniform rules. (1) Licensees under this chapter must agree, enter into, and comply with the terms and conditions of an outdoor, nature-based licensing agreement prepared by the department. The outdoor nature-based licensing agreement will require compliance with the following minimum terms and conditions:

(a) The terms and conditions detailed in the outdoor nature-based licensing agreement;

(b) The requirements of this chapter;

(c) The background check requirements contained in chapter 110-06 WAC, early learning background checks; and

(d) The requirements of the federal Child Care Development Fund (45 C.F.R. Part 98).

(2) To establish a uniform set of requirements for outdoor nature-based programs, the department may periodically update the outdoor nature-based licensing agreement, amend existing rules in this chapter, or draft new rules to be published under this chapter.

NEW SECTION

WAC 110-300E-0020 Enforcement actions—Right of review—Process of seeking review. (1) The department is authorized by RCW 43.216.020, 43.216.065, 43.216.250, and 43.216.325 to take enforcement actions when a provider fails to comply with this chapter, chapter 110-06 WAC, early learning background checks, or chapter 43.216 RCW. Enforcement actions include civil monetary penalties and the denial, suspension, revocation, modification, or nonrenewal of a license.

(2) An applicant or provider has the right to appeal an enforcement action by requesting an adjudicative proceeding or "hearing" pursuant to the hearing rules codified in chapter 110-03 WAC, Administrative hearings.

(3) The department must issue a notice of violation to a provider when taking enforcement actions. A notice of violation must be sent certified mail or personal service and must include:

- (a) The reason why the department is taking the action;
- (b) The rules the provider failed to comply with;
- (c) The provider's right to appeal enforcement actions;

and

- (d) How the provider may appeal and request a hearing.
- (4) Fines must not exceed \$250 per day per violation.
- (5) Fines may be:
 - (a) Assessed and collected with interest for each day a violation occurs;
 - (b) Imposed in addition to other enforcement actions;
- and
- (c) Withdrawn or reduced if a provider comes into compliance during the notification period.

(6) A provider must pay fines within 28 calendar days after receiving a notice of violation unless:

- (a) The office of financial recovery establishes a payment plan for the provider; or
 - (b) The provider requests a hearing, pursuant to chapter 110-03 WAC, Administrative hearings and RCW 43.216.335
- (3).

(7) The department may suspend or revoke a license if a provider fails to pay a fine within 28 calendar days or becomes delinquent in making payments, pursuant to RCW 43.216.327 and 43.216.335. If a provider's license is due for annual compliance, the department may elect not to continue the license for failure to pay a fine.

NEW SECTION

WAC 110-300E-0400 Outdoor nature-based licenses—Application. (1) After submitting to the department a signed outdoor nature-based licensing agreement pur-

suant to WAC 110-300E-0015, an applicant must submit a complete application to the department to receive an initial license, or be granted a continuation of a full license, to operate an outdoor nature-based program.

(2) Pursuant to RCW 43.216.305, the department must grant or deny a license or continuation of a full license within 90 days of receiving a complete application.

(3) After completing a department orientation an applicant must submit to the department a complete license application packet, pursuant to chapter 43.216 RCW. This requirement also applies to a change of ownership. A complete license application packet includes:

(a) Professional and background information about the applicant:

- (i) A completed department application form;
- (ii) A copy of the applicant's orientation certificate (orientation must be taken no more than 12 months prior to applying for a license);
- (iii) A Washington state business license or a tribal, county, or city business or occupation license, if applicable;
- (iv) Liability insurance, if applicable;
- (v) A certificate of incorporation, partnership agreement, or similar business organization document, if applicable;
- (vi) The license fee;
- (vii) A copy of current government issued photo identification;

(viii) A copy of Social Security card or sworn declaration stating that the applicant does not have one;

(ix) Employer identification number (EIN) if applicant plans to hire staff; and

(x) Employment and education verification. For example, diploma, transcripts, or a sworn declaration stating that the applicant cannot verify education requirements.

(b) Information about the program to be licensed:

(i) A site plan, including use of proposed licensed and unlicensed space, with identified emergency exits or emergency exit pathways;

(ii) Certificate of occupancy, if applicable;

(iii) Documentation, no more than three years old, from a licensed inspector, septic designer, or engineer that states the septic system and drain field are maintained and in working order, if applicable;

(iv) *E. coli* bacteria and nitrate testing results for well water that is no more than 12 months old, if applicable;

(v) A lead or arsenic evaluation agreement for program sites located in the Tacoma smelter plume (counties of King, Pierce, and Thurston) or the Everett smelter plume (county of Snohomish); and

(vi) Lead and copper test results for drinking water, if applicable.

(c) Program days and hours of operation, including closure dates and holiday observances; and

(d) The following information about program staff:

(i) A list of staff members, and if applicable and known, staff persons and volunteers required to complete the background check process as outlined in chapter 110-06 WAC, early learning background checks; and

(ii) A resume for the applicant and each staff person, if applicable.

(e) The following policy documents, which will be reviewed by the department and returned to the applicant:

- (i) Parent and program policies;
- (ii) Staff policies;
- (iii) An emergency preparedness plan; and
- (iv) Health policies.

(4) An applicant must submit the completed application packet at least 90 calendar days prior to the planned opening of the outdoor, nature-based program. The department will inspect the program space and all submitted application materials prior to issuing a license.

(a) The 90 calendar days begins when the department receives a complete application packet.

(b) Incomplete application packets will be returned to the applicant for completion.

(c) An applicant who is unable to successfully complete the application and licensing process within 90 days may withdraw the application and reapply when the applicant is able to meet the licensing requirements. If the applicant has completed the steps of the application process within 90 days but an external barrier out of the applicant's control exists, the reapplication fee will be waived one time.

(d) An applicant who is unable to meet the application requirements and has not withdrawn his or her application will be denied a license, pursuant to RCW 43.216.325.

WSR 21-24-021

PERMANENT RULES

OFFICE OF THE

INSURANCE COMMISSIONER

[Insurance Commissioner Matter No. R 2021-10—Filed November 19, 2021, 12:07 p.m., effective January 1, 2022]

Effective Date of Rule: January 1, 2022.

Purpose: The purposes of these regulations are to require title agents to submit a declaration to the office of the insurance commissioner (OIC), which identify their insurance business as operating in certain counties and provide proof of the ownership or leasing rights for the applicable tract indexes, as required by RCW 48.29.160. These rules enhance the reporting requirements for title agents, specifically in regard to their county declarations and ownership or leasing of tract indexes. An entity applying for a title agent license is required to submit the Declaration of Title Insurance Agent form as part of the application process. The purposes of the form are for the title agent to identify which counties they be doing business in and verify that the title agent either owns or leases a complete set of tract indexes for those counties, as required per RCW 48.29.160. Unfortunately, the licensing records do not reflect the original documents which define what counties these title agents own or lease the required tract indexes in, nor is there a regulation or statute which requires them to report any expansion of business into additional counties. There likewise is no current requirement for title agents to verify that they own or lease the proper tract indexes for their counties of operations, as required per RCW 48.29.160. The proposed regulations will require title agents to submit a declaration to OIC, which will identify their exact

counties of operations, and provide proof of ownership or leasing rights for the applicable tract indexes.

Citation of Rules Affected by this Order: Amending WAC 284-29-130.

Statutory Authority for Adoption: RCW 48.02.060(3) and 48.29.005.

Adopted under notice filed as WSR 21-20-092 on October 1, 2021.

Changes Other than Editing from Proposed to Adopted Version: The proposed rules stated that title insurance agents must submit a declaration to the commissioner indicating their county or counties of operation, prior to doing business (WAC 284-29-130(4)). A rule-making comment was received that requested revisions for clarity, such as adding the terms title insurance to the phrase *prior to doing business*. The commenter believed that since title agents provide ancillary services, such as escrow business or contract collections, the commissioner should make it clear that the only business considered in the rule is *title insurance business*.

The commissioner drafted the rule to apply to title insurance business, being located in chapter 284-29 WAC, in the section for title agent insurance reports required (WAC 284-29-130), and having a definition in law that states selling, soliciting, or negotiating insurance is the business of a title insurance agent (RCW 48.17.010(16)).

However, the commenter identified the goal the commissioner is attempting to achieve with this rule making, preventing title insurance business from occurring with undeclared title insurance agents who are not meeting statutory duties. Additionally, the revision requested did not make the rule substantially different from that proposed (RCW 34.05.340(1)); the general subject matter of the adopted rule will remain the same as the proposed rule (applying to title insurance business) (RCW 34.05.340(3)); and the issues determined in the proposed rule or the anticipated effects of the adopted rule would not differ from those of the proposed rule (RCW 34.05.340(3)).

Therefore, the proposed rule was revised to include the term 'title insurance' in front of the word business.

A final cost-benefit analysis is available by contacting Michael Walker, 302 Sid Snyder Avenue S.W., Olympia, WA 98504, phone 360-725-7036, fax 360-586-3109, TTY 360-586-0241, email RulesCoordinator@oic.wa.gov, website OIC.WA.GOV.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 1, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 1, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 19, 2021.

Mike Kreidler
Insurance Commissioner

AMENDATORY SECTION (Amending WSR 09-20-070, filed 10/5/09, effective 11/5/09)

WAC 284-29-130 ((Report)) Reporting required. (1)

The title insurance agent report of affiliated business ownership must be filed with the commissioner annually by March 15th.

(2) If there is any change or addition to the ownership information contained in the annual report, then the title insurance agent must file an amended report with the commissioner within fifteen days after the end of the month in which the title insurance agent learns of the change or addition.

(3) Changes to the information regarding the percent of title orders originating from each of the producers do not need to be filed with the commissioner except with the annual filing. If the title insurance agent discovers or reasonably should have discovered that the information contained in the annual filing was not correct, then the title insurance agent must file an amended report within fifteen days after the end of the month in which the title insurance agent discovered the incorrect information.

(4) Before conducting title insurance business in any counties, title insurance agents must report to the commissioner, declaring the county or counties the business will operate in and providing proof of ownership or leasing rights for the applicable tract indexes. If title insurance business is to be conducted in an additional county not included on previous declarations, then the title insurance agent must submit an updated declaration listing the added business areas and including proof of ownership or leasing rights to the applicable tract indexes, in accordance with RCW 48.29.160.

Proof shall come in the form of real property ownership documents, copies of leases, or other documentation verifying ownership or rights to the applicable tract indexes.

WSR 21-24-027

PERMANENT RULES

WASHINGTON STATE UNIVERSITY

[Filed November 22, 2021, 8:45 a.m., effective December 23, 2021]

Effective Date of Rule: Thirty-one days after filing.

Purpose: The university is amending WAC 504-31-020 conduct on campus rules regarding prohibited conduct.

The proposed change clarifies the term "explosives" in subsection (5) of WAC 504-31-020. The purpose of the change is to bring this WAC section into conformance with the standards of conduct for students prohibited conduct rules regarding firearms and dangerous weapons (WAC 504-26-213).

This is a housekeeping revision.

Citation of Rules Affected by this Order: Amending WAC 504-31-020.

Statutory Authority for Adoption: RCW 28B.30.150.

Adopted under notice filed as WSR 21-18-116 on September 1, 2021.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 1, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 1, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 1, Repealed 0.

Date Adopted: November 19, 2021.

Deborah L. Bartlett, Director
Procedures, Records, and Forms
and University Rules Coordinator

AMENDATORY SECTION (Amending WSR 13-08-033, filed 3/27/13, effective 4/27/13)

WAC 504-31-020 Prohibited conduct. In order to assure the above rights to all members of the university community and to maintain a peaceful atmosphere in which the university may continue to make its unique contribution to society, the following types of conduct are hereby prohibited on or in property either owned, controlled, or operated by the university which is used or set aside for university purposes, hereinafter referred to as the university campus:

(1) Conduct that intentionally and substantially obstructs or disrupts teaching or freedom of movement or other lawful activities on the university campus;

(2) Physical abuse of any person or conduct that unlawfully threatens imminent bodily harm or endangers the health or safety of any person on the university campus;

(3) Malicious damage to or malicious misuse of university property, or the property of any person where such property is located on the university campus;

(4) Refusal to comply with any lawful order to leave the university campus or any portion thereof;

(5) Possession or use of firearms, explosives (including fireworks), dangerous chemicals or other dangerous weapons or instrumentalities on the university campus. This prohibition does not apply to possession of such items for authorized university purposes; possession of such items by authorized law enforcement officers; individuals who have obtained prior written approval from the university chief of police, president, or designee; or lawful possession of firearms by persons other than students in privately owned vehicles while on any university campus((-);

(6) Unlawful possession, use, distribution, or manufacture of alcohol or controlled substances on the university campus or during university-sponsored activities;

(7) Intentionally inciting others to engage immediately in any of the conduct prohibited herein, which incitement

leads directly to such conduct. (Inciting is advocacy that prepares the group addressed for imminent action and steels it to the conduct prohibited herein.)

WSR 21-24-029
PERMANENT RULES
OFFICE OF THE
INSURANCE COMMISSIONER

[Filed November 22, 2021, 9:31 a.m., effective December 23, 2021]

Effective Date of Rule: Thirty-one days after filing.

Purpose: ESHB 1196 (chapter 157, Laws of 2021) was signed into law on May 3, 2021. The legislation addresses coverage of telemedicine services, including audio-only telemedicine services. Prior to passage of this legislation, audio-only telemedicine services were explicitly excluded from the definition of "telemedicine." Carriers were not required by statute to cover audio-only telemedicine services. During the COVID-19 public health emergency, the office of the insurance commissioner issued emergency orders requiring coverage of audio-only telemedicine services in order to ensure access to medical services. ESHB 1196 requires coverage of audio-only telemedicine services under specified conditions and amends the statutory language related to telemedicine payment parity.

The proposed rule amends WAC 284-170-130 to add definitions relevant to telemedicine and creates new WAC 284-43-433. The new section addresses coverage of telemedicine services generally, including payment parity and the conditions in ESHB 1196 associated with payment for audio-only telemedicine services.

Citation of Rules Affected by this Order: New WAC 284-170-433; and amending WAC 284-170-130.

Statutory Authority for Adoption: RCW 48.43.735(9).

Adopted under notice filed as WSR 21-19-137 on September 21, 2021.

Changes Other than Editing from Proposed to Adopted Version: The final rule differs from the proposed rule in the following respects:

- A technical reference was changed to refer to the correct WAC section in the definition of "patient consent" in WAC 284-170-130.
- In WAC 284-170-433 (6)(a), the term "related to" is revised to read "applicable to" in order to clarify the intent of the language.
- In WAC 284-170-433 [(6)](b), subsections were reordered to clarify language. Subsection (b)(iii) was moved up to appear as subsection [(6)](b)(ii) and subsection [(6)](b)(ii) was renumbered to subsection [(6)](b)(iii).
- Language was added to WAC 284-170-433(10) to clarify that the grace period associated with carriers filing conforming changes to their provider contracts does not limit the commissioner's underlying authority provided in RCW 48.02.060 to enforce ESHB 1196 or WAC 284-170-433 as of the effective date of those laws.

A final cost-benefit analysis is available by contacting Tabba Alam, P.O. Box 40260, Olympia, WA 98504-0260,

phone 360-725-7170, fax 360-586-3109, TTY 360-586-0241, email rulescoordinator@oic.wa.gov, website www.insurance.wa.gov.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 1, Amended 1, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 22, 2021.

Mike Kreidler
Insurance Commissioner

AMENDATORY SECTION (Amending WSR 21-01-094, filed 12/11/20, effective 1/11/21)

WAC 284-170-130 Definitions. Except as defined in other subchapters and unless the context requires otherwise, the following definitions shall apply throughout this chapter.

(1) "Adverse determination" has the same meaning as the definition of adverse benefit determination in RCW 48.43.005, and includes:

(a) The determination includes any decision by a health carrier's designee utilization review organization that a request for a benefit under the health carrier's health benefit plan does not meet the health carrier's requirements for medical necessity, appropriateness, health care setting, level of care, or effectiveness or is determined to be experimental or investigational and the requested benefit is therefore denied, reduced, or terminated or payment is not provided or made, in whole or in part for the benefit;

(b) The denial, reduction, termination, or failure to provide or make payment, in whole or in part, for a benefit based on a determination by a health carrier or its designee utilization review organization of a covered person's eligibility to participate in the health carrier's health benefit plan;

(c) Any prospective review or retrospective review determination that denies, reduces, or terminates or fails to provide or make payment in whole or in part for a benefit;

(d) A rescission of coverage determination; or

(e) A carrier's denial of an application for coverage.

(2) "Allowed amount" has the meaning set forth in RCW 48.43.005.

(3)(a) "Audio-only telemedicine" means the delivery of health care services through the use of audio-only technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.

(b) "Audio-only telemedicine" does not include:

(i) The use of facsimile, email, or text messages, unless the use of text-like messaging is necessary to ensure effective communication with individuals who have a hearing, speech, or other disability; or

(ii) The delivery of health care services that are customarily delivered by audio-only technology and customarily not billed as separate services by the provider, such as the sharing of laboratory results.

(4) "Authorization" or "certification" means a determination by the carrier that an admission, extension of stay, or other health care service has been reviewed and, based on the information provided, meets the clinical requirements for medical necessity, appropriateness, level of care, or effectiveness in relation to the applicable health plan.

~~((3))~~ (5) "Clinical review criteria" means the written screens, or screening procedures, decision rules, medical protocols, or clinical practice guidelines used by the carrier as an element in the evaluation of medical necessity and appropriateness of requested admissions, procedures, and services, including prescription drug benefits, under the auspices of the applicable health plan. Clinical approval criteria has the same meaning as clinical review criteria.

~~((4))~~ (6) "Covered health condition" means any disease, illness, injury or condition of health risk covered according to the terms of any health plan.

~~((5))~~ (7) "Covered person" or "enrollee" means an individual covered by a health plan including a subscriber, policyholder, or beneficiary of a group plan.

~~((6))~~ (8) "Disciplining authority" has the meaning set forth in RCW 18.130.020.

(9) "Distant site" has the meaning set forth in RCW 48.43.735.

(10) "Emergency medical condition" means the emergent and acute onset of a symptom or symptoms, including severe pain or emotional distress, that would lead a prudent layperson acting reasonably to believe that a health condition exists that requires immediate medical, mental health, or substance use disorder treatment attention, if failure to provide medical, mental health, or substance use disorder treatment attention would result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part, or would place the person's health in serious jeopardy.

~~((7))~~ (11) "Emergency services" has the meaning set forth in RCW 48.43.005.

~~((8))~~ (12) "Enrollee point-of-service cost-sharing" or "cost-sharing" ~~((means amounts paid to health carriers directly providing services, health care providers, or health care facilities by enrollees and may include copayments, coinsurance, or deductibles))~~ has the meaning set forth in RCW 48.43.005.

~~((9))~~ (13) "Established relationship" means:

(a) The covered person has had at least one in-person appointment within the past year with the provider providing audio-only telemedicine, with a provider employed at the same clinic as the provider providing audio-only telemedicine, or with a locum tenens or other provider who is the designated back up or substitute provider for the provider providing audio-only telemedicine who is on leave and is not associated with an established clinic; or

(b) The covered person was referred to the provider providing audio-only telemedicine by another provider who has had at least one in-person appointment with the covered person within the past year and has provided relevant medical information to the provider providing audio-only telemedicine. A referral includes circumstances in which the provider who has had at least one in-person appointment with the covered person participates in the audio-only telemedicine encounter with the provider to whom the covered person has been referred.

(14) "Facility" means an institution providing health care services including, but not limited to, hospitals and other licensed inpatient centers, ambulatory surgical or treatment centers, skilled nursing centers, residential treatment centers, diagnostic, laboratory, and imaging centers, and rehabilitation and other therapeutic settings, and as defined in RCW 48.43.005.

~~((10))~~ (15) "Formulary" means a listing of drugs used within a health plan.

~~((11))~~ (16) "Grievance" has the meaning set forth in RCW 48.43.005.

~~((12))~~ (17) "Health care provider" or "provider" means:

(a) A person regulated under Title 18 RCW or chapter 70.127 RCW, to practice health or health-related services or otherwise practicing health care services in this state consistent with state law; or

(b) An employee or agent of a person described in (a) of this subsection, acting in the course and scope of his or her employment.

~~((13))~~ (18) "Health care service" or "health service" means that service offered or provided by health care facilities and health care providers relating to the prevention, cure, or treatment of illness, injury, or disease.

~~((14))~~ (19) "Health carrier" or "carrier" means a disability insurance company regulated under chapter 48.20 or 48.21 RCW, a health care service contractor as defined in RCW 48.44.010, and a health maintenance organization as defined in RCW 48.46.020, and includes "issuers" as that term is used in The Patient Protection and Affordable Care Act (P.L. 111-148, as amended (2010)).

~~((15))~~ (20) "Health plan" or "plan" means any individual or group policy, contract, or agreement offered by a health carrier to provide, arrange, reimburse, or pay for health care service except the following:

(a) Long-term care insurance governed by chapter 48.84 RCW;

(b) Medicare supplemental health insurance governed by chapter 48.66 RCW;

(c) Limited health care service offered by limited health care service contractors in accordance with RCW 48.44.035;

(d) Disability income;

(e) Coverage incidental to a property/casualty liability insurance policy such as automobile personal injury protection coverage and homeowner guest medical;

(f) Workers' compensation coverage;

(g) Accident only coverage;

(h) Specified disease and hospital confinement indemnity when marketed solely as a supplement to a health plan;

(i) Employer-sponsored self-funded health plans;

(j) Dental only and vision only coverage; and

(k) Plans deemed by the insurance commissioner to have a short-term limited purpose or duration, or to be a student-only plan that is guaranteed renewable while the covered person is enrolled as a regular full-time undergraduate or graduate student at an accredited higher education institution, after a written request for such classification by the carrier and subsequent written approval by the insurance commissioner.

~~((16))~~ (21) "Hospital" has the meaning set forth in RCW 48.43.735.

(22) "Indian health care provider" means:

(a) The Indian Health Service, an agency operated by the U.S. Department of Health and Human Services established by the Indian Health Care Improvement Act, Section 601, 25 U.S.C. Sec. 1661;

(b) An Indian tribe, as defined in the Indian Health Care Improvement Act, Section 4(14), 25 U.S.C. Sec. 1603(14), that operates a health program under a contract or compact to carry out programs of the Indian Health Service pursuant to the Indian Self-Determination and Education Assistance Act (ISDEAA), 25 U.S.C. Sec. 450 et seq.;

(c) A tribal organization, as defined in the Indian Health Care Improvement Act, Section 4(26), 25 U.S.C. Sec. 1603(26), that operates a health program under a contract or compact to carry out programs of the Indian Health Service pursuant to the ISDEAA, 25 U.S.C. Sec. 450 et seq.;

(d) An Indian tribe, as defined in the Indian Health Care Improvement Act, Section 4(14), 25 U.S.C. Sec. 1603(14), or tribal organization, as defined in the Indian Health Care Improvement Act, Section 4(26), 25 U.S.C. Sec. 1603(26), that operates a health program with funding provided in whole or part pursuant to 25 U.S.C. Sec. 47 (commonly known as the Buy Indian Act); or

(e) An urban Indian organization that operates a health program with funds in whole or part provided by Indian Health Service under a grant or contract awarded pursuant to Title V of the Indian Health Care Improvement Act, Section 4(29), 25 U.S.C. Sec. 1603(29).

~~((17))~~ (23) "Managed care plan" means a health plan that coordinates the provision of covered health care services to a covered person through the use of a primary care provider and a network.

~~((18))~~ (24) "Medically necessary" or "medical necessity" in regard to mental health services and pharmacy services is a carrier determination as to whether a health service is a covered benefit because the service is consistent with generally recognized standards within a relevant health profession.

~~((19))~~ (25) "Mental health provider" means a health care provider or a health care facility authorized by state law to provide mental health services.

~~((20))~~ (26) "Mental health services" means in-patient or out-patient treatment including, but not limited to, partial hospitalization, residential treatment, out-patient facility-based treatment, intensive outpatient treatment, emergency services, or prescription drugs to manage, stabilize, or ameliorate the effects of a mental disorder listed in the most current version of the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association, including diagnoses and treatment for substance use disorder.

~~((21))~~ (27) "Network" means the group of participating providers and facilities providing health care services to a particular health plan or line of business (individual, small, or large group). A health plan network for issuers offering more than one health plan may be smaller in number than the total number of participating providers and facilities for all plans offered by the carrier.

~~((22))~~ (28) "Originating site" means the physical location of a patient receiving health care services through telemedicine, and includes those sites described in WAC 284-170-433.

(29) "Out-patient therapeutic visit" or "out-patient visit" means a clinical treatment session with a mental health provider of a duration consistent with relevant professional standards used by the carrier to determine medical necessity for the particular service being rendered, as defined in Physicians Current Procedural Terminology, published by the American Medical Association.

~~((23))~~ (30) "Participating provider" and "participating facility" mean a facility or provider who, under a contract with the health carrier or with the carrier's contractor or subcontractor, has agreed to provide health care services to covered persons with an expectation of receiving payment, other than coinsurance, copayments, or deductibles, from the health carrier rather than from the covered person.

~~((24))~~ (31) "Patient consent" means a voluntary and informed decision by a patient, following an explanation by the provider or auxiliary personnel under the general supervision of the provider presented in a manner understandable to the patient that is free of undue influence, fraud or duress, to consent to a provider billing the patient or the patient's health plan for an audio-only telemedicine service under RCW 48.43.735 or WAC 284-170-433.

(32) "Person" means an individual, a corporation, a partnership, an association, a joint venture, a joint stock company, a trust, an unincorporated organization, any similar entity, or any combination of the foregoing.

~~((25))~~ (33) "Pharmacy services" means the practice of pharmacy as defined in chapter 18.64 RCW and includes any drugs or devices as defined in chapter 18.64 RCW.

~~((26))~~ (34) "Primary care provider" means a participating provider who supervises, coordinates, or provides initial care or continuing care to a covered person, and who may be required by the health carrier to initiate a referral for specialty care and maintain supervision of health care services rendered to the covered person.

~~((27))~~ (35) "Preexisting condition" means any medical condition, illness, or injury that existed any time prior to the effective date of coverage.

~~((28))~~ (36) "Premium" means all sums charged, received, or deposited by a health carrier as consideration for a health plan or the continuance of a health plan. Any assessment or any "membership," "policy," "contract," "service," or similar fee or charge made by a health carrier in consideration for a health plan is deemed part of the premium. "Premium" shall not include amounts paid as enrollee point-of-service cost-sharing.

~~((29))~~ (37) "Real time communication" means synchronous and live communication between a provider and a

patient. It does not include delayed or recorded messages, such as email, facsimile or voice mail.

(38) "Same amount of compensation" means providers are reimbursed by a carrier using the same allowed amount for telemedicine services as they would if the service had been provided in-person unless negotiation has been undertaken under RCW 48.43.735 or WAC 284-170-433(2). Where consumer cost-sharing applies to telemedicine services, the consumer's payment combined with the carrier's payment must be the same amount of compensation, or allowed amount, as the carrier would pay the provider if the telemedicine service had been provided in person. Where an alternative payment methodology other than fee-for-service payment would apply to an in-person service, "same amount of compensation" means providers are reimbursed by a carrier using the same alternative payment methodology that would be used for the same service if provided in-person, unless negotiation has been undertaken under RCW 48.43.735 or WAC 284-170-433(2).

(39) "Service area" means the geographic area or areas where a specific product is issued, accepts members or enrollees, and covers provided services. A service area must be defined by the county or counties included unless, for good cause, the commissioner permits limitation of a service area by zip code. Good cause includes geographic barriers within a service area, or other conditions that make offering coverage throughout an entire county unreasonable.

~~((30))~~ (40) "Small group plan" means a health plan issued to a small employer as defined under RCW 48.43.005 (34) comprising from one to (~~fifty~~) 50 eligible employees.

~~((31))~~ (41) "Store and forward technology" has the meaning set forth in RCW 48.43.735.

(42) "Substance use disorder services" means in-patient or out-patient treatment including, but not limited to, partial hospitalization, residential treatment, or out-patient facility-based treatment, intensive outpatient treatment, emergency services, or prescription drugs to manage, stabilize, or ameliorate the effects of a substance use disorder listed in the most current version of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) published by the American Psychiatric Association, including diagnoses and treatment for substance use disorder.

~~((32))~~ (43) "Substitute drug" means a prescription medication, drug or therapy that a carrier covers based on an exception request. When the exception request is based on therapeutic equivalence, a substitute drug means a therapeutically equivalent substance as defined in chapter 69.41 RCW.

~~((33))~~ (44) "Supplementary pharmacy services" or "other pharmacy services" means pharmacy services involving the provision of drug therapy management and other services not required under state and federal law but that may be rendered in connection with dispensing, or that may be used in disease prevention or disease management.

(45) "Telemedicine" means the delivery of health care services through the use of interactive audio and video technology or audio-only technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment. For purposes of this chapter, "telemedicine" does not

include facsimile, email, or text messaging, unless the use of text-like messaging is necessary to ensure effective communication with individuals who have a hearing, speech, or other disability.

NEW SECTION

WAC 284-170-433 Provider contracts—Telemedicine. (1)(a) Every participating provider contract must, for health plans issued or renewed on or after January 1, 2017, provide that a health carrier shall reimburse a provider for a health care service provided to a covered person through telemedicine or store and forward technology if:

(i) The plan provides coverage of the health care service when provided in person by the provider;

(ii) The health care service is medically necessary;

(iii) The health care service is a service recognized as an essential health benefit under section 1302(b) of the federal Patient Protection and Affordable Care Act in effect on January 1, 2015, RCW 48.43.005 and 48.43.715;

(iv) The health care service is determined to be safely and effectively provided through telemedicine or store and forward technology according to generally accepted health care practices and standards, and the technology used to provide the health care service meets the standards required by state and federal laws governing the privacy and security of protected health information; and

(b) Beginning January 1, 2023, for audio-only telemedicine, the covered person has an established relationship with the provider.

(2)(a) Every participating provider contract must, for health plans issued or renewed on or after January 1, 2021, provide that, except as provided in (b) of this subsection, a carrier will reimburse a provider for a health care service provided to a covered person through telemedicine as provided in RCW 48.43.735(1) or subsection (1) of this section the same amount of compensation the carrier would pay the provider if the health care service was provided in person by the provider.

(b) Hospitals, hospital systems, telemedicine companies, and provider groups consisting of 11 or more providers may elect to negotiate an amount of compensation for telemedicine services that differs from the amount of compensation for in-person services.

For purposes of (b) of this subsection, the number of providers in a provider group refers to all providers within the group, regardless of a provider's location.

(c) For purposes of this section, reimbursement of store and forward technology is available only for those covered services specified in the negotiated agreement between the health carrier and the health care provider.

(3)(a) Every participating provider contract must, for health plans issued or renewed on or after January 1, 2017, provide that an originating site for a telemedicine health care service subject to subsection (1) of this section includes a:

(i) Hospital;

(ii) Rural health clinic;

(iii) Federally qualified health center;

(iv) Physician's or other provider's office;

(v) Licensed or certified behavioral health agency;

(vi) Skilled nursing facility;

(vii) Home or any location determined by the individual receiving the service including, but not limited to, a pharmacy licensed under chapter 18.64 RCW or a school-based health center as defined in RCW 43.70.825. If the site chosen by the individual receiving service is in a state other than the state of Washington, a provider's ability to conduct a telemedicine encounter in that state is determined by the licensure status of the provider and the provider licensure laws of the other state; or

(viii) Renal dialysis center, except an independent renal dialysis center.

(b) Except for (a)(vii) of this subsection and a hospital that is an originating site for an audio-only telemedicine encounter, any originating site under this subsection may charge a facility fee for infrastructure and preparation of the patient. Reimbursement for a facility fee must be subject to a negotiated agreement between the originating site and the health carrier. A distant site, a hospital that is an originating site for an audio-only telemedicine encounter, or any other site not identified in this subsection may not charge a facility fee.

(4) A health carrier may not distinguish between originating sites that are rural and urban in providing the coverage required in subsection (1) of this section.

(5) A health carrier may subject coverage of a telemedicine or store and forward technology health service under subsection (1) of this section to all terms and conditions of the plan in which the covered person is enrolled including, but not limited to, utilization review, prior authorization, deductible, copayment, or coinsurance requirements that are applicable to coverage of a comparable health care service provided in person.

(6)(a) Every participating provider contract must, effective July 25, 2021, provide that if a provider intends to bill a covered person or the covered person's health plan for an audio-only telemedicine service, the provider must obtain patient consent from the covered person for the billing in advance of the service being delivered, consistent with the requirements of this subsection and state and federal laws applicable to obtaining patient consent.

(b)(i) A covered person's consent must be obtained prior to initiation of the first audio-only encounter with a provider and may constitute consent to such encounters for a period of up to 12 months. If audio-only encounters continue beyond an initial 12-month period, consent must be obtained from the covered person for each prospective 12-month period.

(ii) Consent to be billed for audio-only telemedicine services must be obtained by the provider or auxiliary personnel under the general supervision of the provider.

(iii) A covered person may consent to a provider billing them or their health plan in writing or verbally. Consent to billing for an audio-only telemedicine encounter may be obtained and documented by the provider or auxiliary personnel under the general supervision of the provider as part of the process of making an appointment for an audio-only telemedicine encounter, recorded verbally as part of the audio-only telemedicine encounter record or otherwise documented in the patient record. Consent must be documented and retained by the provider for a minimum of five years. As

needed, a carrier also may request documentation of the covered person's consent as a condition of claim payment.

(iv) A patient may revoke consent granted under this subsection. Revocation of the patient's consent must be communicated by the patient or their authorized representative to the provider or auxiliary personnel under the general supervision of the provider verbally or in writing and must be documented and retained by the provider for a minimum of five years. Once consent is revoked, the revocation must operate prospectively.

(7)(a) A carrier may not deny, reduce, terminate or fail to make payment for the delivery of health care services using audio and visual technology solely because the communication between the patient and provider during the encounter shifted to audio-only due to unanticipated circumstances. In these instances, a carrier may not require a provider to obtain consent from the patient to continue the communication.

(b) A carrier has no obligation to reimburse a provider for both an audio-visual and an audio-only encounter when both means of communication have been used during the encounter due to unforeseen circumstances.

(8)(a) If the commissioner has cause to believe that any provider has engaged in a pattern of unresolved violations of RCW 48.43.735(8) or subsection (6) of this section, the commissioner may submit information to the department of health or the appropriate disciplining authority, as defined in RCW 18.130.020, for action.

(b) In determining whether there is cause to believe that a provider has engaged in a pattern of unresolved violations, the commissioner shall consider, but is not limited to, consideration of the following:

(i) Whether there is cause to believe that the provider has committed two or more violations of RCW 48.43.735(8) or subsection (6) of this section;

(ii) Whether the provider has been nonresponsive to questions or requests for information from the commissioner related to one or more complaints alleging a violation of RCW 48.43.735(8) or subsection (6) of this section; and

(iii) Whether, subsequent to correction of previous violations, additional violations have occurred.

(c) Prior to submitting information to the department of health or the appropriate disciplining authority, the commissioner may give the provider an opportunity to cure the alleged violations or explain why the actions in question did not violate RCW 48.43.735(8) or subsection (6) of this section.

(9) Every participating provider contract must, for health plans issued or renewed on or after July 25, 2021, ensure that access to telemedicine services is inclusive for those patients who may have disabilities or limited-English proficiency and for whom the use of telemedicine technology may be more challenging, consistent with carriers' obligations under WAC 284-43-5940 through 284-43-5965 with respect to design and implementation of plan benefits.

(10) Each carrier's provider contracts must include language conforming to the requirements of this section by July 1, 2022. The grace period associated with carriers filing conforming changes to their provider contracts under this section in no way limits the authority of the commissioner to enforce

the provisions of RCW 48.43.735 or this section on or after the effective date of those laws.

(11) This section does not require a health carrier to reimburse:

- (a) An originating site for professional fees;
- (b) A provider for a health care service that is not a covered benefit under the plan; or
- (c) An originating site or provider when the site or provider is not a participating provider under the plan.

WSR 21-24-031
PERMANENT RULES
DEPARTMENT OF
FISH AND WILDLIFE

[Order 21-259—Filed November 22, 2021, 11:53 a.m., effective
 January 1, 2022]

Effective Date of Rule: January 1, 2022.

Purpose: Proposed rule changes would make it mandatory for several nontreaty coastal and Puget Sound commercial shellfish fisheries to report all landings into Washington ports using electronic fish tickets. The purpose of this change is to improve the timeliness of data collection and is needed to narrow data gaps, support management of catch relative to quotas, and better respond to state/tribal comanagement needs.

Proposed rule changes for the coastal commercial Dungeness crab fishery are necessary to reduce the risk of coastal commercial Dungeness crab gear becoming entangled with marine mammals, including humpback whales which are listed under the Endangered Species Act. Specifically, changes focused on reducing the risk of entanglements would eliminate the replacement buoy tag allowance, reduce the amount of time that crab gear can be left in the ocean unattended, and allow experimental gear testing by coastal Dungeness crab license holders only when authorized through a permit issued by the Washington department of fish and wildlife (WDFW) director.

Additional changes to coastal commercial Dungeness crab rules are necessary to provide clarity to existing rule language that describe the preseason gear set period and clarify season opening provisions if the season is delayed due to biotoxins.

Citation of Rules Affected by this Order: Amending WAC 220-352-035 Requirement to prepare fish receiving ticket forms completely and accurately—Determining the appropriate form, 220-352-305 Coastal Dungeness crab—Additional reporting requirements, 220-352-060 Completion, submission, distribution, and retention copies of nontreaty fish receiving tickets, 220-352-140 Signatures—Fish receiving tickets, 220-340-430 Commercial crab fishery—Gear requirements, 220-340-480 Commercial crab fishery—Gear limits—Coastal, 220-352-020 General gear rules—Commercial fishery, 220-340-420 Commercial crab fishery—Unlawful acts, 220-340-490 Commercial crab fishery—Coastal gear recovery permits, and 220-340-450 Commercial crab fishery—Seasons and areas—Coastal.

Statutory Authority for Adoption: RCW 77.04.020, 77.12.045, and 77.12.047.

Adopted under notice filed as WSR 21-14-001 on June 23, 2021.

Changes Other than Editing from Proposed to Adopted Version: Changes to WAC 220-352-060 and 220-340-420 include the addition of clarifying language as recommended by the WDFW enforcement program to clarify the intent of the proposed changes.

In WAC 220-350-060, the proposed changes clarify that fish receiving tickets must be made out at the time of delivery for both fish and shellfish and that an electronic copy of completed fish tickets must be available upon request for three years to the department which includes WDFW officers. The originally adopted changes only referenced that fish tickets must be made out at the time that fish are delivered but did not distinctly state that fish tickets must also be made out at the time when shellfish are delivered. This clarification is needed to reduce confusion for fish dealers because these proposed changes are specific to fish ticket requirements for shellfish deliveries. In addition, the originally adopted changes only said that an electronic copy of signed and completed fish receiving tickets be available to the department for a minimum of three years. Changes proposed here add that signed and completed fish receiving tickets be available to the department, including WDFW officers upon request. This clarification will improve the enforceability of the regulation by being clear that fish tickets must be made available if requested by WDFW officers for a minimum of three years.

Changes to WAC 220-340-420 remove the reference to ring nets when describing that an area must be open to commercial crabbing in order to set, maintain, or operate baited or unbaited shellfish pots. The proposed change to remove the reference to ring nets from this section is needed because ring nets are not a lawful gear type for the commercial crab fishery. The change provides regulatory consistency with lawful gear and improves the clarity of the regulatory language.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; **Federal Rules or Standards:** New 0, Amended 0, Repealed 0; or **Recently Enacted State Statutes:** New 0, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 10, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; **Pilot Rule Making:** New 0, Amended 0, Repealed 0; or **Other Alternative Rule Making:** New 0, Amended 0, Repealed 0.

Date Adopted: October 21, 2021.

Larry M. Carpenter, Chair
 Fish and Wildlife Commission

AMENDATORY SECTION (Amending WSR 17-22-100, filed 10/30/17, effective 1/1/18)

WAC 220-340-420 Commercial crab fishery—Unlawful acts. (1) **Crab size and sex restrictions.** It is

unlawful for any person acting for commercial purposes to take, possess, deliver, or otherwise control:

(a) Any female Dungeness crab; or

(b) Any male Dungeness crab measuring less than 6-1/4 inches, caliper measurement, at the widest part of the shell immediately in front of the points (tips).

(2) Violation of subsection (1) of this section is a gross misdemeanor or class C felony depending on the value of fish or shellfish taken, possessed, or delivered, punishable under RCW 77.15.550 (1)(c).

(3) **Incidental catch may not be retained.** It is unlawful to retain salmon, food fish, or any shellfish other than octopus that is taken incidental to any commercial crab fishing.

(4) **Net fishing boats must not have crab on board.** It is unlawful for any person to possess any crab on board a vessel geared or equipped with commercial net fishing gear while fishing with the net gear for commercial purposes or while commercial quantities of food fish or shellfish are on board. Violation of this subsection is a gross misdemeanor or class C felony punishable under RCW 77.15.550(1), depending on the quantity of crab taken or possessed.

(5) **Area must be open to commercial crabbing.** It is unlawful for any person to set, maintain, or operate any baited or unbaited shellfish pots (~~(or ring nets)~~) for taking crab for commercial purposes in any area or time that is not open for commercial crabbing by rule of the department, except when acting lawfully under the authority of a valid gear recovery permit as provided in WAC 220-340-450.

(6) Violation of subsection (5) of this section is a gross misdemeanor or class C felony punishable under RCW 77.15.550, or a gross misdemeanor punishable under RCW 77.15.522 depending on the circumstances of the violation.

(7) **When it is unlawful to buy or land crab from the ocean without a crab vessel inspection.** It is unlawful for any fisher or wholesale fish buyer to land or purchase Dungeness crab taken from Grays Harbor, Willapa Bay, the Columbia River, or Washington coastal or adjacent waters of the Pacific Ocean from any vessel that has not been issued a Washington crab vessel inspection certificate during the first 30 days following the opening of a coastal crab season.

(a) Authorized department personnel will perform inspections for Washington crab vessel inspection certificates no earlier than 12 hours prior to the opening of the coastal crab season and during the following 30-day period.

(b) A Washington crab vessel inspection certificate may be issued to vessels made available for inspection at a Washington coastal port that:

- (i) Are properly licensed commercial crab fishing; and
- (ii) Contain no Dungeness crab on board the vessel.

(8) Violation of subsection (7) of this section is a gross misdemeanor, punishable under RCW 77.15.550 (1)(a) Violation of commercial fishing area or time—Penalty.

(9) **Coastal - Barging of crab pots by undesignated vessels.** It is unlawful for a vessel not designated on a Dungeness crab coastal fishery license to deploy crab pot gear except under the following conditions:

(a) The vessel deploys pot gear only during the (~~(64-hour)~~) 73-hour period immediately preceding the season opening date and during the 48-hour period immediately following the season opening date;

(b) The undesignated vessel carries no more than 250 crab pots at any one time; and

(c) The primary or alternate operator of the crab pot gear named on the license associated with the gear is on board the undesignated vessel while the gear is being deployed.

(10) Violation of subsection (9) of this section is a gross misdemeanor or class C felony punishable under RCW 77.15.500 Commercial fishing without a license—Penalty, depending on the circumstances of the violation.

AMENDATORY SECTION (Amending WSR 20-04-066, filed 1/31/20, effective 3/2/20)

WAC 220-340-430 Commercial crab fishery—Gear requirements. (1) Buoy tag and pot tag required.

(a) It is unlawful to place in the water, pull from the water, possess on the water, or transport on the water any crab buoy or crab pot without an attached buoy tag and pot tag that meet the requirements of this section, except as provided by (b) and (c) of this subsection. A violation of this subsection is punishable under RCW 77.15.520 Commercial fishing—Unlawful gear or methods—Penalty.

(b) Persons operating under a valid coastal gear recovery permit as provided in WAC 220-340-440 may possess crab pots or buoys missing tags or bearing the tags of another license holder, provided the permittee adheres to provisions of the permit. Failure to adhere to the provisions of the permit is a gross misdemeanor, punishable under RCW 77.15.750 Unlawful use of a department permit—Penalty.

(c) Persons operating under a valid coastal gear transport permit as provided in WAC 220-340-440 may possess crab pots or buoys bearing the tags issued by another state, provided the permittee adheres to provisions of the permit. Failure to adhere to the provisions of the permit is a gross misdemeanor, punishable under RCW 77.15.750 Unlawful use of a department permit—Penalty.

(2) **Commercial crab fishery pot tag requirements:** Each shellfish pot used in the commercial crab fishery must have a durable, nonbiodegradable tag securely attached to the pot that is permanently and legibly marked with the license owner's name or license number and telephone number. If the tag information is illegible, or the tag is lost for any reason, the pot is not in compliance with state law. A violation of this subsection is punishable under RCW 77.15.520 Commercial fishing—Unlawful gear or methods—Penalty.

(3) **Commercial crab fishery buoy tag requirements.**

(a) The department issues crab pot buoy tags to the owner of each commercial crab fishery license upon payment of an annual buoy tag fee per crab pot buoy tag. Prior to setting gear, each Puget Sound crab license holder must purchase 100 tags, and each coastal crab fisher must purchase 300 or 500 tags, depending on the crab pot limit assigned to the license.

(b) In coastal waters, except if authorized by permit issued by the director, each crab pot must have the department-issued buoy tag securely attached to the first buoy on the crab pot buoy line (the buoy closest to the crab pot), and the buoy tag must be attached to the end of the first buoy, at the end away from the crab pot buoy line.

(c) In Puget Sound, all crab buoys must have the department-issued buoy tag attached to the outermost end of the buoy line.

(d) If there is more than one buoy attached to a pot, only one buoy tag is required.

(e) Replacement crab buoy tags.

(i) Puget Sound: The department only issues additional tags to replace lost tags to owners of Puget Sound commercial crab fishery licenses who obtain, complete, and sign a declaration, under penalty of perjury, in the presence of an authorized department employee. The declaration must state the number of buoy tags lost, the location and date where the licensee last observed lost gear or tags, and the presumed cause of the loss.

(ii) Coastal: The department only issues replacement buoy tags for the coastal crab fishery ~~((beginning March 1 and after a signed affidavit is received by an authorized department employee. The affidavit must be signed by the primary or alternate operator fishing the commercial crab gear and state the number of buoy tags lost, the location and date where the licensee last observed lost gear or tags, and the presumed cause of the loss.~~

~~(A) Coastal crab license holders with a 300-pot limit may replace lost tags according to the following schedule: March 1 through April 30, up to 10 tags.~~

~~(B) Coastal crab license holders with a 500-pot limit may replace lost tags according to the following schedule: March 1 through April 30, up to 15 tags.~~

~~(C) No replacement tags will be issued for the current season after May 1.~~

~~(D) In the case of extraordinary loss of crab pot gear, the department may issue replacement tags in excess of the amount listed in this subsection on a case-by-case basis)) in the case of extraordinary loss or on a case-by-case basis. Replacement buoy tags will not be issued in excess of the license holder's permanent pot limit.~~

(4) A violation of subsection (3) of this section is a gross misdemeanor, punishable under RCW 77.15.520 Commercial fishing—Unlawful gear or methods—Penalty.

(5) Commercial crab fishery buoy requirements.

(a) All buoys attached to commercial crab gear must consist of a durable material and remain floating on the water's surface when 5 pounds of weight is attached, unless otherwise authorized by permit issued by the director.

(b) No buoys attached to commercial crab gear in Puget Sound may be both red and white in color unless a minimum of 30 percent of the surface of each buoy is also prominently marked with an additional color or colors other than red or white. Red and white colors are reserved for personal use crab gear as described in WAC 220-330-020.

(c) It is unlawful for any coastal Dungeness crab fishery license holder to fish for crab unless the license holder has registered the buoy brand and buoy color(s) to be used with the license. A license holder may register only one unique buoy brand and one buoy color scheme with the department per license. Persons holding more than one state license must register buoy color(s) for each license that are distinctly different. The buoy color(s) will be shown in a color photograph.

(i) All buoys fished under a single license must be marked in a uniform manner with one buoy brand number registered by the license holder with the department and be of identical color or color combinations, unless otherwise authorized by permit issued from the director.

(ii) It is unlawful for a coastal Dungeness crab fishery license holder to fish for crab using any other buoy brand or color(s) than those registered with and assigned to the license by the department.

(6) Coastal commercial crab fishery line requirements.

(a) All crab pots used in the coastal Dungeness crab fishery shall be set up to use only the amount of line reasonably necessary to compensate for tides, currents, and weather.

(b)(i) Beginning December 1, 2020, it is unlawful for a coastal Dungeness crab fishery license holder to use line that connects the main buoy to the crab pot that is not marked sufficiently to identify it as gear used in the Washington coastal Dungeness crab fishery.

(ii) ~~For~~ each shellfish pot used in the Washington coastal commercial Dungeness crab fishery ~~((must be))~~ and rigged with line, that ~~((is))~~ line must be marked with 12 inches of red in at least two places. At a minimum, 12 inches of line must be marked in red, no more than one fathom from the main buoy and no more than one fathom from the pot.

(7) Violation of subsection (5) of this section is a gross misdemeanor, punishable under RCW 77.15.520 Commercial fishing—Unlawful gear or methods—Penalty.

AMENDATORY SECTION (Amending WSR 17-05-112, filed 2/15/17, effective 3/18/17)

WAC 220-340-450 Commercial crab fishery—Seasons and areas—Coastal. The open times and areas for coastal commercial crab fishing are as follows:

(1) Coastal, Pacific Ocean, Grays Harbor, Willapa Bay and Columbia River waters are closed to commercial crab fishing except as provided by emergency rule. The target date for the commercial season opening is December 1 based on the results of test fishing to determine crab condition.

(2) The department may delay opening of the coastal crab fishery due to softshell crab conditions or biotoxin levels. If the department delays a season due to softshell crab conditions or biotoxin levels, the following provisions will apply:

(a) After consultation with the Oregon department of fish and wildlife and the California department of fish and wildlife, the director may establish a softshell crab or biotoxin demarcation line by emergency rule.

(b) For waters of the Pacific Ocean north of Point Arena, California, it is unlawful for a person to use a vessel to fish in any area where the season opening is delayed due to softshell crab or biotoxin for the first 30 days following the opening of the area if the vessel was employed in the coastal crab fishery during the previous 45 days.

(c) It is unlawful for fishers to set crab gear in any area where the season opening is delayed, except that gear may be set as allowed by emergency rule. Emergency rules will allow setting crab gear in advance of the delayed season opening time.

(d) It is unlawful to fish for or possess Dungeness crab or to set crab gear in waters of the Pacific Ocean adjacent to the states of Oregon or California without the licenses or permits required to commercially fish for Dungeness crab within the state waters of Oregon or California. Washington coastal Dungeness crab permits are valid only in Washington state waters, the Columbia River, Willapa Bay, Grays Harbor, and the Pacific Ocean in federal waters north of the Washington/Oregon border (46°15'00"N. Lat.), extending 200 nautical miles westward.

AMENDATORY SECTION (Amending WSR 20-04-066, filed 1/31/20, effective 3/2/20)

WAC 220-340-480 Commercial crab fishery—Gear limits—Coastal. (1) Coastal crab pot limit.

(a) It is unlawful for a person to take or fish for Dungeness crab for commercial purposes in Grays Harbor, Willapa Bay, the Columbia River, or waters of the Pacific Ocean adjacent to the state of Washington unless the person's Dungeness crab coastal fishery license or the equivalent Oregon or California Dungeness crab fishery license is assigned a crab pot limit. A violation of this subsection is punishable under RCW 77.15.520 Commercial fishing—Unlawful gear or methods—Penalty.

(b) It is unlawful for a person to deploy or fish more shellfish pots than the number of shellfish pots assigned to the license held by that person, unless authorized under a permit issued by the director. A violation of this subsection is a gross misdemeanor, punishable under RCW 77.15.520 Commercial fishing—Unlawful gear or methods—Penalty.

(c) It is unlawful to use any vessel other than the vessel designated on a license to operate or possess shellfish pots assigned to that license. A violation of this subsection is a gross misdemeanor, punishable under RCW 77.15.530 Unlawful use of a nondesignated vessel—Penalty.

(d) It is unlawful for a person to take or fish for Dungeness crab or to deploy crab pots unless the person is in possession of valid documentation issued by the department that specifies the crab pot limit assigned to the license. A violation of this subsection is a misdemeanor, punishable under RCW 77.15.540 Unlawful use of a commercial fishery license—Penalty.

(e) Beginning May 1, through September 15, it is unlawful to leave Dungeness crab pots deployed in Grays Harbor, Willapa Bay, Columbia River, or waters of the Pacific Ocean adjacent to the state of Washington for more than ((24)) 14 consecutive days without making a Dungeness crab landing.

(2) **Grays Harbor pot limit of 200.** It is unlawful for any person to take or fish for crab for commercial purposes in Grays Harbor (Catch Area 60B) with more than 200 shellfish pots in the aggregate. It is unlawful for any group of persons using the same vessel to take or fish for crab for commercial purposes in Grays Harbor with more than 200 shellfish pots. Violation of this subsection is a gross misdemeanor, punishable under RCW 77.15.520 Commercial fishing—Unlawful gear or methods—Penalty.

(3) **Determination of permanent coastal crab pot limits.**

(a) The number of crab pots assigned to a Washington Dungeness crab coastal fishery license, or to an equivalent Oregon or California Dungeness crab fishery license is based on documented landings of Dungeness crab taken from waters of the Pacific Ocean south of the United States/Canada border and west of the Bonilla-Tatoosh line, and from coastal estuaries in the states of Washington, Oregon, and California. Documented landings may be evidenced only by valid Washington state shellfish receiving tickets, or equivalent valid documents from the states of Oregon and California, which show Dungeness crab were taken between December 1, 1996, and September 16, 1999. Such documents must have been received by the respective states no later than October 15, 1999.

(b) The following criteria is used to determine and assign a crab pot limit to a Dungeness crab coastal fishery license, or to an equivalent Oregon or California Dungeness crab fishery license:

(i) The three "qualifying coastal Dungeness crab seasons" are from December 1, 1996, through September 15, 1997; from December 1, 1997, through September 15, 1998; and from December 1, 1998, through September 15, 1999. Of the three qualifying seasons, the one with the most poundage of Dungeness crab landed on a license determines the crab pot limit for that license. A crab pot limit of 300 will be assigned to a license with landings totaling up to 35,999 pounds and a crab pot limit of 500 will be assigned to a license with landings totaling 36,000 pounds of crab or more.

(ii) Landings of Dungeness crab made in the states of Oregon or California on valid Dungeness crab fisheries licenses during a qualifying season may be used for purposes of assigning a crab pot limit to a Dungeness crab fishery license, provided that documentation of the landings is provided to the department by the Oregon department of fish and wildlife and/or the California department of fish and game.

(iii) Landings of Dungeness crab made in Washington, Oregon, and California on valid Dungeness crab fishery licenses during a qualifying season may be combined for purposes of assigning a crab pot limit, provided that the same vessel was named on the licenses, and the same person held the licenses. A crab pot limit assigned as a result of combined landings is invalidated by any subsequent split in ownership of the licenses. No vessel named on a Dungeness crab fishery license will be assigned more than one coastal crab pot limit.

(4) **Appeals of coastal crab pot limits.** An appeal of a crab pot limit by a coastal commercial license holder must be filed with the department on or before October 18, 2001. The shellfish pot limit assigned to a license by the department will remain in effect until such time as the appeal process is concluded.

(5) **Summer management period - Pot limits.** Beginning May 1 through September 15, it is unlawful for a person to deploy or fish more than the specified reduced pot limit assigned to each license, unless otherwise authorized by permit issued by the director. Each pot deployed during the summer management period must possess a summer buoy tag, unless authorized by permit issued by the director.

(a) Licenses with a permanent pot limit of 500 will be assigned a reduced pot limit of 330 pots.

(b) Licenses with a permanent pot limit of 300 will be assigned a reduced pot limit of 200 pots.

(c) It is unlawful to deploy gear that includes tags other than the summer buoy tag, unless authorized by permit issued by the director.

AMENDATORY SECTION (Amending WSR 20-15-049, filed 7/9/20, effective 8/9/20)

WAC 220-340-490 Commercial crab fishery—Coastal gear recovery permits. (1) **Emergency coastal crab gear recovery permit.** Emergency permits are granted on a case-by-case basis to allow crab fishers to recover shellfish pots that were irretrievable at the end of the lawful season opening due to extreme weather conditions. The director or director's designee may grant an emergency coastal crab gear permit once a commercial crab season is closed. Crab fishers must notify and apply to the department's enforcement program for such emergency permits within 24 hours prior to the close of the commercial crab season.

(2) **Coastal crab gear recovery permit.** ~~((15 days))~~ After the September 15 close of the primary coastal commercial crab season and from May 1 through September 15, the director or director's designee may grant a coastal crab gear recovery permit for licensed coastal Dungeness crab fishers to recover crab pots that remain in the ocean and belong to state licensed fishers.

(3) It is unlawful to fail to follow the provisions of a coastal crab gear recovery permit. Violation of this section is a misdemeanor, punishable under RCW 77.15.750 Unlawful use of a department permit—Penalty.

AMENDATORY SECTION (Amending WSR 18-11-052, filed 5/10/18, effective 6/10/18)

WAC 220-352-035 Requirement to prepare fish receiving ticket forms completely and accurately—Determining the appropriate form. (1) Receivers must completely, accurately, and legibly prepare fish receiving tickets using a department-approved electronic or department-supplied paper form, as further specified in this section.

(2) Receivers must use an electronic fish receiving ticket form for the following:

(a) Deliveries from vessels fishing under the Pacific Fishery Management Council's Pacific Coast Groundfish Fishery Management Plan and related regulations under 50 C.F.R., Part 660. This requirement includes deliveries from research vessels but excludes deliveries of groundfish made under the trip limits for salmon troll ~~((and pink shrimp trawl))~~ vessels.

(b) Deliveries from directed commercial halibut vessels fishing under 50 C.F.R., Part 300 or vessels conducting research surveys for the International Pacific Halibut Commission if not previously delivered in another jurisdiction.

(c) Deliveries of groundfish harvested from the offshore waters off Alaska or British Columbia if not previously delivered in another jurisdiction.

(d) Deliveries of Dungeness crab, ocean pink shrimp, pink shrimp, coonstripe shrimp, sidestripe shrimp, or spot shrimp, and any other lawfully landed species taken incidentally by vessels fishing and delivering under a coastal Dunge-

ness crab license, a Puget Sound Dungeness crab license, an ocean pink shrimp delivery license, an ocean pink shrimp single delivery license, a Puget Sound shrimp pot license, a Puget Sound shrimp trawl license, or a coastal spot shrimp license issued by the department.

(3) Receivers not required to report under subsection (2) of this section may report using electronic fish receiving ticket forms if they enter into an electronic fish receiving ticket reporting agreement with the department.

(a) The department reserves the discretion to limit the use of electronic fish receiving ticket reporting agreements based on species, gears, areas, times, or other factors.

(b) Electronic fish receiving ticket reporting agreements will identify how to access the appropriate electronic forms and may include terms and conditions related to the timing and manner of completion and submittal.

(c) Receivers may not submit paper fish receiving tickets for deliveries covered by an electronic fish receiving ticket reporting agreement.

(d) The department or receiver may terminate an electronic fish receiving ticket reporting agreement with thirty days notice to the other party.

(e) A receiver who fails to comply with the terms of the electronic fish receiving ticket agreement commits a violation of this chapter.

(4) A receiver that is not required or authorized by agreement to use electronic fish receiving ticket forms must report using the appropriate paper form. There are separate forms for nontreaty troll fish, marine fish, shellfish, and Puget Sound salmon; and separate forms for treaty fish and treaty shellfish.

AMENDATORY SECTION (Amending WSR 18-11-052, filed 5/10/18, effective 6/10/18)

WAC 220-352-060 Completion, submission, distribution, and retention of copies of nontreaty fish receiving tickets. (1) Original receivers must complete state of Washington nontreaty fish receiving tickets by recording the delivery amount using the appropriate weight or quantity measure for all fish or shellfish at the conclusion of the offload and prior to the fish being processed or transported away from the delivery site.

(2) Fish receiving tickets paper forms must be made out in quadruplicate (four copies) at the time of delivery of fish or shellfish. Original receivers must use fish receiving tickets in numerical sequence, starting with the lowest numbered ticket issued. Original receivers reporting using paper forms must:

(a) Mail the state copy (green) of the fish receiving ticket to the department of fish and wildlife (department), except for original receivers who submit a fish receiving ticket in portable document format (PDF) to satisfy quick reporting requirements for salmon and sturgeon under WAC 220-352-315, 220-352-320, 220-352-325 and 220-352-330. The department must receive the state copy no later than the sixth working day after the day the original receiver completes the fish ticket.

(b) Retain the dealer copies (white and yellow) of the fish receiving ticket for his or her records.

(c) The deliverer must retain the fisher copy (gold) for his or her records.

(3) Original receivers who submit fish receiving tickets using an electronic form must:

(a)(i) Submit the ticket within ~~((twenty four))~~ 24 hours of completion of the delivery if required ~~((by WAC 220-352-035(2)))~~ to report electronically under WAC 220-352-035(2) except:

(ii) For deliveries made by vessels fishing and delivering under a coastal Dungeness crab license, the receiver must submit the ticket by the close of the next business day after the delivery is completed.

(b) Submit the ticket in compliance with the timely reporting conditions set forth in ~~((an))~~ the electronic fish receiving ticket reporting agreement if reporting voluntarily under WAC 220-352-035(3).

~~((c) Print and retain a copy of the completed electronic fish receiving ticket for three years unless an alternative fish ticket retention requirement is specified in an electronic fish receiving ticket agreement.))~~ (4) Original receivers who submit fish receiving tickets using an electronic form must print and retain a copy of the completed electronic fish receiving ticket for three years unless:

(a) The fish receiving ticket is signed electronically under WAC 220-352-140 (4)(c) and an electronic copy of the signed and completed fish receiving ticket is available to the department including WDFW officers upon request for a minimum of three years; or

(b) An alternative fish ticket retention requirement is specified in the electronic fish receiving ticket agreement governing the voluntary reporting of the delivery.

AMENDATORY SECTION (Amending WSR 18-11-052, filed 5/10/18, effective 6/10/18)

WAC 220-352-140 Signatures—Fish receiving tickets. (1) The fisher and original receiver of both treaty and nontreaty fish or shellfish must sign the appropriate completed fish receiving ticket paper form to certify that all entries on the ticket are accurate and correct.

(2) If an agent of the fisher delivers fish or shellfish to the original receiver, the receiver and the agent must complete and sign the fish receiving ticket together with the transportation ticket. The receiver and fisher shall assume complete responsibility for the correctness of all entries on the fish receiving ticket.

(3) Any employee of a licensed wholesale fish buyer who is authorized to receive or purchase fish or shellfish for that buyer on the premises of the primary business address or any of its plant locations as declared on the license application or agreement described under WAC 220-352-035(3), is authorized to initiate and sign fish receiving tickets on behalf of his or her employer. The business, firm, or licensed wholesale fish buyer that the receivers are operating under is responsible for the accuracy and legibility of all documents initiated in their name by any employee or agent.

(4) If an original receiver submits an electronic fish receiving ticket form, the fisher and original receiver must ~~((sign the printed completed fish receiving ticket form to certify that all entries on the ticket are accurate and correct,~~

~~unless otherwise specified in an electronic fish receiving ticket reporting agreement (WAC 220-352-035(3)))~~ certify that all entries on the ticket are accurate and correct by either:

(a) Signing the printed and completed copy of the fish receiving ticket required under WAC 220-352-060(4);

(b) Following the terms and conditions for signature specified in an electronic fish receiving ticket reporting agreement (WAC 220-352-035(3)); or

(c) Signing electronically if the electronic form provided by the department directs the fisher and receiver to do so.

(5) If the receiver must complete an electronic fish receiving ticket form away from the place of delivery and it is impractical for the fisher to comply with subsection (4) of this section, the deliverer and receiver must sign the completed transportation ticket required by WAC 220-352-230 and attach it to the printed and signed copy of the completed electronic fish receiving ticket form, unless otherwise specified in an electronic fish receiving ticket reporting agreement (WAC 220-352-035(3)).

AMENDATORY SECTION (Amending WSR 18-11-052, filed 5/10/18, effective 6/10/18)

WAC 220-352-305 Coastal Dungeness crab—Additional reporting requirements. Original receivers of Dungeness crab from the Pacific Ocean, Coastal Washington, Grays Harbor, Willapa Harbor, and Columbia River waters must enter the crab vessel hold inspection certificate number on all ~~((shellfish))~~ nontreaty fish receiving tickets during the period specified in emergency regulations. ~~((The crab inspection certificate number must be entered legibly in the space indicated for dealer's use or where specified by the terms of an electronic fish ticket reporting agreement))~~ (WAC 220-352-035(3)).

AMENDATORY SECTION (Amending WSR 17-05-112, filed 2/15/17, effective 3/18/17)

WAC 220-353-020 General gear rules—Commercial fishery. (1)(a) Commercial shellfish pot, bottom fish pot, set line and set net gear must be marked with a buoy that bears the department approved and registered buoy brand issued to the license in a visible and legible manner. It is unlawful for the owner or operator of any commercial food fish or shellfish gear to leave the gear unattended in state or offshore waters unless the gear is marked. Violation of this subsection is punishable under RCW 77.15.520 or 77.15.522, depending on the circumstances of the violation.

(b) Exemptions may apply for commercial shellfish pot gear otherwise authorized for use by permit issued by the director.

(2) Violations of the following are punishable under 77.15.520, Commercial fishing—Unlawful gear or methods—Penalty:

(a) Buoys affixed to unattended commercial food fish or shellfish gear must be visible on the surface of the water except during strong tidal flow ~~((or))~~ extreme weather conditions, or as authorized by permit issued by the director.

(b) It is unlawful to operate any gill net unless there is a buoy, float, or other marker affixed within 5 feet of each end of the net and visible on the cork line. The buoy, float, or

other marker must be labeled legibly and permanently with the name and gill-net license number of the owner of the net.

(c) It is unlawful to leave a gill net unattended at any time in the commercial salmon fishery.

(d) It is unlawful to allow salmon, sturgeon, or fish unlawful to retain that are entangled in commercial nets to pass through a power block or onto a power reel or drum.

(3) It is unlawful for any person who loses or abandons non-tribal commercial net fishing gear within the waters of the state to fail to:

(a) Contact the department of fish and wildlife within twenty-four hours of the loss, by phone at 855-542-3935, or online at <http://wdfw.wa.gov/fishing/derelect/>; and

(b) Provide the following required information:

(i) Type of gear;

(ii) General location of the gear;

(iii) Latitude (if known) of the gear;

(iv) Longitude (if known) of the gear;

(v) Estimated water depth where the gear is located;

(vi) Date the gear was lost;

(vii) Time the gear was lost;

(viii) Name of gear's owner;

(ix) Telephone number of the gear's owner; and

(x) Email address (if available) of the gear's owner.

(c) Failing to report lost or abandoned nontribal commercial net gear under this subsection is an infraction under RCW 77.15.160.

WSR 21-24-032

PERMANENT RULES

OFFICE OF THE

INSURANCE COMMISSIONER

[Insurance Commissioner Matter No. R 2021-13—Filed November 22, 2021, 12:40 p.m., effective December 23, 2021]

Effective Date of Rule: Thirty-one days after filing.

Purpose: The commissioner is adopting rules to amend existing rules as necessary to implement chapter 53, Laws of 2021 (HB 1009), ensure existing regulations comply with the requirement of this legislation regarding student health plan coverage, and make technical corrections.

Citation of Rules Affected by this Order: Amending WAC 284-43-7210, 284-43-7220, and 284-43-7250.

Statutory Authority for Adoption: RCW 48.02.060; and chapter 53, Laws of 2021 (HB 1009).

Adopted under notice filed as WSR 21-20-109 on October 4, 2021.

A final cost-benefit analysis is available by contacting Shari Maier, 302 Sid Snyder Avenue S.W., Suite 200, Olympia, WA 98501, phone 360-725-7173, email ShariM@oic.wa.gov.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 3, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 22, 2021.

Mike Kreidler
Insurance Commissioner

AMENDATORY SECTION (Amending WSR 19-24-039, filed 11/26/19, effective 12/27/19)

WAC 284-43-7210 Definitions. (1) "Contraceptive services" means consultations, examinations, procedures, and other health care services to obtain contraceptive supplies or voluntary sterilization. This includes prescribing, dispensing, inserting, delivering, distributing, administering, or removing contraceptive supplies and voluntary sterilization procedures.

(2) "Contraceptive supplies" means all contraceptive drugs, devices, and other products approved by the Federal Food and Drug Administration. This includes over-the-counter contraceptive drugs, devices, and products approved by the Federal Food and Drug Administration.

(3) "Cost-sharing" means any expenditure required of a covered person for covered services or supplies, including applicable taxes. Cost-sharing includes deductibles, coinsurance, copayments, or similar charges. Cost-sharing does not include premiums, balance billing amounts for nonnetwork providers, or spending for noncovered services or supplies.

(4) "Covered person" or "enrollee" has the same meaning as defined in RCW 48.43.005.

(5) "Gender expression" has the same meaning as defined in (~~(section 3, chapter 399, Laws of 2019)~~) RCW 48.43.072.

(6) "Gender identity" has the same meaning as defined in (~~(section 3, chapter 399, Laws of 2019)~~) RCW 48.43.072.

(7) "Medical management" or "medical management techniques" has the same meaning as defined in RCW 48.165.010.

(8) "Reproductive health care services" has the same meaning as defined in (~~(section 3, chapter 399, Laws of 2019)~~) RCW 48.43.072.

(9) "Reproductive system" has the same meaning as defined in (~~(section 3, chapter 399, Laws of 2019)~~) RCW 48.43.072.

(10) "Well-person preventative visits" has the same meaning as defined in (~~(section 3, chapter 399, Laws of 2019)~~) RCW 48.43.072.

AMENDATORY SECTION (Amending WSR 19-24-039, filed 11/26/19, effective 12/27/19)

WAC 284-43-7220 Coverage required. A health plan must provide coverage for all services and supplies required under RCW 48.43.072 and 48.43.073. (~~(Effective January 1, 2021)~~) A student health plan must also provide coverage for

all services and supplies required under RCW 48.43.072 and 48.43.073.

(1) Required coverage of contraceptive services and supplies includes, but is not limited to:

(a) All prescription and over-the-counter contraceptive drugs, devices, and other products approved by the Federal Food and Drug Administration;

(b) Voluntary sterilization procedures; and

(c) The consultations, examinations, procedures, and medical services that are necessary to prescribe, dispense, insert, deliver, distribute, administer, or remove the drugs, devices, and other products or services in (a) and (b) of this subsection.

(2) A health plan or student health plan that provides coverage for maternity care or services must also provide a covered person with substantially equivalent coverage to permit the abortion of a pregnancy. For the coverage to be substantially equivalent, a health plan or student health plan must not apply cost-sharing or coverage limitations differently for abortion and related services than for maternity care and its related services unless the difference provides the enrollee with access to care and treatment commensurate with the enrollee's specific medical needs, without imposing a surcharge or other additional cost to the enrollee beyond normal cost-sharing requirements under the plan.

(3) This subchapter does not diminish or affect any rights or responsibilities provided under RCW 48.43.065.

AMENDATORY SECTION (Amending WSR 19-24-039, filed 11/26/19, effective 12/27/19)

WAC 284-43-7250 Filing requirements. (1) For health plans and student health plans subject to RCW 48.43.072 and 48.43.073, the carrier must ensure that the health plan and student health plan forms clearly inform covered persons of their rights to access contraceptive services and supplies, voluntary sterilization and abortion. The health plan and student health plan forms must clearly inform covered persons how they access these services and supplies.

~~(2) ((For student health plans subject to RCW 48.43.072, the carrier must ensure that the plan forms clearly inform covered persons of their rights to access contraceptive services and supplies, and voluntary sterilization. The plan forms must clearly inform covered persons how they access these services and supplies.~~

~~(3))~~ A health plan's forms and student health plan's forms must include a detailed description of the plan's benefits provided to covered persons that specifically instructs covered persons where and how they access coverage of contraceptive supplies, including over-the-counter supplies. This information must include:

(a) Whether covered supplies are available from in-network and out-of-network providers; and

(b) How to submit a claim including, at a minimum:

(i) Whether covered persons may purchase covered supplies and seek reimbursement from the carrier;

(ii) How to access and submit any necessary claim forms; and

(iii) Where to send a claim, such as a mailing address or instructions for submitting a claim electronically.

~~((4))~~ (3) If a health plan or student health plan limits the number of covered over-the-counter contraceptive supplies, the health plan or student health plan must include with its filing supporting evidence showing that the limitation does not impose any restriction or delay on the coverage of contraceptive supplies in violation of RCW 48.43.072 or any other state or federal law.

~~((5))~~ (4) If a health plan or student health plan limits the number of covered contraceptive services or supplies, the plan forms must include a detailed description of the plan's benefits that specifically instructs covered persons how to request coverage of additional contraceptive services or supplies. The process may not impose any restrictions or delays on the coverage or access of contraceptive services or supplies in violation of RCW 48.43.072, or any other state or federal law.

WSR 21-24-052

PERMANENT RULES SECRETARY OF STATE

[Filed November 24, 2021, 3:35 p.m., effective December 25, 2021]

Effective Date of Rule: Thirty-one days after filing.

Purpose: Permanent adoption of WAC changes related to the screening of the voter registration database against lists of persons held in total confinement after conviction of a felony crime. This includes the screening process and the follow up by county election offices and persons notified of a possible match on both lists.

Citation of Rules Affected by this Order: Amending WAC 434-324-106, 434-324-1065, and 434-324-107.

Statutory Authority for Adoption: RCW 29A.04.611.

Adopted under notice filed as WSR 21-21-083 on October 18, 2021.

Changes Other than Editing from Proposed to Adopted Version: The final draft of WAC 434-324-106 includes a clarifying clause in subsection (2)(b)(ii) that persons convicted in federal or out of state court must be serving a sentence of total confinement to be ineligible to vote; this conforms to statutory language.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 3, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 3, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 3, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 3, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 24, 2021.

Sheri D. Nelson

Assistant Secretary of State

AMENDATORY SECTION (Amending WSR 20-13-043, filed 6/10/20, effective 7/11/20)

WAC 434-324-106 Felony screening process—Potential match check. (1) The ~~((law on when the))~~ right to vote is restored following a felony conviction ~~((is))~~ that includes serving a sentence of total confinement upon release from total confinement as established in RCW 29A.08.520.

(2)(a) The secretary of state must compare lists of persons held in total confinement for a felony conviction with the list of registered voters, to identify individuals appearing on both lists.

(b) Upon receiving new data, or at least on a monthly basis, the secretary must compare the voter registration records to lists of persons who ~~((are either incarcerated or on community supervision with))~~ have been:

(i) Convicted of a felony in Washington state court and are serving a sentence of total confinement under the jurisdiction of the Washington state department of corrections, ~~((and to lists of persons convicted in federal district courts with a sentence of at least fifteen months incarceration))~~ when lists of such persons are provided by the department of corrections.

(ii) Convicted by a federal court or any state court other than a Washington state court and currently serving a sentence of total confinement, when lists of such persons are provided by federal or other state authorities.

(3) The secretary must create a list of voters potentially ~~((under authority of DOC))~~ convicted of a felony as identified in subsection (1) of this section by matching the first name, last name, date of birth, and other identifying information.

~~((2))~~ (4)(a) For each voter identified through the process set forth in subsections (1) and (2) of this section, the secretary must change the voter's registration status to "pending ~~((status))~~" with a status reason that indicates the record is ~~((a potential felon))~~ for a person who is potentially ineligible to vote due to serving a sentence of total confinement for a felony conviction, or incarcerated for a felony conviction in a state other than Washington state or federal court.

(b) Voters with a pending status must not be issued a ballot.

AMENDATORY SECTION (Amending WSR 20-13-043, filed 6/10/20, effective 7/11/20)

WAC 434-324-1065 Felony screening process—Mailing to potential matches. (1) The secretary must mail a notification letter to each ~~((person under authority of DOC whose status is pending cancellation))~~ registered voter identified through the process set forth in WAC 434-324-106.

(2) The notification letter must contain language informing the person:

(a) That they are potentially a voter whose status is pending cancellation;

(b) That they must contact their county auditor's office to contest the pending cancellation;

(c) That they may request a provisional ballot for any pending elections;

(d) That a person serving a sentence of total confinement under the jurisdiction of the department of corrections for a felony conviction, or currently incarcerated due to a felony conviction in another state or federal court loses the right to vote until the right is restored;

(e) Of the reason the person has been declared ineligible to vote;

(f) That the person's voter registration will be canceled due to their total confinement under the jurisdiction of the department of corrections for a felony conviction or incarceration in another state or federal prison for a felony conviction if they do not respond within 30 days from the date of the letter; and

(g) How to contest the pending cancellation.

(3) The notification letter must be sent to the person's last known registration mailing address and ~~((, if the person is incarcerated or on community supervision with the department of corrections;))~~ to the person's address on file with the department of corrections ~~((address))~~ indicating that their voter registration is about to be canceled. ~~((The letter must contain language notifying the person that they must contact the auditor's office to contest the pending cancellation. The letter must also inform the person that they may request a provisional ballot for any pending elections. The notification letter must include:~~

(1) An explanation that a person under authority of DOC loses the right to vote until the right is restored;

(2)) (4) The notification letter must contain language informing the person that for a felony conviction in a Washington state court, the right to vote is restored as long as the person is not serving a sentence of total confinement ~~((or subject to community custody with))~~ under the jurisdiction of the department of corrections. For a felony conviction in another state or federal court, the right to vote is restored as long as the person is no longer incarcerated;

~~((3))~~ The reason the person has been identified as ineligible to vote;

~~((4))~~ An explanation that the person's voter registration will be canceled due to the felony conviction if they do not respond within thirty days from the date of the letter; and

~~((5))~~ How to contest the pending cancellation.) (5) The secretary must send to each auditor the voter registration ~~((and conviction))~~ status information for each matched person ~~((under authority of DOC registered in that county))~~ registered to vote in that county who has been identified as pending cancellation by this section.

AMENDATORY SECTION (Amending WSR 20-13-043, filed 6/10/20, effective 7/11/20)

WAC 434-324-107 Felony screening process—Contesting cancellation or canceling. (1) If a person ~~((under authority of DOC))~~ sent a notification by the secretary under the processes set forth in WAC 434-324-1065 fails to contact the auditor within ~~((thirty))~~ 30 days of the date of the letter, that person's voter registration must be canceled. If an election in which the person would otherwise be eligible to vote is scheduled to occur during the ~~((thirty))~~ 30 days, the person must be allowed to vote a provisional ballot. Any unreturned ballot issuances for the voter must be suspended and, if

returned, held until the question of the person's eligibility can be resolved.

(2) The question of the person's eligibility ((status)) to vote may be resolved and the pending status reversed ((without scheduling a hearing)) if:

(a) The person provides ((satisfactory documentation)) verifiable information that the person is not serving a sentence of total confinement;

(b) The person's voting rights have been restored((:));

(c) The conviction is not a felony((:));

(d) The person convicted is not the registered voter((: or));

(e) The person is no longer incarcerated due to a felony conviction in another state or federal court; or

(f) The person is otherwise eligible to vote. ((The auditor must notify the voter, retain a scanned copy of all documentation provided, and notify the secretary. The secretary must flag the voter registration record to prevent future cancellation on the same basis.))

(3) ((If the person under the authority of DOC requests a hearing, the auditor must schedule a public hearing to provide the person an opportunity to dispute the finding. In scheduling the hearing, the auditor may take into account whether an election in which the person would otherwise be eligible to vote is scheduled. The notice must be mailed to the person's last known registration mailing address and must be post-marked at least seven calendar days prior to the hearing date. Notice of the hearing must also be provided to the prosecuting attorney.

(4) The auditor must provide the prosecuting attorney a copy of all relevant registration and felony conviction information. The prosecuting attorney must obtain documentation, such as a copy of the judgment and sentence or custody or supervision information from the Washington department of corrections, the out-of-state court or prison, or the federal court or Bureau of Prisons, sufficient to prove by clear and convincing evidence that the person is ineligible to vote. It is not necessary that the copy of the document be certified.

(5) If the prosecuting attorney is unable to obtain sufficient documentation to ascertain the person's voting eligibility in time to hold a hearing prior to certification of an election in which the person would otherwise be eligible to vote, the prosecuting attorney must request that the auditor dismiss the current cancellation proceedings. The auditor must reverse the voter's pending status, cancel the hearing, and notify the voter. A provisional ballot voted in the pending election must be counted if otherwise valid. The prosecuting attorney must continue to research the person's voting eligibility. If the prosecuting attorney is unable to obtain sufficient documentation to ascertain the person's voting eligibility prior to the next election in which the person would otherwise be eligible to vote, the prosecuting attorney must notify the auditor. The auditor must notify the secretary, who must flag the voter registration record to prevent future cancellation on the same basis.

(6) A hearing to determine voting eligibility is an open public hearing pursuant to chapter 42.30 RCW. If the hearing occurs within thirty days before, or during the certification period of, an election in which the person would otherwise be eligible to vote, the hearing must be conducted by the county

canvassing board. If the hearing occurs at any other time, the county auditor conducts the hearing. Before a final determination is made that the person is ineligible to vote, the prosecuting attorney must show by clear and convincing evidence that the voter is ineligible to vote due to a felony conviction. The person must be provided a reasonable opportunity to respond. The hearing may be continued to a later date if continuance is likely to result in additional information regarding the person's voting eligibility. If the person is determined to be ineligible to vote due to felony conviction and lack of rights restoration, the voter registration must be canceled. If the voter is determined to be eligible to vote, the voter's pending status must be reversed and the secretary must flag the voter registration record to prevent future cancellation on the same basis. The person must be notified of the outcome of the hearing and the final determination is subject to judicial review pursuant to chapter 34.05 RCW.

(7) If the person's voter registration is canceled after the person fails to contact the auditor within the thirty day period, the person may contact the auditor at a later date to request a hearing to dispute the cancellation. The auditor must schedule a hearing in substantially the same manner as provided in subsections (3) through (6) of this section.)) If a ballot is received from a voter whose status was changed to "pending" in accordance with WAC 434-324-106 after ballots were issued, the ballot must be held until the question of the person's eligibility can be resolved.

The disposition of the ballot can be decided in the following ways:

(a) If the question of the voter's eligibility is resolved as stated in subsection (2) of this section, the ballot should be counted if otherwise valid.

(b) If the voter is verified as serving a sentence of total confinement under the jurisdiction of the department of corrections for a felony conviction or is currently incarcerated due to a felony conviction in a state other than Washington state or federal court, then the ballot should not be counted.

(c) If the voter's eligibility has not been resolved, then the canvassing board, prosecuting attorney, or their designees should attempt to acquire documentation and/or contact the department of corrections or other institution to verify whether the individual is serving a sentence of total confinement under the jurisdiction of the department of corrections for a felony conviction or is incarcerated due to a felony conviction in a state other than Washington state or federal court.

(d) If the voter's status cannot be verified, then the ballot should be counted if otherwise valid.

(4) The auditor must notify the voter and the secretary of state when their pending status is removed. The secretary must flag the voter registration record to prevent future cancellation on the same basis.

WSR 21-24-059

PERMANENT RULES

DEPARTMENT OF ECOLOGY

[Order 21-04—Filed November 29, 2021, 9:21 a.m., effective December 30, 2021]

Effective Date of Rule: Thirty-one days after filing.

Other Findings Required by Other Provisions of Law as Precondition to Adoption or Effectiveness of Rule: Chapter 173-423 WAC: The Environmental Protection Agency (EPA) must reissue a waiver to California for its unique motor vehicle emission standards before we can implement the program. In April 2021, EPA indicated they intend to reinstate the waiver. The rule text accommodates this requirement by noting that the rule will be effective provided EPA grants a waiver for the California motor vehicle emission standards incorporated by reference.

Purpose: This rule making updates two rules, chapters 173-423 and 173-400 WAC.

Chapter 173-423 WAC, Clean vehicles program: The rule implements the California Advanced Clean Cars Program that combines the control of smog-causing (criteria) pollutants and greenhouse gas emissions into a coordinated package of regulations. The rule adopts California's motor vehicle emission standards that apply to:

- Low emission vehicles - passenger cars, light-duty trucks, and medium-duty vehicles (trucks, SUVs, and vans).
- Zero emission vehicles - passenger cars, light-duty trucks, and medium-duty vehicles (trucks, SUVs, and vans).
- Zero emission trucks - vehicles greater than 8,500 pounds gross vehicle weight rating (delivery vans, work trucks, long-haul trucks, drayage trucks, transit buses, garbage trucks, and other commercial work vehicles). This is California's Advanced Clean Trucks rule.

Chapter 173-400 WAC, General regulations for air pollution sources: This chapter adopts many federal rules by reference because it is our primary rule regulating air quality under the state and federal Clean Air Acts. In Washington, we incorporate applicable federal rules by either copying the rule language into our state rules or adopting applicable federal rules by reference, as they exist at a specified adoption date. In amending WAC 173-400-025, we:

- Updated the "adoption by reference" date to December 23, 2020, from January 24, 2018, to include more recent versions of federal rules; and
- Kept the current requirements for "project emissions accounting" for the Prevention of Significant Deterioration (PSD) Program for Washington sources. This means that the rule changes from the November 24, 2020, Federal Register notice (85 F.R. 74890) that went into effect on December 24, 2020, are not adopted by reference.

Citation of Rules Affected by this Order: Amending chapters 173-423 and 173-400 WAC.

Statutory Authority for Adoption: Chapter 173-423 WAC: Chapter 70A.30 RCW, Motor vehicle emission standards; and chapter 173-400 WAC: Chapter 70A.15 RCW, Washington Clean Air Act.

Adopted under notice filed as WSR 21-13-153 on June 22, 2021.

Changes Other than Editing from Proposed to Adopted Version:

Section in Adopted Rule	Change	Reason
WAC 173-423-070 (2)(b)	Removes requirement to base compliance on vehicle delivery in Washington.	Removes restrictive provision to maintain consistency with California's rules. Low emission vehicle rules allow pooling with California and all Section 177 states for fleet reporting of nonmethane organic gas.
WAC 173-423-070 (3)(c)	Removes requirement to base compliance on vehicle delivery in Washington.	Removes restrictive provision to maintain consistency with California's rules. Low emission vehicle rules allow pooling between California and Section 177 states for fleet reporting of greenhouse gas emissions.
WAC 173-423-075 (1)(c)	Clarifies wording.	Clarifies confusing rule language that was too broad. New wording clarifies original intent to prohibit credit generation for zero emission vehicles before model year 2025 vehicles.
WAC 173-423-140	Deletes enforcement section.	Removes outdated enforcement penalties to maintain consistency with California's rules, specifically advanced clean trucks. Removal simplifies this requirement so the rule relies on penalty provisions in California's rules, which are incorporated by reference.
WAC 173-423-150	Changes "section" to "provision."	Clarifies that invalidation of a portion of a section will invalidate only that portion.

Section in Adopted Rule	Change	Reason
WAC 173-400-025(1)	Changes adoption date to December 23, 2020.	Change clarifies original intent to update adoption date to most recent version of most federal rules, but retain EPA's 2020 requirements for project emissions accounting for major sources.
WAC 173-400-025(3)	Deletes subsection with exemptions.	There are no exemptions to this adoption by reference.
WAC 173-400-025(4)	Deletes subsection with new requirements for existing municipal solid waste landfills.	The requirements were not in effect on the adoption by reference date of December 23, 2020. They were in effect on June 21, 2021.

Number of Sections Adopted in Order to Comply with Federal Statute: New 1, Amended 5, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 1, Amended 7, Repealed 1 [7].

Number of Sections Adopted at the Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 1, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 5, Repealed 1 [7].

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 29, 2021.

Laura J. Watson
Director

AMENDATORY SECTION (Amending WSR 18-17-111, filed 8/16/18, effective 9/16/18)

WAC 173-400-025 Adoption (~~of federal rules~~) by reference. (1) Adoption by reference date: December 23, 2020.

(2) Federal rules mentioned in this rule are adopted as they exist on (~~January 24, 2018~~) the date in subsection (1) of this section. (~~Adopted or adopted~~) Adoption by reference means the federal rule applies as if it was copied into this rule.

Chapter 173-423 WAC

~~((LOW EMISSION VEHICLES))~~ CLEAN VEHICLES PROGRAM

AMENDATORY SECTION (Amending WSR 12-24-033, filed 11/28/12, effective 12/29/12)

WAC 173-423-010 Purpose. The purpose of this chapter is to establish rules (~~implementing the California motor vehicle emission standards adopted by the 2005 legislature and codified in chapters 70.120A and 46.16A RCW~~) as authorized by RCW 70A.30.010.

AMENDATORY SECTION (Amending WSR 05-24-044, filed 11/30/05, effective 12/31/05)

WAC 173-423-020 Applicability. This chapter applies to all (~~2009 and subsequent model year~~) passenger cars, light-duty trucks (~~and~~), medium-duty passenger vehicles, medium-duty vehicles, and heavy-duty vehicles registered, leased, rented or sold for use in (~~the state of~~) Washington, except as provided in WAC 173-423-060(~~;~~) Exemptions.

AMENDATORY SECTION (Amending WSR 05-24-044, filed 11/30/05, effective 12/31/05)

WAC 173-423-025 Effective date. This chapter is effective on January 1, 2006, provided the (~~state of Oregon has adopted the California motor vehicle emission standards as provided in RCW 70.120A.010~~) U.S. Environmental Protection Agency has granted a waiver under 42 U.S.C. Sec. 7543 for the California motor vehicle emission standards adopted by reference in this chapter.

AMENDATORY SECTION (Amending WSR 05-24-044, filed 11/30/05, effective 12/31/05)

WAC 173-423-030 (~~Incorporation~~) Adoption by reference. (1) This chapter (~~incorporates~~) adopts by reference (~~certain sections of the~~) California Code of Regulations, Title 13, (~~relating to implementing the California motor vehicle emission standards in the state of Washington. Table 070(1) found in WAC 173-423-070 lists the sections of the California Code of Regulations, Title 13 incorporated by reference and the California effective date for each section~~) sections 1900, 1956.8 (g) and (h), 1960.1, 1961, 1961.1 to 1961.3, 1962.2, 1962.3, 1963, 1963.1 to 1963.5, 1965, 1968.2, 1968.5, 1976, 1978, 2035 to 2040, 2046, 2109, 2111 to 2120, 2122 to 2133, 2135, 2141 to 2149, 2235, and Appendix A to Article 2.1 in section 2112.

(2) Adoption or adoption by reference means the rule applies as if it was copied into this rule. California Code of Regulations mentioned in this rule are adopted as they exist on June 22, 2021, or the adoption date in WAC 173-400-025 (1), whichever is later.

(~~2~~) (3) Copies of the relevant sections of (~~the~~) California Code of Regulations(~~, Title 13 incorporated~~) adopted by reference in this chapter are available on ecology's website or by contacting:

Washington State Department of Ecology
Air Quality Program
300 Desmond Drive
Lacey, ((Washington)) WA 98503
360-407-6800

~~((3))~~ (4) For purposes of applying the ~~((incorporated))~~ adopted sections of ~~((the))~~ California Code of Regulations ~~((Title 13))~~ in Washington, unless the context requires otherwise:

(a) "California" means "Washington" ~~((unless otherwise specified in this chapter or clearly inappropriate.))~~;

(b) "CARB," "ARB," or "air resources board" means "ecology"; and

(c) "Executive officer" means "ecology."

AMENDATORY SECTION (Amending WSR 12-24-033, filed 11/28/12, effective 12/29/12)

WAC 173-423-040 Definitions and abbreviations.

The following definitions apply to the administration of this chapter. Any term that is not defined in this section ~~((shall))~~ must be as defined or described in ~~((the))~~ California Code of Regulations, Title 13, section 1900 or 1963, as applicable. Definitions in ~~((the))~~ California Code of Regulations, Title 13, section 1900 or 1963 will prevail if any discrepancy arises ~~((between them and those set forth in this section)).~~

(1) ~~(("Emission credits" are earned when a manufacturer's reported fleet average is less than the required fleet average. Credits are calculated according to formulas contained in the California Code of Regulations, Title 13, section 1961(e), 1961.1(b), 1961.2(e), and 1961.3(b), as appropriate.~~

(2) ~~(("Emission debits" are earned when a manufacturer's reported fleet average exceeds the required fleet average. Debits are calculated according to formulas contained in the California Code of Regulations, Title 13, section 1961(e), 1961.1(b), 1961.2(e), and 1961.3(b), as appropriate.~~

(3) ~~(("Fleet average greenhouse gas emission requirements" are generally referred to as limitations on greenhouse gas exhaust mass emission values from passenger cars, light-duty trucks and medium duty passenger vehicles. The fleet average greenhouse gas emission requirements are set forth in CCR, Title 13, section 1961.1 and 1961.3, and incorporated herein by reference.~~

(4)) "Ecology" means the department of ecology.

(2) "Gross vehicle weight rating" or "GVWR" is the value specified by the manufacturer as the maximum design loaded weight of a single vehicle.

~~((5))~~ "Independent low volume manufacturer" is defined in the California Code of Regulations, Title 13, section 1900 and incorporated herein by reference.

(6) "Intermediate volume manufacturer" is defined in the California Code of Regulations, Title 13, section 1900 and incorporated herein by reference.

(7) "Large volume manufacturer" is defined in the California Code of Regulations, Title 13, section 1900 and incorporated herein by reference.

(8)) (3) "Light-duty truck" ~~((is any 2000 and subsequent model motor vehicle certified to the standards in Title 13, CCR, section 1961 (a)(1) rated at 8,500 pounds gross vehicle weight or less, and any other motor vehicle rated at 6,000~~

~~pounds gross vehicle weight or less, which is designed primarily for the purposes of transportation of property or is a derivative of such vehicle, or is available with special features enabling off-street or off-highway operation and use))~~ is defined as provided in California Code of Regulations, Title 13, section 1900.

~~((9))~~ (4) "Medium-duty passenger vehicle" ~~((MDPV))~~ is any medium-duty vehicle with a gross vehicle weight rating of less than 10,000 pounds that is designed primarily for the transportation of persons. The medium-duty passenger vehicle definition does not include any vehicle which:

(a) Is an "incomplete truck," i.e., is a truck that does not have the primary load-carrying device or container attached; or

(b) Has a seating capacity of more than twelve persons; or

(c) Is designed for more than nine persons in seating rearward of the driver's seat; or

(d) Is equipped with an open cargo area of 72.0 inches in interior length or more. A covered box not readily accessible from the passenger compartment will be considered an open cargo area for the purpose of this definition) is defined as provided in California Code of Regulations, Title 13, section 1900.

(5) "Medium-duty vehicle" is defined as provided in California Code of Regulations, Title 13, section 1900.

~~((10))~~ (6) "Model year" ~~((is))~~ Means the manufacturer's annual production period ~~((which))~~ that includes January 1st of a calendar year ~~((or, if the manufacturer has no annual production period, ((model year is)) the calendar year. ((In the case of any)) The model year for a motor vehicle manufactured in two or more stages ((the time of manufacture shall be the date of completion of the chassis)) is the model year in which the chassis is completed, except for a vehicle subject to California Code of Regulations, Title 13, sections 1963 through 1963.5 (Advanced Clean Trucks): Is defined as provided in California Code of Regulations, Title 13, section 1963(c).~~

~~((11))~~ "Nonmethane organic gas" or "NMOG" is the sum of nonoxygenated and oxygenated hydrocarbons contained in a gas sample as measured in accordance with the "California Non-Methane Organic Gas Test Procedures," and incorporated herein by reference.

(12) "NMOG fleet average emissions" is a motor vehicle manufacturer's average vehicle emissions of all nonmethane organic gases from passenger cars and light-duty trucks in any model year delivered in Washington that are subject to this regulation.

~~((13))~~ (7) "Manufacturer" means an independent low volume manufacturer, intermediate volume manufacturer, large volume manufacturer, or a small volume manufacturer defined as provided in California Code of Regulations, Title 13, section 1900.

(8) "Passenger car" ~~((is any motor vehicle designed primarily for transportation of persons and having a design capacity of twelve persons or less))~~ is defined as provided in California Code of Regulations, Title 13, section 1900.

~~((14))~~ "Small volume manufacturer" is defined as set forth in the California Code of Regulations, Title 13, section 1900 and incorporated herein by reference.)

(9) "Zero-emission vehicle" or "ZEV" is defined as provided in California Code of Regulations, Title 13, section 1962.2(a).

AMENDATORY SECTION (Amending WSR 12-24-033, filed 11/28/12, effective 12/29/12)

WAC 173-423-060 Exemptions. The following vehicles are not subject to this chapter:

- (1) Military tactical vehicles;
- (2) Vehicles sold for registration and use out-of-state;
- (3) Previously registered vehicles where the mileage at the time of sale exceeds ((seven thousand five hundred)) 7,500 miles, provided that for vehicle dealers, the mileage at the time of sales is determined by the odometer statement at the time the vehicle dealer acquired the vehicle;
- (4) Vehicles ~~((which))~~ that are only available for rent to a final destination outside of Washington;
- (5) Vehicles purchased by a nonresident prior to establishing residency in ~~((the state of))~~ Washington, regardless of the mileage on the vehicle;
- (6) Vehicles transferred by inheritance or as a result of divorce, dissolution or legal separation; ~~((and))~~
- (7) Motor vehicles purchased for use by a local police department, county sheriff, fire district, or the Washington state patrol; and
- (8) Motor vehicles acquired by a resident who is a member of the military stationed outside Washington pursuant to military orders.

AMENDATORY SECTION (Amending WSR 19-02-056, filed 12/27/18, effective 1/27/19)

WAC 173-423-070 ~~((Emission standards, warranty, recall and other California provisions adopted by reference.))~~ Low emission vehicles. ~~((Each manufacturer and each new 2009 and subsequent model year passenger car, light duty truck and medium duty passenger vehicle subject to this chapter shall comply with each applicable standard set forth in Table 070(1) and incorporated by reference:))~~

Table 070(1)
California Code of Regulations (CCR)
Title 13
Provisions Incorporated by Reference
Effective in Washington starting January 14, 2009

Title 13 CCR Division 3 Air Resources Board	Title	California Effective Date
Chapter 1 Motor Vehicle Pollution Control Devices		
Article 1 General Provisions		
Section 1900	Definitions	10/8/15
Article 2 Approval of Motor Vehicle Pollution Control Devices (New Vehicles)		

Title 13 CCR Division 3 Air Resources Board	Title	California Effective Date
Section 1956.8 (g) and (h)	Exhaust Emission Standards and Test Procedures – 1985 and Subsequent Model Heavy Duty Engines and Vehicles	10/16/17
Section 1960.1	Exhaust Emission Standards and Test Procedures – 1981 and through 2006 Model Passenger Cars, Light Duty and Medium-Duty Vehicles	12/31/12
Section 1961	Exhaust Emission Standards and Test Procedures – 2004 through 2019 Model Passenger Cars, Light Duty Trucks and Medium-Duty Vehicles	12/31/12
Section 1961.1	Greenhouse Gas Exhaust Emission Standards and Test Procedures – 2009 through 2016 Model Passenger Cars, Light Duty Trucks and Medium-Duty Vehicles	8/7/12
Section 1961.2	Exhaust Emission Standards and Test Procedures – 2015 and Subsequent Model Passenger Cars, Light Duty Trucks and Medium-Duty Vehicles	12/12/18
Section 1961.3	Greenhouse Gas Exhaust Emission Standards and Test Procedures – 2017 and Subsequent Model Passenger Cars, Light Duty Trucks and Medium-Duty Vehicles	12/12/18

Title 13 CCR Division 3 Air Resources Board	Title	California- Effective Date
Section 1965	Emission Control, Smog Index, and Environmental Performance Labels—1979 and Subsequent Model-Year Motor Vehicles	10/8/15
Section 1968.2	Malfunction and Diagnostic System Requirements—2004 and Subsequent Model-Year Passenger Cars, Light-Duty Trucks, and Medium-Duty Vehicles and Engines	7/25/16
Section 1968.5	Enforcement of Malfunction and Diagnostic System Requirements for 2004 and Subsequent Model-Year Passenger Cars, Light-Duty Trucks, and Medium-Duty Vehicles and Engines	7/25/16
Section 1976	Standards and Test Procedures for Motor Vehicle Fuel Evaporative Emissions	10/8/15
Section 1978	Standards and Test Procedures for Vehicle Refueling Emissions	10/8/15
Article 6 Emission Control System Warranty		
Section 2035	Purpose, Applicability and Definitions	11/9/07
Section 2036	Defects Warranty Requirements for 1979 through 1989 Model Passenger Cars, Light-Duty Trucks, and Medium-Duty Vehicles; 1979 and Subsequent Model Motorcycles and Heavy-Duty Vehicles; and Motor Vehicle Engines Used in Such Vehicles	12/5/14

Title 13 CCR Division 3 Air Resources Board	Title	California- Effective Date
Section 2037	Defects Warranty Requirements for 1990 and Subsequent Model-Year Passenger Cars, Light-Duty Trucks and Medium-Duty Vehicles and Motor Vehicle Engines Used in Such Vehicles	12/5/14
Section 2038	Performance Warranty Requirements for 1990 and Subsequent Model-Year Passenger Cars, Light-Duty Trucks and Medium-Duty Vehicles and Motor Vehicle Engines Used in Such Vehicles	8/7/12
Section 2039	Emission Control System Warranty Statement	12/26/90
Section 2040	Vehicle Owner Obligations	12/26/90
Section 2046	Defective Catalyst	2/15/79
Chapter 2 Enforcement of Vehicle Emission Standards and Enforcement Testing		
Article 2 Enforcement of New and In-Use Vehicle Standards		
Section 2109	New Vehicle Recall Provisions	12/30/83
Article 2.1 Procedures for In-Use Vehicle Voluntary and Influenced Recalls		
Section 2111	Applicability	12/8/10
Section 2112	Definitions	12/5/14
	Appendix A to Article 2.1	12/5/14
Section 2113	Initiation and Approval of Voluntary and Influenced Emission-Related Recalls	1/26/95
Section 2114	Voluntary and Influenced Recall Plans	11/27/99
Section 2115	Eligibility for Repair	1/26/95
Section 2116	Repair Label	1/26/95
Section 2117	Proof of Correction Certificate	1/26/95

Title 13 CCR Division 3 Air Resources Board	Title	California Effective Date
Section 2118	Notification	1/26/95
Section 2119	Recordkeeping and Reporting Requirements	11/27/99
Section 2120	Other Requirements Not Waived	1/26/95
Article 2.2 Procedures for In-Use Vehicle Ordered Recalls		
Section 2122	General Provisions	12/8/10
Section 2123	Initiation and Notification of Ordered Emission-Related Recalls	1/26/95
Section 2124	Availability of Public Hearing	1/26/95
Section 2125	Ordered Recall Plan	1/26/95
Section 2126	Approval and Implementation of Recall Plan	1/26/95
Section 2127	Notification of Owners	1/26/95
Section 2128	Repair Label	1/26/95
Section 2129	Proof of Correction Certificate	1/26/95
Section 2130	Capture Rates and Alternative Measures	11/27/99
Section 2131	Preliminary Tests	1/26/95
Section 2132	Communication with Repair Personnel	1/26/95
Section 2133	Recordkeeping and Reporting Requirements	1/26/95
Section 2135	Extension of Time	1/26/95
Article 2.4 Procedures for Reporting Failure of Emission-Related Components		
Section 2141	General Provisions	12/8/10
Section 2142	Alternative Procedures	2/23/90
Section 2143	Failure Levels Triggering Recall	11/27/99
Section 2144	Emission Warranty Information Report	11/27/99
Section 2145	Field Information Report	8/7/12
Section 2146	Emissions Information Report	11/27/99

Title 13 CCR Division 3 Air Resources Board	Title	California Effective Date
Section 2147	Demonstration of Compliance with Emission Standards	12/5/14
Section 2148	Evaluation of Need for Recall	11/27/99
Section 2149	Notification and Subsequent Action	2/23/90
Chapter 4.4 Specifications for Fill Pipes and Openings of Motor Vehicle Fuel Tanks		
Section 2235	Requirements	8/8/12))

(1) **Requirement to meet California vehicle emission standards.** All vehicles subject to this chapter must be certified to the standards adopted by reference in WAC 173-423-030 to be registered, leased, rented, licensed, or sold for use in Washington:

(a) Starting with model year 2009: Passenger car, light-duty truck, or medium-duty passenger vehicle; and

(b) Starting with model year 2025: Medium-duty vehicle.

(2) **Fleet average emissions - Nonmethane organic gas (NMOG) plus oxides of nitrogen exhaust.**

(a) Effective model year 2009 through 2014, except as provided in this subsection, each motor vehicle manufacturer's NMOG fleet average emissions from passenger cars and light-duty trucks delivered for sale in Washington must not exceed the fleet average NMOG exhaust emission requirement in California Code of Regulations, Title 13, section 1961(b). For the 2014 model year only, a manufacturer may comply with the fleet average NMOG + NOx values in (b) of this subsection in lieu of complying with the NMOG fleet average emissions in this subsection. A manufacturer must either comply with the NMOG + NOx fleet average requirements for both its PC/LDT1 fleet and its LDT2/MDPV fleet or comply with the NMOG fleet average requirements for both its PC/LDT1 fleet and its LDT2/MDPV fleet. A manufacturer must calculate its fleet average NMOG + NOx values using the applicable full useful life standards.

(b) Starting with model year 2015, a motor vehicle manufacturer must comply with the fleet average nonmethane organic gas plus oxides of nitrogen emission values as provided in California Code of Regulations, Title 13, section 1961.2(b).

(c) Emission credits and debits may be accrued and used as provided in California Code of Regulations, Title 13, section 1961.2(c).

(d) Each manufacturer must submit a report to ecology by March 1st of the calendar year containing the fleet average emissions for the model year that ended most recently. The report must follow California Code of Regulations, Title 13, section 1961.2 and must be in the same format used to report the information to the California air resources board.

(e) If a report submitted by the manufacturer under (c) of this subsection demonstrates that the manufacturer does not comply with the fleet average emission standard, the manufacturer must submit to ecology within 60 days a fleet average enforcement report. The fleet average enforcement report must:

(i) Describe how the manufacturer intends to equalize any accrued debits, as required in California Code of Regulations, Title 13, section 1961.2 (c)(3);

(ii) Identify all vehicle models delivered for sale in Washington, their corresponding certification standards, and the percentage of each model delivered for sale in Washington and California in relation to total fleet sales in the respective state;

(iii) Describe how the manufacturer plans to achieve compliance with the fleet average in future model years.

(3) Fleet average emissions - Greenhouse gas exhaust.

(a) Starting with model year 2009, a motor vehicle manufacturer must comply with the emission standards, fleet average greenhouse gas exhaust emission requirements, and other requirements provided in California Code of Regulations, Title 13, sections 1961.1 and 1961.3.

(b) Emissions credits and debits may be accrued and used in accordance with California Code of Regulations, Title 13, sections 1961.1(b) and 1961.3(b).

(c) Each manufacturer must submit a report to ecology by March 1st that includes end-of-model year data calculating the fleet average greenhouse gas emissions for the model year that has just ended. The report must include the number of greenhouse gas vehicle test groups, delineated by model type, certified pursuant to California Code of Regulations, Title 13, sections 1961.1 and 1961.3. The report must follow the procedures in California Code of Regulations, Title 13, sections 1961.1 and 1961.3 and must be in the same format used to report this information to the California air resources board.

(d) If the report submitted by the manufacturer under this subsection demonstrates that the manufacturer does not comply with the fleet average emission standards, the manufacturer must submit to ecology within 60 days a fleet average enforcement report. The fleet average enforcement report must:

(i) Describe how the manufacturer intends to equalize any accrued debits, as required in California Code of Regulations, Title 13, sections 1961.1(b) and 1961.3(b), as appropriate.

(ii) Identify all vehicle models delivered for sale in Washington, their corresponding certification standards, and the percentage of each model delivered for sale in Washington and California in relation to total fleet sales in the respective state.

(iii) Describe how the manufacturer plans to achieve compliance with the fleet average in future model years.

(4) Manufacturer delivery reporting requirements.

(a) The manufacturer must submit to ecology one copy of the California executive order and certificate of conformity for certification of new motor vehicles for each engine family to be sold in Washington within 30 days of ecology's request. If these reports are available electronically, the man-

ufacturer must send the record in an electronic format acceptable to ecology.

(b) Commencing with the 2009 model year and prior to the beginning of each model year, upon request, each manufacturer must submit to ecology a list of all models of medium-duty vehicles and medium-duty passenger vehicles that will be delivered to Washington dealers.

(c) Upon request, each manufacturer must report to ecology the vehicle identification numbers (VIN) of each passenger car, light-duty truck, medium-duty passenger vehicle, and medium-duty vehicle delivered to each Washington dealer that is not certified to California emission standards.

(d) For the purposes of determining compliance with this chapter, ecology may require a vehicle manufacturer to submit documentation ecology deems necessary to the effective administration and enforcement of this chapter, including all certification materials submitted to the California air resources board.

(5) Warranty requirements.

(a) For all 2009 and subsequent model year vehicles subject to the provisions of this chapter, each manufacturer must provide, to the ultimate purchaser and each subsequent purchaser, a warranty that complies with the requirements in California Code of Regulations, Title 13, sections 2035 through 2038, 2040, and 2046.

(b) For all 2009 and subsequent model year vehicles subject to the provisions of this chapter, each manufacturer must include the emission control system warranty statement that complies with the requirements in California Code of Regulations, Title 13, section 2039. Manufacturers may modify this statement as necessary to inform Washington vehicle owners of the applicability of the warranty. The manufacturer must provide a telephone number appropriate for Washington residents.

(c) All manufacturers must submit to ecology failure of emission-related components reports as defined in California Code of Regulations, Title 13, section 2144 for vehicles subject to this chapter. For purposes of compliance with this requirement, manufacturers may submit copies of the failure of emission-related components reports that are submitted to the California air resources board, in lieu of submitting reports for vehicles subject to this chapter. Manufacturers may discontinue submitting these reports if notified by ecology.

NEW SECTION

WAC 173-423-075 Zero-emission vehicle standards.

(1) Requirement to meet California vehicle emission standards - Passenger cars, light-duty trucks, and medium-duty vehicles.

(a) Applicability. Starting with model year 2025, a manufacturer's sales fleet of passenger cars, light-duty trucks, and medium-duty vehicles delivered for sale or lease in Washington must comply with California Code of Regulations, Title 13, sections 1962.2 and 1962.3, adopted by reference in WAC 173-423-030.

(b) Reporting requirements. Beginning with model year 2025, a manufacturer must submit a report to ecology for each on-road vehicle produced and delivered for sale in

Washington for each model year as required by California Code of Regulations, Title 13, section 1962.3.

(c) ZEV credits. ZEV credits may only be earned by model year 2025 and subsequent vehicles.

(2) **Requirement to meet California vehicle emission standards - On-road vehicles over 8,500 GVWR.** (California advanced clean trucks regulation)

(a) Applicability. Starting with model year 2025, any manufacturer that certifies on-road vehicles over 8,500 pounds GVWR for sale or lease in Washington must comply with California Code of Regulations, Title 13, sections 1963 through 1963.5, adopted by reference in WAC 173-423-030.

(b) Reporting requirements. Beginning with model year 2025, a manufacturer must submit a report to ecology for each on-road vehicle produced and delivered for sale in Washington for each model year as required by California Code of Regulations, Title 13, section 1963.4.

AMENDATORY SECTION (Amending WSR 05-24-044, filed 11/30/05, effective 12/31/05)

WAC 173-423-130 Surveillance. (1) ~~((The department of))~~ Ecology may inspect new and used motor vehicles and related records for the purposes of determining compliance with the requirements of this chapter. ~~((Department of))~~ Ecology inspections ~~((shall))~~ **must** occur during regular business hours and on any premises owned, operated or used by any dealer or rental car agency.

(2) For the purposes of determining compliance with this chapter, ~~((the department of))~~ ecology may require ~~((any))~~ a vehicle dealer or rental car agency to submit ~~((any))~~ documentation ~~((the department of))~~ ecology deems necessary to the effective administration and enforcement of this chapter. This provision does not require creation of new records.

AMENDATORY SECTION (Amending WSR 05-24-044, filed 11/30/05, effective 12/31/05)

WAC 173-423-150 Severability. Each ~~((section))~~ portion of this regulation ~~((shall be deemed))~~ is intended to be severable, and in the event that any ~~((section))~~ portion of this regulation is held invalid, the remainder ~~((shall))~~ is intended to continue in full force and effect.

REPEALER

The following sections of the Washington Administrative Code are repealed:

- WAC 173-423-050 Requirement to meet California vehicle emission standards.
- WAC 173-423-080 Fleet average nonmethane organic gas (NMOG) and NMOG Plus NO_x exhaust emission requirements, reporting and compliance.
- WAC 173-423-090 Fleet average greenhouse gas exhaust emission requirements, reporting and compliance.

WAC 173-423-100 Manufacturer delivery reporting requirements.

WAC 173-423-110 Warranty requirements.

WAC 173-423-120 Recalls.

WAC 173-423-140 Enforcement.

WSR 21-24-061

PERMANENT RULES

SUPERINTENDENT OF PUBLIC INSTRUCTION

[Filed November 29, 2021, 1:05 p.m., effective December 30, 2021]

Effective Date of Rule: Thirty-one days after filing.

Purpose: Office of superintendent of public instruction is adopting permanent rule revisions regarding data collection requirements on the annual S-275 school personnel report after the 2018 Washington legislature made significant changes to how school districts are funded and how educators are compensated. The Washington legislature no longer provides funding to school districts for teacher salary and benefits tied to their education level (degree and credits) and certificated years of experience. These rule revisions implement those changes while continuing to collect S-275 education and experience data as needed.

Citation of Rules Affected by this Order: Repealing WAC 392-121-255 through 392-121-262 and 392-121-266 through 392-121-299; and amending WAC 392-121-249, 392-121-250, and 392-121-264.

Statutory Authority for Adoption: RCW 28A.150.290 (1).

Adopted under notice filed as WSR 21-19-066 on September 14, 2021.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; and Recently Enacted State Statutes: New 0, Amended 3, Repealed 10.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 3, Repealed 10.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 29, 2021.

Chris P. S. Reykdal
State Superintendent
of Public Instruction

AMENDATORY SECTION (Amending WSR 17-03-025, filed 1/6/17, effective 2/6/17)

WAC 392-121-249 Definition—Accredited institution of higher education. As used in this chapter, "accredited institution of higher education" means an institution of higher education that has been accredited by a national or regional accrediting association recognized by the Washington student achievement council and the secretary of the U.S. Department of Education pursuant to WAC ((181-78A-010 (7))) 250-61-050.

AMENDATORY SECTION (Amending WSR 11-21-065, filed 10/17/11, effective 11/17/11)

WAC 392-121-250 Definition—Highest degree level. As used in this chapter, the term "highest degree level" means:

(1) The highest degree earned by the employee from an accredited institution of higher education, pursuant to WAC 392-121-249; or

(2) "Nondegreed" for a certificated instructional employee who((:

(a)) holds no bachelor's or higher level degree((or

(b) Holds a bachelor's or higher level degree and a valid vocational/career and technical education certificate, but:

(i) The bachelor's or higher level degree was not a requirement of any past or present education certificate or permit, including the vocational/career and technical education certificate, pursuant to chapter 181-77 or 181-79A WAC; and

(ii) Whose highest placement pursuant to WAC 392-121-270 is as a nondegreed certificated instructional employee)).

AMENDATORY SECTION (Amending WSR 15-18-078, filed 8/28/15, effective 9/28/15)

WAC 392-121-264 Definition—Certificated years of experience. Regardless of the experience factors used by a school district ((or)), charter school, or tribal compact school for the purposes of its salary schedule(s), as used in this chapter, the term "certificated years of experience" means the number of years of accumulated full-time and part-time ((professional education)) certificated employment prior to the current reporting school year in the state of Washington, out-of-state, and a foreign country. School districts ((and)), charter schools, and tribal compact schools shall report all certificated years of experience including those beyond the experience limit of ((the school district's or charter school's)) their salary schedule(s).

(1) ((Professional education)) Certificated employment shall be limited to ((the following):

(a)) employment in public or private preschools or elementary and secondary schools in positions which require certification where((:

(i) Schools include the Centrum education program, the Pacific Science Center education program, educational centers authorized under chapter 28A.205 RCW, and Seattle Children's Hospital education program;

(ii)) certification means the concurrent public professional education licensing requirements established in the state, province, country, or other governmental unit in which employment occurred and which, for the state of Washington, refers to the certificates authorized by WAC 181-79A-140 and 181-79A-142, and temporary permits authorized by WAC 181-79A-128((:

(b) Employment in public or private vocational technical schools, technical colleges, community/junior colleges, colleges, and universities in positions comparable to those which require certification in Washington school districts;

(c) Employment in a governmental educational agency with regional administrative responsibilities for preschool, elementary, and/or secondary education including but not limited to an educational service district, office of superintendent of public instruction, or United States department of education in any professional position including but not limited to C.P.A., architect, business manager, or physician;

(d) Experience in the following areas:

(i) Military, Peace Corps, or Vista service which interrupted professional education employment included in (a), (b), or (c) of this subsection; and

(ii) Sabbatical leave.

(e) For nondegreed vocational/career and technical education instructors, up to a maximum of six years of management experience as defined in WAC 181-77-003(6) acquired after the instructor meets the minimum vocational/career and technical education certification requirements of three years (six thousand hours) established in WAC 181-77-041 (1)(a)(i), regardless of when the initial certificate is issued and regardless of type of vocational/career and technical education certificate held. If a degree is obtained while employed in the state of Washington as a nondegreed vocational/career and technical education instructor, the eligible years of management experience pursuant to this subsection reported on Report S-275 prior to the awarding of the degree shall continue to be reported but shall not increase.

(f) Beginning in the 2007-08 school year, for occupational therapists, physical therapists, nurses, speech language pathologists, audiologists, counselors, psychologists, and social workers regulated under Title 18 RCW, years of experience may include employment as occupational therapists, physical therapists, nurses, speech language pathologists, audiologists, counselors, psychologists, and social workers, that does not otherwise meet the requirements of (a) through (e) of this subsection, subject to the following conditions and limitations:

(i) Experience included under this subsection shall be limited to a maximum of two years.

(ii) The calculation of years of experience shall be that one year of experience in a school or other non-school position counts as one year of experience for the purposes of this subsection, per subsection (2)(a) of this section.

(iii) Employment as occupational therapists shall be limited to the following:

(A) In positions requiring licensure as an occupational therapist under Title 18 RCW, or comparable out-of-state employment; and

(B) While holding a valid occupational therapist license, or other comparable occupational therapist credential.

~~(iv) Employment as physical therapists shall be limited to the following:~~

~~(A) In positions requiring licensure as a physical therapist under Title 18 RCW, or comparable out-of-state employment; and~~

~~(B) While holding a valid physical therapist license, or other comparable physical therapist credential.~~

~~(v) Employment as nurses shall be limited to the following:~~

~~(A) In positions requiring licensure as a registered nurse under Title 18 RCW, or comparable out-of-state employment; and~~

~~(B) While holding a valid registered nurse license, or other comparable registered nurse credential.~~

~~(vi) Employment as speech language pathologists or audiologists shall be limited to the following:~~

~~(A) In positions requiring the same or similar duties and responsibilities as are performed by speech language pathologists or audiologists regulated under Title 18 RCW; and~~

~~(B) After completion of the minimum requirements for conditional certification as a school speech language pathologist or audiologist established in WAC 181-79A-231(1)(c) (iv).~~

~~(vii) Employment as counselors shall be limited to the following:~~

~~(A) In positions requiring the same or similar duties and responsibilities as are performed by counselors regulated under Title 18 RCW; and~~

~~(B) After completion of the minimum requirements for emergency certification as a school counselor established in WAC 181-79A-231(3).~~

~~(viii) Employment as psychologists shall be limited to the following:~~

~~(A) In positions requiring the same or similar duties and responsibilities as are performed by psychologists regulated under Title 18 RCW; and~~

~~(B) After completion of the minimum requirements for emergency certification as a school psychologist established in WAC 181-79A-231(3).~~

~~(ix) Employment as social workers shall be limited to the following:~~

~~(A) In positions requiring the same or similar duties and responsibilities as are performed by social workers regulated under Title 18 RCW; and~~

~~(B) After completion of the minimum requirements for emergency certification as a school social worker established in WAC 181-79A-231(3).~~

~~(x) Certificated years of experience as occupational therapists, physical therapists, nurses, speech language pathologists, audiologists, counselors, psychologists, and social workers, determined pursuant to this subsection and reported on Report S-275, by teachers and other certificated staff who are no longer employed as occupational therapists, physical therapists, nurses, speech language pathologists, audiologists, counselors, psychologists, and social workers, shall continue to be reported but shall not increase).~~

(2) Years of full-time and part-time ~~((professional education))~~ certificated employment prior to the current reporting school year are accumulated as follows:

(a) For each ~~((professional education))~~ certificated employment which is not employment as a casual substitute pursuant to subsection (1)~~((a))~~ of this section;

(i) Determine the total number of hours, or other unit of measure, per year for an employee working full-time with each employer;

(ii) Determine the number of hours, or other unit of measure, per year with each employer, including paid leave and excluding unpaid leave;

(iii) Calculate the quotient of the hours, or other unit of measure, determined in (a)(ii) of this subsection divided by the hours, or other unit of measure, in (a)(i) of this subsection rounded to ~~((two))~~ one decimal place~~((s))~~ for each year.

(b) For ~~((professional education))~~ certificated employment as a casual substitute pursuant to subsection (1)~~((a))~~ of this section:

(i) Determine the total number of full-time equivalent substitute days per year;

(ii) Calculate the quotient of full-time equivalent days determined in (b)(i) of this subsection divided by ~~((180))~~ one hundred eighty rounded to ~~((two))~~ one decimal place~~((s))~~ for each year.

(c) No more than 1.0 year may be accumulated in any traditional nine-month academic year or any twelve-month period.

(i) Accumulate, for each year, ~~((professional education))~~ certificated employment calculated in (a)(iii) and (b)(ii) of this subsection.

(ii) Determine the smaller of the result in (c)(i) of this subsection or ~~((1.00))~~ 1.0 for each year.

(d) Determine certificated years of experience as the accumulation of all years of ~~((professional education))~~ certificated employment calculated in (c)(ii) of this subsection and report such years rounded to one decimal place.

REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 392-121-255 Definition—Academic credits.

WAC 392-121-257 Definition—In-service credits.

WAC 392-121-259 Definition—Nondegree credits.

WAC 392-121-261 Definition—Total eligible credits.

WAC 392-121-262 Definition—Additional criteria for all credits.

WAC 392-121-266 Definition—LEAP salary allocation documents.

WAC 392-121-270 Placement of certificated instructional employees on LEAP salary allocation documents.

WAC 392-121-280 Placement on LEAP salary allocation documents—Documentation required.

WAC 392-121-295 Definition—District average certificated instructional staff mix factor.

WAC 392-121-299 Determination of district average certificated instructional staff salary for the purpose of apportionment.

WSR 21-24-063
PERMANENT RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Economic Services Administration)
(Division of Child Support)

[Filed November 29, 2021, 5:54 p.m., effective December 30, 2021]

Effective Date of Rule: Thirty-one days after filing.

Purpose: This proposal will update our income imputation WAC 388-14A-3205 to align with updated federal/state standards and current division of child support practice. This proposal will also implement authorized changed [changes] to our notice of support owed process, which will increase efficiencies and improve outcomes for our clients.

Citation of Rules Affected by this Order: New WAC 388-14A-3331; and amending WAC 388-14A-3205, 388-14A-3300, 388-14A-3302, 388-14A-3310, 388-14A-3311, 388-14A-3312, 388-14A-3316, 388-14A-3330, and 388-14A-6300.

Statutory Authority for Adoption: RCW 26.09.105, 26.23.110, 74.04.055, 74.08.090, 74.20.040, and 74.20A-310.

Adopted under notice filed as WSR 21-20-024 on September 24, 2021.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 1, Amended 9, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 1, Amended 9, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 1, Amended 9, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 1, Amended 9, Repealed 0.

Date Adopted: November 29, 2021.

Katherine I. Vasquez
Rules Coordinator

AMENDATORY SECTION (Amending WSR 11-12-006, filed 5/19/11, effective 6/19/11)

WAC 388-14A-3205 How does DCS calculate my income? (1) The division of child support (DCS) calculates a parent's income using the best available information. If a parent is voluntarily unemployed or underemployed, either DCS or the administrative law judge (ALJ), or both may impute

income to that parent. Voluntary underemployment or unemployment is determined based upon the parent's assets, residence, employment and earnings history, job skills, educational attainment, literacy, health, age, criminal record, dependency court obligations, and other employment barriers, record of seeking work, the local job market, the availability of employers willing to hire the parent, the prevailing earnings level in the local community, or any other relevant factors. Income is not imputed for an unemployable parent. Income is also not imputed to a parent to the extent the parent is unemployed or significantly underemployed due to the parent's efforts to comply with court-ordered reunification efforts under chapter 13.34 RCW or under a voluntary placement agreement with an agency supervising the child.

(2) In the absence of records of a parent's actual earnings, either DCS ((and/or)) or the administrative law judge (ALJ), or both may impute a parent's income under RCW 26.19.071 (6) in the following order of priority:

(a) Full-time earnings at the current rate of pay;
(b) Full-time earnings at the historical rate of pay based on reliable information, such as employment security department data;

(c) Full-time earnings at a past rate of pay where information is incomplete or sporadic;

(d) ((Full-time)) Earnings of thirty-two hours per week at minimum wage in the jurisdiction where the parent resides if the parent ((has a recent history of minimum wage earnings,)) is on or recently coming off ((public assistance, disability lifeline benefits)) temporary assistance for needy families or recently coming off aged, blind, or disabled assistance benefits, pregnant women assistance benefits, essential needs and housing support, supplemental security income, or disability, has recently been released from incarceration, or is a ((high school student or)) recent high school graduate. Imputation at thirty-two hours per week under this subsection is a rebuttable presumption; ((or))

(e) Full-time earnings at minimum wage in the jurisdiction where the parent resides if the parent has a recent history of minimum wage earnings, has never been employed and has no earnings history, or has no significant earnings history; or

(f) Median net monthly income of year-round full-time workers as derived from the United States bureau of census, current population reports.

((2)) (3) When a parent is currently enrolled in high school full-time, either DCS or the ALJ, or both may consider the totality of the circumstances of both parents when determining whether each parent is voluntarily unemployed or voluntarily underemployed. If the parent who is enrolled in high school is determined to be voluntarily unemployed or voluntarily underemployed, either DCS or the ALJ, or both may impute earnings of twenty hours per week at minimum wage in the jurisdiction where the parent resides. Imputation of earnings at twenty hours per week under this subsection is a rebuttable presumption.

(4) DCS and the ALJ impute ((full-time)) earnings of thirty-two hours per week at the minimum wage to a TANF recipient in the absence of actual income information. You may rebut the imputation of income if you are excused from being required to work while receiving TANF, because:

(a) You are either engaged in other qualifying WorkFirst activities which do not generate income, such as job search; or

(b) You are excused or exempt from being required to work in order to receive TANF, because of other barriers such as family violence or mental health issues.

AMENDATORY SECTION (Amending WSR 11-12-006, filed 5/19/11, effective 6/19/11)

WAC 388-14A-3300 How does the division of child support require me to make my support payments to the Washington state support registry when my support order says to pay someone else? (1) If a support order requires the noncustodial parent (NCP) to pay support to anywhere other than the Washington state support registry (WSSR), the division of child support (DCS) may serve a notice on the NCP telling the NCP to make all future payments to the WSSR.

(2) DCS determines which notice to serve on the NCP as provided in WAC 388-14A-3302 and elsewhere in this chapter.

(3) When DCS serves a notice of support debt under RCW 74.20A.040 or a notice of support owed under RCW 26.23.110, DCS notifies the ~~((other party to))~~ person entitled to receive the support as well as the payee under the order if appropriate. See WAC 388-14A-3315.

AMENDATORY SECTION (Amending WSR 11-22-116, filed 11/2/11, effective 12/3/11)

WAC 388-14A-3302 How does the division of child support decide what notice to serve when there is already an existing order for child support? (1) When the division of child support (DCS) serves a notice under WAC 388-14A-3300 to advise a noncustodial parent (NCP) that DCS is enforcing a support order, DCS may serve a notice of support debt, a notice of support debt and registration, a notice of support owed, or any other appropriate notice as provided in this chapter.

(2) If the support order sets the amount of the support obligation in a sum certain amount, DCS may serve a notice of support debt on the NCP as provided in RCW 74.20A.040 and WAC 388-14A-3304.

(3) If DCS is registering a support order or income-withholding order issued in another state, DCS may serve a notice of support debt and registration on the NCP, as provided in RCW 26.21A.500, 26.21A.540 and WAC 388-14A-7100.

(4) Under RCW 26.23.110, DCS may serve a notice of support owed on an NCP or a custodial parent (CP), as appropriate, if the underlying support order:

(a) Does not state the monthly support obligation as a fixed dollar amount stated in U.S. dollars;

(b) Contains an escalation clause or adjustment provision for which additional information not contained in the support order is needed to determine the fixed dollar amount of the support debt or the fixed dollar amount of the current and future support obligation, or both;

(c) Provides that the NCP is responsible for a portion of nonmedical expenses incurred on behalf of the child, but does not reduce the amount owed to a fixed dollar amount; or

(d) Provides that either the NCP or the custodial parent (CP) must provide medical support as provided under either RCW 26.19.105 or 74.20A.300, but does not reduce the medical support obligation to a fixed dollar amount.

(5) As of the effective date of this section, DCS does not serve a notice of support owed under RCW 26.23.110 to determine the NCP's proportionate share of any nonmedical expenses other than daycare or child care expenses incurred on behalf of the child(ren) covered by the order.

(6) The fact that an NCP or CP's request that DCS act on his or her claim for unreimbursed nonmedical expenses is rejected by DCS does not mean that the NCP or CP cannot pursue reimbursement of those expenses by proceeding in court.

(a) If a CP obtains a judgment for unreimbursed non-medical expenses, DCS may enforce the judgment if the CP qualifies for services under WAC 388-14A-2000.

(b) If DCS served a notice of support owed to determine the NCP's proportionate share of nonmedical expenses at some time before the effective date of this section and either NCP or CP requests an annual review under RCW 26.23.110, DCS may continue to provide annual reviews for the support order which was the subject of the prior notice of support owed but only for the same nonmedical expenses addressed in the prior notice of support owed.

(7) See WAC 388-14A-3310 for the general rules for a notice of support owed.

(a) WAC 388-14A-3311 describes the procedures for service of a notice of support owed to:

(i) Determine the fixed dollar amount of the support debt or the fixed dollar amount of the current and future support obligation;

(ii) Implement an escalation clause or adjustment provision;

(iii) Convert a support order set in foreign currency using the current rate of exchange to fix the amount of support in U.S. dollars; or

(iv) Determine as a sum certain the NCP's proportionate share of daycare or child care expenses paid by the NCP.

(b) WAC 388-14A-3312 describes the procedures for service of a notice of support owed to establish a parent's share of medical expenses and/or medical support owed for the child or children covered by a support order.

(c) WAC 388-14A-3330 describes the procedures for service of a notice of support owed when DCS conducts an annual review of the amounts determined by an order resulting from a previous notice of support owed.

(8) WAC 388-14A-3307 discusses how DCS proceeds when DCS decides that a determination of controlling order under chapter 26.21A RCW is required. Under that section, DCS may serve a notice of support debt and registration as provided in WAC 388-14A-7100.

(9) WAC 388-14A-3315 provides that:

(a) When DCS serves a notice of support debt or a notice of support owed on the NCP, DCS notifies the CP and the payee under the order, if the CP is not the payee under the order; and

(b) When DCS serves a notice of support owed under WAC 388-14A-3312 on the CP, DCS notifies the NCP.

AMENDATORY SECTION (Amending WSR 20-03-024, filed 1/6/20, effective 4/1/20)

WAC 388-14A-3310 What notice does the division of child support serve to establish a fixed dollar amount under an existing child support order? (1) The division of child support (DCS) may serve a notice of support owed under RCW 26.23.110 on either the noncustodial parent (NCP) or the custodial parent (CP) whenever it is necessary to establish a fixed dollar amount owed under a child support order that was entered in Washington or by any other tribunal. This section provides general information regarding the notice of support owed.

(a) WAC 388-14A-3311 describes the procedures for service of a notice of support owed on the NCP to determine the fixed dollar amount of the support debt or the fixed dollar amount of the current and future support obligation(~~(, including:~~

~~(i) The NCP's proportionate share of daycare or child care expenses incurred on behalf of the child or children; and~~

~~(ii) Converting a support order set in foreign currency using the current rate of exchange to fix the amount of support in U.S. dollars, if necessary; and)) for nonmedical expenses.~~

(b) WAC 388-14A-3312 describes the procedures for service of a notice of support owed on either parent to establish that parent's share of medical expenses or medical support, or both, owed for the child or children covered by a support order.

(2) The notice of support owed contains an initial finding, showing DCS' calculation of the fixed dollar amount of:

- (a) The current and future support obligation;
- (b) Any support debt owed; or
- (c) Both amounts.

(3) The notice of support owed facilitates enforcement of the underlying support order by implementing the terms of the order, but it cannot modify the terms of the order.

(4) The reasons that DCS may serve a notice of support owed include, but are not limited to:

(a) The underlying support order sets a support obligation but does not state the monthly support obligation as a fixed dollar amount;

(b) The underlying support order sets a support obligation stated in foreign currency and DCS seeks to convert that amount using the current rate of exchange to fix the amount of support stated in U.S. dollars;

(c) DCS is implementing the adjustment or escalation provision of a court order;

(d) The support order provides that the NCP is responsible for paying for a portion of daycare or child care expenses incurred on behalf of the child or children, but does not reduce the amount owed to a fixed dollar amount. DCS serves the notice of support owed to determine the NCP's proportionate share of those expenses; or

(e) The support order provides that either the NCP or the CP must provide medical support as required under either RCW 26.19.105 or 74.20A.300, but does not reduce the medical support obligation to a fixed dollar amount.

(5) ~~((Because of the different purposes for which DCS may serve a notice of support owed under RCW 26.23.110;))~~

DCS ~~((has developed two))~~ uses four separate forms to use for the notice of support owed:

(a) The basic form used by DCS to establish a fixed dollar amount owed by an NCP under an existing child support order is called the notice of support owed. The notice of support owed is also used to notify parties of an annual review of amounts owed established by a previous notice of support owed.

(b) ~~((DCS developed a special form called))~~ The "notice of support owed - Medical support" ~~((which))~~ is used ~~((only))~~ for the following purposes:

(i) To notify an obligated parent of the obligation to pay a portion of the premium for health insurance provided by the other parent or state of Washington; or

(ii) To determine a fixed dollar amount for uninsured medical expenses incurred on behalf of the child or children and to demand payment of the obligated parent's proportionate share when a support order requires the obligated parent to pay a specific percentage of uninsured medical expenses.

(iii) To determine the amounts owed in an annual review of the amounts established by a previous notice of support owed-Medical support.

(c) The notice of support owed-Daycare establishment is used to establish a daycare obligation for past-due and current and future daycare when the underlying order provides that daycare expenses must be determined by a percentage stated in the underlying order.

(d) The notice of support owed-Daycare annual review is used to review daycare expenses established by a previous notice of support owed-Daycare establishment or notice of support owed-Daycare annual review and to determine current and future daycare obligation subsequent to the effective period of the previous notice of support owed that addressed a daycare obligation.

(6) For the purposes of this chapter, the term "notice of support owed" includes "notice of support owed," ~~((and))~~ "notice of support owed - Medical support~~((-))~~," "notice of support owed-Daycare establishment," and "notice of support owed-Daycare annual review."

(7) DCS serves ~~((a))~~ an initial notice of support owed on the NCP or the CP, as appropriate, like a summons in a civil action or by certified mail, return receipt requested.

(8) ~~((WAC 388-14A-3315 provides that;))~~ When DCS serves a notice of support owed on one party, DCS notifies the other party to the support order by sending a form called the notice to payee, and encloses a copy of the notice.

(a) If DCS is serving a notice of support owed on the NCP, DCS mails the notice to payee to the CP and to the payee under the order, if the CP is not the payee under the order.

(b) If DCS is serving a notice of support owed on the CP, DCS mails the notice to payee to the NCP.

(9) If the order resulting from a previous notice of support owed included a statement that subsequent notices of support owed to review the amounts will be served in regular mail, DCS may serve a subsequent notice of support owed by regular mail to the parties at their last known mailing addresses on file with the department.

(10) If the previous notice of support owed does not include a statement that a subsequent notice of support owed

may be mailed by first class mail, DCS must serve the notice of support owed in the same manner as an initial notice of support owed.

(11) See WAC 388-14A-3330 for procedures used by DCS for annual review of an obligation established by a prior notice of support owed.

(12) In a notice of support owed, DCS includes:

(a) The information required by RCW 26.23.110;

(b) Any provision or factors contained in the underlying order regarding how to calculate the monthly support or the amounts claimed for medical support;

(c) Any other information not contained in the order that DCS used to calculate the amounts in the notice; and

(d) Notice of the right to request an annual review of the order or a review on the date given in the order for an annual review, if any. WAC 388-14A-3330 describes the procedures for the annual review of a notice of support owed; and

(e) Notice that a subsequent notice of support owed for an annual review of the amounts established by the notice of support owed may be served by regular mail to each party at their last known address.

~~((10))~~ (13) A notice of support owed fully and fairly informs the parties of the rights and responsibilities in this section.

~~((11))~~ (14) After service of a notice of support owed, the recipient of the notice (which could be either the CP or the NCP, as appropriate,) must make all support payments required by the notice to the Washington state support registry (WSSR). DCS does not credit payments made to any other party after service of a notice of support owed except as provided in WAC 388-14A-3375.

~~((12))~~ (15) The need to serve a notice of support owed does not require DCS to cease all enforcement actions on a case. At any time, DCS may enforce:

(a) A fixed or minimum dollar amount for monthly support stated in the court order or a prior administrative order entered under this section;

(b) Any part of a support debt that has been reduced to a fixed dollar amount by a court or administrative order; and

(c) Any part of a support debt that neither party claims is incorrect.

~~((13))~~ (16) A notice of support owed becomes final and subject to immediate income withholding and enforcement as provided in WAC 388-14A-3316.

~~((14))~~ (17) An objection or request for hearing on a notice of support owed may be timely or untimely:

(a) WAC 388-14A-3317 discusses what happens if a parent makes a timely request for hearing; and

(b) WAC 388-14A-3318 discusses what happens if a parent makes an untimely request for hearing.

~~((15))~~ (18) WAC 388-14A-3320 provides general information regarding an administrative hearing on a notice of support owed.

~~((16))~~ (19) WAC 388-14A-3330 provides information regarding the annual review of a notice of support owed.

~~((17))~~ (20) For the purposes of this section and WAC 388-14A-3311 through ~~((388-14A-3330))~~ 388-14A-3331, the term "payee" includes "physical custodian," "custodial parent," or "party seeking reimbursement."

AMENDATORY SECTION (Amending WSR 11-12-006, filed 5/19/11, effective 6/19/11)

WAC 388-14A-3311 How does DCS prepare a notice of support owed to determine amounts owed to establish a fixed dollar amount under an existing child support order? (1) The division of child support (DCS) serves a notice of support owed under RCW 26.23.110, WAC 388-14A-3310 and this section on the noncustodial parent (NCP) to determine the fixed dollar amount of the support debt, the fixed dollar amount of the current and future support obligation, or both.

(2) DCS may serve a notice of support owed on the NCP to determine the fixed dollar amount of the current and future support obligation when a support order provides that the NCP's support obligation is:

(a) A certain percentage of the NCP's gross or net earnings;

(b) Set as a sum-certain amount, but the amount is to be paid other than monthly; or

(c) To be determined by some other formula or method requiring the use of information that is not contained in the order, including currency conversion when DCS is enforcing a support order which sets the support amount in a foreign currency.

(3) DCS may serve a notice of support owed-Daycare establishment on the NCP to determine the amount of the NCP's share of daycare or child care expenses for the children when the support order sets the NCP's obligation as a percentage or proportion of those expenses. A custodial parent (CP) seeking reimbursement for daycare or childcare expenses for the ~~((child(ren)))~~ child or children must:

(a) Apply for full collection services at the time of the request, unless the CP already has an open full collection case with DCS;

(b) Have paid the daycare or child care expenses before seeking reimbursement through DCS;

(c) Provide proof of payment of those expenses;

(d) Complete the forms provided by DCS for the claim, or at a minimum present the required information and documentation in a format similar to that in the DCS forms; and

(e) Declare under penalty of perjury that he or she has asked the NCP to pay his or her share of the daycare or child care expenses or provide good cause for not asking the NCP for payment.

(4) DCS' denial of a request from either the CP or the NCP to serve a notice of support owed under this section does not affect either party's ability to bring an action in another tribunal to enforce a claim for the other party's proportionate share of expenses paid for the children. Either party may file an action in court to:

(a) Make a claim for reimbursement of daycare or childcare expenses;

(b) Make a claim for reimbursement of any other child rearing expenses; or

(c) Seek any other kind of relief against the other party.

(5) DCS may serve a notice of support owed under this section on the NCP to implement an escalation clause or adjustment provision for which additional information not contained in the support order is needed to determine the

fixed dollar amount of the support debt or the fixed dollar amount of the current and future support obligation.

(6) Whenever DCS serves a notice of support owed on the NCP under subsections (2), (3) or (5) above, that notice may also include a determination of the fixed dollar amount of:

- (a) Any support debt owing;
- (b) Any amount paid by the NCP that exceeds his or her actual current and future support obligation; and
- (c) Any amount paid by the NCP that exceeds his or her actual share of day care or child care expenses.

(7) If DCS is preparing a notice of support owed as part of an annual review, the notice may also include a determination of the fixed dollar amount of:

- (a) Any support debt owed by the NCP; and
- (b) Any amounts calculated under an order resulting from a previous notice of support owed that exceed the NCP's actual obligation after actual income or expenses are considered.

(8) If the notice of support owed contains a determination that the amount owed by the NCP under the previous notice of support owed (if any) is more than his or her actual current and future support obligation or his or her actual share of expenses, the notice addresses how the difference may be credited or repaid, in the absence of an agreement between the parties.

(a) Any overpayment may be applied as an offset to non-assistance child support arrears owed by the NCP on that case only.

(b) If there is no nonassistance debt owed on the case, the reimbursement must be in the form of a credit against the NCP's future child support obligation:

- (i) Spread equally over a twelve-month period starting the month after the administrative order becomes final; or
- (ii) In a case where the underlying order provides that the NCP's support obligation will end in less than twelve months, spread equally over the remaining life of the order.

(9) In a notice of support owed under this section, DCS includes:

- (a) The information required by RCW 26.23.110 and WAC 388-14A-3110;
- (b) A description of any provisions or factors contained in the underlying order regarding how to calculate the monthly support obligation or the amounts claimed for non-medical expenses; and
- (c) Any other information not contained in the order that DCS used to calculate the amounts in the notice.

(10) See WAC 388-14A-3330 for additional procedures used by DCS for an annual review of the amounts established by a notice of support owed.

AMENDATORY SECTION (Amending WSR 19-02-017, filed 12/21/18, effective 1/21/19)

WAC 388-14A-3312 The division of child support serves a notice of support owed to establish a fixed dollar amount owed by either parent for medical support. (1) Depending on the specific requirements of the child support order, and only if the case meets the criteria set out in WAC (~~388-14A-4111~~) 388-14A-4100, the division of child sup-

port (DCS) may serve a notice of support owed under RCW 26.23.110, WAC 388-14A-3310 and this section:

(a) On either the noncustodial parent (NCP) or the custodial parent (CP), as appropriate, in order to:

(i) Establish as a sum certain and collect the obligated parent's proportionate share of uninsured medical expenses owed to the parent seeking reimbursement. This process is called reimbursement of uninsured medical expenses;

(ii) Establish as a sum certain and collect the obligated parent's monthly payment toward the premium currently being paid by the other parent for health care coverage for a child named in the support order; or

(iii) Establish and collect amounts owed under both subsections (a)(i) and (a)(ii) of this section.

(b) On the NCP in order to establish as a sum certain and collect the NCP's monthly payment toward the premium paid by the state for managed care coverage for a child named in the support order, if the child receives public health care coverage in the state of Washington, whether or not there is an assignment of rights.

(2) Unless otherwise specified in the order, each parent's proportionate share of uninsured medical expenses and health care premiums is the same as the proportionate share of income shown on the Washington state child support schedule worksheet that was completed as part of the support order.

(a) On occasion, a tribunal may specify that medical support obligations are to be shared between the parents at a different percentage than the one on the worksheet.

(b) DCS follows the terms of the underlying order when serving a notice of support owed under this section.

(3) WAC 388-14A-4111 and 388-14A-4112 set out some of the reasons why DCS may decline a party's request to enforce a medical support obligation.

(4) Only a CP who is both a parent of the child and a party to the support order may ask DCS to serve a notice of support owed on the NCP under subsection (1)(a) of this section. If the CP is not both a parent of the child and a party to the support order, DCS' denial of the request does not affect the CP's ability to bring an action in another tribunal to enforce the CP's claim against the NCP for medical support. The CP may file an action in court to:

(a) Make a claim for reimbursement of uninsured medical expenses;

(b) Make a claim for a monthly contribution toward any health care coverage provided by the CP; or

(c) Seek both kinds of relief against the NCP.

(5) DCS may serve a notice of support owed on the NCP under subsection (1)(b) of this section without regard to the CP's status as a parent or party to the order, if the child receives public health care coverage in the state of Washington, whether or not there is an assignment of rights.

(6) Except as limited in subsection (4) above, either the NCP or the CP may ask DCS to serve a notice of support owed on the other party to the support order in order to establish the obligated parent's proportionate share of uninsured medical expenses as a sum certain amount if the support order establishes such an obligation. The parent seeking reimbursement for uninsured medical expenses must:

(a) Apply for full collection services at the time of the request, unless the parent already has an open full collection case with DCS;

(b) Have paid the uninsured medical expenses before seeking reimbursement through DCS;

(c) Provide proof of payment of at least five hundred dollars in uninsured medical expenses;

(d) Complete the forms provided by DCS for the claim, or at a minimum present the required information and documentation in a format similar to that in the DCS forms; and

(e) Declare under penalty of perjury that he or she has asked the obligated parent to pay his or her share of the uninsured medical expenses or provide good cause for not asking the obligated parent.

(i) If the uninsured medical expenses have been incurred within the last twelve months, this requirement is waived; and

(ii) If the obligated party denies having received notice that the other party was seeking reimbursement for uninsured medical expenses or support, the service of the notice of support owed constitutes the required notice.

(7) A party's request that DCS serve a notice of support owed to establish the other parent's obligation for medical support, including reimbursement for uninsured medical expenses:

(a) May be for a period of up to twenty-four consecutive months;

(b) May include only medical services provided after July 21, 2007;

(c) May not include months which were included in a prior notice of support owed for medical support or a prior judgment;

(d) Need not be for the twenty-four month period immediately following the period included in the prior notice of support owed for medical support;

(e) May include a claim for the obligated parent's proportionate share of any health care coverage premiums paid by the requesting parent after July 21, 2007, but this type of claim is limited as provided in subsections (11) and (12) of this section; and

(f) May include a request that DCS establish a monthly payment toward the premium representing the obligated parent's proportionate share of the premium paid by the requesting parent only for premiums paid for health care coverage provided after September 30, 2009.

(8) The party seeking reimbursement must ask DCS to serve a notice of support owed for medical support within two years of the date that the uninsured medical expense or premium was incurred.

(a) The fact that a request that DCS serve a notice of support owed for medical support is denied, either in whole or in part, does not mean that the party cannot pursue reimbursement of those uninsured medical expenses by proceeding in court.

(b) If a party obtains a judgment for reimbursement of uninsured medical expenses or other type of medical support, DCS enforces the judgment.

(9) When either party asks DCS to serve a notice of support owed under this section to establish the other party's proportionate share of uninsured medical expenses as a sum cer-

tain amount and the medical expenses include premiums for health care coverage for the children covered by the order, DCS reviews the order to determine whether it provides for a monthly payment toward the premium when the obligated parent does not have insurance available through his or her employer or union.

(a) If the order does not have such a requirement, DCS includes the health care coverage premiums in the claim for reimbursement of uninsured medical expenses, but limits the obligated parent's obligation as provided in subsections (11) and (12) of this section.

(b) If the order does have such a requirement, DCS serves a notice of support owed which:

(i) Includes the health care coverage premiums in the claim for reimbursement of uninsured medical expenses; and

(ii) If appropriate, includes the provisions necessary to establish a monthly contribution which represents the obligated parent's proportionate share of the premium paid by the other parent (not to exceed twenty-five percent of the obligated parent's basic support obligation), if the obligated parent is not already providing health care coverage for the children.

(10) There are two circumstances under which DCS may serve a notice of support owed to establish the amount owed by an obligated parent as a monthly payment toward the premium paid for coverage by the other parent or the state. DCS may serve the notice of support owed when the support order:

(a) Specifically provides that the obligated parent's medical support obligation under RCW 26.09.105 (1)(c) is to pay a monthly payment toward the premium instead of providing health care coverage, but does not set that obligation as a sum certain; or

(b) Provides that, if health insurance is not available through the obligated parent's employer or union at a cost not to exceed twenty-five percent of the obligated parent's basic support obligation, the obligated parent must pay a monthly payment toward the premium but does not set that obligation as a sum certain. In this situation, DCS serves the notice of support owed to establish a monthly payment toward the premium paid only if the obligated parent is not already providing coverage for the children.

(11) DCS may collect a maximum of twenty-five percent of the obligated parent's basic support obligation for medical premium costs claimed by the requesting party.

(12) DCS may not collect for medical premium costs claimed by the requesting party through either the monthly payment toward the premium or the reimbursement of uninsured medical expenses if the obligated parent is providing accessible health care coverage for the child. The obligated parent is only required to pay those costs if he or she is not providing accessible health care coverage for the child.

(13) Once DCS serves a notice of support owed under this section that establishes a medical support obligation representing the obligated parent's proportionate share of the premium paid by the other parent, the obligated parent is not required to reimburse the other parent for any amounts of that proportionate share of the premium which are not paid because those amounts exceed twenty-five percent of the obligated parent's basic support obligation.

(a) That portion of the obligated parent's proportionate share of the premium for a month that is not included in the obligated parent's monthly payment toward the premium may not be recovered by a later claim for unreimbursed medical expenses; and

(b) The obligation to contribute a proportionate share of other uninsured medical expenses is not affected by the establishment of a medical support obligation for medical premiums paid by the requesting parent under this section.

(14) Once DCS serves a notice of support owed under this section that establishes a monthly payment toward the premium which represents the NCP's proportionate share of the premium paid by the state, the NCP is not required to reimburse the state for any amounts of that proportionate share of the premium which are not paid because those amounts exceed twenty-five percent of the NCP's basic support obligation.

(15) An NCP who wants DCS to enforce the CP's medical support obligation must first apply for full child support enforcement services.

(a) DCS enforces a CP's medical support obligation only as provided under WAC 388-14A-4112.

(b) If the parties already have an open full enforcement case with DCS, DCS opens up a new case which is called the medical support case, and the previously existing case is called the main case.

(c) If the parties do not already have an open full enforcement case with DCS, DCS opens two cases:

(i) The case where DCS is acting on NCP's request to enforce CP's medical support obligation is called the medical support case; and

(ii) The case where DCS is enforcing the underlying support order and collecting from the NCP is called the main case.

(16) In a notice of support owed under this section, DCS includes the information required by RCW 26.23.110, and:

(a) The factors stated in the order regarding medical support;

(b) A statement of uninsured medical expenses and a declaration by the parent seeking reimbursement; and

(c) Any other information not contained in the order that DCS used to calculate the amounts in the notice.

(17) Whenever DCS serves a notice of support owed under this section, that notice may also include a determination of the fixed dollar amount of:

(a) Any medical support debt owed by the obligated parent;

(b) Any amounts owed by the obligated parent under a previous notice of support owed that exceed the obligated parent's actual monthly obligation to pay a proportionate share of the premium after actual expenses or updated proportionate shares owed are considered, but not to exceed twenty-five percent of the obligated parent's basic support obligation; and

(c) Any amounts owed by the obligated parent under a previous notice of support owed that are less than the obligated parent's actual monthly obligation to pay a proportionate share of the premium after actual expenses or updated proportionate shares owed are considered, but not to exceed

twenty-five percent of the obligated parent's basic support obligation.

(18) If the notice of support owed contains a determination that the order resulting from a previous notice of support owed calculated a medical support obligation that differed from the obligated parent's actual obligation after actual expenses or updated proportionate shares owed are considered, the notice may address how any difference may be credited or repaid in the absence of any agreement between the parties.

(19) If the obligated parent is the NCP, any amounts owed under a previous notice of support owed exceeding the actual obligation after actual expenses or updated proportionate shares owed are considered in the final administrative order are added to the NCP's support debt.

(a) Amounts owed to the CP are added to the unassigned arrears on the case.

(b) Amounts owed to reimburse the state for medicaid or other public health care coverage in the state of Washington are added to the main case as permanently assigned arrears.

(20) If the obligated parent is the CP, any amounts owed under a previous notice of support owed exceeding the actual obligation after actual expenses are considered in the final administrative order are paid in the following order:

(a) Any amount owed by the CP to the NCP is applied as an offset to any nonassistance child support arrears owed by the NCP on the main case only; or

(b) If there is no debt owed to the CP on the main case, payment of the amount owed by the CP is in the form of a credit against the NCP's future child support obligation:

(i) Spread equally over a twelve-month period starting the month after the administrative order becomes final; or

(ii) When the future support obligation will end under the terms of the order in less than twelve months, spread equally over the life of the order.

(c) If the amount owed by the CP exceeds the amount that can be paid off using the methods specified in subsections (a) and (b) of this section, DCS uses the medical support case to collect the remaining amounts owed using the remedies available to DCS for collecting child support debts.

(21) If both the CP and the NCP request that DCS serve a notice of support owed under this section on the other party, those notices remain separate and may not be combined.

(a) The office of administrative hearings (OAH) may schedule consecutive hearings but may not combine the matters under the same docket number.

(b) The administrative law judge (ALJ) must issue two separate administrative orders, one for each obligated parent.

(22) ~~((DCS does not serve a second or subsequent notice of support owed under this section on an obligated parent until the party seeking reimbursement once again meets the conditions set forth in))~~ See WAC 388-14A-3330 for additional procedures used by DCS for an annual review of the amounts established by a notice of support owed.

AMENDATORY SECTION (Amending WSR 11-12-006, filed 5/19/11, effective 6/19/11)

WAC 388-14A-3316 When can a notice of support owed become a final order? (1) The division of child sup-

port (DCS) may serve a notice of support owed on either the noncustodial parent (NCP) or the custodial parent (CP), as described in WAC 388-14A-3310, 388-14A-3311, and 388-14A-3312.

(2) The notice of support owed becomes a final administrative order subject to immediate income withholding and enforcement without further notice under chapters 26.18, 26.23, 74.20, and 74.20A RCW unless one of the parties, no matter which one was served with the notice, contacts DCS within the time limits provided in this section and:

- (a) Objects to the notice;
 - (b) Requests a hearing;
 - (c) Negotiates and signs an agreed settlement as provided in WAC 388-14A-3600; or
 - (d) Obtains a stay from the superior court.
- (3) DCS treats any objection to the notice of support owed as a request for hearing on the notice.

(4) If a timely objection is filed, DCS cannot enforce the contested amounts claimed in the notice of support owed until a final order as defined in this section is entered.

(a) WAC 388-14A-3317 discusses what happens if a party makes a timely objection or request for hearing on a notice of support owed.

(b) Even after a timely objection, DCS may still enforce those parts of the support obligation listed in WAC 388-14A-3310(10).

(5) To be timely, the party must object within the following time limits:

- (a) Within twenty days of service, if the notice was served in Washington state.
- (b) Within sixty days of service, if the notice was served outside of Washington state.

(6) The effective date of an objection or hearing request is the date that DCS receives the objection or request for hearing.

(7) After a timely request for hearing, the final order is one of the following, whichever occurs latest:

- (a) An agreed settlement or consent order under WAC 388-14A-3600; or
- (b) A final order as defined in WAC 388-14A-6105 and further described in WAC 388-14A-6115.

(8) WAC 388-14A-3318 describes what happens when a party makes an untimely request for hearing on a notice of support owed.

(9) RCW 26.23.110 provides that if a party who receives a notice of support owed does not initiate an action in superior court and serve notice on DCS and on the other party to the support order within twenty days after service of the notice, that party is considered to have made an election of remedies. This means that the party (either the CP or the NCP) must exhaust the administrative remedies under chapter 26.23 RCW before bringing a court action to challenge the notice.

AMENDATORY SECTION (Amending WSR 11-12-006, filed 5/19/11, effective 6/19/11)

WAC 388-14A-3330 What are the procedures for the annual review of a notice of support owed? (1) RCW 26.23.110 provides for an annual review of the support order

which was previously the subject of a notice of support owed under that statute if the division of child support (DCS), the noncustodial parent (NCP), or the custodial parent (CP) requests a review.

(a) Either the CP or the NCP may request an annual review of the support order (~~(; even though RCW 26.23.110 mentions only the NCP).~~)

(b) DCS may request an annual review of the support order but has no duty to do so.

(2) For purposes of chapter 388-14A WAC, an "annual review of a support order" is defined as:

(a) The collection by DCS of necessary information from CP and NCP;

(b) The service of a notice of support owed under WAC 388-14A-3310, 388-14A-3311, or 388-14A-3312; and

(c) The determination of arrears and current support amount with an effective date which is at least twelve months after the date the last notice of support owed, or the last administrative order or decision based on a notice of support owed, became a final administrative order.

(3) A notice of support owed may be prepared and served sooner than twelve months after the date the last notice of support owed, or the last administrative order or decision based on a notice of support owed, became a final administrative order, but the amounts determined under the notice of support owed may not be effective sooner than twelve months after that date unless the notice of support owed resulted from an accelerated review under WAC 388-14A-3331.

(4) For the purpose of this section, the terms "payee" and "CP" are interchangeable, and can mean either the payee under the order or the person with whom the child resides the majority of the time.

(5) For purposes of chapter 388-14A WAC, the following rules apply to an "annual review of a support order" for a notice of support owed served under WAC 388-14A-3312:

(a) Either the CP or the NCP may be the party seeking reimbursement, so long as the CP is both a party to the order and a parent of the ~~((child(ren)))~~ child or children for whom the expenses were incurred.

(b) The party seeking reimbursement must provide proof of payment of at least five hundred dollars in uninsured medical expenses for services provided in the last twenty-four months.

(c) At least twelve months must have passed since:

(i) The date the last notice of support owed for unreimbursed medical expenses on behalf of the party seeking reimbursement became a final order; or

(ii) The last administrative order or decision based on a notice of support owed for unreimbursed medical expenses on behalf of that party became a final administrative order.

(6) WAC 388-14A-3310(1) describes the different types of notice of support owed which are served by DCS. In the event that DCS has served more than one type of notice of support owed on the same case, each notice of support owed has its own twelve-month cycle for annual review.

(7) For purposes of this section, the twelve-month cycle for annual review runs separately for the NCP and for the CP, depending on which one is the party seeking reimbursement.

(8) DCS serves the notice for an annual review on both parties by regular mail to each party's last known address if the order resulting from the prior notice of support owed included a statement that subsequent notices of support owed to review the amounts will be served by regular mail.

NEW SECTION

WAC 388-14A-3331 What are the procedures for the accelerated review of a notice of support owed for day-care expenses? (1) RCW 26.23.110 provides for an accelerated review of the amounts established by a prior notice of support owed if the division of child support (DCS), the non-custodial parent (NCP), or the custodial parent (CP) requests a review.

(a) Either the CP or the NCP may request an accelerated review of the support order.

(b) DCS may request an accelerated review of the support order but has no duty to do so.

(2) For purposes of chapter 388-14A WAC, an "accelerated review of a support order" is defined as:

(a) A review of the daycare expenses established under a prior notice of support owed;

(b) The collection by DCS of necessary information from CP and NCP;

(c) The service of a notice of support owed to review the amounts determined under a previous notice of support owed; and

(d) The service of a notice of support owed less than twelve months after the effective date of the last notice of support owed or the last administrative based on a notice of support owed.

(3) DCS may accelerate the review of a notice of support owed for daycare expenses if:

(a) The CP informs DCS in writing that daycare expenses have terminated and are not expected to resume;

(b) The NCP alleges that daycare expenses have terminated and not expected to resume and the CP fails to provide documentation to indicate continuing daycare expenses;

(c) A new child support order modifies the proportionate shares of the parties' obligations that may change the NCP's daycare obligation;

(d) A child emancipates who is the subject of a current notice of support owed.

(4) A notice of support owed on an accelerated review includes a determination of the fixed dollar amount of:

(a) Any support debt owed by the NCP; and

(b) Any amounts calculated under an order resulting from the prior notice of support owed that exceed the NCP's actual obligation after actual income or expenses are considered.

(5) If the notice of support owed contains a determination that the amount owed by the NCP under the prior notice of support owed is more than his or her actual current and future support obligation or his or her actual share of expenses, the notice addresses how the difference may be credited or repaid.

(a) Any overpayment may be applied as an offset to non-assistance child support arrears owed by the NCP on that case only.

(b) If there is no nonassistance debt owed on the case, the reimbursement must be in the form of a credit against the NCP's future child support obligation:

(i) Spread equally over a twelve-month period starting the month after the administrative order becomes final; or

(ii) In a case where the underlying order provides that the NCP's support obligation will end in less than twelve months, spread equally over the remaining life of the order.

(6) In a notice of support owed under this section, DCS includes:

(a) The information required by RCW 26.23.110 and WAC 388-14A-3110;

(b) A description of any provisions or factors contained in the underlying order regarding how to calculate the monthly support obligation or the amounts claimed for day-care expenses; and

(c) Any other information not contained in the order that DCS used to calculate the amounts in the notice.

(7) An order resulting from an accelerated review of a notice of support owed is subject to the rules in chapter 388-14A WAC regarding annual review of notices of support owed.

AMENDATORY SECTION (Amending WSR 19-02-017, filed 12/21/18, effective 1/21/19)

WAC 388-14A-6300 Duty of the administrative law judge in a hearing to determine the amount of a support obligation. (1) A support order entered under this chapter must conform to the requirements set forth in RCW 26.09.105, 26.18.170, ~~((and))~~ 26.23.050, and 26.23.110. The administrative law judge (ALJ) must comply with the DSHS rules on child support and include a Washington state child support schedule worksheet when entering a support order.

(2) In hearings held under this chapter to contest a notice and finding of financial responsibility or a notice and finding of parental responsibility or other notice or petition, the ALJ must determine:

(a) The noncustodial parent's obligation to provide support under RCW 74.20A.057;

(b) The names and dates of birth of the children covered by the support order;

(c) The net monthly income of the noncustodial parent (NCP) and the other parent of the children;

(d) The NCP's share of the basic support obligation and any adjustments to that share, according to his or her circumstances;

(e) Each parent's proportionate share of costs such as uninsured medical expenses, day care and special child rearing expenses;

(f) If requested by a party, the NCP's proportionate share of costs such as uninsured medical expenses or day care expenses in a sum certain amount per month;

(g) A statement that either or both parents are obligated to provide medical support under RCW 26.09.105 and 26.18.170, as provided in subsection (3) of this section, including but not limited to notice that if proof of health care coverage or proof that the coverage is unavailable is not provided to DCS within twenty days, DCS may seek direct

enforcement through the obligated parent's employer or union without further notice to the parent;

(h) The NCP's accrued debt and order payments toward the debt in a monthly amount to be determined by the division of child support (DCS);

(i) The NCP's current and future monthly support obligation as a sum certain amount per month, and also as a "per month per child" amount if appropriate under WAC 388-14A-3200(4) and 388-14A-4800, and order payments in that amount.

(3) In determining the medical support obligation of the parents, the ALJ must:

(a) Require both parents to provide medical support for the children covered by the order. Medical support includes both:

(i) The obligation to provide health care coverage for the children:

(A) If coverage that can be extended to cover the children is or becomes available through the obligated parent's employer or union;

(B) If the obligated parent can enroll the children in public health care coverage; or

(C) ~~(To make a monthly contribution toward the premium paid for coverage by the other parent or the state)~~ When coverage is not available, to make a monthly contribution toward the premium paid for coverage by the other parent or the state; and

(ii) The obligation to pay his or her proportionate share of uninsured medical expenses.

(b) Determine whether one (but not both) of the parents should be excused from the obligation to provide coverage or contribute to a premium.

(i) The ALJ must state the reasons for excusing a parent from the coverage obligation.

(ii) The ALJ may not excuse that parent from the obligation to contribute his or her proportionate share of uninsured medical expenses.

(4) Having made the determinations required in subsection (2) above, the ALJ must order the NCP to make payments to the Washington state support registry (WSSR).

(5) The ALJ must allow DCS to orally amend the notice at the hearing to conform to the evidence. The ALJ may grant a continuance, when necessary, to allow the NCP or the CP additional time to present rebutting evidence or argument as to the amendment.

(6) The ALJ may not require DCS to produce or obtain information, documents, or witnesses to assist the NCP or CP in proof of defenses to liability. However, this rule does not apply to relevant, nonconfidential information or documents that DCS has in its possession.

(7) In a hearing held on a notice of support owed served on the NCP under WAC 388-14A-3310 or 388-14A-3311, the ALJ must comply with WAC 388-14A-3323 and 388-14A-3325 to determine, depending on what was requested in the notice:

(a) Whether a condition precedent in the order to begin or adjust the support obligation was met;

(b) The amount of monthly support as a fixed dollar amount;

(c) Any accrued arrears;

(d) Any difference between the amount calculated in the order resulting from a previous notice of support owed and the actual amount of the NCP's obligation for the period covered by the order; and

(e) The amount of the NCP's share of daycare or child care expenses for the children, including:

(i) The amount that the NCP must pay each month as his or her ongoing share of daycare or child care expenses for the children; and

(ii) The amount of NCP's accrued debt for daycare or child care expenses.

(8) In a hearing held on a notice of support owed served on either the NCP or the CP issued under WAC 388-14A-3312, the ALJ must determine either or both of the following, depending on what was requested in the notice:

(a) The amount owed by the obligated parent to the other for unreimbursed medical expenses;

(b) The monthly amount to be paid by the obligated parent as his or her proportionate share of the health care coverage premium paid by the other parent or the state.

(9) Except as provided in WAC 388-14A-3324, the ALJ does not specify how the amounts owed by the obligated parent should be paid.

(10) In the event that DCS has served a notice of support owed under WAC 388-14A-3312 on both the NCP and the CP, the ALJ must issue a separate administrative order for each notice issued, and may not set off the debts against each other.

(11) An administrative final order on a notice of support owed must include a provision that any subsequent notice of support owed created for the purposes of reviewing the amounts established by the final order may be served on any party to the order by regular mail to their last known address.

WSR 21-24-066

PERMANENT RULES

DEPARTMENT OF

LABOR AND INDUSTRIES

[Filed November 30, 2021, 8:24 a.m., effective January 1, 2022]

Effective Date of Rule: January 1, 2022.

Purpose: The purpose of this rule adoption is to establish premium rates and experience rating parameters for calendar year 2022. Washington law (RCW 51.16.035, 51.32.073, 51.18.010, and 51.04.020) requires the department of labor and industries (L&I) to adjust rates to ensure solvency of the accident, medical aid, and supplemental pension funds. RCW 51.16.035 also provides that premium rates vary by industry and degree of hazard. L&I is proposing a 3.1 percent overall average premium rate change to workers' compensation insurance premium rates beginning January 1, 2022, and adjusting each industry risk classification rate to align with expected losses.

This adoption amends the tables of classification base premium rates, experience rating plan parameters, and experience modification factor calculation limitations for the workers' compensation insurance program for calendar year

2022. Classification base rates were amended for updated loss and payroll experience.

This adoption is an attempt to minimize the economic burden on Washington employers who continue to deal with uncertainties associated with the pandemic and the global economy by adopting an overall average rate increase of 3.1 percent to ensure adequate premiums to cover expected losses for 2022 claims. This increase is far below the indicated break-even rate. This average rate increase is required to address a projected shortfall in the supplemental pension fund (a "pay as you go" fund) that pays for cost of living adjustments for all pensions. L&I is able to hold rates down for this upcoming year as a result of an ongoing effort to gradually increase the system's contingency reserve (surplus).

This adoption also amends the experience rating and retrospective rating rules (WAC 296-17-870 Evaluation of actual losses and 296-17B-530 Determining case incurred losses) to explain that all accepted claim losses resulting from a public health emergency will not be included in the determination of an employer's experience modification factor or in an employer's retrospective rating adjustment calculation. An employer will not lose their claim free discount as a result of an allowed public health emergency injury claim.

In addition, this adoption repeals WAC 296-17-89509 Classification 2103 fulfillment centers rate and adds that classification rate into the base rate rule WAC 296-17-895 Base rates.

Lastly, this adoption is also notice that the director intends to transfer the amount of the accident and medical-aid funds combined that exceed 10 percent of funded liabilities as required by RCW 51.44.023.

Citation of Rules Affected by this Order: Repealing WAC 296-17-89509 Classification 2103; and amending WAC 296-17-855 Experience modification, 296-17-870 Evaluation of actual losses, 296-17-875 Table I, 296-17-880 Table II, 296-17-885 Table III, 296-17-890 Table IV, 296-17-895 Industrial insurance accident fund base rates, stay at work and medical aid base rates by class of industry, 296-17-89502 Industrial insurance accident fund, stay at work, medical aid and supplemental pension rates by class of industry for nonhourly rated classifications, 296-17-89507 Horse racing rates, 296-17-89508 Farm internship program industrial insurance, accident fund, stay at work fund, medical aid fund, and supplemental pension by class, 296-17-920 Assessment for supplemental pension fund, 296-17B-530 Determining case incurred losses, and 296-17B-540 Determining loss incurred for each claim.

Statutory Authority for Adoption: RCW 51.16.035 (base rates), 51.32.073 (supplemental pension), 51.18.010 (retrospective rating), and 51.04.020(1) (general authority).

Adopted under notice filed as WSR 21-19-123 on September 21, 2021.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 13, Repealed 1.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 13, Repealed 1.

Date Adopted: November 30, 2021.

Joel Sacks
Director

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-855 Experience modification. The basis of the experience modification shall be a comparison of the actual losses charged to an employer during the experience period with the expected losses for an average employer reporting the same exposures in each classification. The comparison shall contain actuarial refinements designed to weigh the extent to which the actual experience is credible, due consideration being given to the volume of the employer's experience. Except for those employers who qualify for an adjusted experience modification as specified in WAC 296-17-860 or 296-17-865, the experience modification factor shall be calculated from the formula:

$$\begin{aligned} \text{EXPERIENCE MODIFICATION FACTOR} &= \frac{\text{Credible Actual Primary Loss} + \text{Credible Actual Excess Loss}}{\text{Expected Loss}} \\ \text{Where} & \\ \text{Credible Actual Primary Loss} &= \text{Actual Primary Loss} \times \text{Primary Credibility} \\ &+ \text{Expected Primary Loss} \times (100\% - \text{Primary Credibility}) \\ \text{Credible Actual Excess Loss} &= \text{Actual Excess Loss} \times \text{Excess Credibility} \\ &+ \text{Expected Excess Loss} \times (100\% - \text{Excess Credibility}) \end{aligned}$$

The meaning and function of each term in the formula is specified below.

For each claim, the actual primary loss is the first dollar portion of the claim costs, which has been shown in actuarial studies, to have the greater credibility in predicting future experience. These amounts are summed over all claims. For each claim in excess of ~~(\$20,743)~~ \$21,280 the actual primary loss shall be determined from the formula:

$$\text{Primary Loss} = \frac{((51,857)) \ 53,210}{(\text{Total Loss} + ((31,114)) \ 31,930)} \times \text{Total Loss}$$

For each claim, less than ~~(\$20,743)~~ \$21,280 the full value of the claim shall be considered a primary loss.

For each claim, the excess actual loss is the remaining portion of the claim costs, which have been shown in actuarial studies to have less credibility in predicting future experi-

ence. The excess actual loss for each claim shall be determined by subtracting the primary loss from the total loss. These amounts are summed over all claims.

For any claim without disability benefits (time loss, partial permanent disability, total permanent disability or death) either actually paid or estimated to be paid, the total actual losses for calculating the primary loss and excess loss shall first be reduced by the lesser of ~~(($\$3,340$))~~ $\$3,450$ or the total cost of the claim. Here are some examples for these claims:

Total Loss	Type of Claim	Total Loss (after deduction)	Primary Loss	Excess Loss
300	Medical Only	0	0	0
4,000	Medical Only	((660)) <u>550</u>	((660)) <u>550</u>	0
4,000	Timeloss	4,000	4,000	0
30,000	Medical Only	((26,660)) <u>26,550</u>	((23,930)) <u>24,157</u>	((2,730)) <u>2,393</u>
30,000	Timeloss	30,000	((25,456)) <u>25,776</u>	((4,544)) <u>4,224</u>
130,000	PPD	130,000	((41,842)) <u>42,718</u>	((88,158)) <u>87,282</u>
500,000	TPD Pension	((331,662)) <u>341,650</u>	((47,409)) <u>48,662</u>	((284,253)) <u>292,988</u>
2,000,000	TPD Pension	((331,662)) <u>341,650</u>	((47,409)) <u>48,662</u>	((284,253)) <u>292,988</u>

Note: The deduction, ~~(($\$3,340$))~~ $\$3,450$, is twice the average case incurred cost of these types of claims occurring during the three-year period used for experience rating. On average this results in reducing the average actual loss about seventy percent for these types of claims adjusted. This is done to help make the transition between the two different experience rating methods better by helping make the change in experience factor reasonable for small changes to the actual losses.

For each employer, the primary credibility and the excess credibility determines the percentage weight given to the corresponding actual primary losses and the actual excess losses, included in the calculation of the experience modification, based on the volume of expected losses. Primary credibility and excess credibility values are set forth in Table II.

An employer's expected losses shall be determined by summing the expected loss for each of the three years of the experience period, which are calculated by multiplying the reported exposure in each classification during the year by the corresponding classification expected loss rate and rounding the result to the nearest cent. Classification expected loss rates by year are set forth in Table III.

Expected losses in each classification shall be multiplied by the classification "Primary-Ratio" to obtain "expected primary losses" which shall be rounded to the nearest cent. Expected excess losses shall then be calculated by subtracting expected primary losses from expected total losses rounded to the nearest cent. Primary-Ratios are also set forth in Table III.

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-870 Evaluation of actual losses. (1) Except as provided in subsections (3) through (13) of this section, the actual losses for claims with a date of injury during the experience period will be evaluated on the "valuation date." Losses on claims occurring outside the experience period will not be included. The actual losses for closed claims must include:

- (a) Accident and medical aid payments; and
- (b) Pension reserve amounts paid by the accident fund; and
- (c) Accident and medical aid benefits or payments that are scheduled to be paid; and
- (d) Reserve for other accident and medical aid benefits accessible by the worker while the claim is closed.

The actual losses for claims that are open may, in addition, also include a reserve for future payments. Actual losses do not include wage subsidies or reimbursements paid by the stay-at-work program.

(2) **Valuation date.** The valuation date shall be June 1, seven months immediately preceding the effective date of premium rates.

(3) **Retroactive adjustments - Revision of losses between valuation dates.** No claim value shall be revised between valuation dates and no retroactive adjustment of an experience modification shall be made because of disputation concerning the judgment of the claims examiner or because of subsequent developments except as specifically provided in the following cases:

- (a) In cases where loss values are included or excluded through mistake other than error of judgment.
- (b) In cases where a third party recovery is made, subject to subsection (5)(a) of this section.
- (c) In cases where the claim qualifies as a second injury claim under the provisions of RCW 51.16.120.
- (d) In cases where a claim, which was previously evaluated as a compensable claim, is closed and is determined to be noncompensable (ineligible for benefits other than medical treatment).
- (e) In cases where a claim is closed and is determined to be ineligible for any benefits.

In the above specified cases retroactive adjustment of the experience modification shall be made for each rating in which the claim was included. Retroactive adjustments will not be made for rating periods more than ten years prior to the date on which the claim status was changed.

(4) **Average death value.** Each fatality occurring to a worker included within the mandatory or elective coverage of Title 51 RCW shall be assigned the "average death value." The "average death value" shall be the average incurred cost for all such fatalities occurring during the experience period. The average death value is set forth in WAC 296-17-880 (Table II).

(5) **Third-party recovery - Effect on experience modification.**

- (a) For claims with injury dates prior to July 1, 1994, a potential claim cost recovery from action against a third party, either by the injured worker or by the department, shall not be considered in the evaluation of actual losses until such

time as the third-party action has been completed. If a third-party recovery is made after a claim had previously been used in an experience modification calculation, the experience modification shall be retroactively adjusted. The department shall compute a percentage recovery by dividing the current valuation of the claim into the amount recovered or recoverable as of the recovery date, and shall reduce both primary and excess losses previously used in the experience modification calculation by that percentage.

(b) For claims with injury dates on or after July 1, 1994, if the department determines that there is a reasonable potential of recovery from an action against a third party, both primary and excess values of the claim shall be reduced by fifty percent for purposes of experience modification calculation, until such time as the third-party action has been completed. This calculation shall not be retroactively adjusted, regardless of the final outcome of the third-party action. After a third-party recovery is made, the actual percentage recovery shall be applied to future experience modification calculations.

(c) For third-party actions completed before July 1, 1996, the claim shall be credited with the department's net share of the recovery, after deducting attorney fees and costs. For third-party actions completed on or after July 1, 1996, the claim shall be credited with the department's gross share of the recovery, before deducting attorney fees and costs.

(d) Definitions:

(i) As used in this section, "recovery date" means the date the money is received at the department or the date the order confirming the distribution of the recovery becomes final, whichever comes first.

(ii) As used in this section, "recoverable" means any amount due as of the recovery date and/or any amount available to offset case reserved future benefits.

(6) **Second injury claims.** The primary and excess values of any claim which becomes eligible for second injury relief under the provisions of RCW 51.16.120, as now or hereafter amended, shall be reduced by the percentage of relief granted.

(7) **Occupational disease claims.** When a claim results from an employee's exposure to an occupational disease hazard, the "date of injury," solely for the purpose of experience rating, will be the date the claim for benefits was received by the department. The cost of any occupational disease claim, paid from the accident fund and medical aid fund and arising from exposure to the disease hazard under two or more employers, shall be prorated to each period of employment involving exposure to the hazard. Each insured employer who had employed the claimant during the experience period, and for at least ten percent of the claimant's exposure to the hazard, shall be charged for his/her share of the claim based upon the prorated costs.

(8) **Maximum claim value.** No claim shall enter an employer's experience record at a value greater than the "maximum claim value." The maximum claim value is set forth in WAC 296-17-880 (Table II).

(9) **Catastrophic losses.** Whenever a single accident results in the deaths or total permanent disability of three or more workers employed by the same employer, costs charged

to the employer's experience shall be limited as required by RCW 51.16.130.

(10) **Acts of terrorism.** Whenever any worker insured with the state fund sustains an injury or occupational disease as a result of an incident certified to be an act of terrorism under the U.S. Terrorism Risk Insurance Act of 2002, the costs of the resulting claim shall be excluded from the experience rating computation of the worker's employer.

(11) **Claims filed by preferred workers.** The costs of subsequent claims filed by certified preferred workers will not be included in experience calculations, as provided in WAC 296-16-150.

(12) **Life and rescue phase of emergencies:** This provision applies to "emergency workers" of nongovernmental employers assigned to report in classification 7205 (WAC 296-17A-7205) who assist in a life and rescue phase of a state or local emergency (disaster). The life and rescue phase of an emergency is defined in RCW 51.16.130(3) as being the first seventy-two hours after a natural or man-made disaster has occurred. For an employer to qualify for this special experience rating relief, a state or local official such as, but not limited to, the governor; a county executive; a mayor; a fire marshal; a sheriff or police chief must declare an emergency and must request help from private sector employers to assist in locating and rescuing survivors. This special relief is only applicable to nongovernmental employers during this initial seventy-two hour phase of the declared emergency unless the emergency has been extended by the official who declared the emergency. The cost of injuries or occupational disease claims filed by employees of nongovernmental employers assisting in the life and rescue phase of a declared emergency will not be charged to the experience record of the nongovernmental state fund employer.

(13) ~~((2019 Coronavirus (COVID-19)))~~ **Public health emergency claims:** All accepted ~~((COVID-19))~~ claim losses resulting from a public health emergency will not be included in the determination of an employer's experience modification factor. An employer will not lose their claim free discount as a result of an allowed ~~((COVID-19))~~ claim caused by a public health emergency during a declared public health emergency.

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-875 Table I.

Primary Losses for Selected Claim Values Effective January 1, ~~((2021))~~ 2022

TOTAL LOSS AFTER DEDUCTION	PRIMARY LOSS
5,000	5,000
10,000	10,000
15,000	15,000
((20,743))	20,743
28,963	25,000
42,706	30,000
64,602	35,000

TOTAL LOSS AFTER DEDUCTION	PRIMARY LOSS	Expected Losses		Primary Credibility	Excess Credibility
100,000	39,551	14,564	- 15,091	32%	7%
104,964	40,000	15,092	- 15,634	33%	7%
200,000	44,876	15,635	- 16,189	34%	7%
331,662 **	47,409))	16,190	- 16,755	35%	7%
<u>21,280</u>	<u>21,280</u>	16,756	- 17,333	36%	7%
<u>28,297</u>	<u>25,000</u>	17,334	- 17,926	37%	7%
<u>41,271</u>	<u>30,000</u>	17,927	- 18,539	38%	7%
<u>61,370</u>	<u>35,000</u>	18,540	- 19,163	39%	7%
<u>96,684</u>	<u>40,000</u>	19,164	- 19,807	40%	7%
<u>175,012</u>	<u>45,000</u>	19,808	- 20,470	41%	7%
<u>265,617</u>	<u>47,500</u>	20,471	- 21,156	42%	7%
<u>341,650 **</u>	<u>48,662</u>	21,157	- 21,865	43%	7%

** Maximum claim value

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-880 Table II.

PRIMARY AND EXCESS CREDIBILITY VALUES

Effective January 1, (~~2021~~) 2022

Maximum Claim Value = ((~~\$331,662~~)) \$341,650

Average Death Value = ((~~\$331,662~~)) \$341,650

Expected Losses	Primary Credibility	Excess Credibility					
((0 - 5,943	12%	7%	30,082	-	31,397	53%	7%
5,944 - 6,345	13%	7%	31,398	-	31,532	54%	7%
6,346 - 6,751	14%	7%	31,533	-	32,915	54%	8%
6,752 - 7,160	15%	7%	32,916	-	34,769	55%	8%
7,161 - 7,576	16%	7%	34,770	-	52,622	56%	8%
7,577 - 7,996	17%	7%	52,623	-	57,998	57%	8%
7,997 - 8,422	18%	7%	57,999	-	82,843	57%	9%
8,423 - 8,854	19%	7%	82,844	-	85,326	57%	10%
8,855 - 9,289	20%	7%	85,327	-	107,840	58%	10%
9,290 - 9,733	21%	7%	107,841	-	118,030	58%	11%
9,734 - 10,182	22%	7%	118,031	-	132,994	59%	11%
10,183 - 10,639	23%	7%	132,995	-	150,737	59%	12%
10,640 - 11,100	24%	7%	150,738	-	158,298	60%	12%
11,101 - 11,571	25%	7%	158,299	-	183,443	60%	13%
11,572 - 12,050	26%	7%	183,444	-	183,764	61%	13%
12,051 - 12,533	27%	7%	183,765	-	209,387	61%	14%
12,534 - 13,028	28%	7%	209,388	-	216,147	61%	15%
13,029 - 13,529	29%	7%	216,148	-	235,170	62%	15%
13,530 - 14,039	30%	7%	235,171	-	248,853	62%	16%
14,040 - 14,563	31%	7%	248,854	-	261,115	63%	16%
			261,116	-	281,559	63%	17%

Expected Losses		Primary Credibility	Excess Credibility	Expected Losses		Primary Credibility	Excess Credibility
281,560	- 287,225	64%	17%	906,276	- 935,666	83%	40%
287,226	- 313,498	64%	18%	935,667	- 936,607	84%	40%
313,499	- 314,262	64%	19%	936,608	- 967,148	84%	41%
314,263	- 339,941	65%	19%	967,149	- 968,369	84%	42%
339,942	- 346,968	65%	20%	968,370	- 997,894	85%	42%
346,969	- 366,546	66%	20%	997,895	- 1,001,074	85%	43%
366,547	- 379,675	66%	21%	1,001,075	- 1,028,856	86%	43%
379,676	- 393,323	67%	21%	1,028,857	- 1,033,781	86%	44%
393,324	- 412,381	67%	22%	1,033,782	- 1,060,027	87%	44%
412,382	- 420,273	68%	22%	1,060,028	- 1,066,487	87%	45%
420,274	- 445,082	68%	23%	1,066,488	- 1,091,415	88%	45%
445,083	- 447,395	69%	23%	1,091,416	- 1,099,192	88%	46%
447,396	- 474,690	69%	24%	1,099,193	- 1,123,020	89%	46%
474,691	- 477,788	69%	25%	1,123,021	- 1,131,896	89%	47%
477,789	- 502,162	70%	25%	1,131,897	- 1,154,846	90%	47%
502,163	- 510,496	70%	26%	1,154,847	- 1,164,603	90%	48%
510,497	- 529,812	71%	26%	1,164,604	- 1,186,892	91%	48%
529,813	- 543,201	71%	27%	1,186,893	- 1,197,306	91%	49%
543,202	- 557,642	72%	27%	1,197,307	- 1,219,162	92%	49%
557,643	- 575,906	72%	28%	1,219,163	- 1,230,014	92%	50%
575,907	- 585,653	73%	28%	1,230,015	- 1,251,659	93%	50%
585,654	- 608,612	73%	29%	1,251,660	- 1,262,719	93%	51%
608,613	- 613,846	74%	29%	1,262,720	- 1,284,386	94%	51%
613,847	- 641,317	74%	30%	1,284,387	- 1,295,423	94%	52%
641,318	- 642,227	75%	30%	1,295,424	- 1,317,344	95%	52%
642,228	- 670,793	75%	31%	1,317,345	- 1,328,128	95%	53%
670,794	- 674,022	75%	32%	1,328,129	- 1,350,535	96%	53%
674,023	- 699,548	76%	32%	1,350,536	- 1,360,834	96%	54%
699,549	- 706,728	76%	33%	1,360,835	- 1,383,963	97%	54%
706,729	- 728,491	77%	33%	1,383,964	- 1,393,539	97%	55%
728,492	- 739,433	77%	34%	1,393,540	- 1,417,629	98%	55%
739,434	- 757,631	78%	34%	1,417,630	- 1,426,245	98%	56%
757,632	- 772,138	78%	35%	1,426,246	- 1,451,537	99%	56%
772,139	- 786,962	79%	35%	1,451,538	- 1,458,949	99%	57%
786,963	- 804,844	79%	36%	1,458,950	- 1,485,689	100%	57%
804,845	- 816,490	80%	36%	1,485,690	- 1,520,089	100%	58%
816,491	- 837,547	80%	37%	1,520,090	- 1,554,738	100%	59%
837,548	- 846,218	81%	37%	1,554,739	- 1,589,638	100%	60%
846,219	- 870,254	81%	38%	1,589,639	- 1,624,794	100%	61%
870,255	- 876,145	82%	38%	1,624,795	- 1,660,207	100%	62%
876,146	- 902,961	82%	39%	1,660,208	- 1,695,882	100%	63%
902,962	- 906,275	83%	39%	1,695,883	- 1,731,818	100%	64%

Expected Losses		Primary Credibility	Excess Credibility	Expected Losses		Primary Credibility	Excess Credibility
<u>1,731,819</u>	-	<u>1,768,022</u>	100%	65%	<u>14,418</u>	=	<u>14,940</u> 32% 7%
<u>1,768,023</u>	-	<u>1,804,494</u>	100%	66%	<u>14,941</u>	=	<u>15,478</u> 33% 7%
<u>1,804,495</u>	-	<u>1,841,241</u>	100%	67%	<u>15,479</u>	=	<u>16,027</u> 34% 7%
<u>1,841,242</u>	-	<u>1,878,261</u>	100%	68%	<u>16,028</u>	=	<u>16,587</u> 35% 7%
<u>1,878,262</u>	-	<u>1,915,560</u>	100%	69%	<u>16,588</u>	=	<u>17,160</u> 36% 7%
<u>1,915,561</u>	-	<u>1,953,141</u>	100%	70%	<u>17,161</u>	=	<u>17,747</u> 37% 7%
<u>1,953,142</u>	-	<u>1,991,008</u>	100%	71%	<u>17,748</u>	=	<u>18,354</u> 38% 7%
<u>1,991,009</u>	-	<u>2,029,163</u>	100%	72%	<u>18,355</u>	=	<u>18,971</u> 39% 7%
<u>2,029,164</u>	-	<u>2,067,608</u>	100%	73%	<u>18,972</u>	=	<u>19,609</u> 40% 7%
<u>2,067,609</u>	-	<u>2,106,349</u>	100%	74%	<u>19,610</u>	=	<u>20,265</u> 41% 7%
<u>2,106,350</u>	-	<u>2,145,386</u>	100%	75%	<u>20,266</u>	=	<u>20,944</u> 42% 7%
<u>2,145,387</u>	-	<u>2,184,727</u>	100%	76%	<u>20,945</u>	=	<u>21,646</u> 43% 7%
<u>2,184,728</u>	-	<u>2,224,371</u>	100%	77%	<u>21,647</u>	=	<u>22,373</u> 44% 7%
<u>2,224,372</u>	-	<u>2,264,325</u>	100%	78%	<u>22,374</u>	=	<u>23,131</u> 45% 7%
<u>2,264,326</u>	-	<u>2,304,591</u>	100%	79%	<u>23,132</u>	=	<u>23,923</u> 46% 7%
<u>2,304,592</u>	-	<u>2,345,174</u>	100%	80%	<u>23,924</u>	=	<u>24,751</u> 47% 7%
<u>2,345,175</u>	-	<u>2,386,079</u>	100%	81%	<u>24,752</u>	=	<u>25,626</u> 48% 7%
<u>2,386,080</u>	-	<u>2,427,302</u>	100%	82%	<u>25,627</u>	=	<u>26,554</u> 49% 7%
<u>2,427,303</u>	-	<u>2,468,857</u>	100%	83%	<u>26,555</u>	=	<u>27,541</u> 50% 7%
<u>2,468,858</u>	-	<u>2,510,738</u>	100%	84%	<u>27,542</u>	=	<u>28,610</u> 51% 7%
<u>2,510,739</u>	-	<u>2,552,960</u>	100%	85%	<u>28,611</u>	=	<u>29,780</u> 52% 7%
<u>2,552,961</u>	-	<u>and higher</u>	100%	86%))	<u>29,781</u>	=	<u>31,083</u> 53% 7%
<u>0</u>	=	<u>5,884</u>	12%	7%	<u>31,084</u>	=	<u>31,217</u> 54% 7%
<u>5,885</u>	=	<u>6,282</u>	13%	7%	<u>31,218</u>	=	<u>32,586</u> 54% 8%
<u>6,283</u>	=	<u>6,683</u>	14%	7%	<u>32,587</u>	=	<u>34,421</u> 55% 8%
<u>6,684</u>	=	<u>7,088</u>	15%	7%	<u>34,422</u>	=	<u>52,096</u> 56% 8%
<u>7,089</u>	=	<u>7,500</u>	16%	7%	<u>52,097</u>	=	<u>57,418</u> 57% 8%
<u>7,501</u>	=	<u>7,916</u>	17%	7%	<u>57,419</u>	=	<u>82,015</u> 57% 9%
<u>7,917</u>	=	<u>8,338</u>	18%	7%	<u>82,016</u>	=	<u>84,473</u> 57% 10%
<u>8,339</u>	=	<u>8,765</u>	19%	7%	<u>84,474</u>	=	<u>106,762</u> 58% 10%
<u>8,766</u>	=	<u>9,196</u>	20%	7%	<u>106,763</u>	=	<u>116,850</u> 58% 11%
<u>9,197</u>	=	<u>9,636</u>	21%	7%	<u>116,851</u>	=	<u>131,664</u> 59% 11%
<u>9,637</u>	=	<u>10,080</u>	22%	7%	<u>131,665</u>	=	<u>149,230</u> 59% 12%
<u>10,081</u>	=	<u>10,533</u>	23%	7%	<u>149,231</u>	=	<u>156,715</u> 60% 12%
<u>10,534</u>	=	<u>10,989</u>	24%	7%	<u>156,716</u>	=	<u>181,609</u> 60% 13%
<u>10,990</u>	=	<u>11,455</u>	25%	7%	<u>181,610</u>	=	<u>181,926</u> 61% 13%
<u>11,456</u>	=	<u>11,929</u>	26%	7%	<u>181,927</u>	=	<u>207,293</u> 61% 14%
<u>11,930</u>	=	<u>12,408</u>	27%	7%	<u>207,294</u>	=	<u>213,986</u> 61% 15%
<u>12,409</u>	=	<u>12,898</u>	28%	7%	<u>213,987</u>	=	<u>232,818</u> 62% 15%
<u>12,899</u>	=	<u>13,394</u>	29%	7%	<u>232,819</u>	=	<u>246,364</u> 62% 16%
<u>13,395</u>	=	<u>13,899</u>	30%	7%	<u>246,365</u>	=	<u>258,504</u> 63% 16%
<u>13,900</u>	=	<u>14,417</u>	31%	7%	<u>258,505</u>	=	<u>278,743</u> 63% 17%

Expected Losses		Primary Credibility	Excess Credibility	Expected Losses		Primary Credibility	Excess Credibility		
<u>278,744</u>	=	<u>284,353</u>	<u>64%</u>	<u>17%</u>	<u>897,213</u>	=	<u>926,309</u>	<u>83%</u>	<u>40%</u>
<u>284,354</u>	=	<u>310,363</u>	<u>64%</u>	<u>18%</u>	<u>926,310</u>	=	<u>927,241</u>	<u>84%</u>	<u>40%</u>
<u>310,364</u>	=	<u>311,119</u>	<u>64%</u>	<u>19%</u>	<u>927,242</u>	=	<u>957,477</u>	<u>84%</u>	<u>41%</u>
<u>311,120</u>	=	<u>336,542</u>	<u>65%</u>	<u>19%</u>	<u>957,478</u>	=	<u>958,685</u>	<u>84%</u>	<u>42%</u>
<u>336,543</u>	=	<u>343,498</u>	<u>65%</u>	<u>20%</u>	<u>958,686</u>	=	<u>987,915</u>	<u>85%</u>	<u>42%</u>
<u>343,499</u>	=	<u>362,881</u>	<u>66%</u>	<u>20%</u>	<u>987,916</u>	=	<u>991,063</u>	<u>85%</u>	<u>43%</u>
<u>362,882</u>	=	<u>375,878</u>	<u>66%</u>	<u>21%</u>	<u>991,064</u>	=	<u>1,018,567</u>	<u>86%</u>	<u>43%</u>
<u>375,879</u>	=	<u>389,390</u>	<u>67%</u>	<u>21%</u>	<u>1,018,568</u>	=	<u>1,023,443</u>	<u>86%</u>	<u>44%</u>
<u>389,391</u>	=	<u>408,257</u>	<u>67%</u>	<u>22%</u>	<u>1,023,444</u>	=	<u>1,049,427</u>	<u>87%</u>	<u>44%</u>
<u>408,258</u>	=	<u>416,070</u>	<u>68%</u>	<u>22%</u>	<u>1,049,428</u>	=	<u>1,055,822</u>	<u>87%</u>	<u>45%</u>
<u>416,071</u>	=	<u>440,631</u>	<u>68%</u>	<u>23%</u>	<u>1,055,823</u>	=	<u>1,080,501</u>	<u>88%</u>	<u>45%</u>
<u>440,632</u>	=	<u>442,921</u>	<u>69%</u>	<u>23%</u>	<u>1,080,502</u>	=	<u>1,088,200</u>	<u>88%</u>	<u>46%</u>
<u>442,922</u>	=	<u>469,943</u>	<u>69%</u>	<u>24%</u>	<u>1,088,201</u>	=	<u>1,111,790</u>	<u>89%</u>	<u>46%</u>
<u>469,944</u>	=	<u>473,010</u>	<u>69%</u>	<u>25%</u>	<u>1,111,791</u>	=	<u>1,120,577</u>	<u>89%</u>	<u>47%</u>
<u>473,011</u>	=	<u>497,140</u>	<u>70%</u>	<u>25%</u>	<u>1,120,578</u>	=	<u>1,143,298</u>	<u>90%</u>	<u>47%</u>
<u>497,141</u>	=	<u>505,391</u>	<u>70%</u>	<u>26%</u>	<u>1,143,299</u>	=	<u>1,152,957</u>	<u>90%</u>	<u>48%</u>
<u>505,392</u>	=	<u>524,514</u>	<u>71%</u>	<u>26%</u>	<u>1,152,958</u>	=	<u>1,175,023</u>	<u>91%</u>	<u>48%</u>
<u>524,515</u>	=	<u>537,769</u>	<u>71%</u>	<u>27%</u>	<u>1,175,024</u>	=	<u>1,185,333</u>	<u>91%</u>	<u>49%</u>
<u>537,770</u>	=	<u>552,066</u>	<u>72%</u>	<u>27%</u>	<u>1,185,334</u>	=	<u>1,206,970</u>	<u>92%</u>	<u>49%</u>
<u>552,067</u>	=	<u>570,147</u>	<u>72%</u>	<u>28%</u>	<u>1,206,971</u>	=	<u>1,217,714</u>	<u>92%</u>	<u>50%</u>
<u>570,148</u>	=	<u>579,796</u>	<u>73%</u>	<u>28%</u>	<u>1,217,715</u>	=	<u>1,239,142</u>	<u>93%</u>	<u>50%</u>
<u>579,797</u>	=	<u>602,526</u>	<u>73%</u>	<u>29%</u>	<u>1,239,143</u>	=	<u>1,250,092</u>	<u>93%</u>	<u>51%</u>
<u>602,527</u>	=	<u>607,708</u>	<u>74%</u>	<u>29%</u>	<u>1,250,093</u>	=	<u>1,271,542</u>	<u>94%</u>	<u>51%</u>
<u>607,709</u>	=	<u>634,904</u>	<u>74%</u>	<u>30%</u>	<u>1,271,543</u>	=	<u>1,282,469</u>	<u>94%</u>	<u>52%</u>
<u>634,905</u>	=	<u>635,805</u>	<u>75%</u>	<u>30%</u>	<u>1,282,470</u>	=	<u>1,304,171</u>	<u>95%</u>	<u>52%</u>
<u>635,806</u>	=	<u>664,085</u>	<u>75%</u>	<u>31%</u>	<u>1,304,172</u>	=	<u>1,314,847</u>	<u>95%</u>	<u>53%</u>
<u>664,086</u>	=	<u>667,282</u>	<u>75%</u>	<u>32%</u>	<u>1,314,848</u>	=	<u>1,337,030</u>	<u>96%</u>	<u>53%</u>
<u>667,283</u>	=	<u>692,553</u>	<u>76%</u>	<u>32%</u>	<u>1,337,031</u>	=	<u>1,347,226</u>	<u>96%</u>	<u>54%</u>
<u>692,554</u>	=	<u>699,661</u>	<u>76%</u>	<u>33%</u>	<u>1,347,227</u>	=	<u>1,370,123</u>	<u>97%</u>	<u>54%</u>
<u>699,662</u>	=	<u>721,206</u>	<u>77%</u>	<u>33%</u>	<u>1,370,124</u>	=	<u>1,379,604</u>	<u>97%</u>	<u>55%</u>
<u>721,207</u>	=	<u>732,039</u>	<u>77%</u>	<u>34%</u>	<u>1,379,605</u>	=	<u>1,403,453</u>	<u>98%</u>	<u>55%</u>
<u>732,040</u>	=	<u>750,055</u>	<u>78%</u>	<u>34%</u>	<u>1,403,454</u>	=	<u>1,411,983</u>	<u>98%</u>	<u>56%</u>
<u>750,056</u>	=	<u>764,417</u>	<u>78%</u>	<u>35%</u>	<u>1,411,984</u>	=	<u>1,437,022</u>	<u>99%</u>	<u>56%</u>
<u>764,418</u>	=	<u>779,092</u>	<u>79%</u>	<u>35%</u>	<u>1,437,023</u>	=	<u>1,444,360</u>	<u>99%</u>	<u>57%</u>
<u>779,093</u>	=	<u>796,796</u>	<u>79%</u>	<u>36%</u>	<u>1,444,361</u>	=	<u>1,470,832</u>	<u>100%</u>	<u>57%</u>
<u>796,797</u>	=	<u>808,325</u>	<u>80%</u>	<u>36%</u>	<u>1,470,833</u>	=	<u>1,504,888</u>	<u>100%</u>	<u>58%</u>
<u>808,326</u>	=	<u>829,172</u>	<u>80%</u>	<u>37%</u>	<u>1,504,889</u>	=	<u>1,539,191</u>	<u>100%</u>	<u>59%</u>
<u>829,173</u>	=	<u>837,756</u>	<u>81%</u>	<u>37%</u>	<u>1,539,192</u>	=	<u>1,573,742</u>	<u>100%</u>	<u>60%</u>
<u>837,757</u>	=	<u>861,551</u>	<u>81%</u>	<u>38%</u>	<u>1,573,743</u>	=	<u>1,608,546</u>	<u>100%</u>	<u>61%</u>
<u>861,552</u>	=	<u>867,384</u>	<u>82%</u>	<u>38%</u>	<u>1,608,547</u>	=	<u>1,643,605</u>	<u>100%</u>	<u>62%</u>
<u>867,385</u>	=	<u>893,931</u>	<u>82%</u>	<u>39%</u>	<u>1,643,606</u>	=	<u>1,678,923</u>	<u>100%</u>	<u>63%</u>
<u>893,932</u>	=	<u>897,212</u>	<u>83%</u>	<u>39%</u>	<u>1,678,924</u>	=	<u>1,714,500</u>	<u>100%</u>	<u>64%</u>

Expected Losses	Primary Credibility	Excess Credibility	((Class	2017	2018	2019	Primary- Ratio
<u>1,714,501</u> = <u>1,750,342</u>	<u>100%</u>	<u>65%</u>	212	0.6227	0.5615	0.4778	0.429
<u>1,750,343</u> = <u>1,786,449</u>	<u>100%</u>	<u>66%</u>	214	1.1910	1.0690	0.9014	0.414
<u>1,786,450</u> = <u>1,822,829</u>	<u>100%</u>	<u>67%</u>	217	0.8693	0.7837	0.6668	0.454
<u>1,822,830</u> = <u>1,859,478</u>	<u>100%</u>	<u>68%</u>	219	0.6124	0.5484	0.4606	0.463
<u>1,859,479</u> = <u>1,896,404</u>	<u>100%</u>	<u>69%</u>	301	0.6696	0.6087	0.5257	0.463
<u>1,896,405</u> = <u>1,933,610</u>	<u>100%</u>	<u>70%</u>	302	1.4908	1.3360	1.1241	0.406
<u>1,933,611</u> = <u>1,971,098</u>	<u>100%</u>	<u>71%</u>	303	1.3693	1.2341	1.0502	0.412
<u>1,971,099</u> = <u>2,008,871</u>	<u>100%</u>	<u>72%</u>	306	0.5495	0.4943	0.4184	0.447
<u>2,008,872</u> = <u>2,046,932</u>	<u>100%</u>	<u>73%</u>	307	0.6495	0.5846	0.4954	0.477
<u>2,046,933</u> = <u>2,085,286</u>	<u>100%</u>	<u>74%</u>	308	0.4652	0.4224	0.3638	0.515
<u>2,085,287</u> = <u>2,123,932</u>	<u>100%</u>	<u>75%</u>	403	1.3286	1.1954	1.0128	0.486
<u>2,123,933</u> = <u>2,162,880</u>	<u>100%</u>	<u>76%</u>	502	0.6913	0.6193	0.5207	0.468
<u>2,162,881</u> = <u>2,202,127</u>	<u>100%</u>	<u>77%</u>	504	1.4947	1.3563	1.1689	0.409
<u>2,202,128</u> = <u>2,241,682</u>	<u>100%</u>	<u>78%</u>	507	2.1186	1.9338	1.6836	0.401
<u>2,241,683</u> = <u>2,281,545</u>	<u>100%</u>	<u>79%</u>	508	0.8573	0.7707	0.6525	0.361
<u>2,281,546</u> = <u>2,321,722</u>	<u>100%</u>	<u>80%</u>	509	0.6272	0.5619	0.4718	0.369
<u>2,321,723</u> = <u>2,362,218</u>	<u>100%</u>	<u>81%</u>	510	1.7101	1.5566	1.3487	0.414
<u>2,362,219</u> = <u>2,403,029</u>	<u>100%</u>	<u>82%</u>	511	0.9681	0.8724	0.7406	0.460
<u>2,403,030</u> = <u>2,444,168</u>	<u>100%</u>	<u>83%</u>	512	0.9268	0.8392	0.7195	0.455
<u>2,444,169</u> = <u>2,485,631</u>	<u>100%</u>	<u>84%</u>	513	0.6384	0.5752	0.4887	0.448
<u>2,485,632</u> = <u>2,527,430</u>	<u>100%</u>	<u>85%</u>	514	0.9120	0.8250	0.7050	0.467
<u>2,527,431</u> and higher	<u>100%</u>	<u>86%</u>	516	1.0725	0.9683	0.8263	0.446

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-885 Table III.

Expected Loss Rates and Primary Ratios
by Risk Classification and Fiscal Year

Expected Loss Rates in Dollars Per Worker Hour
Effective January 1, (~~2021~~) 2022

((Class	2017	2018	2019	Primary- Ratio
601	0.7485	0.6747	0.5739	0.417
603	0.9666	0.8764	0.7541	0.421
604	0.6700	0.6032	0.5120	0.415
605	0.8109	0.7340	0.6285	0.494
606	1.8604	1.6904	1.4603	0.465
607	0.6967	0.6280	0.5339	0.417
608	0.6700	0.6032	0.5120	0.415
609	0.5068	0.4608	0.3980	0.403
701	1.4681	1.3206	1.1188	0.366
702	1.3730	1.2338	1.0434	0.371
710	0.6135	0.5540	0.4724	0.410
801	0.7485	0.6747	0.5739	0.417
803	0.9666	0.8764	0.7541	0.421
804	0.6700	0.6032	0.5120	0.415
805	0.8109	0.7340	0.6285	0.494
806	1.8604	1.6904	1.4603	0.465
807	0.6967	0.6280	0.5339	0.417
808	0.6700	0.6032	0.5120	0.415
812	0.5068	0.4608	0.3980	0.403
901	1.4681	1.3206	1.1188	0.366
902	1.3730	1.2338	1.0434	0.371
910	0.6135	0.5540	0.4724	0.410
1001	0.7485	0.6747	0.5739	0.417
1003	0.9666	0.8764	0.7541	0.421
1004	0.6700	0.6032	0.5120	0.415
1005	0.8109	0.7340	0.6285	0.494
1006	1.8604	1.6904	1.4603	0.465
1007	0.6967	0.6280	0.5339	0.417
1008	0.6700	0.6032	0.5120	0.415
1012	0.5068	0.4608	0.3980	0.403
1001	1.4681	1.3206	1.1188	0.366
1002	1.3730	1.2338	1.0434	0.371
1007	0.6135	0.5540	0.4724	0.410

((Class	2017	2018	2019	Primary- Ratio	((Class	2017	2018	2019	Primary- Ratio
1101	0.8929	0.8047	0.6847	0.471	2905	0.3874	0.3509	0.3009	0.515
1102	1.2289	1.1050	0.9366	0.412	2906	0.4135	0.3784	0.3296	0.483
1103	0.7955	0.7139	0.6026	0.472	2907	0.3759	0.3406	0.2920	0.531
1104	0.4789	0.4348	0.3743	0.481	2908	0.7728	0.7004	0.6001	0.524
1105	0.6170	0.5543	0.4684	0.495	2909	0.3367	0.3093	0.2722	0.455
1106	0.2927	0.2653	0.2276	0.538	3101	0.6317	0.5692	0.4833	0.490
1108	0.3485	0.3168	0.2732	0.500	3102	0.2285	0.2057	0.1740	0.461
1109	1.2721	1.1477	0.9790	0.443	3103	0.2970	0.2695	0.2320	0.438
1301	0.4882	0.4376	0.3684	0.492	3104	0.5190	0.4698	0.4022	0.517
1303	0.3082	0.2758	0.2314	0.539	3105	0.6847	0.6242	0.5407	0.495
1304	0.0162	0.0146	0.0124	0.506	3303	0.3069	0.2775	0.2371	0.521
1305	0.4126	0.3695	0.3105	0.487	3304	0.5563	0.5055	0.4361	0.514
1401	0.2174	0.1998	0.1763	0.472	3309	0.3402	0.3080	0.2641	0.502
1404	0.6156	0.5546	0.4719	0.512	3402	0.3902	0.3526	0.3008	0.506
1405	0.5290	0.4768	0.4051	0.506	3403	0.1123	0.1014	0.0862	0.490
1407	0.5343	0.4805	0.4073	0.528	3404	0.3728	0.3362	0.2857	0.531
1501	0.6503	0.5822	0.4891	0.490	3405	0.2345	0.2119	0.1806	0.492
1507	0.3889	0.3515	0.2999	0.517	3406	0.2339	0.2106	0.1786	0.566
1701	0.6012	0.5422	0.4618	0.442	3407	0.5908	0.5332	0.4545	0.459
1702	0.9373	0.8432	0.7142	0.322	3408	0.2031	0.1814	0.1518	0.544
1703	0.6434	0.5774	0.4874	0.400	3409	0.1489	0.1345	0.1150	0.550
1704	0.6012	0.5422	0.4618	0.442	3410	0.1489	0.1345	0.1150	0.550
1801	0.3401	0.3063	0.2600	0.418	3411	0.4186	0.3762	0.3180	0.472
1802	0.5441	0.4900	0.4160	0.418	3412	0.5104	0.4572	0.3843	0.448
2002	0.6175	0.5593	0.4798	0.470	3414	0.6158	0.5533	0.4682	0.488
2004	0.4401	0.3959	0.3346	0.552	3415	0.7434	0.6705	0.5713	0.477
2007	0.5783	0.5249	0.4523	0.456	3501	0.4588	0.4182	0.3622	0.495
2008	0.2979	0.2707	0.2337	0.511	3503	0.2597	0.2346	0.2003	0.518
2009	0.3105	0.2816	0.2419	0.522	3506	0.6425	0.5805	0.4957	0.444
2101	0.5008	0.4559	0.3944	0.501	3509	0.3523	0.3179	0.2707	0.540
2102	0.5599	0.5069	0.4345	0.481	3510	0.2936	0.2673	0.2311	0.499
2103	0.9189	0.8197	0.6847	0.563	3511	0.6319	0.5740	0.4949	0.463
2104	0.3180	0.2915	0.2548	0.555	3512	0.2959	0.2683	0.2298	0.565
2105	0.5345	0.4788	0.4021	0.527	3513	0.3682	0.3351	0.2894	0.514
2106	0.4602	0.4164	0.3566	0.502	3602	0.0853	0.0770	0.0655	0.533
2201	0.2875	0.2606	0.2242	0.523	3603	0.4042	0.3671	0.3163	0.483
2202	0.4658	0.4218	0.3614	0.467	3604	0.5747	0.5232	0.4523	0.473
2203	0.4343	0.3948	0.3404	0.525	3605	0.3902	0.3526	0.3008	0.506
2204	0.2875	0.2606	0.2242	0.523	3701	0.2285	0.2057	0.1740	0.461
2401	0.3739	0.3354	0.2831	0.453	3702	0.3007	0.2724	0.2334	0.502
2903	0.5528	0.5035	0.4362	0.508	3708	0.4795	0.4361	0.3768	0.469
2904	0.5663	0.5130	0.4398	0.425	3802	0.1691	0.1540	0.1334	0.482

((Class	2017	2018	2019	Primary- Ratio	((Class	2017	2018	2019	Primary- Ratio
3808	0.3233	0.2921	0.2494	0.474	4905	0.3162	0.2886	0.2509	0.551
3901	0.1238	0.1123	0.0963	0.581	4906	0.0923	0.0827	0.0695	0.543
3902	0.3951	0.3584	0.3080	0.537	4907	0.0523	0.0477	0.0411	0.599
3903	0.3081	0.2795	0.2403	0.537	4908	0.0765	0.0696	0.0598	0.578
3905	0.1130	0.1029	0.0890	0.566	4909	0.0306	0.0279	0.0239	0.578
3906	0.4060	0.3688	0.3180	0.521	4910	0.3862	0.3484	0.2966	0.496
3909	0.2234	0.2024	0.1735	0.555	4911	0.0452	0.0410	0.0350	0.442
4101	0.2075	0.1874	0.1600	0.519	5001	5.9922	5.4424	4.7016	0.358
4103	0.4630	0.4206	0.3629	0.497	5002	0.4835	0.4341	0.3661	0.523
4107	0.1648	0.1482	0.1255	0.502	5003	1.6646	1.4985	1.2734	0.394
4108	0.1326	0.1198	0.1024	0.533	5004	0.7760	0.7132	0.6289	0.402
4109	0.1649	0.1510	0.1320	0.496	5005	0.7130	0.6424	0.5463	0.382
4201	0.6307	0.5635	0.4714	0.443	5006	0.8863	0.7993	0.6811	0.360
4301	0.7521	0.6844	0.5919	0.525	5101	0.7391	0.6624	0.5576	0.443
4302	0.6180	0.5597	0.4799	0.501	5103	0.6605	0.5997	0.5161	0.503
4304	0.8942	0.8201	0.7199	0.505	5106	0.6605	0.5997	0.5161	0.503
4305	0.9181	0.8217	0.6901	0.497	5108	0.6685	0.5991	0.5041	0.534
4401	0.3069	0.2775	0.2371	0.521	5109	0.4075	0.3658	0.3079	0.491
4402	0.5520	0.4959	0.4190	0.522	5201	0.2495	0.2245	0.1897	0.547
4404	0.3571	0.3235	0.2773	0.496	5204	0.7556	0.6783	0.5730	0.423
4501	0.1486	0.1337	0.1134	0.578	5206	0.3409	0.3094	0.2664	0.416
4502	0.0521	0.0472	0.0403	0.485	5207	0.1270	0.1154	0.0994	0.547
4504	0.0965	0.0872	0.0744	0.589	5208	0.5469	0.4955	0.4247	0.482
4802	0.3687	0.3356	0.2906	0.507	5209	0.5095	0.4586	0.3882	0.492
4803	0.3432	0.3134	0.2721	0.557	5300	0.0813	0.0731	0.0617	0.559
4804	0.5007	0.4575	0.3984	0.518	5301	0.0268	0.0242	0.0208	0.490
4805	0.3307	0.3017	0.2619	0.525	5302	0.0071	0.0064	0.0054	0.528
4806	0.0978	0.0893	0.0775	0.588	5305	0.0377	0.0340	0.0289	0.545
4808	0.3888	0.3535	0.3054	0.463	5306	0.0362	0.0326	0.0277	0.582
4809	0.2323	0.2114	0.1828	0.490	5307	0.5701	0.5099	0.4278	0.500
4810	0.2048	0.1865	0.1614	0.559	5308	0.0778	0.0705	0.0604	0.570
4811	0.4203	0.3850	0.3365	0.517	6103	0.0799	0.0726	0.0624	0.585
4812	0.3904	0.3542	0.3047	0.506	6104	0.3379	0.3051	0.2601	0.545
4813	0.2007	0.1840	0.1607	0.559	6105	0.4142	0.3718	0.3135	0.480
4814	0.1112	0.1024	0.0903	0.557	6107	0.1138	0.1040	0.0898	0.637
4815	0.2287	0.2110	0.1869	0.571	6108	0.2375	0.2157	0.1853	0.576
4816	0.3113	0.2876	0.2551	0.513	6109	0.0897	0.0804	0.0675	0.519
4900	0.0921	0.0829	0.0701	0.452	6110	0.3512	0.3150	0.2652	0.520
4901	0.0337	0.0303	0.0255	0.476	6120	0.2498	0.2245	0.1898	0.514
4902	0.0833	0.0750	0.0637	0.524	6121	0.3333	0.2980	0.2496	0.525
4903	0.1388	0.1244	0.1049	0.535	6201	0.3870	0.3484	0.2955	0.493
4904	0.0137	0.0124	0.0105	0.556	6202	0.6428	0.5798	0.4929	0.521

((Class	2017	2018	2019	Primary- Ratio	((Class	2017	2018	2019	Primary- Ratio
6203	0.0951	0.0871	0.0759	0.620	6705	0.5904	0.5382	0.4661	0.573
6204	0.1294	0.1169	0.0999	0.571	6706	0.2113	0.1933	0.1685	0.512
6205	0.1606	0.1452	0.1240	0.526	6707	12.9247	11.6029	9.7842	0.664
6206	0.1822	0.1642	0.1393	0.576	6708	8.1066	7.5046	6.6810	0.485
6207	0.8689	0.7875	0.6774	0.489	6709	0.2098	0.1900	0.1625	0.548
6208	0.2261	0.2059	0.1782	0.594	6801	0.5706	0.5017	0.4073	0.557
6209	0.2433	0.2224	0.1934	0.539	6802	0.7085	0.6341	0.5324	0.552
6301	0.1059	0.0953	0.0808	0.473	6803	0.4198	0.3752	0.3141	0.374
6303	0.0425	0.0384	0.0325	0.520	6804	0.2387	0.2153	0.1830	0.557
6305	0.0828	0.0748	0.0636	0.578	6809	3.3970	3.0978	2.6741	0.564
6306	0.2847	0.2559	0.2162	0.554	6901	0.0175	0.0174	0.0166	0.787
6308	0.0485	0.0437	0.0371	0.495	6902	0.6801	0.6161	0.5296	0.411
6309	0.1723	0.1559	0.1333	0.535	6903	4.0915	3.7086	3.1895	0.343
6402	0.2271	0.2057	0.1761	0.571	6904	0.8427	0.7526	0.6291	0.473
6403	0.1252	0.1130	0.0962	0.577	6905	0.6377	0.5691	0.4744	0.509
6404	0.2731	0.2488	0.2155	0.533	6906	0.2495	0.2390	0.2247	0.619
6405	0.4830	0.4347	0.3686	0.501	6907	0.7113	0.6425	0.5478	0.539
6406	0.1254	0.1132	0.0962	0.577	6908	0.2901	0.2622	0.2238	0.483
6407	0.2397	0.2165	0.1847	0.528	6909	0.1013	0.0916	0.0780	0.528
6408	0.4742	0.4292	0.3678	0.478	7100	0.0170	0.0151	0.0127	0.537
6409	0.5203	0.4682	0.3969	0.490	7101	0.0185	0.0167	0.0142	0.461
6410	0.2731	0.2451	0.2067	0.539	7103	0.7816	0.6960	0.5791	0.498
6411	0.0408	0.0371	0.0321	0.538	7104	0.0197	0.0178	0.0152	0.500
6501	0.0921	0.0824	0.0692	0.564	7105	0.0149	0.0136	0.0116	0.517
6502	0.0235	0.0212	0.0180	0.507	7106	0.2552	0.2296	0.1947	0.582
6503	0.0670	0.0596	0.0495	0.536	7107	0.3151	0.2846	0.2427	0.564
6504	0.2478	0.2265	0.1968	0.592	7108	0.2190	0.1973	0.1675	0.603
6505	0.1475	0.1333	0.1136	0.640	7109	0.0861	0.0778	0.0665	0.520
6506	0.1127	0.1017	0.0866	0.552	7110	0.3404	0.3093	0.2673	0.412
6509	0.2172	0.1975	0.1701	0.577	7111	0.2822	0.2511	0.2083	0.476
6510	0.3003	0.2706	0.2302	0.385	7112	0.6411	0.5812	0.4992	0.539
6511	0.2383	0.2161	0.1858	0.544	7113	0.3686	0.3328	0.2839	0.547
6512	0.0765	0.0690	0.0590	0.471	7114	0.6813	0.6154	0.5250	0.585
6601	0.1552	0.1411	0.1218	0.511	7115	0.4734	0.4305	0.3716	0.557
6602	0.4895	0.4456	0.3861	0.509	7116	0.3673	0.3325	0.2851	0.456
6603	0.2571	0.2316	0.1964	0.555	7117	0.9906	0.8974	0.7694	0.511
6604	0.0682	0.0616	0.0525	0.556	7118	1.4155	1.2775	1.0893	0.500
6605	0.2249	0.2028	0.1718	0.549	7119	1.4197	1.2754	1.0793	0.489
6607	0.0869	0.0791	0.0684	0.536	7120	4.5901	4.1084	3.4501	0.497
6608	0.4075	0.3640	0.3044	0.400	7121	6.3024	5.7193	4.9320	0.352
6620	2.5436	2.2688	1.8865	0.572	7122	0.3328	0.3033	0.2632	0.514
6704	0.1217	0.1092	0.0920	0.592	7200	1.5951	1.4168	1.1738	0.477

Class	2017	2018	2019	Primary Ratio	Class	2018	2019	2020	Primary Ratio
7201	1.2905	1.1514	0.9619	0.494	512	0.8808	0.7898	0.6458	0.447
7202	0.0219	0.0196	0.0165	0.527	513	0.6414	0.5720	0.4626	0.452
7203	0.0873	0.0802	0.0699	0.586	514	0.8519	0.7641	0.6251	0.459
7204	0.0000	0.0000	0.0000	0.500	516	1.0671	0.9538	0.7749	0.443
7205	0.0000	0.0000	0.0000	0.500	517	1.2373	1.1119	0.9135	0.381
7301	0.5527	0.5079	0.4470	0.465	518	0.8355	0.7440	0.5995	0.427
7302	0.6644	0.6101	0.5366	0.437	519	1.0390	0.9261	0.7482	0.439
7307	0.4695	0.4235	0.3609	0.555	521	0.4779	0.4294	0.3525	0.450
7308	0.2313	0.2105	0.1816	0.581	601	0.3761	0.3349	0.2697	0.443
7309	0.2294	0.2083	0.1791	0.585	602	0.4930	0.4353	0.3447	0.408
7400	1.8343	1.6293	1.3498	0.477))	603	0.5801	0.5152	0.4130	0.407
					604	0.7987	0.7165	0.5865	0.444
					606	0.4228	0.3754	0.3006	0.541
					607	0.5720	0.5075	0.4063	0.495
					608	0.3170	0.2804	0.2228	0.461
					701	1.3057	1.1640	0.9405	0.372
					803	0.4693	0.4166	0.3335	0.522
					901	0.8355	0.7440	0.5995	0.427
					1002	0.5999	0.5364	0.4359	0.430
					1003	0.5061	0.4504	0.3627	0.485
					1004	0.3205	0.2832	0.2246	0.468
					1005	6.3853	5.6789	4.5694	0.418
					1006	0.1721	0.1529	0.1228	0.531
					1007	0.2395	0.2135	0.1726	0.457
					1101	0.9395	0.8343	0.6688	0.497
					1102	1.2456	1.1092	0.8943	0.398
					1103	0.8256	0.7327	0.5865	0.479
					1104	0.4933	0.4422	0.3612	0.489
					1105	0.6563	0.5822	0.4654	0.502
					1106	0.2968	0.2660	0.2171	0.538
					1108	0.3555	0.3192	0.2618	0.503
					1109	1.3799	1.2349	1.0059	0.429
					1301	0.4819	0.4287	0.3445	0.470
					1303	0.3049	0.2697	0.2142	0.528
					1304	0.0152	0.0135	0.0109	0.505
					1305	0.3958	0.3512	0.2811	0.478
					1401	0.2477	0.2244	0.1874	0.495
					1404	0.6067	0.5414	0.4384	0.518
					1405	0.5591	0.4972	0.3997	0.523
					1407	0.5350	0.4761	0.3832	0.522
					1501	0.6846	0.6063	0.4832	0.497
					1507	0.3850	0.3434	0.2777	0.523
Class	2018	2019	2020	Primary Ratio					
101	0.7342	0.6551	0.5303	0.415					
103	0.9369	0.8429	0.6940	0.417					
104	0.6350	0.5660	0.4572	0.412					
105	0.7935	0.7098	0.5777	0.491					
106	1.7238	1.5562	1.2904	0.452					
107	0.6721	0.5994	0.4846	0.420					
108	0.6350	0.5660	0.4572	0.412					
112	0.5180	0.4658	0.3830	0.411					
201	1.5008	1.3380	1.0811	0.372					
202	1.3704	1.2204	0.9840	0.397					
210	0.6178	0.5529	0.4504	0.396					
212	0.6096	0.5454	0.4439	0.439					
214	1.1725	1.0412	0.8341	0.418					
217	0.8085	0.7216	0.5843	0.444					
219	0.5662	0.5028	0.4029	0.464					
301	0.7059	0.6338	0.5195	0.478					
302	1.4900	1.3247	1.0645	0.402					
303	1.3056	1.1681	0.9508	0.411					
306	0.5356	0.4778	0.3866	0.441					
307	0.6141	0.5479	0.4431	0.474					
308	0.4604	0.4138	0.3399	0.513					
403	1.2552	1.1165	0.8979	0.478					
502	0.6672	0.5910	0.4711	0.475					
504	1.4020	1.2601	1.0353	0.406					
507	2.1128	1.9125	1.5942	0.389					
508	0.9382	0.8346	0.6715	0.367					
509	0.6220	0.5525	0.4430	0.357					
510	1.6857	1.5183	1.2529	0.413					
511	0.9550	0.8496	0.6832	0.470					

<u>Class</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>Primary</u> <u>Ratio</u>	<u>Class</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>Primary</u> <u>Ratio</u>
<u>1701</u>	<u>0.6107</u>	<u>0.5463</u>	<u>0.4446</u>	<u>0.425</u>	<u>3407</u>	<u>0.6066</u>	<u>0.5409</u>	<u>0.4373</u>	<u>0.468</u>
<u>1702</u>	<u>0.9116</u>	<u>0.8119</u>	<u>0.6549</u>	<u>0.318</u>	<u>3408</u>	<u>0.2258</u>	<u>0.1993</u>	<u>0.1576</u>	<u>0.546</u>
<u>1703</u>	<u>0.6565</u>	<u>0.5832</u>	<u>0.4677</u>	<u>0.410</u>	<u>3409</u>	<u>0.1610</u>	<u>0.1436</u>	<u>0.1162</u>	<u>0.560</u>
<u>1704</u>	<u>0.6107</u>	<u>0.5463</u>	<u>0.4446</u>	<u>0.425</u>	<u>3410</u>	<u>0.1610</u>	<u>0.1436</u>	<u>0.1162</u>	<u>0.560</u>
<u>1801</u>	<u>0.3489</u>	<u>0.3110</u>	<u>0.2512</u>	<u>0.416</u>	<u>3411</u>	<u>0.4146</u>	<u>0.3684</u>	<u>0.2957</u>	<u>0.479</u>
<u>1802</u>	<u>0.5583</u>	<u>0.4976</u>	<u>0.4019</u>	<u>0.416</u>	<u>3412</u>	<u>0.5234</u>	<u>0.4649</u>	<u>0.3729</u>	<u>0.425</u>
<u>2002</u>	<u>0.5917</u>	<u>0.5297</u>	<u>0.4319</u>	<u>0.470</u>	<u>3414</u>	<u>0.6803</u>	<u>0.6034</u>	<u>0.4822</u>	<u>0.500</u>
<u>2004</u>	<u>0.4557</u>	<u>0.4058</u>	<u>0.3267</u>	<u>0.560</u>	<u>3415</u>	<u>0.9122</u>	<u>0.8114</u>	<u>0.6527</u>	<u>0.509</u>
<u>2007</u>	<u>0.5430</u>	<u>0.4891</u>	<u>0.4035</u>	<u>0.443</u>	<u>3501</u>	<u>0.3583</u>	<u>0.3239</u>	<u>0.2691</u>	<u>0.481</u>
<u>2008</u>	<u>0.3050</u>	<u>0.2735</u>	<u>0.2238</u>	<u>0.519</u>	<u>3503</u>	<u>0.2639</u>	<u>0.2356</u>	<u>0.1908</u>	<u>0.522</u>
<u>2009</u>	<u>0.3033</u>	<u>0.2727</u>	<u>0.2242</u>	<u>0.519</u>	<u>3506</u>	<u>0.6322</u>	<u>0.5640</u>	<u>0.4564</u>	<u>0.441</u>
<u>2101</u>	<u>0.4918</u>	<u>0.4430</u>	<u>0.3654</u>	<u>0.487</u>	<u>3509</u>	<u>0.3773</u>	<u>0.3357</u>	<u>0.2701</u>	<u>0.548</u>
<u>2102</u>	<u>0.5322</u>	<u>0.4778</u>	<u>0.3914</u>	<u>0.472</u>	<u>3510</u>	<u>0.2981</u>	<u>0.2685</u>	<u>0.2214</u>	<u>0.502</u>
<u>2103</u>	<u>1.1392</u>	<u>1.0046</u>	<u>0.7931</u>	<u>0.580</u>	<u>3511</u>	<u>0.6492</u>	<u>0.5837</u>	<u>0.4798</u>	<u>0.470</u>
<u>2104</u>	<u>0.3381</u>	<u>0.3062</u>	<u>0.2553</u>	<u>0.552</u>	<u>3512</u>	<u>0.2975</u>	<u>0.2665</u>	<u>0.2172</u>	<u>0.555</u>
<u>2105</u>	<u>0.5348</u>	<u>0.4734</u>	<u>0.3769</u>	<u>0.533</u>	<u>3513</u>	<u>0.3638</u>	<u>0.3264</u>	<u>0.2672</u>	<u>0.508</u>
<u>2106</u>	<u>0.4704</u>	<u>0.4206</u>	<u>0.3418</u>	<u>0.508</u>	<u>3602</u>	<u>0.0844</u>	<u>0.0754</u>	<u>0.0612</u>	<u>0.526</u>
<u>2201</u>	<u>0.2956</u>	<u>0.2660</u>	<u>0.2188</u>	<u>0.526</u>	<u>3603</u>	<u>0.3859</u>	<u>0.3465</u>	<u>0.2841</u>	<u>0.477</u>
<u>2202</u>	<u>0.5297</u>	<u>0.4728</u>	<u>0.3829</u>	<u>0.499</u>	<u>3604</u>	<u>0.6209</u>	<u>0.5571</u>	<u>0.4560</u>	<u>0.479</u>
<u>2203</u>	<u>0.4639</u>	<u>0.4149</u>	<u>0.3375</u>	<u>0.550</u>	<u>3605</u>	<u>0.3721</u>	<u>0.3329</u>	<u>0.2709</u>	<u>0.507</u>
<u>2204</u>	<u>0.2956</u>	<u>0.2660</u>	<u>0.2188</u>	<u>0.526</u>	<u>3701</u>	<u>0.2215</u>	<u>0.1973</u>	<u>0.1591</u>	<u>0.467</u>
<u>2401</u>	<u>0.3679</u>	<u>0.3275</u>	<u>0.2638</u>	<u>0.459</u>	<u>3702</u>	<u>0.3118</u>	<u>0.2786</u>	<u>0.2261</u>	<u>0.520</u>
<u>2903</u>	<u>0.5488</u>	<u>0.4943</u>	<u>0.4079</u>	<u>0.507</u>	<u>3708</u>	<u>0.4981</u>	<u>0.4481</u>	<u>0.3688</u>	<u>0.458</u>
<u>2904</u>	<u>0.5550</u>	<u>0.4986</u>	<u>0.4090</u>	<u>0.410</u>	<u>3802</u>	<u>0.1754</u>	<u>0.1576</u>	<u>0.1294</u>	<u>0.494</u>
<u>2905</u>	<u>0.4326</u>	<u>0.3870</u>	<u>0.3150</u>	<u>0.533</u>	<u>3808</u>	<u>0.3284</u>	<u>0.2942</u>	<u>0.2400</u>	<u>0.487</u>
<u>2906</u>	<u>0.4342</u>	<u>0.3927</u>	<u>0.3265</u>	<u>0.472</u>	<u>3901</u>	<u>0.1300</u>	<u>0.1164</u>	<u>0.0949</u>	<u>0.585</u>
<u>2907</u>	<u>0.3781</u>	<u>0.3382</u>	<u>0.2749</u>	<u>0.544</u>	<u>3902</u>	<u>0.3975</u>	<u>0.3563</u>	<u>0.2910</u>	<u>0.552</u>
<u>2908</u>	<u>0.7723</u>	<u>0.6912</u>	<u>0.5628</u>	<u>0.530</u>	<u>3903</u>	<u>0.4171</u>	<u>0.3739</u>	<u>0.3053</u>	<u>0.552</u>
<u>2909</u>	<u>0.3413</u>	<u>0.3096</u>	<u>0.2592</u>	<u>0.461</u>	<u>3905</u>	<u>0.1157</u>	<u>0.1042</u>	<u>0.0857</u>	<u>0.565</u>
<u>3101</u>	<u>0.6281</u>	<u>0.5605</u>	<u>0.4537</u>	<u>0.489</u>	<u>3906</u>	<u>0.4089</u>	<u>0.3678</u>	<u>0.3026</u>	<u>0.529</u>
<u>3102</u>	<u>0.2215</u>	<u>0.1973</u>	<u>0.1591</u>	<u>0.467</u>	<u>3909</u>	<u>0.2230</u>	<u>0.1998</u>	<u>0.1631</u>	<u>0.560</u>
<u>3103</u>	<u>0.2876</u>	<u>0.2583</u>	<u>0.2119</u>	<u>0.433</u>	<u>4101</u>	<u>0.2011</u>	<u>0.1797</u>	<u>0.1459</u>	<u>0.529</u>
<u>3104</u>	<u>0.5421</u>	<u>0.4858</u>	<u>0.3965</u>	<u>0.526</u>	<u>4103</u>	<u>0.4597</u>	<u>0.4134</u>	<u>0.3401</u>	<u>0.489</u>
<u>3105</u>	<u>0.6890</u>	<u>0.6227</u>	<u>0.5174</u>	<u>0.481</u>	<u>4107</u>	<u>0.1643</u>	<u>0.1463</u>	<u>0.1180</u>	<u>0.491</u>
<u>3303</u>	<u>0.3122</u>	<u>0.2792</u>	<u>0.2268</u>	<u>0.522</u>	<u>4108</u>	<u>0.1443</u>	<u>0.1290</u>	<u>0.1046</u>	<u>0.544</u>
<u>3304</u>	<u>0.5898</u>	<u>0.5301</u>	<u>0.4354</u>	<u>0.507</u>	<u>4109</u>	<u>0.1713</u>	<u>0.1547</u>	<u>0.1284</u>	<u>0.501</u>
<u>3309</u>	<u>0.3425</u>	<u>0.3061</u>	<u>0.2484</u>	<u>0.507</u>	<u>4201</u>	<u>0.6313</u>	<u>0.5576</u>	<u>0.4418</u>	<u>0.438</u>
<u>3402</u>	<u>0.3721</u>	<u>0.3329</u>	<u>0.2709</u>	<u>0.507</u>	<u>4301</u>	<u>0.7524</u>	<u>0.6777</u>	<u>0.5588</u>	<u>0.525</u>
<u>3403</u>	<u>0.1081</u>	<u>0.0965</u>	<u>0.0781</u>	<u>0.487</u>	<u>4302</u>	<u>0.6013</u>	<u>0.5383</u>	<u>0.4385</u>	<u>0.486</u>
<u>3404</u>	<u>0.3765</u>	<u>0.3362</u>	<u>0.2722</u>	<u>0.517</u>	<u>4304</u>	<u>0.8882</u>	<u>0.8058</u>	<u>0.6743</u>	<u>0.502</u>
<u>3405</u>	<u>0.2346</u>	<u>0.2094</u>	<u>0.1696</u>	<u>0.492</u>	<u>4305</u>	<u>0.8491</u>	<u>0.7527</u>	<u>0.6011</u>	<u>0.493</u>
<u>3406</u>	<u>0.2418</u>	<u>0.2153</u>	<u>0.1737</u>	<u>0.557</u>	<u>4401</u>	<u>0.3122</u>	<u>0.2792</u>	<u>0.2268</u>	<u>0.522</u>

<u>Class</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>Primary Ratio</u>	<u>Class</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>Primary Ratio</u>
<u>4402</u>	<u>0.5433</u>	<u>0.4824</u>	<u>0.3864</u>	<u>0.515</u>	<u>5201</u>	<u>0.2587</u>	<u>0.2303</u>	<u>0.1852</u>	<u>0.553</u>
<u>4404</u>	<u>0.3651</u>	<u>0.3272</u>	<u>0.2672</u>	<u>0.489</u>	<u>5204</u>	<u>0.7832</u>	<u>0.6948</u>	<u>0.5558</u>	<u>0.431</u>
<u>4501</u>	<u>0.1496</u>	<u>0.1329</u>	<u>0.1067</u>	<u>0.578</u>	<u>5206</u>	<u>0.3450</u>	<u>0.3101</u>	<u>0.2549</u>	<u>0.417</u>
<u>4502</u>	<u>0.0526</u>	<u>0.0471</u>	<u>0.0383</u>	<u>0.484</u>	<u>5207</u>	<u>0.1250</u>	<u>0.1123</u>	<u>0.0920</u>	<u>0.540</u>
<u>4504</u>	<u>0.0998</u>	<u>0.0890</u>	<u>0.0718</u>	<u>0.590</u>	<u>5208</u>	<u>0.5222</u>	<u>0.4679</u>	<u>0.3819</u>	<u>0.476</u>
<u>4802</u>	<u>0.3676</u>	<u>0.3309</u>	<u>0.2726</u>	<u>0.500</u>	<u>5209</u>	<u>0.5156</u>	<u>0.4598</u>	<u>0.3718</u>	<u>0.487</u>
<u>4803</u>	<u>0.3682</u>	<u>0.3319</u>	<u>0.2741</u>	<u>0.550</u>	<u>5300</u>	<u>0.0831</u>	<u>0.0738</u>	<u>0.0592</u>	<u>0.550</u>
<u>4804</u>	<u>0.5020</u>	<u>0.4527</u>	<u>0.3742</u>	<u>0.524</u>	<u>5301</u>	<u>0.0271</u>	<u>0.0242</u>	<u>0.0198</u>	<u>0.488</u>
<u>4805</u>	<u>0.3295</u>	<u>0.2972</u>	<u>0.2457</u>	<u>0.536</u>	<u>5302</u>	<u>0.0070</u>	<u>0.0062</u>	<u>0.0049</u>	<u>0.524</u>
<u>4806</u>	<u>0.1123</u>	<u>0.1008</u>	<u>0.0825</u>	<u>0.597</u>	<u>5305</u>	<u>0.0347</u>	<u>0.0310</u>	<u>0.0251</u>	<u>0.536</u>
<u>4808</u>	<u>0.4090</u>	<u>0.3675</u>	<u>0.3018</u>	<u>0.470</u>	<u>5306</u>	<u>0.0369</u>	<u>0.0329</u>	<u>0.0265</u>	<u>0.591</u>
<u>4809</u>	<u>0.2124</u>	<u>0.1913</u>	<u>0.1579</u>	<u>0.488</u>	<u>5307</u>	<u>0.5863</u>	<u>0.5186</u>	<u>0.4124</u>	<u>0.505</u>
<u>4810</u>	<u>0.2150</u>	<u>0.1937</u>	<u>0.1596</u>	<u>0.553</u>	<u>5308</u>	<u>0.0757</u>	<u>0.0679</u>	<u>0.0555</u>	<u>0.559</u>
<u>4811</u>	<u>0.4383</u>	<u>0.3966</u>	<u>0.3301</u>	<u>0.519</u>	<u>6103</u>	<u>0.0814</u>	<u>0.0731</u>	<u>0.0598</u>	<u>0.588</u>
<u>4812</u>	<u>0.3781</u>	<u>0.3396</u>	<u>0.2783</u>	<u>0.493</u>	<u>6104</u>	<u>0.3237</u>	<u>0.2890</u>	<u>0.2341</u>	<u>0.540</u>
<u>4813</u>	<u>0.2159</u>	<u>0.1950</u>	<u>0.1615</u>	<u>0.562</u>	<u>6105</u>	<u>0.4460</u>	<u>0.3956</u>	<u>0.3161</u>	<u>0.486</u>
<u>4814</u>	<u>0.1103</u>	<u>0.1004</u>	<u>0.0843</u>	<u>0.558</u>	<u>6107</u>	<u>0.1315</u>	<u>0.1182</u>	<u>0.0969</u>	<u>0.644</u>
<u>4815</u>	<u>0.2271</u>	<u>0.2070</u>	<u>0.1745</u>	<u>0.572</u>	<u>6108</u>	<u>0.2292</u>	<u>0.2056</u>	<u>0.1681</u>	<u>0.582</u>
<u>4816</u>	<u>0.3093</u>	<u>0.2823</u>	<u>0.2389</u>	<u>0.514</u>	<u>6109</u>	<u>0.0912</u>	<u>0.0809</u>	<u>0.0648</u>	<u>0.504</u>
<u>4900</u>	<u>0.0974</u>	<u>0.0867</u>	<u>0.0700</u>	<u>0.460</u>	<u>6110</u>	<u>0.3560</u>	<u>0.3155</u>	<u>0.2515</u>	<u>0.527</u>
<u>4901</u>	<u>0.0334</u>	<u>0.0297</u>	<u>0.0237</u>	<u>0.478</u>	<u>6120</u>	<u>0.2746</u>	<u>0.2436</u>	<u>0.1947</u>	<u>0.522</u>
<u>4902</u>	<u>0.0748</u>	<u>0.0669</u>	<u>0.0542</u>	<u>0.504</u>	<u>6121</u>	<u>0.3803</u>	<u>0.3353</u>	<u>0.2646</u>	<u>0.532</u>
<u>4903</u>	<u>0.1407</u>	<u>0.1248</u>	<u>0.0995</u>	<u>0.528</u>	<u>6201</u>	<u>0.4261</u>	<u>0.3785</u>	<u>0.3036</u>	<u>0.511</u>
<u>4904</u>	<u>0.0132</u>	<u>0.0118</u>	<u>0.0095</u>	<u>0.550</u>	<u>6202</u>	<u>0.6491</u>	<u>0.5795</u>	<u>0.4696</u>	<u>0.519</u>
<u>4905</u>	<u>0.3166</u>	<u>0.2848</u>	<u>0.2344</u>	<u>0.559</u>	<u>6203</u>	<u>0.0935</u>	<u>0.0845</u>	<u>0.0701</u>	<u>0.623</u>
<u>4906</u>	<u>0.0906</u>	<u>0.0803</u>	<u>0.0641</u>	<u>0.547</u>	<u>6204</u>	<u>0.1240</u>	<u>0.1110</u>	<u>0.0905</u>	<u>0.562</u>
<u>4907</u>	<u>0.0509</u>	<u>0.0459</u>	<u>0.0379</u>	<u>0.610</u>	<u>6205</u>	<u>0.1575</u>	<u>0.1408</u>	<u>0.1144</u>	<u>0.525</u>
<u>4908</u>	<u>0.0815</u>	<u>0.0733</u>	<u>0.0604</u>	<u>0.592</u>	<u>6206</u>	<u>0.1766</u>	<u>0.1576</u>	<u>0.1276</u>	<u>0.565</u>
<u>4909</u>	<u>0.0326</u>	<u>0.0294</u>	<u>0.0241</u>	<u>0.592</u>	<u>6207</u>	<u>0.8400</u>	<u>0.7537</u>	<u>0.6173</u>	<u>0.484</u>
<u>4910</u>	<u>0.3870</u>	<u>0.3451</u>	<u>0.2791</u>	<u>0.495</u>	<u>6208</u>	<u>0.2143</u>	<u>0.1927</u>	<u>0.1584</u>	<u>0.589</u>
<u>4911</u>	<u>0.0458</u>	<u>0.0409</u>	<u>0.0334</u>	<u>0.443</u>	<u>6209</u>	<u>0.2500</u>	<u>0.2256</u>	<u>0.1866</u>	<u>0.547</u>
<u>5001</u>	<u>6.1433</u>	<u>5.5201</u>	<u>4.5355</u>	<u>0.362</u>	<u>6301</u>	<u>0.1087</u>	<u>0.0970</u>	<u>0.0786</u>	<u>0.446</u>
<u>5002</u>	<u>0.4844</u>	<u>0.4301</u>	<u>0.3444</u>	<u>0.522</u>	<u>6303</u>	<u>0.0435</u>	<u>0.0387</u>	<u>0.0313</u>	<u>0.520</u>
<u>5003</u>	<u>1.8231</u>	<u>1.6282</u>	<u>1.3211</u>	<u>0.392</u>	<u>6305</u>	<u>0.0816</u>	<u>0.0729</u>	<u>0.0592</u>	<u>0.574</u>
<u>5004</u>	<u>0.8090</u>	<u>0.7364</u>	<u>0.6205</u>	<u>0.405</u>	<u>6306</u>	<u>0.2879</u>	<u>0.2561</u>	<u>0.2060</u>	<u>0.552</u>
<u>5005</u>	<u>0.7622</u>	<u>0.6794</u>	<u>0.5489</u>	<u>0.397</u>	<u>6308</u>	<u>0.0501</u>	<u>0.0448</u>	<u>0.0362</u>	<u>0.493</u>
<u>5006</u>	<u>0.9158</u>	<u>0.8174</u>	<u>0.6625</u>	<u>0.374</u>	<u>6309</u>	<u>0.1834</u>	<u>0.1640</u>	<u>0.1334</u>	<u>0.527</u>
<u>5101</u>	<u>0.7685</u>	<u>0.6813</u>	<u>0.5442</u>	<u>0.453</u>	<u>6402</u>	<u>0.2241</u>	<u>0.2009</u>	<u>0.1640</u>	<u>0.571</u>
<u>5103</u>	<u>0.7160</u>	<u>0.6418</u>	<u>0.5242</u>	<u>0.507</u>	<u>6403</u>	<u>0.1263</u>	<u>0.1127</u>	<u>0.0912</u>	<u>0.582</u>
<u>5106</u>	<u>0.7160</u>	<u>0.6418</u>	<u>0.5242</u>	<u>0.507</u>	<u>6404</u>	<u>0.2533</u>	<u>0.2282</u>	<u>0.1885</u>	<u>0.519</u>
<u>5108</u>	<u>0.7019</u>	<u>0.6218</u>	<u>0.4959</u>	<u>0.538</u>	<u>6405</u>	<u>0.5279</u>	<u>0.4695</u>	<u>0.3775</u>	<u>0.506</u>
<u>5109</u>	<u>0.4000</u>	<u>0.3551</u>	<u>0.2844</u>	<u>0.494</u>	<u>6406</u>	<u>0.1301</u>	<u>0.1160</u>	<u>0.0936</u>	<u>0.577</u>

<u>Class</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>Primary Ratio</u>	<u>Class</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>Primary Ratio</u>
<u>6407</u>	<u>0.2470</u>	<u>0.2205</u>	<u>0.1786</u>	<u>0.538</u>	<u>6909</u>	<u>0.0954</u>	<u>0.0853</u>	<u>0.0693</u>	<u>0.523</u>
<u>6408</u>	<u>0.5097</u>	<u>0.4565</u>	<u>0.3724</u>	<u>0.479</u>	<u>7100</u>	<u>0.0165</u>	<u>0.0145</u>	<u>0.0115</u>	<u>0.532</u>
<u>6409</u>	<u>0.5314</u>	<u>0.4737</u>	<u>0.3826</u>	<u>0.484</u>	<u>7101</u>	<u>0.0186</u>	<u>0.0165</u>	<u>0.0134</u>	<u>0.450</u>
<u>6410</u>	<u>0.2675</u>	<u>0.2378</u>	<u>0.1909</u>	<u>0.539</u>	<u>7103</u>	<u>0.8743</u>	<u>0.7711</u>	<u>0.6091</u>	<u>0.490</u>
<u>6411</u>	<u>0.0370</u>	<u>0.0334</u>	<u>0.0276</u>	<u>0.526</u>	<u>7104</u>	<u>0.0205</u>	<u>0.0183</u>	<u>0.0148</u>	<u>0.503</u>
<u>6501</u>	<u>0.0914</u>	<u>0.0809</u>	<u>0.0643</u>	<u>0.562</u>	<u>7105</u>	<u>0.0139</u>	<u>0.0124</u>	<u>0.0102</u>	<u>0.504</u>
<u>6502</u>	<u>0.0231</u>	<u>0.0206</u>	<u>0.0165</u>	<u>0.509</u>	<u>7106</u>	<u>0.2612</u>	<u>0.2324</u>	<u>0.1867</u>	<u>0.580</u>
<u>6503</u>	<u>0.0700</u>	<u>0.0616</u>	<u>0.0484</u>	<u>0.537</u>	<u>7107</u>	<u>0.3621</u>	<u>0.3218</u>	<u>0.2583</u>	<u>0.571</u>
<u>6504</u>	<u>0.2478</u>	<u>0.2236</u>	<u>0.1848</u>	<u>0.593</u>	<u>7108</u>	<u>0.2432</u>	<u>0.2163</u>	<u>0.1739</u>	<u>0.610</u>
<u>6505</u>	<u>0.1447</u>	<u>0.1294</u>	<u>0.1050</u>	<u>0.640</u>	<u>7109</u>	<u>0.0828</u>	<u>0.0740</u>	<u>0.0600</u>	<u>0.506</u>
<u>6506</u>	<u>0.1093</u>	<u>0.0975</u>	<u>0.0789</u>	<u>0.547</u>	<u>7110</u>	<u>0.3681</u>	<u>0.3304</u>	<u>0.2708</u>	<u>0.429</u>
<u>6509</u>	<u>0.2165</u>	<u>0.1943</u>	<u>0.1589</u>	<u>0.578</u>	<u>7111</u>	<u>0.2544</u>	<u>0.2244</u>	<u>0.1773</u>	<u>0.469</u>
<u>6510</u>	<u>0.3130</u>	<u>0.2784</u>	<u>0.2240</u>	<u>0.401</u>	<u>7112</u>	<u>0.5812</u>	<u>0.5225</u>	<u>0.4293</u>	<u>0.522</u>
<u>6511</u>	<u>0.2467</u>	<u>0.2210</u>	<u>0.1802</u>	<u>0.554</u>	<u>7113</u>	<u>0.3892</u>	<u>0.3469</u>	<u>0.2799</u>	<u>0.552</u>
<u>6512</u>	<u>0.0763</u>	<u>0.0682</u>	<u>0.0555</u>	<u>0.455</u>	<u>7114</u>	<u>0.7032</u>	<u>0.6273</u>	<u>0.5070</u>	<u>0.586</u>
<u>6601</u>	<u>0.1666</u>	<u>0.1495</u>	<u>0.1222</u>	<u>0.519</u>	<u>7115</u>	<u>0.5064</u>	<u>0.4550</u>	<u>0.3732</u>	<u>0.560</u>
<u>6602</u>	<u>0.4985</u>	<u>0.4487</u>	<u>0.3698</u>	<u>0.499</u>	<u>7116</u>	<u>0.4160</u>	<u>0.3712</u>	<u>0.3007</u>	<u>0.478</u>
<u>6603</u>	<u>0.2451</u>	<u>0.2193</u>	<u>0.1783</u>	<u>0.552</u>	<u>7117</u>	<u>0.9334</u>	<u>0.8380</u>	<u>0.6870</u>	<u>0.498</u>
<u>6604</u>	<u>0.0636</u>	<u>0.0569</u>	<u>0.0461</u>	<u>0.549</u>	<u>7118</u>	<u>1.4329</u>	<u>1.2780</u>	<u>1.0335</u>	<u>0.497</u>
<u>6605</u>	<u>0.2469</u>	<u>0.2193</u>	<u>0.1758</u>	<u>0.564</u>	<u>7119</u>	<u>1.4906</u>	<u>1.3254</u>	<u>1.0655</u>	<u>0.482</u>
<u>6607</u>	<u>0.0880</u>	<u>0.0791</u>	<u>0.0650</u>	<u>0.538</u>	<u>7120</u>	<u>4.2459</u>	<u>3.7638</u>	<u>3.0058</u>	<u>0.493</u>
<u>6608</u>	<u>0.3956</u>	<u>0.3501</u>	<u>0.2787</u>	<u>0.392</u>	<u>7121</u>	<u>6.1170</u>	<u>5.4953</u>	<u>4.5123</u>	<u>0.350</u>
<u>6620</u>	<u>2.8352</u>	<u>2.4937</u>	<u>1.9578</u>	<u>0.579</u>	<u>7122</u>	<u>0.3219</u>	<u>0.2907</u>	<u>0.2410</u>	<u>0.511</u>
<u>6704</u>	<u>0.1135</u>	<u>0.1010</u>	<u>0.0813</u>	<u>0.583</u>	<u>7200</u>	<u>1.7445</u>	<u>1.5337</u>	<u>1.2035</u>	<u>0.476</u>
<u>6705</u>	<u>0.6226</u>	<u>0.5623</u>	<u>0.4659</u>	<u>0.579</u>	<u>7201</u>	<u>1.3706</u>	<u>1.2088</u>	<u>0.9551</u>	<u>0.502</u>
<u>6706</u>	<u>0.2172</u>	<u>0.1961</u>	<u>0.1624</u>	<u>0.519</u>	<u>7202</u>	<u>0.0211</u>	<u>0.0188</u>	<u>0.0149</u>	<u>0.527</u>
<u>6707</u>	<u>11.2987</u>	<u>10.0420</u>	<u>8.0498</u>	<u>0.667</u>	<u>7203</u>	<u>0.0852</u>	<u>0.0771</u>	<u>0.0640</u>	<u>0.583</u>
<u>6708</u>	<u>8.0379</u>	<u>7.3520</u>	<u>6.2503</u>	<u>0.485</u>	<u>7204</u>	<u>0.0000</u>	<u>0.0000</u>	<u>0.0000</u>	<u>0.500</u>
<u>6709</u>	<u>0.2369</u>	<u>0.2114</u>	<u>0.1712</u>	<u>0.560</u>	<u>7205</u>	<u>0.0000</u>	<u>0.0000</u>	<u>0.0000</u>	<u>0.500</u>
<u>6801</u>	<u>0.5865</u>	<u>0.5102</u>	<u>0.3911</u>	<u>0.552</u>	<u>7301</u>	<u>0.5811</u>	<u>0.5280</u>	<u>0.4434</u>	<u>0.473</u>
<u>6802</u>	<u>0.6889</u>	<u>0.6097</u>	<u>0.4851</u>	<u>0.547</u>	<u>7302</u>	<u>0.6820</u>	<u>0.6189</u>	<u>0.5182</u>	<u>0.456</u>
<u>6803</u>	<u>0.4158</u>	<u>0.3678</u>	<u>0.2923</u>	<u>0.393</u>	<u>7307</u>	<u>0.4573</u>	<u>0.4084</u>	<u>0.3310</u>	<u>0.551</u>
<u>6804</u>	<u>0.2394</u>	<u>0.2132</u>	<u>0.1718</u>	<u>0.558</u>	<u>7308</u>	<u>0.2248</u>	<u>0.2023</u>	<u>0.1665</u>	<u>0.580</u>
<u>6809</u>	<u>3.2949</u>	<u>2.9642</u>	<u>2.4384</u>	<u>0.556</u>	<u>7309</u>	<u>0.2223</u>	<u>0.1997</u>	<u>0.1638</u>	<u>0.587</u>
<u>6901</u>	<u>0.0192</u>	<u>0.0185</u>	<u>0.0171</u>	<u>0.808</u>	<u>7400</u>	<u>2.0062</u>	<u>1.7638</u>	<u>1.3840</u>	<u>0.476</u>
<u>6902</u>	<u>0.6662</u>	<u>0.5977</u>	<u>0.4893</u>	<u>0.420</u>	Expected Loss Rates in Dollars Per Sq. Ft. of Wallboard Installed				
<u>6903</u>	<u>3.6438</u>	<u>3.2724</u>	<u>2.6842</u>	<u>0.331</u>	((<u>Class</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>Primary Ratio</u>
<u>6904</u>	<u>0.8938</u>	<u>0.7881</u>	<u>0.6223</u>	<u>0.482</u>	<u>540</u>	<u>0.0164</u>	<u>0.0145</u>	<u>0.0124</u>	<u>0.458</u>
<u>6905</u>	<u>0.6427</u>	<u>0.5683</u>	<u>0.4511</u>	<u>0.499</u>	<u>541</u>	<u>0.0068</u>	<u>0.0064</u>	<u>0.0053</u>	<u>0.438</u>
<u>6906</u>	<u>0.2491</u>	<u>0.2355</u>	<u>0.2121</u>	<u>0.618</u>	<u>550</u>	<u>0.0264</u>	<u>0.0238</u>	<u>0.0205</u>	<u>0.385</u>
<u>6907</u>	<u>0.7274</u>	<u>0.6488</u>	<u>0.5245</u>	<u>0.545</u>					
<u>6908</u>	<u>0.2951</u>	<u>0.2638</u>	<u>0.2141</u>	<u>0.481</u>					

<u>Class</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>Primary Ratio</u>	<u>Expected Loss Range</u>	<u>Maximum Experience Modification</u>
551	0.0103	0.0093	0.0080	0.403))	28,917 - 31,536	0.63
					31,537 - 35,467	0.62
					35,468 - 41,363	0.61
<u>Class</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>Primary Ratio</u>	<u>41,364 and higher</u>	<u>0.60))</u>
<u>540</u>	<u>0.0145</u>	<u>0.0130</u>	<u>0.0105</u>	<u>0.459</u>	<u>1</u>	<u>0.90</u>
<u>541</u>	<u>0.0069</u>	<u>0.0062</u>	<u>0.0050</u>	<u>0.428</u>	<u>5,329</u>	<u>0.89</u>
<u>550</u>	<u>0.0267</u>	<u>0.0240</u>	<u>0.0197</u>	<u>0.367</u>	<u>5,330</u>	<u>0.89</u>
<u>551</u>	<u>0.0097</u>	<u>0.0087</u>	<u>0.0072</u>	<u>0.407</u>	<u>6,507</u>	<u>0.88</u>
					<u>7,177</u>	<u>0.87</u>
					<u>7,178</u>	<u>0.87</u>
					<u>7,848</u>	<u>0.86</u>
					<u>8,517</u>	<u>0.86</u>
					<u>8,518</u>	<u>0.85</u>
					<u>9,187</u>	<u>0.85</u>
					<u>9,188</u>	<u>0.84</u>
					<u>9,857</u>	<u>0.84</u>
					<u>9,858</u>	<u>0.83</u>
					<u>10,528</u>	<u>0.83</u>
					<u>10,529</u>	<u>0.82</u>
					<u>11,198</u>	<u>0.82</u>
					<u>11,199</u>	<u>0.81</u>
					<u>11,893</u>	<u>0.81</u>
					<u>11,894</u>	<u>0.80</u>
					<u>12,617</u>	<u>0.80</u>
					<u>12,618</u>	<u>0.79</u>
					<u>13,369</u>	<u>0.79</u>
					<u>13,370</u>	<u>0.78</u>
					<u>14,150</u>	<u>0.78</u>
					<u>14,151</u>	<u>0.77</u>
					<u>14,959</u>	<u>0.77</u>
					<u>14,960</u>	<u>0.76</u>
					<u>15,797</u>	<u>0.76</u>
					<u>15,798</u>	<u>0.75</u>
					<u>16,664</u>	<u>0.75</u>
					<u>16,665</u>	<u>0.74</u>
					<u>17,559</u>	<u>0.74</u>
					<u>17,560</u>	<u>0.73</u>
					<u>18,483</u>	<u>0.73</u>
					<u>18,484</u>	<u>0.72</u>
					<u>19,436</u>	<u>0.72</u>
					<u>19,437</u>	<u>0.71</u>
					<u>20,417</u>	<u>0.71</u>
					<u>20,418</u>	<u>0.70</u>
					<u>21,426</u>	<u>0.70</u>
					<u>21,427</u>	<u>0.69</u>
					<u>22,464</u>	<u>0.69</u>
					<u>22,465</u>	<u>0.68</u>
					<u>23,531</u>	<u>0.68</u>
					<u>23,532</u>	<u>0.67</u>
					<u>24,626</u>	<u>0.67</u>
					<u>24,627</u>	<u>0.66</u>
					<u>25,750</u>	<u>0.66</u>
					<u>25,751</u>	<u>0.65</u>
					<u>26,903</u>	<u>0.65</u>
					<u>26,904</u>	<u>0.64</u>
					<u>28,632</u>	<u>0.64</u>
					<u>28,633</u>	<u>0.63</u>
					<u>31,225</u>	<u>0.63</u>
					<u>31,226</u>	<u>0.62</u>
					<u>35,115</u>	<u>0.62</u>
					<u>35,116</u>	<u>0.61</u>
					<u>40,950</u>	<u>0.61</u>
					<u>40,951 and higher</u>	<u>0.60</u>

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-890 Table IV.

Maximum Experience Modifications
For Firms with No Compensable Accidents:
Effective January 1, (~~2021~~) 2022

<u>Expected Loss Range</u>	<u>Maximum Experience Modification</u>
(1 - 5,383	0.90
5,384 - 6,572	0.89
6,573 - 7,249	0.88
7,250 - 7,925	0.87
7,926 - 8,602	0.86
8,603 - 9,279	0.85
9,280 - 9,956	0.84
9,957 - 10,632	0.83
10,633 - 11,309	0.82
11,310 - 12,010	0.81
12,011 - 12,741	0.80
12,742 - 13,500	0.79
13,501 - 14,288	0.78
14,289 - 15,105	0.77
15,106 - 15,951	0.76
15,952 - 16,826	0.75
16,827 - 17,730	0.74
17,731 - 18,663	0.73
18,664 - 19,625	0.72
19,626 - 20,615	0.71
20,616 - 21,635	0.70
21,636 - 22,684	0.69
22,685 - 23,762	0.68
23,763 - 24,869	0.67
24,870 - 26,004	0.66
26,005 - 27,169	0.65
27,170 - 28,916	0.64

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-895 Industrial insurance accident fund base rates, stay at work and medical aid base rates by class of industry. Industrial insurance accident fund, stay at work and medical aid fund base rates by class of industry shall be as set forth below.

Base Rates Effective January 1, ((2021)) 2022				Base Rates Effective January 1, ((2021)) 2022			
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund
((101	1.4036	0.0217	0.5564	604	1.3510	0.0207	0.6988
103	1.6664	0.0256	0.8141	606	0.6560	0.0100	0.3561
104	1.2781	0.0198	0.4907	607	0.9624	0.0148	0.4166
105	1.2504	0.0190	0.7289	608	0.6288	0.0098	0.2096
106	2.8185	0.0428	1.7145	701	3.0790	0.0479	0.9632
107	1.3290	0.0205	0.5180	803	0.7507	0.0115	0.3623
108	1.2781	0.0198	0.4907	901	1.6024	0.0248	0.6173
112	0.9049	0.0139	0.4370	1002	1.1055	0.0170	0.4749
201	3.0790	0.0479	0.9632	1003	0.8634	0.0132	0.4217
202	2.8843	0.0449	0.9036	1004	0.5871	0.0091	0.2192
210	1.1667	0.0180	0.4737	1005	11.8650	0.1837	4.4426
212	1.1412	0.0176	0.4833	1006	0.2594	0.0040	0.1407
214	2.3836	0.0370	0.7918	1007	0.4089	0.0063	0.1844
217	1.5176	0.0233	0.6853	1101	1.4773	0.0227	0.7010
219	1.1342	0.0175	0.4335	1102	2.3317	0.0361	0.8575
301	1.0423	0.0159	0.6093	1103	1.3713	0.0211	0.5884
302	3.0173	0.0469	0.9669	1104	0.7468	0.0113	0.4477
303	2.5466	0.0393	1.0121	1105	1.0320	0.0159	0.4755
306	1.0139	0.0156	0.4177	1106	0.4092	0.0062	0.2844
307	1.1181	0.0172	0.5170	1108	0.5201	0.0079	0.3428
308	0.6589	0.0100	0.4398	1109	2.1915	0.0337	0.9911
403	2.2339	0.0343	1.0480	1301	0.8407	0.0130	0.3594
502	1.2511	0.0193	0.4925	1303	0.4884	0.0075	0.2314
504	2.6132	0.0401	1.2286	1304	0.0269	0.0004	0.0129
507	3.5714	0.0545	1.9359	1305	0.7041	0.0109	0.2943
508	1.8144	0.0282	0.5632	1401	0.2768	0.0041	0.2359
509	1.3773	0.0215	0.3852	1404	0.9178	0.0140	0.5054
510	2.8667	0.0438	1.5018	1405	0.8384	0.0128	0.4420
511	1.7280	0.0266	0.7712	1407	0.7971	0.0122	0.4288
512	1.5541	0.0238	0.7930	1501	1.1235	0.0173	0.4614
513	1.1391	0.0175	0.4961	1507	0.5872	0.0089	0.3407
514	1.5492	0.0237	0.7958	1701	1.0516	0.0162	0.4628
516	1.8588	0.0286	0.8561	1702	2.1243	0.0332	0.5753
517	2.3709	0.0365	1.0348	1703	1.2895	0.0200	0.4317
518	1.6024	0.0248	0.6173	1704	1.0516	0.0162	0.4628
519	1.6829	0.0259	0.7170	1801	0.6457	0.0100	0.2501
521	0.7158	0.0109	0.3984	1802	1.0331	0.0160	0.4001
601	0.6794	0.0105	0.3013	2002	0.9914	0.0151	0.5337
602	1.0453	0.0163	0.2835	2004	0.6655	0.0101	0.3871
603	1.1619	0.0181	0.3562	2007	0.9196	0.0140	0.5143

Base Rates Effective January 1, ((2021)) 2022				Base Rates Effective January 1, ((2021)) 2022			
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund
2008	0.4106	0.0062	0.2873	3501	0.6680	0.0101	0.4699
2009	0.4507	0.0068	0.3034	3503	0.3894	0.0059	0.2342
2101	0.7178	0.0108	0.4904	3506	1.1400	0.0175	0.5228
2102	0.8772	0.0134	0.4864	3509	0.5014	0.0076	0.3074
2104	0.3783	0.0056	0.3691	3510	0.4305	0.0065	0.2913
2105	0.8668	0.0133	0.4145	3511	0.9996	0.0152	0.5773
2106	0.6910	0.0105	0.4064	3512	0.4024	0.0060	0.3025
2201	0.3939	0.0059	0.2661	3513	0.5306	0.0080	0.3804
2202	0.7706	0.0118	0.4031	3602	0.1277	0.0019	0.0753
2203	0.6037	0.0091	0.4239	3603	0.6157	0.0093	0.3770
2204	0.3939	0.0059	0.2661	3604	0.8990	0.0136	0.5573
2401	0.6769	0.0105	0.2701	3605	0.6070	0.0092	0.3435
2903	0.7589	0.0114	0.5567	3701	0.4164	0.0064	0.1780
2904	1.0168	0.0156	0.4750	3702	0.4610	0.0070	0.2768
2905	0.5679	0.0086	0.3576	3708	0.7478	0.0114	0.4404
2906	0.6222	0.0094	0.4518	3802	0.2523	0.0038	0.1632
2907	0.5377	0.0081	0.3593	3808	0.5340	0.0082	0.2727
2908	1.1469	0.0173	0.7608	3901	0.1557	0.0023	0.1246
2909	0.4679	0.0070	0.3727	3902	0.5431	0.0082	0.3786
3101	1.0408	0.0160	0.5089	3903	0.4236	0.0064	0.2953
3102	0.4164	0.0064	0.1780	3905	0.1399	0.0021	0.1217
3103	0.4983	0.0076	0.2609	3906	0.5613	0.0085	0.3871
3104	0.7654	0.0116	0.4662	3909	0.3036	0.0046	0.2205
3105	0.9970	0.0150	0.7015	4101	0.3129	0.0048	0.1812
3303	0.4502	0.0068	0.2708	4103	0.6672	0.0101	0.4325
3304	0.7759	0.0117	0.5291	4107	0.2695	0.0041	0.1316
3309	0.5110	0.0078	0.2997	4108	0.1887	0.0029	0.1161
3402	0.6070	0.0092	0.3435	4109	0.2315	0.0035	0.1852
3403	0.1917	0.0029	0.0984	4201	1.2306	0.0191	0.3961
3404	0.5685	0.0087	0.3298	4301	1.0025	0.0151	0.7404
3405	0.3844	0.0059	0.2048	4302	0.9385	0.0143	0.5555
3406	0.3231	0.0049	0.2021	4304	1.1022	0.0164	0.9506
3407	0.9991	0.0153	0.4734	4305	1.5587	0.0240	0.6659
3408	0.3177	0.0049	0.1542	4401	0.4502	0.0068	0.2708
3409	0.1999	0.0030	0.1350	4402	0.8727	0.0134	0.4382
3410	0.1999	0.0030	0.1350	4404	0.5587	0.0085	0.3288
3411	0.7284	0.0112	0.3158	4501	0.2042	0.0031	0.1344
3412	0.9582	0.0148	0.3519	4502	0.0841	0.0013	0.0458
3414	1.0213	0.0157	0.4672	4504	0.1286	0.0019	0.0968
3415	1.2073	0.0185	0.5934	4802	0.5077	0.0077	0.3545

Base Rates Effective January 1, ((2021)) 2022				Base Rates Effective January 1, ((2021)) 2022			
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund
4803	0.4192	0.0062	0.3681	5301	0.0421	0.0006	0.0242
4804	0.6524	0.0098	0.5183	5302	0.0113	0.0002	0.0061
4805	0.4375	0.0065	0.3436	5305	0.0572	0.0009	0.0347
4806	0.1108	0.0016	0.1077	5306	0.0489	0.0007	0.0337
4808	0.6074	0.0092	0.3568	5307	0.9641	0.0149	0.4012
4809	0.3459	0.0052	0.2243	5308	0.1061	0.0016	0.0790
4810	0.2498	0.0037	0.2096	6103	0.0985	0.0015	0.0833
4811	0.5371	0.0080	0.4626	6104	0.4808	0.0073	0.3043
4812	0.5785	0.0088	0.3569	6105	0.7307	0.0113	0.3123
4813	0.2345	0.0035	0.2296	6107	0.1332	0.0019	0.1498
4900	0.1699	0.0026	0.0701	6108	0.3188	0.0048	0.2572
4901	0.0607	0.0009	0.0263	6109	0.1515	0.0023	0.0699
4902	0.1262	0.0019	0.0695	6110	0.5715	0.0088	0.2769
4903	0.2197	0.0034	0.1115	6120	0.4073	0.0062	0.2026
4904	0.0193	0.0003	0.0128	6121	0.5516	0.0085	0.2489
4905	0.3826	0.0057	0.3317	6201	0.6345	0.0097	0.3159
4906	0.1423	0.0022	0.0731	6202	0.9876	0.0150	0.5673
4907	0.0667	0.0010	0.0619	6203	0.1013	0.0015	0.1180
4908	0.1041	0.0015	0.0925	6204	0.1694	0.0026	0.1196
4909	0.0416	0.0006	0.0370	6205	0.2358	0.0036	0.1471
4910	0.6124	0.0094	0.3213	6206	0.2496	0.0038	0.1662
4911	0.0814	0.0012	0.0394	6207	1.2684	0.0193	0.7764
5001	11.2701	0.1738	4.7411	6208	0.2538	0.0037	0.2426
5002	0.7710	0.0118	0.3889	6209	0.3088	0.0046	0.2665
5003	3.2016	0.0496	1.1534	6301	0.1805	0.0028	0.0819
5004	1.1860	0.0179	0.7743	6303	0.0670	0.0010	0.0367
5005	1.4130	0.0219	0.4948	6305	0.1109	0.0017	0.0779
5006	1.7961	0.0279	0.6108	6306	0.4190	0.0064	0.2395
5101	1.3748	0.0213	0.5126	6308	0.0782	0.0012	0.0398
5103	0.9952	0.0151	0.6366	6309	0.2468	0.0037	0.1591
5106	0.9952	0.0151	0.6366	6402	0.3021	0.0045	0.2235
5108	1.0402	0.0159	0.5269	6403	0.1652	0.0025	0.1169
5109	0.7288	0.0112	0.3228	6404	0.3528	0.0053	0.2701
5201	0.3903	0.0059	0.2237	6405	0.7843	0.0120	0.3922
5204	1.4318	0.0222	0.5076	6406	0.1674	0.0025	0.1139
5206	0.6048	0.0093	0.2932	6407	0.3582	0.0054	0.2134
5207	0.1685	0.0025	0.1272	6408	0.7580	0.0116	0.4133
5208	0.8832	0.0135	0.4899	6409	0.8580	0.0132	0.4128
5209	0.8668	0.0133	0.4160	6410	0.4207	0.0064	0.2213
5300	0.1192	0.0018	0.0685	6411	0.0538	0.0008	0.0421

Base Rates Effective January 1, ((2021)) 2022				Base Rates Effective January 1, ((2021)) 2022			
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund
6501	0.1353	0.0021	0.0716	7103	1.3868	0.0215	0.4972
6502	0.0377	0.0006	0.0194	7104	0.0308	0.0005	0.0181
6503	0.1163	0.0018	0.0482	7105	0.0226	0.0003	0.0139
6504	0.2881	0.0042	0.2920	7106	0.3321	0.0050	0.2178
6505	0.1688	0.0025	0.1524	7107	0.4243	0.0064	0.2936
6506	0.1593	0.0024	0.1018	7108	0.2719	0.0041	0.1985
6509	0.2790	0.0042	0.2354	7109	0.1300	0.0020	0.0787
6510	0.5890	0.0091	0.2114	7110	0.5791	0.0089	0.2885
6511	0.3178	0.0048	0.2289	7111	0.5321	0.0083	0.1774
6512	0.1245	0.0019	0.0626	7112	0.8673	0.0131	0.5999
6601	0.2138	0.0032	0.1497	7113	0.5073	0.0077	0.3250
6602	0.6587	0.0099	0.4675	7114	0.8570	0.0129	0.6360
6603	0.3775	0.0057	0.2332	7115	0.5869	0.0088	0.4755
6604	0.0955	0.0014	0.0640	7116	0.5997	0.0092	0.3115
6605	0.3476	0.0053	0.2114	7117	1.4666	0.0222	0.9268
6607	0.1188	0.0018	0.0905	7118	2.1989	0.0336	1.1804
6608	0.8603	0.0134	0.2452	7119	2.3137	0.0355	1.0812
6620	4.0897	0.0627	2.0253	7120	7.7935	0.1201	3.3295
6704	0.1680	0.0025	0.1067	7121	12.2022	0.1886	4.8007
6705	0.7027	0.0104	0.6296	7122	0.4414	0.0066	0.3372
6706	0.2874	0.0043	0.2248	7200	2.9834	0.0464	0.9284
6707	14.0761	0.2101	11.4756	7201	2.2410	0.0347	0.8445
6708	9.7896	0.1436	10.0015	7202	0.0341	0.0005	0.0177
6709	0.2939	0.0044	0.2020	7203	0.1088	0.0016	0.1158
6801	1.0093	0.0157	0.3136	7204	0.0000	0.0000	0.0000
6802	1.0678	0.0163	0.5439	7205	0.0000	0.0000	0.0000
6803	0.9244	0.0144	0.2379	7301	0.7631	0.0114	0.6095
6804	0.3430	0.0052	0.2195	7302	0.9734	0.0147	0.6903
6809	4.6235	0.0687	3.9823	7307	0.6305	0.0095	0.4056
6901	0.0000	0.0000	0.0602	7308	0.2847	0.0042	0.2545
6902	1.1890	0.0183	0.5370	7309	0.2806	0.0042	0.2368
6903	8.2534	0.1279	2.9400	7400	3.4309	0.0534	1.0676))
6904	1.7873	0.0277	0.6802	<u>101</u>	<u>1.3687</u>	<u>0.0234</u>	<u>0.5372</u>
6905	1.3775	0.0214	0.4906	<u>103</u>	<u>1.5726</u>	<u>0.0266</u>	<u>0.8086</u>
6906	0.0000	0.0000	0.4429	<u>104</u>	<u>1.2083</u>	<u>0.0207</u>	<u>0.4562</u>
6907	1.0270	0.0156	0.6426	<u>105</u>	<u>1.2229</u>	<u>0.0206</u>	<u>0.7000</u>
6908	0.4855	0.0074	0.2529	<u>106</u>	<u>2.5426</u>	<u>0.0425</u>	<u>1.6376</u>
6909	0.1540	0.0023	0.0935	<u>107</u>	<u>1.2607</u>	<u>0.0216</u>	<u>0.4925</u>
7100	0.0285	0.0004	0.0128	<u>108</u>	<u>1.2083</u>	<u>0.0207</u>	<u>0.4562</u>
7101	0.0326	0.0005	0.0162	<u>112</u>	<u>0.9012</u>	<u>0.0153</u>	<u>0.4396</u>

Base Rates Effective January 1, (2021) 2022				Base Rates Effective January 1, (2021) 2022			
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund
<u>201</u>	<u>3.0533</u>	<u>0.0526</u>	<u>0.9878</u>	<u>1003</u>	<u>0.8288</u>	<u>0.0141</u>	<u>0.3910</u>
<u>202</u>	<u>2.6980</u>	<u>0.0464</u>	<u>0.9298</u>	<u>1004</u>	<u>0.5966</u>	<u>0.0102</u>	<u>0.2197</u>
<u>210</u>	<u>1.1763</u>	<u>0.0201</u>	<u>0.4728</u>	<u>1005</u>	<u>11.8281</u>	<u>0.2028</u>	<u>4.4298</u>
<u>212</u>	<u>1.0529</u>	<u>0.0179</u>	<u>0.4957</u>	<u>1006</u>	<u>0.2633</u>	<u>0.0044</u>	<u>0.1432</u>
<u>214</u>	<u>2.3037</u>	<u>0.0396</u>	<u>0.7653</u>	<u>1007</u>	<u>0.4088</u>	<u>0.0070</u>	<u>0.1861</u>
<u>217</u>	<u>1.4242</u>	<u>0.0243</u>	<u>0.6252</u>	<u>1101</u>	<u>1.5114</u>	<u>0.0257</u>	<u>0.6953</u>
<u>219</u>	<u>1.0152</u>	<u>0.0173</u>	<u>0.4151</u>	<u>1102</u>	<u>2.4043</u>	<u>0.0413</u>	<u>0.8363</u>
<u>301</u>	<u>1.0640</u>	<u>0.0179</u>	<u>0.6227</u>	<u>1103</u>	<u>1.3918</u>	<u>0.0237</u>	<u>0.5976</u>
<u>302</u>	<u>2.9267</u>	<u>0.0503</u>	<u>0.9897</u>	<u>1104</u>	<u>0.7645</u>	<u>0.0128</u>	<u>0.4528</u>
<u>303</u>	<u>2.3404</u>	<u>0.0399</u>	<u>0.9860</u>	<u>1105</u>	<u>1.0830</u>	<u>0.0184</u>	<u>0.4853</u>
<u>306</u>	<u>0.9661</u>	<u>0.0165</u>	<u>0.4163</u>	<u>1106</u>	<u>0.4082</u>	<u>0.0068</u>	<u>0.2833</u>
<u>307</u>	<u>1.0332</u>	<u>0.0175</u>	<u>0.4973</u>	<u>1108</u>	<u>0.5222</u>	<u>0.0087</u>	<u>0.3446</u>
<u>308</u>	<u>0.6385</u>	<u>0.0106</u>	<u>0.4389</u>	<u>1109</u>	<u>2.3828</u>	<u>0.0406</u>	<u>1.0706</u>
<u>403</u>	<u>2.1251</u>	<u>0.0362</u>	<u>0.9576</u>	<u>1301</u>	<u>0.8315</u>	<u>0.0142</u>	<u>0.3581</u>
<u>502</u>	<u>1.1778</u>	<u>0.0202</u>	<u>0.4612</u>	<u>1303</u>	<u>0.4939</u>	<u>0.0084</u>	<u>0.2207</u>
<u>504</u>	<u>2.4361</u>	<u>0.0414</u>	<u>1.1460</u>	<u>1304</u>	<u>0.0246</u>	<u>0.0004</u>	<u>0.0125</u>
<u>507</u>	<u>3.5520</u>	<u>0.0599</u>	<u>1.9418</u>	<u>1305</u>	<u>0.6693</u>	<u>0.0114</u>	<u>0.2816</u>
<u>508</u>	<u>1.9483</u>	<u>0.0336</u>	<u>0.5921</u>	<u>1401</u>	<u>0.3107</u>	<u>0.0051</u>	<u>0.2577</u>
<u>509</u>	<u>1.3605</u>	<u>0.0235</u>	<u>0.3814</u>	<u>1404</u>	<u>0.8773</u>	<u>0.0147</u>	<u>0.5100</u>
<u>510</u>	<u>2.8124</u>	<u>0.0476</u>	<u>1.4515</u>	<u>1405</u>	<u>0.8605</u>	<u>0.0145</u>	<u>0.4576</u>
<u>511</u>	<u>1.6717</u>	<u>0.0285</u>	<u>0.7327</u>	<u>1407</u>	<u>0.7993</u>	<u>0.0135</u>	<u>0.4208</u>
<u>512</u>	<u>1.4782</u>	<u>0.0250</u>	<u>0.7512</u>	<u>1501</u>	<u>1.1438</u>	<u>0.0195</u>	<u>0.4791</u>
<u>513</u>	<u>1.1139</u>	<u>0.0190</u>	<u>0.4956</u>	<u>1507</u>	<u>0.5760</u>	<u>0.0097</u>	<u>0.3296</u>
<u>514</u>	<u>1.4276</u>	<u>0.0241</u>	<u>0.7717</u>	<u>1701</u>	<u>1.0681</u>	<u>0.0182</u>	<u>0.4726</u>
<u>516</u>	<u>1.8299</u>	<u>0.0311</u>	<u>0.8383</u>	<u>1702</u>	<u>2.0528</u>	<u>0.0356</u>	<u>0.5429</u>
<u>517</u>	<u>2.2504</u>	<u>0.0384</u>	<u>0.9738</u>	<u>1703</u>	<u>1.2774</u>	<u>0.0220</u>	<u>0.4333</u>
<u>518</u>	<u>1.5866</u>	<u>0.0272</u>	<u>0.6103</u>	<u>1704</u>	<u>1.0681</u>	<u>0.0182</u>	<u>0.4726</u>
<u>519</u>	<u>1.8512</u>	<u>0.0316</u>	<u>0.7692</u>	<u>1801</u>	<u>0.6549</u>	<u>0.0112</u>	<u>0.2520</u>
<u>521</u>	<u>0.7663</u>	<u>0.0129</u>	<u>0.4170</u>	<u>1802</u>	<u>1.0478</u>	<u>0.0179</u>	<u>0.4032</u>
<u>601</u>	<u>0.6988</u>	<u>0.0119</u>	<u>0.2855</u>	<u>2002</u>	<u>0.9499</u>	<u>0.0160</u>	<u>0.5033</u>
<u>602</u>	<u>1.0324</u>	<u>0.0179</u>	<u>0.2841</u>	<u>2004</u>	<u>0.6560</u>	<u>0.0110</u>	<u>0.4091</u>
<u>603</u>	<u>1.1585</u>	<u>0.0199</u>	<u>0.3871</u>	<u>2007</u>	<u>0.8575</u>	<u>0.0144</u>	<u>0.4934</u>
<u>604</u>	<u>1.3315</u>	<u>0.0225</u>	<u>0.6895</u>	<u>2008</u>	<u>0.4153</u>	<u>0.0069</u>	<u>0.2828</u>
<u>606</u>	<u>0.6331</u>	<u>0.0107</u>	<u>0.3385</u>	<u>2009</u>	<u>0.4270</u>	<u>0.0071</u>	<u>0.3065</u>
<u>607</u>	<u>0.9385</u>	<u>0.0160</u>	<u>0.4170</u>	<u>2101</u>	<u>0.7141</u>	<u>0.0119</u>	<u>0.4754</u>
<u>608</u>	<u>0.5936</u>	<u>0.0102</u>	<u>0.2107</u>	<u>2102</u>	<u>0.8211</u>	<u>0.0138</u>	<u>0.4721</u>
<u>701</u>	<u>2.6563</u>	<u>0.0458</u>	<u>0.8594</u>	<u>2103</u>	<u>1.6013</u>	<u>0.0271</u>	<u>0.7920</u>
<u>803</u>	<u>0.7404</u>	<u>0.0126</u>	<u>0.3609</u>	<u>2104</u>	<u>0.3944</u>	<u>0.0064</u>	<u>0.3874</u>
<u>901</u>	<u>1.5866</u>	<u>0.0272</u>	<u>0.6103</u>	<u>2105</u>	<u>0.8452</u>	<u>0.0143</u>	<u>0.4061</u>
<u>1002</u>	<u>1.0671</u>	<u>0.0182</u>	<u>0.4660</u>	<u>2106</u>	<u>0.6974</u>	<u>0.0117</u>	<u>0.4051</u>

Base Rates Effective January 1, ((2021)) 2022				Base Rates Effective January 1, ((2021)) 2022			
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund
<u>2201</u>	<u>0.3847</u>	<u>0.0064</u>	<u>0.2828</u>	<u>3513</u>	<u>0.5337</u>	<u>0.0089</u>	<u>0.3507</u>
<u>2202</u>	<u>0.8244</u>	<u>0.0139</u>	<u>0.4374</u>	<u>3602</u>	<u>0.1255</u>	<u>0.0021</u>	<u>0.0751</u>
<u>2203</u>	<u>0.6285</u>	<u>0.0105</u>	<u>0.4343</u>	<u>3603</u>	<u>0.5952</u>	<u>0.0100</u>	<u>0.3555</u>
<u>2204</u>	<u>0.3847</u>	<u>0.0064</u>	<u>0.2828</u>	<u>3604</u>	<u>0.9721</u>	<u>0.0163</u>	<u>0.5709</u>
<u>2401</u>	<u>0.6387</u>	<u>0.0109</u>	<u>0.2772</u>	<u>3605</u>	<u>0.5645</u>	<u>0.0095</u>	<u>0.3329</u>
<u>2903</u>	<u>0.7505</u>	<u>0.0124</u>	<u>0.5485</u>	<u>3701</u>	<u>0.3895</u>	<u>0.0066</u>	<u>0.1749</u>
<u>2904</u>	<u>0.9972</u>	<u>0.0169</u>	<u>0.4724</u>	<u>3702</u>	<u>0.4622</u>	<u>0.0077</u>	<u>0.2801</u>
<u>2905</u>	<u>0.6050</u>	<u>0.0101</u>	<u>0.3953</u>	<u>3708</u>	<u>0.7837</u>	<u>0.0132</u>	<u>0.4476</u>
<u>2906</u>	<u>0.6541</u>	<u>0.0109</u>	<u>0.4626</u>	<u>3802</u>	<u>0.2582</u>	<u>0.0043</u>	<u>0.1638</u>
<u>2907</u>	<u>0.5275</u>	<u>0.0088</u>	<u>0.3570</u>	<u>3808</u>	<u>0.5111</u>	<u>0.0086</u>	<u>0.2885</u>
<u>2908</u>	<u>1.1101</u>	<u>0.0185</u>	<u>0.7335</u>	<u>3901</u>	<u>0.1586</u>	<u>0.0026</u>	<u>0.1295</u>
<u>2909</u>	<u>0.4734</u>	<u>0.0078</u>	<u>0.3680</u>	<u>3902</u>	<u>0.5202</u>	<u>0.0086</u>	<u>0.3815</u>
<u>3101</u>	<u>1.0147</u>	<u>0.0172</u>	<u>0.5145</u>	<u>3903</u>	<u>0.5458</u>	<u>0.0090</u>	<u>0.4003</u>
<u>3102</u>	<u>0.3895</u>	<u>0.0066</u>	<u>0.1749</u>	<u>3905</u>	<u>0.1424</u>	<u>0.0023</u>	<u>0.1236</u>
<u>3103</u>	<u>0.4793</u>	<u>0.0081</u>	<u>0.2486</u>	<u>3906</u>	<u>0.5416</u>	<u>0.0090</u>	<u>0.4020</u>
<u>3104</u>	<u>0.7637</u>	<u>0.0127</u>	<u>0.4975</u>	<u>3909</u>	<u>0.2915</u>	<u>0.0048</u>	<u>0.2185</u>
<u>3105</u>	<u>0.9866</u>	<u>0.0163</u>	<u>0.7169</u>	<u>4101</u>	<u>0.2904</u>	<u>0.0049</u>	<u>0.1773</u>
<u>3303</u>	<u>0.4493</u>	<u>0.0075</u>	<u>0.2720</u>	<u>4103</u>	<u>0.6650</u>	<u>0.0111</u>	<u>0.4276</u>
<u>3304</u>	<u>0.8206</u>	<u>0.0137</u>	<u>0.5491</u>	<u>4107</u>	<u>0.2676</u>	<u>0.0045</u>	<u>0.1294</u>
<u>3309</u>	<u>0.5129</u>	<u>0.0086</u>	<u>0.2899</u>	<u>4108</u>	<u>0.1960</u>	<u>0.0033</u>	<u>0.1241</u>
<u>3402</u>	<u>0.5645</u>	<u>0.0095</u>	<u>0.3329</u>	<u>4109</u>	<u>0.2408</u>	<u>0.0040</u>	<u>0.1870</u>
<u>3403</u>	<u>0.1832</u>	<u>0.0031</u>	<u>0.0942</u>	<u>4201</u>	<u>1.2331</u>	<u>0.0213</u>	<u>0.3762</u>
<u>3404</u>	<u>0.5773</u>	<u>0.0097</u>	<u>0.3316</u>	<u>4301</u>	<u>0.9764</u>	<u>0.0161</u>	<u>0.7381</u>
<u>3405</u>	<u>0.3805</u>	<u>0.0064</u>	<u>0.2015</u>	<u>4302</u>	<u>0.9390</u>	<u>0.0158</u>	<u>0.5248</u>
<u>3406</u>	<u>0.3325</u>	<u>0.0056</u>	<u>0.2064</u>	<u>4304</u>	<u>1.0833</u>	<u>0.0177</u>	<u>0.9319</u>
<u>3407</u>	<u>1.0079</u>	<u>0.0171</u>	<u>0.4720</u>	<u>4305</u>	<u>1.4213</u>	<u>0.0242</u>	<u>0.6144</u>
<u>3408</u>	<u>0.3502</u>	<u>0.0060</u>	<u>0.1624</u>	<u>4401</u>	<u>0.4493</u>	<u>0.0075</u>	<u>0.2720</u>
<u>3409</u>	<u>0.2123</u>	<u>0.0035</u>	<u>0.1417</u>	<u>4402</u>	<u>0.8645</u>	<u>0.0147</u>	<u>0.4159</u>
<u>3410</u>	<u>0.2123</u>	<u>0.0035</u>	<u>0.1417</u>	<u>4404</u>	<u>0.5706</u>	<u>0.0096</u>	<u>0.3311</u>
<u>3411</u>	<u>0.7057</u>	<u>0.0120</u>	<u>0.3080</u>	<u>4501</u>	<u>0.2050</u>	<u>0.0034</u>	<u>0.1311</u>
<u>3412</u>	<u>0.9971</u>	<u>0.0171</u>	<u>0.3562</u>	<u>4502</u>	<u>0.0837</u>	<u>0.0014</u>	<u>0.0459</u>
<u>3414</u>	<u>1.1101</u>	<u>0.0189</u>	<u>0.4892</u>	<u>4504</u>	<u>0.1333</u>	<u>0.0022</u>	<u>0.0990</u>
<u>3415</u>	<u>1.3994</u>	<u>0.0237</u>	<u>0.6965</u>	<u>4802</u>	<u>0.5135</u>	<u>0.0086</u>	<u>0.3482</u>
<u>3501</u>	<u>0.5130</u>	<u>0.0085</u>	<u>0.3728</u>	<u>4803</u>	<u>0.4561</u>	<u>0.0075</u>	<u>0.3874</u>
<u>3503</u>	<u>0.3901</u>	<u>0.0065</u>	<u>0.2313</u>	<u>4804</u>	<u>0.6450</u>	<u>0.0106</u>	<u>0.5074</u>
<u>3506</u>	<u>1.1278</u>	<u>0.0192</u>	<u>0.4874</u>	<u>4805</u>	<u>0.4198</u>	<u>0.0069</u>	<u>0.3454</u>
<u>3509</u>	<u>0.5334</u>	<u>0.0090</u>	<u>0.3137</u>	<u>4806</u>	<u>0.1292</u>	<u>0.0021</u>	<u>0.1170</u>
<u>3510</u>	<u>0.4263</u>	<u>0.0071</u>	<u>0.2970</u>	<u>4808</u>	<u>0.6290</u>	<u>0.0106</u>	<u>0.3694</u>
<u>3511</u>	<u>0.9928</u>	<u>0.0167</u>	<u>0.5979</u>	<u>4809</u>	<u>0.3111</u>	<u>0.0052</u>	<u>0.2065</u>
<u>3512</u>	<u>0.4053</u>	<u>0.0067</u>	<u>0.2936</u>	<u>4810</u>	<u>0.2624</u>	<u>0.0043</u>	<u>0.2190</u>

Base Rates Effective January 1, (2021) 2022				Base Rates Effective January 1, (2021) 2022			
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund
<u>4811</u>	<u>0.5506</u>	<u>0.0090</u>	<u>0.4709</u>	<u>6104</u>	<u>0.4609</u>	<u>0.0077</u>	<u>0.2876</u>
<u>4812</u>	<u>0.5639</u>	<u>0.0095</u>	<u>0.3418</u>	<u>6105</u>	<u>0.7730</u>	<u>0.0132</u>	<u>0.3255</u>
<u>4813</u>	<u>0.2564</u>	<u>0.0042</u>	<u>0.2380</u>	<u>6107</u>	<u>0.1504</u>	<u>0.0024</u>	<u>0.1663</u>
<u>4900</u>	<u>0.1710</u>	<u>0.0029</u>	<u>0.0756</u>	<u>6108</u>	<u>0.3019</u>	<u>0.0049</u>	<u>0.2545</u>
<u>4901</u>	<u>0.0594</u>	<u>0.0010</u>	<u>0.0256</u>	<u>6109</u>	<u>0.1532</u>	<u>0.0026</u>	<u>0.0715</u>
<u>4902</u>	<u>0.1158</u>	<u>0.0020</u>	<u>0.0625</u>	<u>6110</u>	<u>0.5664</u>	<u>0.0096</u>	<u>0.2721</u>
<u>4903</u>	<u>0.2251</u>	<u>0.0038</u>	<u>0.1095</u>	<u>6120</u>	<u>0.4423</u>	<u>0.0075</u>	<u>0.2135</u>
<u>4904</u>	<u>0.0188</u>	<u>0.0003</u>	<u>0.0120</u>	<u>6121</u>	<u>0.6271</u>	<u>0.0107</u>	<u>0.2653</u>
<u>4905</u>	<u>0.3846</u>	<u>0.0063</u>	<u>0.3222</u>	<u>6201</u>	<u>0.6791</u>	<u>0.0115</u>	<u>0.3381</u>
<u>4906</u>	<u>0.1357</u>	<u>0.0023</u>	<u>0.0709</u>	<u>6202</u>	<u>0.9753</u>	<u>0.0164</u>	<u>0.5739</u>
<u>4907</u>	<u>0.0630</u>	<u>0.0010</u>	<u>0.0660</u>	<u>6203</u>	<u>0.0985</u>	<u>0.0016</u>	<u>0.1170</u>
<u>4908</u>	<u>0.1047</u>	<u>0.0017</u>	<u>0.1022</u>	<u>6204</u>	<u>0.1602</u>	<u>0.0027</u>	<u>0.1165</u>
<u>4909</u>	<u>0.0419</u>	<u>0.0007</u>	<u>0.0408</u>	<u>6205</u>	<u>0.2298</u>	<u>0.0038</u>	<u>0.1428</u>
<u>4910</u>	<u>0.6088</u>	<u>0.0103</u>	<u>0.3147</u>	<u>6206</u>	<u>0.2424</u>	<u>0.0040</u>	<u>0.1658</u>
<u>4911</u>	<u>0.0810</u>	<u>0.0014</u>	<u>0.0388</u>	<u>6207</u>	<u>1.2195</u>	<u>0.0204</u>	<u>0.7399</u>
<u>5001</u>	<u>11.5021</u>	<u>0.1965</u>	<u>4.7005</u>	<u>6208</u>	<u>0.2468</u>	<u>0.0040</u>	<u>0.2304</u>
<u>5002</u>	<u>0.7612</u>	<u>0.0129</u>	<u>0.3837</u>	<u>6209</u>	<u>0.3080</u>	<u>0.0050</u>	<u>0.2675</u>
<u>5003</u>	<u>3.4014</u>	<u>0.0583</u>	<u>1.2767</u>	<u>6301</u>	<u>0.1886</u>	<u>0.0032</u>	<u>0.0837</u>
<u>5004</u>	<u>1.2040</u>	<u>0.0201</u>	<u>0.8106</u>	<u>6303</u>	<u>0.0678</u>	<u>0.0011</u>	<u>0.0365</u>
<u>5005</u>	<u>1.4580</u>	<u>0.0250</u>	<u>0.5189</u>	<u>6305</u>	<u>0.1060</u>	<u>0.0018</u>	<u>0.0783</u>
<u>5006</u>	<u>1.7929</u>	<u>0.0308</u>	<u>0.6201</u>	<u>6306</u>	<u>0.4144</u>	<u>0.0070</u>	<u>0.2445</u>
<u>5101</u>	<u>1.3850</u>	<u>0.0237</u>	<u>0.5192</u>	<u>6308</u>	<u>0.0791</u>	<u>0.0013</u>	<u>0.0413</u>
<u>5103</u>	<u>1.0668</u>	<u>0.0179</u>	<u>0.6669</u>	<u>6309</u>	<u>0.2634</u>	<u>0.0044</u>	<u>0.1662</u>
<u>5106</u>	<u>1.0668</u>	<u>0.0179</u>	<u>0.6669</u>	<u>6402</u>	<u>0.2893</u>	<u>0.0048</u>	<u>0.2264</u>
<u>5108</u>	<u>1.0694</u>	<u>0.0181</u>	<u>0.5377</u>	<u>6403</u>	<u>0.1611</u>	<u>0.0027</u>	<u>0.1167</u>
<u>5109</u>	<u>0.6970</u>	<u>0.0119</u>	<u>0.3169</u>	<u>6404</u>	<u>0.3365</u>	<u>0.0056</u>	<u>0.2533</u>
<u>5201</u>	<u>0.3866</u>	<u>0.0065</u>	<u>0.2317</u>	<u>6405</u>	<u>0.8387</u>	<u>0.0142</u>	<u>0.4162</u>
<u>5204</u>	<u>1.4608</u>	<u>0.0251</u>	<u>0.5037</u>	<u>6406</u>	<u>0.1710</u>	<u>0.0028</u>	<u>0.1165</u>
<u>5206</u>	<u>0.5986</u>	<u>0.0101</u>	<u>0.2974</u>	<u>6407</u>	<u>0.3541</u>	<u>0.0059</u>	<u>0.2179</u>
<u>5207</u>	<u>0.1670</u>	<u>0.0028</u>	<u>0.1244</u>	<u>6408</u>	<u>0.7968</u>	<u>0.0134</u>	<u>0.4419</u>
<u>5208</u>	<u>0.8503</u>	<u>0.0143</u>	<u>0.4640</u>	<u>6409</u>	<u>0.8619</u>	<u>0.0146</u>	<u>0.4190</u>
<u>5209</u>	<u>0.8527</u>	<u>0.0144</u>	<u>0.4270</u>	<u>6410</u>	<u>0.4017</u>	<u>0.0068</u>	<u>0.2217</u>
<u>5300</u>	<u>0.1222</u>	<u>0.0021</u>	<u>0.0684</u>	<u>6411</u>	<u>0.0485</u>	<u>0.0008</u>	<u>0.0385</u>
<u>5301</u>	<u>0.0424</u>	<u>0.0007</u>	<u>0.0239</u>	<u>6501</u>	<u>0.1335</u>	<u>0.0023</u>	<u>0.0695</u>
<u>5302</u>	<u>0.0108</u>	<u>0.0002</u>	<u>0.0058</u>	<u>6502</u>	<u>0.0363</u>	<u>0.0006</u>	<u>0.0189</u>
<u>5305</u>	<u>0.0528</u>	<u>0.0009</u>	<u>0.0325</u>	<u>6503</u>	<u>0.1192</u>	<u>0.0020</u>	<u>0.0489</u>
<u>5306</u>	<u>0.0477</u>	<u>0.0008</u>	<u>0.0343</u>	<u>6504</u>	<u>0.2851</u>	<u>0.0046</u>	<u>0.2889</u>
<u>5307</u>	<u>0.9725</u>	<u>0.0166</u>	<u>0.4025</u>	<u>6505</u>	<u>0.1603</u>	<u>0.0026</u>	<u>0.1528</u>
<u>5308</u>	<u>0.1040</u>	<u>0.0017</u>	<u>0.0790</u>	<u>6506</u>	<u>0.1533</u>	<u>0.0026</u>	<u>0.0963</u>
<u>6103</u>	<u>0.0973</u>	<u>0.0016</u>	<u>0.0849</u>	<u>6509</u>	<u>0.2792</u>	<u>0.0046</u>	<u>0.2321</u>

Base Rates Effective January 1, ((2021)) 2022				Base Rates Effective January 1, ((2021)) 2022			
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund
<u>6510</u>	<u>0.6030</u>	<u>0.0104</u>	<u>0.2058</u>	<u>7110</u>	<u>0.6091</u>	<u>0.0103</u>	<u>0.3004</u>
<u>6511</u>	<u>0.3210</u>	<u>0.0053</u>	<u>0.2331</u>	<u>7111</u>	<u>0.4726</u>	<u>0.0081</u>	<u>0.1602</u>
<u>6512</u>	<u>0.1253</u>	<u>0.0021</u>	<u>0.0617</u>	<u>7112</u>	<u>0.7800</u>	<u>0.0130</u>	<u>0.5501</u>
<u>6601</u>	<u>0.2270</u>	<u>0.0038</u>	<u>0.1545</u>	<u>7113</u>	<u>0.5321</u>	<u>0.0089</u>	<u>0.3292</u>
<u>6602</u>	<u>0.6798</u>	<u>0.0113</u>	<u>0.4650</u>	<u>7114</u>	<u>0.8828</u>	<u>0.0146</u>	<u>0.6422</u>
<u>6603</u>	<u>0.3406</u>	<u>0.0057</u>	<u>0.2367</u>	<u>7115</u>	<u>0.6127</u>	<u>0.0101</u>	<u>0.4934</u>
<u>6604</u>	<u>0.0891</u>	<u>0.0015</u>	<u>0.0594</u>	<u>7116</u>	<u>0.6595</u>	<u>0.0112</u>	<u>0.3312</u>
<u>6605</u>	<u>0.3725</u>	<u>0.0062</u>	<u>0.2269</u>	<u>7117</u>	<u>1.3602</u>	<u>0.0227</u>	<u>0.8744</u>
<u>6607</u>	<u>0.1185</u>	<u>0.0020</u>	<u>0.0912</u>	<u>7118</u>	<u>2.2303</u>	<u>0.0377</u>	<u>1.1628</u>
<u>6608</u>	<u>0.8288</u>	<u>0.0143</u>	<u>0.2324</u>	<u>7119</u>	<u>2.4177</u>	<u>0.0411</u>	<u>1.1075</u>
<u>6620</u>	<u>4.4416</u>	<u>0.0754</u>	<u>2.1299</u>	<u>7120</u>	<u>7.1065</u>	<u>0.1212</u>	<u>3.0718</u>
<u>6704</u>	<u>0.1530</u>	<u>0.0025</u>	<u>0.1027</u>	<u>7121</u>	<u>11.8028</u>	<u>0.2021</u>	<u>4.5366</u>
<u>6705</u>	<u>0.7044</u>	<u>0.0114</u>	<u>0.7009</u>	<u>7122</u>	<u>0.4190</u>	<u>0.0069</u>	<u>0.3307</u>
<u>6706</u>	<u>0.2880</u>	<u>0.0047</u>	<u>0.2248</u>	<u>7200</u>	<u>3.2292</u>	<u>0.0557</u>	<u>0.9720</u>
<u>6707</u>	<u>11.9160</u>	<u>0.1944</u>	<u>10.5239</u>	<u>7201</u>	<u>2.3223</u>	<u>0.0398</u>	<u>0.8636</u>
<u>6708</u>	<u>9.6752</u>	<u>0.1558</u>	<u>9.8167</u>	<u>7202</u>	<u>0.0327</u>	<u>0.0006</u>	<u>0.0162</u>
<u>6709</u>	<u>0.3220</u>	<u>0.0054</u>	<u>0.2143</u>	<u>7203</u>	<u>0.1058</u>	<u>0.0017</u>	<u>0.1100</u>
<u>6801</u>	<u>1.0296</u>	<u>0.0178</u>	<u>0.3030</u>	<u>7204</u>	<u>0.0000</u>	<u>0.0000</u>	<u>0.0000</u>
<u>6802</u>	<u>1.0340</u>	<u>0.0175</u>	<u>0.5129</u>	<u>7205</u>	<u>0.0000</u>	<u>0.0000</u>	<u>0.0000</u>
<u>6803</u>	<u>0.8745</u>	<u>0.0151</u>	<u>0.2339</u>	<u>7301</u>	<u>0.7736</u>	<u>0.0127</u>	<u>0.6313</u>
<u>6804</u>	<u>0.3417</u>	<u>0.0057</u>	<u>0.2141</u>	<u>7302</u>	<u>0.9579</u>	<u>0.0159</u>	<u>0.7061</u>
<u>6809</u>	<u>4.4187</u>	<u>0.0725</u>	<u>3.6843</u>	<u>7307</u>	<u>0.6028</u>	<u>0.0101</u>	<u>0.3922</u>
<u>6901</u>	<u>0.0000</u>	<u>0.0000</u>	<u>0.0670</u>	<u>7308</u>	<u>0.2704</u>	<u>0.0044</u>	<u>0.2498</u>
<u>6902</u>	<u>1.1296</u>	<u>0.0192</u>	<u>0.5239</u>	<u>7309</u>	<u>0.2665</u>	<u>0.0043</u>	<u>0.2377</u>
<u>6903</u>	<u>7.3824</u>	<u>0.1269</u>	<u>2.5581</u>	<u>7400</u>	<u>3.7135</u>	<u>0.0641</u>	<u>1.1178</u>
<u>6904</u>	<u>1.8754</u>	<u>0.0322</u>	<u>0.6760</u>				
<u>6905</u>	<u>1.3846</u>	<u>0.0238</u>	<u>0.4990</u>				
<u>6906</u>	<u>0.0000</u>	<u>0.0000</u>	<u>0.4513</u>				
<u>6907</u>	<u>1.0289</u>	<u>0.0172</u>	<u>0.6362</u>				
<u>6908</u>	<u>0.4864</u>	<u>0.0082</u>	<u>0.2549</u>				
<u>6909</u>	<u>0.1454</u>	<u>0.0024</u>	<u>0.0895</u>				
<u>7100</u>	<u>0.0277</u>	<u>0.0005</u>	<u>0.0119</u>				
<u>7101</u>	<u>0.0331</u>	<u>0.0006</u>	<u>0.0157</u>				
<u>7103</u>	<u>1.5366</u>	<u>0.0264</u>	<u>0.5442</u>				
<u>7104</u>	<u>0.0317</u>	<u>0.0005</u>	<u>0.0180</u>				
<u>7105</u>	<u>0.0207</u>	<u>0.0003</u>	<u>0.0131</u>				
<u>7106</u>	<u>0.3382</u>	<u>0.0056</u>	<u>0.2177</u>				
<u>7107</u>	<u>0.4918</u>	<u>0.0082</u>	<u>0.3060</u>				
<u>7108</u>	<u>0.2963</u>	<u>0.0049</u>	<u>0.2175</u>				
<u>7109</u>	<u>0.1278</u>	<u>0.0022</u>	<u>0.0726</u>				

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-89502 Industrial insurance accident fund, stay at work, medical aid and supplemental pension rates by class of industry for nonhourly rated classifications. The base rates as set forth below are for classifications whose premium rates are based on units other than hours worked.

**Base Rates Effective
January 1, ((2024)) 2022**

Class	Accident Fund	Stay at Work	Medical Aid Fund	Supplemental Pension Fund
((540	0.0281	0.0004	0.0126	0.0011
541	0.0115	0.0002	0.0058	0.0011
550	0.0498	0.0008	0.0197	0.0011
551	0.0184	0.0003	0.0081	0.0011))
<u>540</u>	<u>0.0248</u>	<u>0.0004</u>	<u>0.0116</u>	<u>0.0013</u>
<u>541</u>	<u>0.0118</u>	<u>0.0002</u>	<u>0.0057</u>	<u>0.0013</u>
<u>550</u>	<u>0.0510</u>	<u>0.0009</u>	<u>0.0199</u>	<u>0.0013</u>
<u>551</u>	<u>0.0171</u>	<u>0.0003</u>	<u>0.0076</u>	<u>0.0013</u>

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-89507 Horse racing rates. Horse racing industry industrial insurance accident fund, stay at work fund, medical aid fund, supplemental pension fund and composite rate by class.

**Base Rates Effective
January 1, ((2024)) 2022**

Class	Accident Fund	Stay at Work	Medical Aid Fund	Supplemental Pension Fund	Composite Rate
((6618	74.00*	1.00*	74.00*	1.00*	150.00*
6625	76.95**	1.32**	71.84**	13.72**	163.83**
6626	0.5888***	0.0101***	0.6139***	0.1372***	1.3500***
6627	10.5590****	0.1810****	8.2610****	1.0290****	20.0300****))
<u>6618</u>	<u>74.00*</u>	<u>1.00*</u>	<u>74.00*</u>	<u>1.00*</u>	<u>150.00*</u>
<u>6625</u>	<u>76.67**</u>	<u>1.48**</u>	<u>74.66**</u>	<u>15.64**</u>	<u>168.45**</u>
<u>6626</u>	<u>0.6102***</u>	<u>0.0118***</u>	<u>0.6316***</u>	<u>0.1564***</u>	<u>1.4100***</u>
<u>6627</u>	<u>11.0140****</u>	<u>0.2130****</u>	<u>8.7400****</u>	<u>1.1730****</u>	<u>21.1400****</u>

*This rate is calculated on a percentage of ownership in a horse or horses.

**This rate is calculated per month.

***This rate is calculated per horse per day.

****This rate is calculated per day.

Note: These rates are not subject to experience rating or retrospective rating.

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-89508 Farm internship program industrial insurance, accident fund, stay at work fund, medical aid fund, and supplemental pension by class.

**Base Rates Effective
January 1, ((2024)) 2022**

Class	Accident Fund	Stay at Work Fund	Medical Aid Fund	Supplemental Pension Fund
((4814	0.1175	0.0017	0.1330	0.1372
4815	0.2176	0.0031	0.2776	0.1372
4816	0.3514	0.0051	0.3725	0.1372))
<u>4814</u>	<u>0.1163</u>	<u>0.0019</u>	<u>0.1309</u>	<u>0.1564</u>
<u>4815</u>	<u>0.2157</u>	<u>0.0034</u>	<u>0.2739</u>	<u>0.1564</u>
<u>4816</u>	<u>0.3480</u>	<u>0.0056</u>	<u>0.3676</u>	<u>0.1564</u>

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17-920 Assessment for supplemental pension fund. The amount of ~~((68.6 mils (\$0.0686)))~~ 78.2 mils (\$0.0782) shall be retained by each employer from the earnings of each worker for each hour or fraction thereof the worker is employed. The amount of money so retained from the employee shall be matched in an equal amount by each employer, except as otherwise provided in these rules, all such moneys shall be remitted to the department on or before the last day of January, April, July, and October of each year for the preceding calendar quarter, provided self-insured employers shall remit to the department as provided under WAC 296-15-229. All such moneys shall be deposited in the supplemental pension fund.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 296-17-89509 Classification 2103.

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17B-530 Determining case incurred losses. If a claim is closed, we will use the actual losses for the claim as defined in WAC 296-17-870(1). If the claim is open, we will use either the case reserve amounts or the actual losses, whichever are higher.

Where not in conflict with these rules, we will use the rules for valuing claims for experience rating found in WAC 296-17-870 (1), (5) through (7), and (10) through (13).

Employer reimbursements from the Washington stay-at-work program will not be included in the case incurred costs of claims.

~~((2019 Novel coronavirus (COVID-19)))~~ **Public health emergency claims:** All accepted ~~((COVID-19))~~ claim losses resulting from a declared public health emergency with a date of injury or last injurious exposure on or after January 1, 2020, will not be included in the retrospective rating adjustment calculations.

AMENDATORY SECTION (Amending WSR 20-24-094, filed 11/30/20, effective 1/1/21)

WAC 296-17B-540 Determining loss incurred for each claim. (1) Calculating the initial loss incurred:

For each of your claims, we will multiply the case incurred loss by the appropriate discounted loss development factors to determine the initial loss incurred.

If you have a fatality, we will use ~~((four hundred forty-seven thousand two hundred dollars (\$447,200)))~~ \$474,400 as the claim's initial incurred loss for the claim, with ~~((four hundred seventeen thousand one hundred dollars (\$417,100)))~~ \$440,900 for accident fund incurred loss and ~~((thirty thousand one hundred dollars (\$30,100)))~~ \$33,500 for the medical aid incurred loss, regardless of the case incurred loss, and before recovery factors if applicable.

(2) Applying the single loss occurrence limit:

The initial loss incurred for a claim will be the amount we use as the loss incurred unless the single loss occurrence limit applies.

The single loss occurrence limit applies when the sum of all initial losses incurred for your claims arising out of a single event is greater than your selected single loss occurrence limit. In that case, each claim's initial loss incurred will be its proportionate share of your single loss occurrence limit.

(3) Applying the expected loss ratio factors:

The preliminary loss incurred for a claim will be the amount of the initial loss incurred, after application of the single loss limit, multiplied by the appropriate expected loss ratio factor. The accident fund and medical aid fund portions of each claim will have separate expected loss ratio factors applied.

WSR 21-24-072

PERMANENT RULES

OFFICE OF THE

INSURANCE COMMISSIONER

[Insurance Commissioner Matter No. R 2021-14—Filed November 30, 2021, 11:25 a.m., effective January 1, 2022]

Effective Date of Rule: January 1, 2022.

Purpose: To add new sections and amend existing rules as necessary to implement chapter 280, Laws of 2021, regarding health insurance discrimination and gender affirming treatment.

Citation of Rules Affected by this Order: New WAC 284-43-5151; and amending WAC 284-43-3070, 284-43-5940, 284-43-7080, and 284-170-260.

Statutory Authority for Adoption: RCW 48.02.060, 48.43.515; and chapter 280, Laws of 2021.

Adopted under notice filed as WSR 21-20-110 on October 4, 2021.

Changes Other than Editing from Proposed to Adopted Version: References to "facial feminization surgeries" were removed, but the wording "facial gender affirming treatment (such as tracheal shaves)" was retained. References to "hair electrolysis" were replaced with "hair removal procedures."

A final cost-benefit analysis is available by contacting Shari Maier, 302 Sid Snyder Avenue S.W., Suite 200, Olympia, WA 98501, phone 360-725-7173, email ShariM@oic.wa.gov.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 1, Amended 4, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making:

New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 30, 2021.

Mike Kreidler
Insurance Commissioner

AMENDATORY SECTION (Amending WSR 20-24-120, filed 12/2/20, effective 1/2/21)

WAC 284-43-3070 Notice and explanation of adverse benefit determination—General requirements. (1) A carrier must notify enrollees of an adverse benefit determination either electronically or by U.S. mail. The notification must be provided:

(a) To an appellant or their authorized representative;
(b) To the provider if the adverse benefit determination involves the preservice denial of treatment or procedure prescribed by the provider; and

(c) Whenever an adverse benefit determination relates to a protected individual, as defined in RCW 48.43.005, the health carrier must follow RCW 48.43.505.

(2) A carrier or health plan's notice must include the following information, worded in plain language:

(a) The specific reasons for the adverse benefit determination;

(b) The specific health plan policy or contract sections on which the determination is based, including references to the provisions;

(c) The plan's review procedures, including the appellant's right to a copy of the carrier and health plan's records related to the adverse benefit determination;

(d) The time limits applicable to the review; ~~(and)~~

(e) The right of appellants and their providers to present evidence as part of a review of an adverse benefit determination;

(f) Effective April 1, 2022, the following statement: "Enrollees may request that a health insurer identify the medical, vocational, or other experts whose advice was obtained in connection with the adverse benefit determination, even if the advice was not relied on in making the determination. Health insurers may satisfy this requirement by providing the job title, a statement as to whether the expert is affiliated with the carrier as an employee, and the expert's specialty, board certification status, or other criteria related to the expert's qualification without providing the expert's name or address."; and

(g) When the adverse benefit determination concerns gender affirming treatment or services, a confirmation that a health care provider experienced with prescribing or delivering gender affirming treatment has reviewed the determination and confirmed that an adverse benefit determination denying or limiting the service is appropriate and provide information to confirm that the reviewing provider has clinically appropriate expertise prescribing or delivering gender affirming treatment.

(3) If an adverse benefit determination is based on medical necessity, decisions related to experimental treatment, or a similar exclusion or limit involving the exercise of professional judgment, the notification must contain either an explanation of the scientific or clinical basis for the determi-

nation, the manner in which the terms of the health plan were applied to the appellant's medical circumstances, or a statement that such explanation is available free of charge upon request.

(4) A health carrier must not issue an adverse benefit determination concerning gender affirming services or treatment until a health care provider with experience prescribing or delivering gender affirming treatment has reviewed and confirmed the appropriateness of the adverse benefit determination.

(5) If an internal rule, guideline, protocol, or other similar criterion was relied on in making the adverse benefit determination, the notice must contain either the specific rule, guideline, protocol, or other similar criterion; or a statement that a copy of the rule, guideline, protocol, or other criterion will be provided free of charge to the appellant on request.

~~((5))~~ (6) The notice of an adverse benefit determination must include an explanation of the right to review the records of relevant information, including evidence used by the carrier or the carrier's representative that influenced or supported the decision to make the adverse benefit determination.

(a) For purposes of this subsection, "relevant information" means information relied on in making the determination, or that was submitted, considered, or generated in the course of making the determination, regardless of whether the document, record, or information was relied on in making the determination.

(b) Relevant information includes any statement of policy, procedure, or administrative process concerning the denied treatment or benefit, regardless of whether it was relied on in making the determination.

~~((6))~~ (7) If the carrier and health plan determine that additional information is necessary to perfect the denied claim, the carrier and health plan must provide a description of the additional material or information that they require, with an explanation of why it is necessary, as soon as the need is identified.

~~((7))~~ (8) An enrollee or covered person may request that a carrier identify the medical, vocational, or other experts whose advice was obtained in connection with the adverse benefit determination, even if the advice was not relied on in making the determination. The carrier may satisfy this requirement by providing the job title, a statement as to whether the expert is affiliated with the carrier as an employee, and the expert's specialty, board certification status, or other criteria related to the expert's qualification without providing the expert's name or address. The carrier must be able to identify for the commissioner upon request the name of each expert whose advice was obtained in connection with the adverse benefit determination.

~~((8))~~ (9) The notice must include language substantially similar to the following:

"If you request a review of this adverse benefit determination, (Company name) will continue to provide coverage for the disputed benefit pending outcome of the review if you are currently receiving services or supplies under the disputed benefit. If (Company name) prevails in the appeal, you may be responsible for the cost of coverage received during

the review period. The decision at the external review level is binding unless other remedies are available under state or federal law."

NEW SECTION

WAC 284-43-5151 Unfair practice relating to gender affirming treatment and services. When a treatment or service is gender affirming treatment, as defined in RCW 48.43.0128, it is an unfair practice for any health carrier to:

(1) Deny or limit coverage, issue automatic denials of coverage, impose additional cost sharing or other limitations or restrictions on coverage, or deny or limit coverage of a claim, if gender affirming treatment is:

(a) Prescribed to an individual because of, related to, or consistent with a person's gender expression or identity, as defined in RCW 49.60.040;

(b) Medically necessary; and

(c) Prescribed in accordance with accepted standards of care;

(2) Apply blanket exclusions or categorical exclusions to gender affirming treatment; or

(3) When prescribed as medically necessary, exclude facial gender affirming treatment (such as tracheal shaves), hair removal procedures, and other care (such as mastectomies, breast reductions, breast implants, or any combination of gender affirming procedures, including revisions to prior treatment) as cosmetic services.

AMENDATORY SECTION (Amending WSR 20-24-040, filed 11/23/20, effective 12/24/20)

WAC 284-43-5940 Nondiscrimination in health plans, short-term limited duration medical plans and student-only health plans. (1) An issuer offering a plan, and the issuer's officials, employees, agents, or representatives may not:

(a) Design plan benefits, or implement its plan benefits, in a manner that results in discrimination against individuals because of their age, expected length of life, present or predicted disability, degree of medical dependency, quality of life, or other health conditions; and

(b) With respect to the plan including, but not limited to, administration, member communication, medical protocols or criteria for medical necessity or other aspects of plan operations:

(i) Discriminate on the basis of race, color, national origin, sex, gender identity, sexual orientation, age, or disability;

(ii) Deny, cancel, limit, or refuse to issue or renew a plan, or deny or limit coverage of a claim, or impose additional cost sharing or other limitations or restrictions on coverage, on the basis of race, color, national origin, sex, gender identity, sexual orientation, age, or disability;

(iii) Have or implement marketing practices or benefit designs that discriminate on the basis of race, color, national origin, sex, gender identity, sexual orientation, age, or disability. In reviewing plan design, plan features that attempt to circumvent coverage of medically necessary benefits such as by labeling a benefit as a pediatric service, and thereby excluding adults, or by placing all or most drugs for a specific condition in the highest cost-sharing tier, absent an appropri-

ate reason for the exclusion, are potentially discriminatory. In these or other instances, the commissioner may request a justification for the practice. If requested, issuers must identify an appropriate nondiscriminatory reason that supports their benefit design;

(iv) Deny or limit coverage, deny or limit coverage of a claim, issue automatic denials of coverage or impose additional cost sharing or other limitations or restrictions on coverage, for:

(A) Any health services that are ordinarily or exclusively available to individuals of one sex, based on the fact that an individual's sex assigned at birth, gender identity, or gender otherwise recorded is different from the one to which such health services are ordinarily or exclusively available. For example, a denial of coverage for medically necessary hormone prescriptions for transgender, gender nonconforming, or intersex individuals because the dosages exceed those typically prescribed for cisgender people would be discriminatory against transgender, nonbinary, gender nonconforming, or intersex individuals; or

(B) Gender affirming treatment, as defined in RCW 48.43.0128, when that treatment is:

(I) Prescribed to an individual because of, related to, or consistent with a person's gender expression or identity, as defined in RCW 49.60.040;

(II) Medically necessary; and

(III) Prescribed in accordance with accepted standards of care;

(v) Have or implement a categorical coverage exclusion or limitation for all medical, surgical, or behavioral health services related to a person's gender identity or sexual orientation, including gender affirming treatment; or

(vi) When prescribed as medically necessary, exclude facial gender affirming treatment (such as tracheal shaves), hair removal procedures, and other care (such as mastectomies, breast reductions, breast implants, or any combination of gender affirming procedures, including revisions to prior treatment) as cosmetic services; or

(vii) Otherwise deny or limit coverage, deny or limit coverage of a claim, or impose additional cost sharing or other limitations or restrictions on coverage, for specific medical, surgical, or behavioral health services related to a person's gender identity or sexual orientation if such denial, limitation, or restriction results in discrimination against a transgender, nonbinary, gender nonconforming or intersex individual.

(2) The enumeration of specific forms of discrimination in subsection (1)(b)(ii) through ~~((vi))~~ (vii) of this section does not limit the general applicability of the prohibition in subsection (1)(b)(i) of this section.

(3) Nothing in this section may be construed to prevent an issuer from appropriately utilizing fair and reasonable medical management techniques. Appropriate use of medical management techniques includes use of evidence based criteria for determining whether a service or benefit is medically necessary and clinically appropriate.

(4) An issuer's obligation to comply with these requirements is nondelegable; an issuer is obligated to ensure compliance with WAC 284-43-5935 through 284-43-5980, even if they use a third-party vendor or subcontracting arrange-

ment. An issuer is not exempt from any of these requirements because it relied upon a third-party vendor or subcontracting arrangement for administration of any aspect of its benefits or services.

(5) The commissioner may determine whether an issuer's actions to comply with this section are consistent with current state law, the legislative intent underlying RCW 48.43.0128 to maintain the enrollee protections of the Affordable Care Act, and the federal regulations and guidance in effect as of January 1, 2017, including, but not limited to, those issued by the U.S. Department of Health and Human Services Office of Civil Rights and federal regulations implementing 42 U.S.C. Sec. 18116 (Sec. 1557 of the Affordable Care Act) as set forth in 81 Fed. Reg. 31375 et seq. (2016).

AMENDATORY SECTION (Amending WSR 20-24-040, filed 11/23/20, effective 12/24/20)

WAC 284-43-7080 Prohibited exclusions. (1) Benefits for actual treatment and services rendered may not be denied solely because a course of treatment was interrupted or was not completed.

(2) If a service is prescribed for a mental health condition and is medically necessary, it may not be denied solely on the basis that it is part of a category of services or benefits that is excluded by the terms of the contract.

(3) Benefits for mental health services and substance use disorder may not be limited or denied based solely on age or condition.

(4) When a treatment or service is gender affirming treatment, as defined in RCW 48.43.0128, a health carrier may not:

(a) Deny or limit coverage, deny or limit coverage of a claim, issue automatic denials of coverage or impose additional cost sharing or other limitations or restrictions on coverage if that treatment is:

(i) Prescribed to an individual because of, related to, or consistent with a person's gender expression or identity, as defined in RCW 49.60.040;

(ii) Medically necessary; and

(iii) Prescribed in accordance with accepted standards of care; or

(b) Apply blanket exclusions; or

(c) When prescribed as medically necessary, exclude facial gender affirming treatment (such as tracheal shaves), hair removal procedures, and other care (such as mastectomies, breast reductions, breast implants, or any combination of gender affirming procedures, including revisions to prior treatment) as cosmetic services.

(5) Nothing in this section relieves a plan or an issuer from its obligations to pay for a court ordered substance use disorder benefit or mental health benefit when it is medically necessary.

AMENDATORY SECTION (Amending WSR 21-01-094, filed 12/11/20, effective 1/11/21)

WAC 284-170-260 Provider directories. (1) For each carrier that uses a provider network, the carrier must make information about that network available to the general pub-

lic, prospective enrollees and enrollees, in the form of an easily accessible and searchable online provider directory.

Easily accessible for the purposes of this section means:

(a) The general public is able to view all of the current providers for each plan in the provider directory on the carrier's public website through a clearly identifiable link or tab and without creating or accessing an account or entering a policy number; and

(b) If a carrier maintains multiple provider networks, the carrier must post the current provider directory for each plan so the general public is able to easily discern which providers participate in which plans and which provider networks.

(2) Carriers must make a printed copy of the current provider directory available to an enrollee upon request as required under RCW 48.43.510 (1)(g). The printed directory must contain the carrier's telephone number, including a TTY/TTD number, and any other contact information to enable the enrollee to obtain information about providers in the health plan network.

(3) Printed and online provider directories must be made available to the general public, prospective (~~enrollee's~~) enrollees and (~~enrollee's~~) enrollees in a manner that accommodates individuals with limited-English proficiency or disabilities.

(4) Printed and online provider directories must be updated for accuracy at least monthly. To ensure accuracy:

(a) Each provider directory must include clear instructions about how a consumer or an enrollee can report inaccurate information in the provider directory to the carrier.

(b) Carriers must have an easily available method for providers to report changes to their provider directory information, in addition to any reports associated with initial or renewed credentialing used by the carrier.

(c) Carriers must investigate reported inaccuracies from providers and consumers, and if verified, correct inaccuracies as part of the carrier's monthly updates.

(d) Carriers must establish processes and procedures to confirm the accuracy of provider directory information, including processes and procedures to ensure that changes are made when inaccuracies are verified. Carriers must provide the processes and procedures and any associated records, including the provider directories, to the commissioner upon request for review.

(5) Printed and online provider directories must include the following information for each provider:

(a) The provider's location and telephone number;

(b) The specialty area or areas for which the provider is licensed to practice and included in the network;

(c) Any in-network institutional affiliation of the provider, such as hospitals where the provider has admitting privileges or provider groups with which a provider is a member;

(d) Whether the provider may be accessed without referral;

(e) Any languages, other than English, spoken by the provider; and

(f) If a provider offers mental health or substance use disorder treatment services, identify in the directory that the provider is contracted to deliver mental health or substance use disorder treatment services.

(6) A carrier must include in its printed and online provider directories a notation of any primary care, chiropractor, women's health care provider, mental health provider, substance use disorder provider, or pediatric provider whose practice is closed to new patients.

(7) Printed and online provider directories must include information about any available telemedicine services, including any audio-only telemedicine services that are available, and specifically describe the services and how to access those services.

(8) Printed and online provider directories must include information about any available interpreter services, communication and language assistance services, and accessibility of the physical facility, and the mechanism by which an enrollee may access such services.

(9) Printed and online provider directories must include information about the network status of emergency providers as required by WAC 284-170-370.

(10) In both printed and online provider directories, the carrier must indicate that, if an enrollee is unable to locate a gender affirming treatment provider, the carrier must identify a gender affirming treatment provider.

WSR 21-24-077
PERMANENT RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Economic Services Administration)
(Division of Child Support)

[Filed November 30, 2021, 3:30 p.m., effective December 31, 2021]

Effective Date of Rule: Thirty-one days after filing.

Purpose: The division of child support (DCS) is enacting WAC 388-14A-4900 Insurers must report claim information to the division of child support and withhold payments if directed.

Beginning January 1, 2022, insurers will be required to report insurance claims to DCS under RCW 26.23.037. This permanent rule will ensure that insurers provide the necessary information under the law for these insurance intercept actions.

Citation of Rules Affected by this Order: New WAC 388-14A-4900.

Statutory Authority for Adoption: RCW 26.23.037, 26.23.110, 74.08.090, 74.20A.055.

Adopted under notice filed as WSR 21-21-045 on October 14, 2021.

Changes Other than Editing from Proposed to Adopted Version: Adding clarifying language that a claim is deemed open when a claimant is identified and that an insurer fax number is only required if one exists. These changes were requested by representatives of the insurance industry that will be directly impacted by the rule.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 1, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 1, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 1, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 1, Amended 0, Repealed 0.

Date Adopted: November 30, 2021.

Katherine I. Vasquez
Rules Coordinator

NEW SECTION

WAC 388-14A-4900 Insurers must report claim information to the division of child support and withhold payments if directed.

(1) Insurers must report certain insurance claims to the division of child support. Within 10 days after opening a tort liability claim for bodily injury or wrongful death, a workers' compensation claim, or a claim under a policy of life insurance, including an annuity, the insurer must report sufficient information to the division of child support to enable it to verify whether the claimant or other beneficiary owes child support. A claim is deemed opened when an insurer has sufficient information to:

- (a) Identify the claimant;
- (b) Determine that the claimant is entitled to payment of the insurance claim proceeds; and
- (c) Make such payment. In the case of a claim that will be paid through periodic payments, the insurer must only report the claim before issuing the initial payment.

(2) The information reporting requirements are satisfied so long as the insurer provides minimum identifying information. Minimum identifying information about the claimant includes:

- (a) The claimant's full name;
- (b) The claimant's Social Security number, or if that is unavailable, the claimant's physical address and date of birth;
- (c) The insurer's name;
- (d) The insurer's claims department address for lien receipt;
- (e) The insurer's claim number in the proper format for identification of the claim;
- (f) The insurer's claim date of loss;
- (g) The adjustor's name;
- (h) The adjustor's telephone number;
- (i) The adjustor's email address; and
- (j) The insurer's fax number for receiving lien notices, if one exists.

(3) Insurers can report information:

- (a) To the federal office of child support enforcement or the child support lien network;
- (b) Through an insurance claim data collection organization, which submits the required information to the federal office of child support enforcement, the child support lien network, or the division of child support within the timeframes and in the manner required by law; or

(c) To the division of child support special collections unit in writing or electronically, if the insurer does not have the capability to report through the above methods.

(4) Upon receipt of claims information, the division of child support will determine whether a child support debt exists. If so, the division of child support will issue a notice to the insurer to withhold payment and remit to the division of child support. An insurer is not required to remit payment to the division of child support if the notice issued is received after the insurer has disbursed payment on the claim.

(5) The division of child support will give any lien, claim, or demand for reasonable claim-related attorneys' fees, property damage, and medical costs priority over any withholding of payment. These costs must be final costs after all reductions have been pursued with interested parties.

WSR 21-24-094
PERMANENT RULES
EXECUTIVE ETHICS BOARD

[Filed December 1, 2021, 6:28 a.m., effective January 1, 2022]

Effective Date of Rule: Thirty-one days after filing.

Purpose: The purpose of this rule making is to update the rule and provide clarity to state employees and the public.

Citation of Rules Affected by this Order: Amending chapter 292-100 WAC.

Statutory Authority for Adoption: RCW 42.52.360.

Adopted under notice filed as WSR 21-20-038 on September 30 [27], 2021.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 18, Repealed 1.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 1, Repealed 0.

Date Adopted: December 1, 2021.

Ruthann Bryant
Administrative Officer

AMENDATORY SECTION (Amending WSR 17-01-138, filed 12/20/16, effective 1/20/17)

WAC 292-100-050 Determination on reasonable cause. (1) Following an investigation and preparation of the written investigative report, if the complaint is not dismissed by the executive director under WAC 292-100-045, the ~~((board staff will prepare a written investigation report and make a recommendation))~~ results of the investigation will be

~~presented to the board ((on whether to)). Board staff may recommend that the board find reasonable cause, including a recommendation as to the potential penalty, or may recommend that the matter be dismissed.~~

(2) Upon receipt of the board staff's investigation report and recommendation, the board will determine:

(a) ~~Whether ((or not)) there is reasonable cause to believe that a violation of chapter 42.52 RCW has occurred, and the potential penalty; or~~

Whether to dismiss the matter.

(3) The board's review of reasonable cause determinations will be done in closed session.

(4) If after determining reasonable cause, the board determines that the penalty and costs should be greater than ~~((five hundred dollars))~~ \$500, the respondent will be given the option to have an administrative law judge conduct the hearing and rule on procedural and evidentiary matters in accordance with RCW 42.52.500.

(5) The board may, on its own initiative, choose to retain an administrative law judge to conduct any hearing.

(6) Upon receipt of an investigation report and recommendation on a complaint referred to the employing agency for investigation, the board will either:

(a) Reject the report and recommendation and initiate its own investigation; or

(b) Reject or concur with the report and recommendation and dismiss the complaint; or

(c) Concur with the report and recommendation and proceed under this section; or

(d) Concur with the report and recommendation and refer the matter to the employing agency for implementation of the recommendation if the recommendation is within the agency's authority to implement. The agency will report implementation to the board and the board will then dismiss the complaint.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-060 Notice of hearing—Filing of answer. (1) Following the board's determination on reasonable cause, the board ~~((shall))~~ will provide the complainant, the respondent and the employing agency with a copy of the written determination on reasonable cause and ~~((a copy of the board staff's written investigation))~~ investigative report. ~~((If reasonable cause is found, the determination of reasonable cause shall include a statement of the alleged violations. Prior to scheduling a public hearing, the board shall provide the respondent with an explanation of the option to request that the hearing be conducted by an administrative law judge if the penalty and costs for the alleged violation may be greater than \$500.~~

~~((2) Within 30 days of service of the written determination on reasonable cause, the respondent shall file an answer to the written determination on reasonable cause which shall state his/her response to the alleged violations. The answer shall include either a request for or a waiver of the right to))~~

(2) The respondent has 30 days from the time the determination on reasonable cause is served to file an answer to the determination on reasonable cause and request an adjudica-

tive proceeding and/or settlement. If the penalty is over \$500, the respondent may request an administrative law judge ((if the penalty and costs for the alleged violation may be greater than \$500)) at the hearing. The administrative judge's role is limited to ruling on procedural and evidentiary matters.

(3) Failure to file an answer ((to the written determination on reasonable cause)) and request an adjudicative hearing and/or settlement within 30 days of service constitutes a default, and the board may proceed to resolve the case without further notice to, or hearing for the benefit of, the respondent.

(4) Within 10 days after service of a default order under subsection (3) of this section, the respondent may file a written motion requesting that the default order be vacated((;)) and stating the grounds relied upon. During the time within which a party may file a written motion under this subsection, the board chair or a designated board member may adjourn further proceedings or conduct them without the participation of the respondent.

(5) ((Within 30 days of service of the written determination on reasonable cause, the respondent shall have the right to request an administrative law judge if the penalty and costs for the alleged violation may be greater than \$500. If the respondent fails to request an administrative law judge within 30 days, the right to have the matter presided over by an administrative law judge is waived. If the respondent does not request an administrative law judge within 30 days and has not defaulted pursuant to this section, the board staff may, at its option, commence an adjudicative proceeding to resolve the matter.

((6)) If a hearing is requested by the respondent, the respondent ((shall)) will be notified of the date of the hearing no later than ((20)) seven days before the hearing date.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-080 Investigation procedures—Subpoenas. (1) During the course of an investigation, the board((; a board member)), or the executive director((;)) may issue ((a)) subpoenas ((directed to any person who is likely to possess information which is relevant and)) to persons to appear and give testimony, and may require the production of any books, papers, correspondence, memoranda, or other records deemed relevant or material to the investigation. The subpoena ((shall)) must:

(a) Specifically describe the information which is sought, and

(b) Require the production of information at a reasonable place and time, but no later than ((ten)) 10 days from the date it is served, and

(c) Notify the person that if the information is not produced, the board will apply to the superior court for an appropriate order or other remedy.

(2) The subpoena may be personally delivered or sent by certified mail, return receipt requested.

((2) The board may issue a subpoena under RCW 42.52.390 to compel persons to appear and give testimony and may require the production of any books, papers, corre-

spondence, memorandums or other documents which the board deems relevant and material.))

AMENDATORY SECTION (Amending WSR 99-06-073, filed 3/2/99, effective 4/2/99)

WAC 292-100-090 ((Informal settlement—)) Cases resolvable by stipulation. (1) ((RCW 34.05.060 authorizes agencies to establish by rule specific procedures for attempting and executing informal settlement of matters. The following procedures are available for informal dispute resolution that may make more elaborate proceedings under the Administrative Procedure Act unnecessary.

((a)) Any respondent may request settlement by notifying board staff in writing.

((b) If settlement may be accomplished by negotiation, negotiations shall be commenced at the earliest possible time. When board staff and the respondent agree that some or all of the facts are uncontested and a stipulation of the facts is reached, board staff is responsible for providing a written description of the recommended resolution or stipulation to the person(s) involved.

(c) If settlement of a hearing may be accomplished by informal negotiation, negotiations may be concluded by:

(i) Stipulation of facts by the parties; or

(ii) Stipulation of facts, conclusions and penalty by the parties.

(iii) A stipulated order agreed to by the parties.

(d) Board staff shall only present proposed stipulations and settlements to the board which it recommends the board adopt.))

(2) Settlement may be accomplished by a stipulation of facts, conclusions and penalty by the parties or a stipulated order agreed to by the parties.

(3) Any proposed stipulation ((shall)) must be in writing and signed by each party to the stipulation and ((his or her)) their attorney, if represented. ((The stipulation may be recited on the record at the hearing.)) Board staff will present the proposed stipulation to the board for consideration.

(4) The board has the option of accepting, rejecting, or modifying the proposed stipulation or asking for additional facts to be presented.

(a) If the board accepts the stipulation or modifies the stipulation with the agreement of the respondent, the board ((shall)) will enter ((an order in conformity with the terms of)) the stipulation.

(b) If the board rejects the stipulation or the respondent does not agree to the board's proposed modifications to the stipulation, the normal hearing process will continue.

(c) If the board requests additional facts, the matter will be referred to the board staff for further investigation.

(5) The proposed stipulation and information obtained during ((formal)) settlement discussions ((shall)) will not be admitted into evidence at a subsequent ((public)) hearing. ((If the board requests additional facts be presented, the matter shall be referred to the board staff for further investigation.))

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-100 Prehearing conference~~(—Rule).~~

(1) In any proceeding, the presiding officer upon ~~((his/her))~~ the presiding officer's own motion or upon request by board staff or the respondent or their counsel, may direct the board staff ~~((or))~~ and respondent to appear at a specified time and place for a prehearing conference to consider:

- (a) Simplification of issues;
- (b) ~~((The necessity of amendments to the hearing notice;~~
- ~~(e)))~~ The possibility of obtaining stipulations, admissions of facts and of documents;
- ~~((d)))~~ (c) Limitation on the number of witnesses;
- ~~((e)))~~ (d) Authorizing discovery by any party;
- ~~((f)))~~ (e) Scheduling order; and
- ~~((g)))~~ (f) Procedural and such other matters as may aid in the disposition of the proceeding.

(2) Prehearing conferences may be held by ~~((telephone conference call or at a time and place))~~ teleconference, video conference, or any method specified by the presiding officer.

(3) Following the prehearing conference, the presiding officer ~~((shall))~~ will issue an order reciting the action taken and decisions made at the prehearing conference. If no objection to the order is filed with the presiding officer within seven days after the date the order is mailed, the order ~~((shall))~~ will control the subsequent course of the proceeding unless modified for good cause by subsequent order.

AMENDATORY SECTION (Amending WSR 99-06-073, filed 3/2/99, effective 4/2/99)

WAC 292-100-105 Discovery—Authority of presiding officer. After a finding of reasonable cause, no discovery is permitted by a party pursuant to WAC 292-100-110 through 292-100-150 unless authorized by the presiding officer. In deciding whether to authorize discovery and the extent of discovery to be allowed, the presiding officer ~~((shall))~~ will consider the party's need for discovery while ensuring that discovery does not unduly delay the hearing. ~~((If the determination of reasonable cause includes an allegation that the respondent has violated RCW 42.52.180, the presiding officer shall permit discovery by the parties. Prior to the appointment of a presiding officer, the chair or other member designated by the board may authorize discovery if the party can demonstrate a compelling reason why discovery must be conducted prior to the appointment of a presiding officer.))~~

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-110 Hearings—Discovery—Subpoenas. (1) ~~((The board, a board member, or the executive director may issue subpoenas for discovery, subpoenas to persons to appear and give testimony, and may require the production of any books, papers, correspondence, memoranda, or other records deemed relevant or material and the board or presiding officer may issue protective orders as appropriate. Any party may issue subpoenas.))~~ All subpoenas for hearings must be filed with the presiding officer, together with proof of proper service, at least five days prior to the date of the

hearing for which they are issued. All subpoenas will be issued and may be enforced in the form and manner set forth in RCW 34.05.446 and WAC 10-08-120.

(2) The presiding officer, upon motion and before the time specified in the subpoena ~~((for compliance therewith))~~ at issue, may:

- (a) Quash or modify the subpoena if it is unreasonable and oppressive; or
- (b) Condition denial of the motion upon the advancement by the person in whose behalf the subpoena is issued of the reasonable cost of producing the books, papers, documents, or tangible things.

(3) The attendance of witnesses and such production of evidence may be required from any place within the state of Washington to any location where a hearing is being conducted.

AMENDATORY SECTION (Amending WSR 99-06-073, filed 3/2/99, effective 4/2/99)

WAC 292-100-120 Hearings—Discovery—Methods authorized. The following discovery methods are authorized: Deposition upon oral examination, written interrogatories, requests for production, and requests for admission. Deposition upon oral examination, written interrogatories, and requests for admission may be used as evidence in the hearing. The attendance of witnesses to a deposition may be compelled by use of a subpoena. Depositions ~~((shall))~~ will be taken ~~((only))~~ in accordance with this rule and the rules on subpoenas, ~~((except that))~~ unless board staff and the respondent ~~((may))~~ stipulate to other arrangements.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-130 Hearings—Discovery—Depositions and interrogatories—Notice. A party ~~((desiring to take))~~ taking the deposition of any person upon oral examination ~~((shall))~~ must give reasonable notice of not less than five days in writing to the presiding officer and all parties. The notice shall state the time and place for taking the deposition and the name and address of each person to be examined. On motion of a party to whom the notice is served, the presiding officer may, for cause shown, enlarge or shorten the time. If the parties so stipulate in writing, depositions may be taken at any time or place, upon any notice, and in any manner and when so taken may be used as other depositions.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-140 Depositions and interrogatories in hearings—Protection of parties and deponents. (1) After notice is served for taking a deposition, upon its own motion or upon motion reasonably made by any party or by the person to be examined and upon notice and for good cause shown, the presiding officer may order that the deposition ~~((shall))~~ may:

- (a) Not be taken~~((;))~~; or
- (b) That it may be taken only at some designated place other than that stated in the notice~~((;))~~; or

(c) That it may be taken only on written interrogatories ~~((?))~~; or

(d) That certain matters ~~((shall))~~ must not be inquired into ~~((?))~~; or

(e) That the scope of the examination ~~((shall))~~ must be limited to certain matters ~~((?))~~; or

(f) That the examination ~~((shall))~~ may be held with no one present except the parties to the action and their officers or counsel ~~((?))~~; or

(g) The presiding officer may make any other order which justice requires to protect the party or witness from annoyance, embarrassment, or oppression.

(2) At any time during the taking of the deposition, on motion of any party or the deponent and upon a showing that the examination is being conducted in bad faith or in such manner as unreasonably to annoy, embarrass, or oppress the deponent or party, the presiding officer may order the party conducting the examination to cease ~~((forthwith))~~ from taking the deposition or may limit the scope and manner of the taking of the deposition as ~~((above))~~ provided above. If the order made terminates the examination, it ~~((shall))~~ may be resumed only upon the order of the presiding officer. Upon demand of the objecting party or deponent, the taking of the deposition ~~((shall))~~ must be suspended for the time necessary to make a motion for an order.

AMENDATORY SECTION (Amending WSR 07-02-001, filed 12/20/06, effective 1/20/07)

WAC 292-100-150 Discovery—Production of documents and use at hearing. (1) Any materials to be presented at the hearing ~~((shall))~~ must be provided to the executive director and to the opposing party no less than ~~((ten))~~ 10 days prior to the hearing.

(2) Upon agreement by both parties, additional documentary evidence may be presented at the hearing. The parties ~~((shall))~~ must arrive at the hearing location or make documents available in sufficient time before the time scheduled for the hearing for the purpose of exchanging exhibits to be introduced. When documents are to be offered into evidence at the hearing, the one offering the exhibit shall provide a minimum of ~~((ten))~~ seven copies.

(3) If the parties do not reach an agreement on the submission of additional documentary evidence, at the commencement of the hearing the presiding officer ~~((shall))~~ will, after hearing argument, rule on the admissibility of the documents. The proponent of the documents proposed for submission must show good cause why the documents could not be submitted ~~((ten))~~ 10 days prior to the hearing.

(4) "Good cause" is a substantial reason or legal justification for failing to appear, to act, or respond to an action. To show good cause, the presiding officer must find that a party had a good reason for what they did or did not do, using the provisions of Superior Court civil rule 60 as a guideline.

AMENDATORY SECTION (Amending WSR 07-02-001, filed 12/20/06, effective 1/20/07)

WAC 292-100-160 Conduct of hearings. (1) A hearing ~~((shall))~~ must be conducted pursuant to the Administrative Procedure Act (chapter 34.05 RCW) and its supporting regu-

lations (chapter 10-08 WAC) ~~((shall be followed))~~ unless modified by chapter 292-100 WAC.

(2) Hearings may be conducted in-person, by video conference, or other virtual means as determined by the presiding officer and in accordance with WAC 10-08-180. Preference should be given to the method which will facilitate the timeliest hearing.

When circumstances prevent the scheduling of an in-person hearing, virtual hearings are strongly encouraged unless a party can demonstrate it will be prejudiced by such a hearing in accordance with the APA and WAC 10-08-180.

(3) A hearing ~~((shall))~~ must be conducted either by the board or by an administrative law judge.

(a) If an administrative law judge participates by request of a respondent, the board may choose to sit with the administrative law judge to hear the matter. If an administrative law judge sits with the board, ~~((he or she shall))~~ the administrative law judge will rule on procedural and evidentiary matters.

(b) If an administrative law judge hears the matter at the request of the board, the board may choose to sit with the administrative law judge or the board may request that the administrative law judge hear the matter alone and prepare an initial order.

~~((3))~~ (4) Following a hearing ~~((in which the board participates))~~, the board or administrative law judge may conclude that:

(a) The respondent(s) did not violate the act, as alleged, and dismiss the case; or

(b) The respondent(s) has (have) violated chapter 42.52 RCW; or

(c) The respondent(s) is (are) in violation of chapter 42.52 RCW, the board's remedy would be inadequate and the matter should be referred to the appropriate law enforcement agency as provided in RCW 42.52.470.

~~((4))~~ (5) Following a hearing in which the board participates, the board:

(a) ~~((shall))~~ Must set forth in writing its findings of fact, conclusions of law and decision on the merits of the case; and

(b) ~~((shall))~~ Must serve each party, the complainant and the employing agency ~~((?))~~ a copy of the findings of fact, conclusions of law and decision.

~~((5))~~ (6) Following a hearing in which the board does not participate, the administrative law judge ~~((shall))~~ must:

(a) Set forth written findings of fact, conclusions of law and decision on the merits of the case in an initial order;

(b) ~~((shall))~~ Must serve each party and board staff a copy of the findings of fact, conclusions of law and decision, including a statement of the right to request review of the initial order by the board.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-170 Review of initial orders by an administrative law judge. (1) An initial order by an administrative law judge ~~((shall))~~ will become the final order of the board within ~~((forty-five))~~ 45 days of the initial order unless:

(a) A board member determines that the initial order should be reviewed as provided in WAC 292-100-175;

(b) A party files a petition for review of the initial order within ~~((thirty))~~ 30 days of the entry of the initial order.

(2) The petition for review ~~((will))~~ must specify the portions of the initial order to which exception is taken and ~~((will))~~ refer to the evidence of record relied upon to support the petition.

(3) Petitions for review ~~((shall))~~ must be filed with the executive director and served on all other parties. The party not filing the petition for review ~~((shall))~~ will have ~~((twenty))~~ 20 days to reply to the petition for review. The reply ~~((shall))~~ must be filed with the executive director and copies of the reply ~~((shall))~~ must be served on all other parties ~~((or their counsel at the time the reply is filed, and)).~~ A reply to a petition for review may include a cross-petition for review.

(4) If the reply contains a cross-petition for review, it ~~((shall))~~ must specify portions of the initial order to which exception is taken by the replying party, and ~~((shall))~~ refer to the evidence of the record relied upon ~~((to support the reply-~~

~~((4))).~~ A respondent to a cross-petition for review will have 20 days to reply to the cross-petition for review. The reply to the cross-petition for review must be filed with the executive director and copies of the reply to the cross-petition for review must be served on all other parties.

(5) When considering a petition for review, the board ~~((shall personally))~~ must consider the whole record or ~~((such))~~ the portions of it ~~((as may be))~~ cited by the parties.

(a) The board ~~((shall))~~ will afford each party an opportunity to present written argument and may afford each party an opportunity to present oral argument.

(b) The board ~~((shall))~~ will enter a final order disposing of the proceeding.

(c) The board ~~((shall))~~ must serve copies of the final order on all parties, the complainant, and the employing agency.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-175 A board member's request for review of initial orders. (1) Within five days after receiving an initial order by an administrative law judge the executive director ~~((shall))~~ must serve a copy of the initial order upon each board member.

(2) A board member who is requesting review of an initial order ~~((shall))~~ must provide written notice to the executive director within ~~((thirty))~~ 30 days of service on the board member.

(3) Upon receipt of a board member's ~~((notice of))~~ request for review the executive director ~~((shall))~~ must serve the ~~((notice of review))~~ request on all other parties.

(4) The board ~~((shall personally))~~ will consider the whole record or ~~((such))~~ the portions of ~~((it as may be))~~ the record as required for its deliberation.

(a) The board may afford each party an opportunity to present written argument ~~((or))~~ and may afford each party an opportunity to present oral argument.

(b) The board ~~((shall))~~ will enter a final order disposing of the proceeding.

(c) The board ~~((shall))~~ must serve copies of the final order on all parties, the complainant, and the employing agency.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-180 Brief adjudicative proceeding— Authority. Pursuant to RCW 34.05.482 through 34.05.494, after a finding of reasonable cause ~~((and notwithstanding the provision of WAC 292-100-050 through 292-100-170)),~~ the board may provide a brief adjudicative proceeding as set forth in WAC 292-100-190 for alleged violations of provisions in chapter 42.52 RCW and corresponding rules in which the facts are undisputed, the violations appear to be relatively minor in nature, and the penalty and costs no greater than \$500 will be assessed for the violations.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-190 Brief adjudicative proceeding— Procedure. (1) A brief adjudicative proceeding may be presided over by the chair, or a member of the board designated by the chair.

(2) ~~((When a violation is alleged, before taking action,))~~ The executive director ~~((shall))~~ will send the ~~((alleged violator))~~ respondent notice, which ~~((shall))~~ must include:

(a) The determination of reasonable cause and the investigative report;

(b) The maximum amount of the penalty and costs which can be imposed at the hearing; and

(c) ~~((Person's))~~ The respondent's right to respond, within ~~((twenty))~~ 20 days, either in writing or in person to explain ~~((his/her))~~ the respondent's view of the matter.

(3) At the time of the hearing, if the presiding officer believes alleged violations no longer meet the criteria in WAC 292-100-180, the presiding officer ~~((shall))~~ must immediately adjourn the brief adjudicative proceeding and direct the matter to be scheduled for a ~~((public))~~ hearing by the full board and/or an administrative law judge.

(4) ~~((At the time any unfavorable action is taken,))~~ After the brief adjudicative proceeding, the presiding officer ~~((shall))~~ must serve upon each party a written statement describing the violation, the reasons for the decision, the penalty and costs imposed and their right to request review by the board.

(5) The written decision of the presiding officer is an initial order. If no review is taken of the initial order, the initial order ~~((shall))~~ will be the final order.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-200 Brief adjudicative proceeding— Administrative review procedures. (1) The board will conduct a review of the initial order upon the written or oral request of a party if the board receives the request within ~~((twenty))~~ 20 days after the service of the initial order.

(2) If the parties have not requested review, the board may conduct a review of the initial order upon its own motion

and without notice to the parties, but it may not take any action on review less favorable to any party than the original order without giving that party notice and an opportunity to explain that party's view of the matter.

(3) The order on review ~~((shall))~~ must be in writing stating the findings made, and the reasons for the decision, and notice that judicial review is available. The order on review ~~((shall))~~ must be entered within ~~((twenty-one))~~ 21 days after the date of the initial order or of the request for review, whichever is later.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-210 Reconsideration of final orders.

(1) Within ~~((ten))~~ 10 days of the service of a final order, any party may file a petition for reconsideration ~~((as provided in RCW 34.05.470.~~

~~(2) Any party may make a motion for reconsideration of a final order of the board as provided in RCW 34.05.470. The request for reconsideration shall be filed at the office of the board and served on the parties no later than ten days after service of the final order. A request or motion for reconsideration shall specify the grounds therefor.~~

~~(3)) stating the specific grounds upon which relief is requested. The petition for review must be filed at the office of the board and served on the parties.~~

(2) Any party may respond to a ~~((request))~~ petition for reconsideration. The response is due no later than ~~((ten))~~ 10 days after the party is served with the request.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 292-100-220 Effective date.

WSR 21-24-100

PERMANENT RULES

OFFICE OF THE

INSURANCE COMMISSIONER

[Insurance Commissioner Matter No. R 2021-22—Filed December 1, 2021, 9:26 a.m., effective January 1, 2022]

Effective Date of Rule: January 1, 2022.

Purpose: Currently, WAC 284-38-200 phrasing provides a timeline only to filers of consolidated audited statements; it does not mention those that are filing as a single entity. This was not the intent as originally drafted; therefore, the office of the insurance commissioner needs to amend WAC 284-38-200 to provide a uniform timeline for submission of audited financial statements by entities authorized to issue charitable gift annuities.

Citation of Rules Affected by this Order: WAC 284-38-200.

Statutory Authority for Adoption: RCW 48.02.060, 48.38.010(10).

Adopted under notice filed as WSR 21-21-101 on October 19, 2021.

A final cost-benefit analysis is available by contacting Tabba Alam, P.O. Box 40260, Olympia, WA 98504-0260, phone 360-725-7170, fax 360-586-3109, email rulescoordinator@oic.wa.gov, website www.insurance.wa.gov.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 1, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 1, Repealed 0.

Date Adopted: December 1, 2021.

Mike Kreidler
Insurance Commissioner

AMENDATORY SECTION (Amending WSR 14-05-017, filed 2/10/14, effective 3/15/14)

WAC 284-38-200 Annual reporting requirements.

(1) Every certificate holder must electronically file with the commissioner a completed annual report within ~~((sixty))~~ 60 days of its fiscal year end. A copy of the annual report form and instructions for completing and filing the annual report are available on the commissioner's website at www.insurance.wa.gov.

(2) As an ongoing statement of financial condition, required under RCW 48.38.010(10), the certificate holder must annually electronically file the following financial reports:

(a)(i) An audited financial statement specific to the certificate holder prepared in accordance with generally accepted accounting principles for the fiscal year immediately preceding; or

(ii) A consolidated audited financial statement prepared in accordance with generally accepted accounting principles for the fiscal year immediately preceding, which includes a supplemental schedule specific to the certificate holder. ~~((The audited financial statement must be filed within fifteen days of its release date following the certificate holder's fiscal year end.))~~

(b) Unless permanently exempt in accordance with Internal Revenue Service regulations, file a complete public inspection copy of the certificate holder's IRS Form 990 within fifteen days of its filing with the IRS.

(c) Any other financial information required by the commissioner.

(3) The audited financial statement must be filed within 15 days of the release date following the certificate holder's fiscal year end.

(4) The failure by a certificate holder to file an audited financial statement within nine months following its most recent fiscal year end, and when applicable its IRS Form 990 within ~~((fifteen))~~ 15 days of its filing with the IRS, will constitute a finding as referenced under RCW 48.38.050 that the certificate holder failed to provide a satisfactory statement of financial condition as required under RCW 48.38.010(10). The finding may subject the certificate holder to disciplinary action as allowed under RCW 48.38.050.

~~((4))~~ (5) An encrypted or password protected filing or transmission is not considered filed under RCW 48.38.010 (10) and this section.

~~((5))~~ (6) For purposes of determining whether a filing deadline has been met, a document is considered received if electronically submitted on or before the date it is due.

WSR 21-24-101
PERMANENT RULES
OFFICE OF THE
INSURANCE COMMISSIONER

[Insurance Commissioner Matter No. R 2021-20—Filed December 1, 2021,
9:26 a.m., effective January 1, 2022]

Effective Date of Rule: January 1, 2022.

Purpose: The current state law on out-of-state title records storage requires title insurance companies and agents, who are conducting business of an escrow agent, to keep adequate records of all transactions, and these records must be maintained in Washington, unless otherwise approved by the commissioner (RCW 48.29.190 (1)(a)).

Rule making is required to outline the process for title insurance companies and agents to request approval under RCW 48.29.190 (1)(a) and detail the requirements for title insurance companies and agents to store title records outside of Washington.

Citation of Rules Affected by this Order: Amending WAC 284-29-160.

Statutory Authority for Adoption: RCW 48.02.060 (3)(a), 48.29.005, and 48.29.190 (1)(a).

Adopted under notice filed as WSR 21-21-102 on October 19, 2021.

A final cost-benefit analysis is available by contacting Tabba Alam, P.O. Box 40260, Olympia, WA 98504-0260, phone 360-725-7170, fax 360-586-3109, email rulescoordinator@oic.wa.gov, website www.insurance.wa.gov.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 1, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 1, Repealed 0.

Date Adopted: December 1, 2021.

Mike Kreidler
Insurance Commissioner

AMENDATORY SECTION (Amending WSR 09-20-070, filed 10/5/09, effective 11/5/09)

WAC 284-29-160 Recordkeeping. (1) A title insurance agent must keep and maintain complete and accurate records of the names and business addresses of those persons who have had a financial interest in the title insurance agent who are reasonably known or reasonably believed by the title insurance agent to be producers.

(2) A title insurance agent must keep and maintain records of its title orders sufficient to identify the source of the title orders.

(3) The records required by WAC 284-29-100 through 284-29-160 must be kept by the title insurance agent for a period of three years after the end of the year being reported upon.

(4) All records of a title insurance agent kept pursuant to WAC 284-29-100 through 284-29-160 must be available to the commissioner or the commissioner's representative during regular business hours.

(5) Title insurance companies and agents shall store these records in this state, unless otherwise approved by the commissioner in accordance with RCW 48.29.190.

(a) Title insurance companies and agents must request approval from the commissioner prior to storing their records outside of the state. Requests shall be emailed to prod-comp@oic.wa.gov.

(b) The commissioner will review and consider approval of the out-of-state title records storage if the records are readily accessible, securely stored, and maintained by the required statutory terms.

(c) If the title insurance company or agent plans to change the approved location of the out-of-state record storage, notification to the commissioner is required and reapproval must be granted prior to the change.

(d) Out-of-state record storage must comply with the security and data breach reporting requirements in WAC 284-04-625.

WSR 21-24-103
PERMANENT RULES
SUPERINTENDENT OF
PUBLIC INSTRUCTION

[Filed December 1, 2021, 9:47 a.m., effective January 1, 2022]

Effective Date of Rule: Thirty-one days after filing.

Purpose: Revising WAC 392-194-001 and 391-194-002 to adjust the processing fees for educator certificate applications and subsequent actions. The fee adjustment is needed to adequately support and maintain the operations of office of superintendent of public instruction's professional certification office. The existing fee was not sufficient to adequately run the operations and staffing to meet the needs of constituents, school districts, and educators in a timely manner. The fee is adjusted to \$51 for initial educator certificate applications and subsequent actions. The fee for paraeducator certificates and subsequent actions is \$39.

Citation of Rules Affected by this Order: Amending WAC 392-194-001 and 392-194-002.

Statutory Authority for Adoption: RCW 28A.410.062.

Adopted under notice filed as WSR 21-19-129 on September 21, 2021.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Non-governmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 2, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: December 1, 2021.

Chris P. S. Reykdal
State Superintendent
of Public Instruction

AMENDATORY SECTION (Amending WSR 12-03-065, filed 1/12/12, effective 2/12/12)

WAC 392-194-001 Purpose and authority. The purpose of this chapter is to establish the fee for processing (~~initial~~) educator and paraeducator certificate applications and subsequent actions. The authority for this chapter is (~~chapter 23 (ESHB 1449), Laws of 2011~~) RCW 28A.410.062. OSPI will review every two years to assure the fee is at a sufficient level to defray the costs of administering the educator certification program under RCW 28A.300.040(9) and the paraeducator certificate program under chapter 28A.413 RCW.

AMENDATORY SECTION (Amending WSR 15-16-077, filed 7/31/15, effective 8/31/15)

WAC 392-194-002 Fee for processing initial educator certificate applications and subsequent actions. (~~Effective October 1, 2011,~~) The superintendent of public instruction will charge a nonrefundable fee of (~~thirty-nine dollars~~) \$51 for processing any certificate application or requests for administrative action which results in the issuance, renewal, or reissuance of a permit or certificate (~~pursu-~~

~~ant to RCW 28A.410.010, 28A.410.025, 28A.410.210, and chapters 181-85 and 181-77 WAC; for issuance of a letter authorizing internship/student teaching pursuant to WAC 181-78A-130; and any subsequent action upon any certificate or permit referred to within this chapter. Educator certificates governed under this chapter include:~~

~~(1) Teacher. The teacher certificate, including teacher exchange permits as provided in WAC 181-79A-140, authorizes service as a classroom teacher.~~

~~(2) Career and technical. The career and technical education certificate authorizes service in career and technical education programs in accordance with the provisions of chapter 181-77 WAC.~~

~~(3) First people's language/culture. The first peoples' language, culture, and oral tribal traditions teacher certificate authorizes service as defined under WAC 181-78A-700(8).~~

~~(4) Administrator.~~

~~(5) Educational staff associate. The educational staff associate certificate authorizes service in the roles of school speech pathologists or audiologists, school counselors, school nurses, school occupational therapists, school physical therapists, school psychologists, and school social workers. Provided, That nothing within chapter 181-79A WAC authorizes professional practice by an educational staff associate which is otherwise prohibited or restricted by any other law, including licensure statutes and rules and regulations promulgated by the appropriate licensure board or agency.~~

~~(6) Limited certificates. The following limited certificates are issued to individuals under specific circumstances set forth in WAC 181-79A-231:~~

~~(a) Conditional certificate.~~

~~(b) Substitute certificate.~~

~~(c) Emergency certificate.~~

~~(d) Emergency substitute certificate.~~

~~(e) Nonimmigrant alien exchange teacher.~~

~~(f) Intern substitute teacher certificate.~~

~~(g) Transitional certificate.~~

~~(h) Provisional alternative administrative certificate.) in accordance with chapters 28A.410 and 28A.413 RCW.~~

(1) Educator certificates issued under chapter 181-79A WAC will be charged a fee of \$51 for processing educator certificates and subsequent actions.

(2) Paraeducator certificates issued under Title 179 WAC will be charged a fee of \$39 for processing paraeducator certificates and subsequent actions.