

**OPERATING PROCEDURES**  
**Washington USL&H Assigned Risk Plan (WARP)**  
**ARTICLE VIII: APPEALS**

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Any applicant, Insured or participating insurer who feels aggrieved by any ruling or decision of the Plan may demand a hearing before the Office of the Insurance Commissioner for resolution of a dispute. Before a demand for hearing is made to the Office of the Insurance Commissioner, the appeal must be made in accordance with the following procedures:

**1. Aggrieved Applicant or Insured**

- A. In the event an applicant or Insured has a dispute with a ruling or decision of the Plan, the aggrieved party or its designated representative must deliver written notice of the dispute to the Plan Executive Director. The written notice shall set forth the nature of the dispute and shall include all material supporting documentation. The Plan Executive Director shall immediately forward the written notice and supporting documentation to the Plan Chair. The Plan Chair and the Plan Executive Director shall review the dispute and may propose to the aggrieved party a resolution of the dispute. The Plan Chair shall, within 10 business days of receipt of the notice by the Plan Executive Director, appoint three members of the Committee to serve as a Dispute Review Subcommittee. The Chair may serve as one of the three members of the Dispute Review Subcommittee. The Plan Executive Director shall be appointed as a non-voting fourth member of the Dispute Review Subcommittee.
- B. If the aggrieved party is not satisfied with a resolution proposed by the Plan Chair and Plan Executive Director, the Plan Executive Director shall schedule a meeting of the Dispute Review Subcommittee to be held within 20 business days of the receipt of the notice of dispute by the Plan Executive Director. The meeting must be attended by a person who has full authority on behalf of the aggrieved applicant or Insured to enter into a settlement agreement with the Plan. The aggrieved applicant's or Insured's broker must attend the meeting. The meeting may be adjourned and reconvened if the participants so decide.
- C. Prior to a meeting of the Dispute Review Subcommittee, the Plan Chair may require the aggrieved applicant or aggrieved Insured to produce additional documentation within the aggrieved person's possession or control which is of material relevance to the dispute.
- D. The purpose of the meeting with the Dispute Review Subcommittee, the aggrieved party and the broker is to attempt to reach a resolution of the dispute. The Dispute Review Subcommittee shall have full authority to bind the Plan to a settlement agreement. The attendees of the meeting are encouraged to freely discuss the issues and any form of resolution. All admissions made during the course of the meeting are deemed to be privileged settlement discussions, made without prejudice to any party's legal position, and are deemed inadmissible for any purpose in any legal proceeding. If the dispute is not resolved as a result of the meeting, within 10 business days of the conclusion of the meeting, the Plan Executive Director shall provide the Plan's written ruling or decision to the aggrieved applicant or Insured stating that the dispute has not been resolved and that the ruling or decision of the Plan is final. The aggrieved applicant or Insured may demand a hearing before the Commissioner in accordance with RCW 48.04 and 34.05.
- E. Any party may, but is not required to, be represented by counsel at a Dispute Review Subcommittee meeting.