

ALASKA LEGISLATURE COMMITTEE FILES 1987-1988 8672

4774 HJUD SB 322 (FILE 3)

346

ALASKA

Calculation of Voluntary Rate Offset

$$\text{Formula: } R \times V \times 1.091 + (1 - R) \times V = 1.00$$

where: R = Residual Market Premium Share = 6.6%  
V = Voluntary Rate Offset

$$\begin{aligned} (.066)(V)(1.091) + (1 - .066) (V) &= 1.000 \\ .072V + .934V &= 1.000 \\ 1.006V &= 1.000 \\ V &= .994 \\ \text{Voluntary Rate Offset} &= -0.6\% \end{aligned}$$

Files: M/WPP  
 Date: 02/09/88 20:04:22  
 Title: Alaska Workers Compensation  
 Average Permanent Partial Indemnity Incurred Loss Development  
 Source: MCCI Statistical Plan

Average Loss Incurred Per Claim at Report Number:

Policy Year	1	2	3	4	5
1979				\$20,697	\$21,891
1980			\$23,435	24,804	27,089
1981		\$23,723	26,132	29,886	
1982	\$20,299	28,831	33,769		
1983	23,477	32,648			
1984	24,690				

Report - Report Loss Development Factor:

Policy Year	1-2	2-3	3-4	4-5
1979				1.058
1980			1.058	1.092
1981		1.102	1.144	
1982	1.420	1.171		
1983	1.391			
Averages:	1.405	1.136	1.101	1.075
Cumulative:	1.890	1.345	1.184	1.075

Policy Year	(1) Average Loss Incurred At Most Recent Report	(2) Estimated Factor to Develop Loss to Report 5	(3) Estimated Average Loss at Report 5 (1) x (2)	(4) Estimated Factor to Loss From Report 5 to Ultimate	(5) Estimated Ultimate Average Loss (3) x (4)
1979	21,891	1.000	21,891	1.100	24,080
1980	27,089	1.000	27,089	1.100	29,798
1981	29,886	1.075	32,127	1.100	35,340
1982	33,769	1.184	39,982	1.100	43,980
1983	32,648	1.345	43,912	1.100	48,303
1984	24,690	1.890	46,664	1.100	51,330

117	121	127	131	134	136	171	181	191	1101	1111	1121	1131	1141	1126	1161	1177	1191	1197	1201
All Claims										Claims Where Disability Has Ended									
Attorney			Disability			Claims With Attorney		Claims With Rehabilitation		Claims With Rehab & Attorney		Claims With Attorney		Claims With Rehabilitation		Claims With Rehab & Attorney			
Injury Year	Involvement (1-6, 1-7)	Rehab? (1-6, 1-7)	Endd? (1-6, 1-7)	Class Count	STD Duration	Class Count	STD Duration	Class Count	STD Duration	Class Count	STD Duration	Class Count	STD Duration	Class Count	STD Duration	Class Count	STD Duration	Class Count	STD Duration
82	0	0	0	1	3,776	0	0	0	0	0	0	0	0	0	0	0	0	0	0
82	0	0	0	3	1,724	0	0	0	0	0	0	0	0	0	0	0	0	0	0
82	0	0	0	47	29,458	0	0	0	0	0	0	07	29,458	0	0	0	0	0	0
82	0	0	0	405	81,821	0	0	0	0	0	0	405	81,821	0	0	0	0	0	0
82	0	1	0	2	2,458	0	0	2	2,454	0	0	0	0	0	0	0	0	0	0
82	0	1	0	6	8,837	0	0	6	8,837	0	0	0	0	0	0	0	0	0	0
82	0	1	0	22	10,726	0	0	22	10,726	0	0	22	10,726	0	0	22	10,726	0	0
82	0	1	0	26	26,623	0	0	26	26,623	0	0	26	26,623	0	0	26	26,623	0	0
82	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
82	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
82	0	1	0	14	29,192	43	29,192	0	0	0	0	43	29,192	43	29,192	0	0	0	0
82	0	1	0	38	26,400	58	26,400	0	0	0	0	58	26,400	58	26,400	0	0	0	0
82	0	1	0	7	11,101	7	11,101	7	11,101	7	11,101	0	0	0	0	0	0	0	0
82	0	1	0	4	3,293	4	3,293	4	3,293	4	3,293	0	0	0	0	0	0	0	0
82	0	1	0	73	99,093	73	99,093	73	99,093	73	99,093	73	99,093	73	99,093	73	99,093	73	99,093
82	0	1	0	43	31,939	43	31,939	43	31,939	43	31,939	43	31,939	43	31,939	43	31,939	43	31,939
<b>Totals</b>				<b>692</b>	<b>279,861</b>	<b>233</b>	<b>148,846</b>	<b>217</b>	<b>143,992</b>	<b>131</b>	<b>97,648</b>	<b>772</b>	<b>251,276</b>	<b>243</b>	<b>134,646</b>	<b>152</b>	<b>118,423</b>	<b>129</b>	<b>94,894</b>
<b>Average Duration</b>					<b>349</b>		<b>301</b>		<b>461</b>		<b>746</b>		<b>328</b>		<b>342</b>		<b>398</b>		<b>673</b>
<b>Relative</b>						<b>322</b>	<b>1401</b>	<b>272</b>	<b>1692</b>	<b>181</b>	<b>1121</b>		<b>31,643</b>	<b>1471</b>	<b>23,412</b>	<b>1093</b>	<b>83,322</b>		<b>2081</b>
83	0	0	0	10	4,437	0	0	0	0	0	0	0	0	0	0	0	0	0	0
83	0	0	0	16	29,133	0	0	0	0	0	0	0	0	0	0	0	0	0	0
83	0	0	0	26	21,316	0	0	0	0	0	0	26	21,316	0	0	0	0	0	0
83	0	0	0	379	84,133	0	0	0	0	0	0	379	84,133	0	0	0	0	0	0
83	0	1	0	6	10,132	0	0	6	10,132	0	0	0	0	0	0	0	0	0	0
83	0	1	0	7	7,250	0	0	7	7,250	0	0	0	0	0	0	0	0	0	0
83	0	1	0	28	18,470	0	0	28	18,470	0	0	28	18,470	0	0	28	18,470	0	0
83	0	1	0	31	26,833	0	0	31	26,833	0	0	31	26,833	0	0	31	26,833	0	0
83	0	1	0	4	3,722	4	3,722	4	3,722	4	3,722	0	0	0	0	0	0	0	0
83	0	1	0	3	1,470	3	1,470	3	1,470	3	1,470	0	0	0	0	0	0	0	0
83	0	1	0	43	21,837	43	21,837	0	0	0	0	43	21,837	43	21,837	0	0	0	0
83	0	1	0	31	23,222	31	23,222	0	0	0	0	31	23,222	31	23,222	0	0	0	0
83	0	1	0	4	7,872	4	7,872	4	7,872	4	7,872	0	0	0	0	0	0	0	0
83	0	1	0	3	8,920	3	8,920	3	8,920	3	8,920	0	0	0	0	0	0	0	0
83	0	1	0	40	93,239	40	93,239	40	93,239	40	93,239	40	93,239	40	93,239	40	93,239	40	93,239
83	0	1	0	44	27,948	44	27,948	44	27,948	44	27,948	44	27,948	44	27,948	44	27,948	44	27,948
<b>Totals</b>				<b>783</b>	<b>311,744</b>	<b>736</b>	<b>146,906</b>	<b>707</b>	<b>117,838</b>	<b>113</b>	<b>87,329</b>	<b>720</b>	<b>248,842</b>	<b>220</b>	<b>119,644</b>	<b>183</b>	<b>116,916</b>	<b>161</b>	<b>73,207</b>
<b>Average Duration</b>					<b>399</b>		<b>397</b>		<b>718</b>		<b>773</b>		<b>343</b>		<b>343</b>		<b>429</b>		<b>461</b>
<b>Relative</b>						<b>304</b>	<b>1302</b>	<b>271</b>	<b>1292</b>	<b>141</b>	<b>1141</b>		<b>30,393</b>	<b>1341</b>	<b>23,422</b>	<b>1043</b>	<b>10,641</b>		<b>2071</b>

111 121 131 141 151 161 171 181 191 201 211 221 231 241 251 261 271 281 291

All Claims

Claims Where Disability Has Ended

Year	All Injury (Level 1000)		Disability Ended? (0-1-y)	Claim Count	TTB Duration	Claims With Attorney		Claims With Rehabilitation		Claims With Rehab & Attorney		Claims With Attorney		Claims With Rehabilitation		Claims With Rehab & Attorney	
	Count	Duration				Count	Duration	Count	Duration	Count	Duration	Count	Duration	Count	Duration	Count	Duration
84	0	0	0	11	11,674	0	0	0	0	0	0	0	0	0	0	0	0
84	0	0	0	21	9,543	0	0	0	0	0	0	0	0	0	0	0	0
84	0	0	0	42	21,647	0	0	0	0	0	0	42	21,647	0	0	0	0
84	0	0	0	293	65,776	0	0	0	0	0	0	293	65,776	0	0	0	0
84	0	0	0	6	9,321	0	0	6	9,321	0	0	0	0	0	0	0	0
84	0	0	0	12	13,299	0	0	12	13,299	0	0	0	0	0	0	0	0
84	0	0	0	29	24,109	0	0	29	24,109	0	0	29	24,109	0	0	0	0
84	0	0	0	41	19,834	0	0	41	19,834	0	0	41	19,834	0	0	0	0
84	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
84	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
84	0	0	0	33	23,244	33	23,244	0	0	0	0	33	23,244	33	23,244	0	0
84	0	0	0	37	21,100	37	21,100	0	0	0	0	37	21,100	37	21,100	0	0
84	0	0	0	6	7,317	6	7,317	6	7,317	6	7,317	0	0	0	0	0	0
84	0	0	0	12	11,319	12	11,319	12	11,319	12	11,319	0	0	0	0	0	0
84	0	0	0	65	34,261	65	34,261	65	34,261	65	34,261	65	34,261	65	34,261	65	34,261
84	0	0	0	42	27,054	42	27,054	42	27,054	42	27,054	42	27,054	42	27,054	42	27,054
<b>Totals</b>				<b>712</b>	<b>316,524</b>	<b>227</b>	<b>142,540</b>	<b>113</b>	<b>162,216</b>	<b>123</b>	<b>97,194</b>	<b>722</b>	<b>253,629</b>	<b>217</b>	<b>121,741</b>	<b>177</b>	<b>121,640</b>
<b>Average Duration</b>					<b>449</b>		<b>641</b>		<b>742</b>		<b>777</b>		<b>351</b>		<b>566</b>		<b>732</b>
<b>Relativities</b>						<b>308</b>	<b>1308</b>	<b>278</b>	<b>1918</b>	<b>162</b>	<b>1472</b>		<b>30.642</b>	<b>1612</b>	<b>24.522</b>	<b>1923</b>	<b>14.872</b>
85	0	0	0	21	7,979	0	0	0	0	0	0	0	0	0	0	0	0
85	0	0	0	44	16,610	0	0	0	0	0	0	44	16,610	0	0	0	0
85	0	0	0	340	22,070	0	0	0	0	0	0	340	22,070	0	0	0	0
85	0	0	0	10	11,354	0	0	10	11,354	0	0	0	0	0	0	0	0
85	0	0	0	10	13,745	0	0	10	13,745	0	0	0	0	0	0	0	0
85	0	0	0	26	13,773	0	0	26	13,773	0	0	26	13,773	0	0	0	0
85	0	0	0	33	24,772	0	0	33	24,772	0	0	33	24,772	0	0	0	0
85	0	0	0	3	3,044	3	3,044	0	0	0	0	0	0	0	0	0	0
85	0	0	0	7	3,244	7	3,244	0	0	0	0	0	0	0	0	0	0
85	0	0	0	26	13,100	26	13,100	0	0	0	0	26	13,100	26	13,100	0	0
85	0	0	0	41	11,600	41	11,600	0	0	0	0	41	11,600	41	11,600	0	0
85	0	0	0	3	2,417	3	2,417	3	2,417	3	2,417	0	0	0	0	0	0
85	0	0	0	8	9,333	8	9,333	8	9,333	8	9,333	0	0	0	0	0	0
85	0	0	0	24	30,898	24	30,898	24	30,898	24	30,898	24	30,898	24	30,898	24	30,898
85	0	0	0	41	18,798	41	18,798	41	18,798	41	18,798	41	18,798	41	18,798	41	18,798
<b>Totals</b>				<b>649</b>	<b>220,573</b>	<b>215</b>	<b>101,304</b>	<b>219</b>	<b>133,810</b>	<b>106</b>	<b>68,946</b>	<b>639</b>	<b>215,611</b>	<b>182</b>	<b>84,244</b>	<b>171</b>	<b>82,791</b>
<b>Average Duration</b>					<b>336</b>		<b>471</b>		<b>619</b>		<b>644</b>		<b>336</b>		<b>470</b>		<b>607</b>
<b>Relativities</b>						<b>282</b>	<b>1072</b>	<b>282</b>	<b>1081</b>	<b>141</b>	<b>1242</b>		<b>282</b>	<b>1342</b>	<b>242</b>	<b>1112</b>	<b>102</b>

CONSULTING ACTUARIES INC.



File# 8571 Date: 02/09/88 20:24:22  
 Note: Revisions are in days.

Alaska Workers Compensation Personnel Partial  
 Data From The Alaska Workers Compensation Information Handling System (January 1988)

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)
MI Claims											Claims Where Disability Has Ended								
Injury Year	Attorney (Level 1-3)		Stability (End of)	Claim		Claim With Attorney		Claim With Rehabilitation		Claim With Rehab & Attorney		Claim With Attorney		Claim With Rehabilitation		Claim With Rehab & Attorney			
	Year	(0-9,1-7)		(0-9,1-7)	Count	YTD	Count	YTD	Count	YTD	Count	YTD	Count	YTD	Count	YTD	Count	YTD	Count
82-87	0	0	0	88	26,900	0	0	0	0	0	0	0	0	0	0	0	0	0	0
82-87	0	0	0	140	47,193	0	0	0	0	0	0	0	0	0	0	0	0	0	0
82-87	0	0	1	732	87,063	0	0	0	0	0	0	232	87,183	0	0	0	0	0	0
82-87	0	0	1	1,000	244,330	0	0	0	0	0	0	1,000	244,330	0	0	0	0	0	0
82-87	0	0	0	37	88,913	0	0	77	38,913	0	0	0	0	0	0	0	0	0	0
82-87	0	1	0	32	47,963	0	0	52	82,963	0	0	0	0	0	0	0	0	0	0
82-87	0	1	1	148	70,271	0	0	118	70,271	0	0	118	70,271	0	0	118	70,271	0	0
82-87	0	1	1	279	163,351	0	0	229	163,351	0	0	279	163,351	0	0	279	163,351	0	0
82-87	1	0	0	11	9,984	83	9,984	0	0	0	0	0	0	0	0	0	0	0	0
82-87	1	0	0	13	4,081	83	4,081	0	0	0	0	0	0	0	0	0	0	0	0
82-87	1	0	1	267	88,254	267	88,254	0	0	0	0	267	88,254	267	88,254	0	0	0	0
82-87	1	0	0	214	84,898	214	84,898	0	0	0	0	214	84,898	214	84,898	0	0	0	0
82-87	1	0	0	20	28,797	20	28,797	20	28,797	20	28,797	0	0	0	0	0	0	0	0
82-87	1	1	0	31	32,323	31	32,323	31	32,323	31	32,323	0	0	0	0	0	0	0	0
82-87	1	1	1	281	193,354	281	193,354	281	193,354	281	193,354	281	193,354	281	193,354	281	193,354	281	193,354
82-87	1	1	1	184	109,275	184	109,275	184	109,275	184	109,275	184	109,275	184	109,275	184	109,275	184	109,275
<b>Totals:</b>				<b>3,474</b>	<b>1,241,985</b>	<b>1,027</b>	<b>354,872</b>	<b>934</b>	<b>621,161</b>	<b>518</b>	<b>345,643</b>	<b>3,327</b>	<b>1,004,828</b>	<b>948</b>	<b>477,779</b>	<b>814</b>	<b>478,323</b>	<b>647</b>	<b>304,631</b>
<b>Average Duration</b>					<b>358</b>		<b>340</b>		<b>651</b>		<b>704</b>		<b>302</b>		<b>300</b>		<b>300</b>		<b>452</b>
<b>Relatibility</b>						<b>282</b>	<b>1648</b>	<b>262</b>	<b>1971</b>	<b>112</b>	<b>2091</b>			<b>282</b>	<b>1672</b>	<b>242</b>	<b>1938</b>	<b>102</b>	<b>2112</b>

WILLIAM & ROBERTSON, INC. CONSULTING ACTUARIES

Files: INJURY  
 Dates: 02/04/88 20:54:37  
 Title: Alaska Workers Compensation  
 Distribution of Permanent Partial Claims By Injured Body Part  
 Data From The Alaska Workers Compensation Information Handling System  
 (January 1988)

Body Part	Total Number Of Cases	Cases Involving Attorneys	Cases Involving Rehab	Scheduled Awards
----	-----	-----	-----	-----
Other	105	15	14	90
Ears	6	2	0	6
Eyes	55	5	6	52
Head	24	7	8	18
Neck	22	8	11	10
Hand	262	30	50	250
Fingers	565	33	19	560
Arm	190	37	40	178
Back	997	586	453	165
Other Trunk	217	58	61	183
Foot	222	30	37	213
Toes	30	3	2	29
Leg	682	113	141	642
Multiple	297	100	112	231
	-----	-----	-----	-----
Totals	3,676	1,027	954	2,627

File: INJURY  
 Date: 02/09/88 20:54:37  
 Title: Comparison of The Distribution of  
 Permanent Partial Injuries By Body Part  
 In The Alaska Workers Compensation Information  
 Handling System And That Implicitly Used By The  
 NCCI In Their Preliminary Evaluation Of SB322/HB352.

Body Part	NCIHS	NCCI
----	-----	-----
Other	3%	4%
Ears	0%	1%
Eyes	1%	1%
Head	1%	2%
Neck	1%	1%
Hand	7%	10%
Fingers	15%	23%
Arm	5%	8%
Back	27%	22%
Other Trunk	6%	1%
Foot	6%	6%
Toes	1%	2%

File: REP14

Date: 02/09/88 20:53:02

Title: Alaska Workers Compensation Permanent Partial

Data From Alaska Workers Compensation Information Handling System  
(January 1988)

Relative Durations of Different Injuries For With Disability Ended

Note: Durations are in days.

(1)	(2)	(3)	(4)	(5)	(6)
Injury Year	Body Part	Claim Count	Total TTD Duration	Average TTD Duration (4)/(3)	Relativity (5)/Total (5)
82	Other	14	4,246	303	93%
82	Ears	2	19	10	3%
82	Eyes	12	1,352	129	40%
82	Head	5	3,304	661	203%
82	Neck	6	2,386	398	122%
82	Hand	54	15,661	290	89%
82	Fingers	117	10,271	88	27%
82	Arm	42	9,309	222	68%
82	Back	188	106,736	568	175%
82	Other Trunk	53	15,899	300	92%
82	Foot	47	7,692	164	50%
82	Toes	4	251	63	19%
82	Leg	148	36,076	244	75%
82	Multiple	81	37,874	468	144%
Total:		773	251,276	325	
83	Other	24	2,048	85	26%
83	Ears	0	0	—	—
83	Eyes	14	1,416	101	29%
83	Head	3	2,069	690	201%
83	Neck	6	3,482	580	169%
83	Hand	51	7,916	155	45%
83	Fingers	97	11,045	114	33%
83	Arm	41	10,713	261	76%
83	Back	199	111,574	561	164%
83	Other Trunk	38	15,671	412	120%
83	Foot	49	14,645	299	87%
83	Toes	12	777	65	19%
83	Leg	122	32,323	265	77%
83	Multiple	68	34,343	505	147%
Total:		724	248,042	343	

File: REP14

Date: 02/09/88 20:53:02

Title: Alaska Workers Compensation Permanent Partial  
Data From Alaska Workers Compensation Information Handling System  
(January 1988)

Relative Durations of Different Injuries For With Disability Awarded

Note: Durations are in days.

(1)	(2)	(3)	(4)	(5)	(6)
Injury Year	Body Part	Claim Count	Total TTD Duration	Average TTD Duration (4)/(3)	Relativity (5)/Total (5)
84	Other	21	3,641	173	49%
84	Ears	1	0	0	0%
84	Eyes	7	2,224	318	91%
84	Head	5	2,272	454	129%
84	Neck	3	266	89	25%
84	Hand	49	9,971	203	58%
84	Fingers	109	10,886	100	28%
84	Arm	27	8,549	317	90%
84	Back	199	119,934	603	172%
84	Other Trunk	54	20,478	379	106%
84	Foot	41	11,348	277	79%
84	Toes	8	759	93	27%
84	Leg	144	38,198	265	75%
84	Multiple	54	23,078	464	132%
Totals		722	253,629	351	
85	Other	21	1,810	86	30%
85	Ears	3	137	46	16%
85	Eyes	8	1,637	205	72%
85	Head	3	512	171	60%
85	Neck	1	716	716	251%
85	Hand	57	10,492	184	65%
85	Fingers	106	11,405	108	38%
85	Arm	39	11,100	285	100%
85	Back	186	84,064	463	162%
85	Other Trunk	33	10,511	319	112%
85	Foot	48	12,074	252	88%
85	Toes	4	474	119	42%
85	Leg	120	28,575	238	84%
85	Multiple	36	14,066	391	137%
Totals		645	189,573	285	

File: REP10

Date: 02/09/88 20:53:02

Title: Alaska Workers Compensation Permanent Partial  
Data Free Alaska Workers Compensation Information Handling System  
(January 1988)  
Relative Durations of Different Injuries For With Disability Ended  
Note: Durations are in days.

(1)	(2)	(3)	(4)	(5)	(6)
Injury Year	Body Part	Claim Count	Total TTD Duration	Average TTD Duration (4)/(3)	Relativity (3)/(Total) (5)
86	Other	15	60	4	3%
86	Ears	0	0	--	--
86	Eyes	8	470	59	38%
86	Head	3	84	28	18%
86	Neck	2	605	303	195%
86	Hand	27	3,810	141	91%
86	Fingers	88	5,624	62	40%
86	Arm	19	3,163	166	107%
86	Back	109	30,586	281	181%
86	Other Trunk	13	3,137	241	155%
86	Foot	17	1,944	114	74%
86	Toes	2	163	82	53%
86	Leg	62	6,573	106	68%
86	Multiple	7	1,466	209	133%
Totals:		572	57,485	155	
87	Other	1	0	0	0%
87	Ears	0	0	--	--
87	Eyes	2	134	67	99%
87	Head	1	121	121	178%
87	Neck	0	0	--	--
87	Hand	2	52	26	38%
87	Fingers	33	1,818	55	81%
87	Arm	4	204	51	75%
87	Back	13	1,272	98	144%
87	Other Trunk	2	89	45	64%
87	Foot	2	109	55	81%
87	Toes	0	0	ERR	ERR
87	Leg	10	869	87	128%
87	Multiple	1	157	157	231%
Totals:		71	4,825	68	

File: REP16

Date: 02/19/88 20:53:02

Title: Alaska Workers Compensation Permanent Partial  
Data From Alaska Workers Compensation Information Handling System  
(January 1988)

Relative Durations of Different Injuries For With Disability Ended

Note: Durations are in days.

(1)	(2)	(3)	(4)	(5)	(6)
Injury Year	Body Part	Claim Count	Total TTD Duration	Average TTD Duration (4)/(3)	Relativity (5)/Total (5)
82-87	Other	96	11,008	123	41%
82-87	Ears	6	156	26	9%
82-87	Eyes	51	7,438	146	48%
82-87	Head	20	8,262	413	133%
82-87	Neck	18	7,455	414	137%
82-87	Hand	240	47,902	200	64%
82-87	Fingers	350	50,869	92	30%
82-87	Arm	172	43,058	250	83%
82-87	Back	894	456,166	510	169%
82-87	Other Trunk	193	65,785	341	113%
82-87	Foot	204	47,812	234	77%
82-87	Toes	30	2,424	81	27%
82-87	Leg	606	142,614	235	78%
82-87	Multiple	247	112,984	457	151%
Totals:		3,327	1,004,830	302	

File: DURATION

Date: 02/09/88 20:51:04

Title: Alaska Workers Compensation Permanent Partial

Duration of Temporary Benefits Received By Claimants  
Injured In 1982-84 Whose Disability Is Now Ended.

Data From The Alaska Workers Compensation Information Handling System  
(January 1988)

DISTRIBUTION OF NUMBER OF CLAIMANTS BY DURATION OF TEMPORARY BENEFITS

Injury Year	Number of Years Temporary Benefits Paid				Total
	0-1	1-2	2-3	>3	
1982	537	120	52	44	753
1983	522	101	90	51	764
1984	495	112	54	59	720
	1574	333	196	154	2,257

ACTUAL TOTAL DURATION OF TEMPORARY BENEFITS

	Number of Years Temporary Benefits Paid				Total
	0-1	1-2	2-3	>3	
1982	66,712	60,629	45,512	78,427	251,276
1983	62,595	53,273	43,508	88,666	248,042
1984	53,347	59,542	50,087	90,653	253,629
	182,654	173,444	139,107	257,746	752,947

ACTUAL TOTAL DURATION OF TEMPORARY BENEFITS LIMITED TO TWO YEARS PER CLAIMANT

	Number of Years Temporary Benefits Paid				Total
	0-1	1-2	2-3	>3	
1982	66,712	60,629	37,960	32,120	197,417
1983	62,595	53,273	36,530	37,230	189,598
1984	53,347	59,542	40,080	43,070	196,039
	182,654	173,440	115,340	112,420	563,854

IMPACT OF TWO YEAR LIMITATION

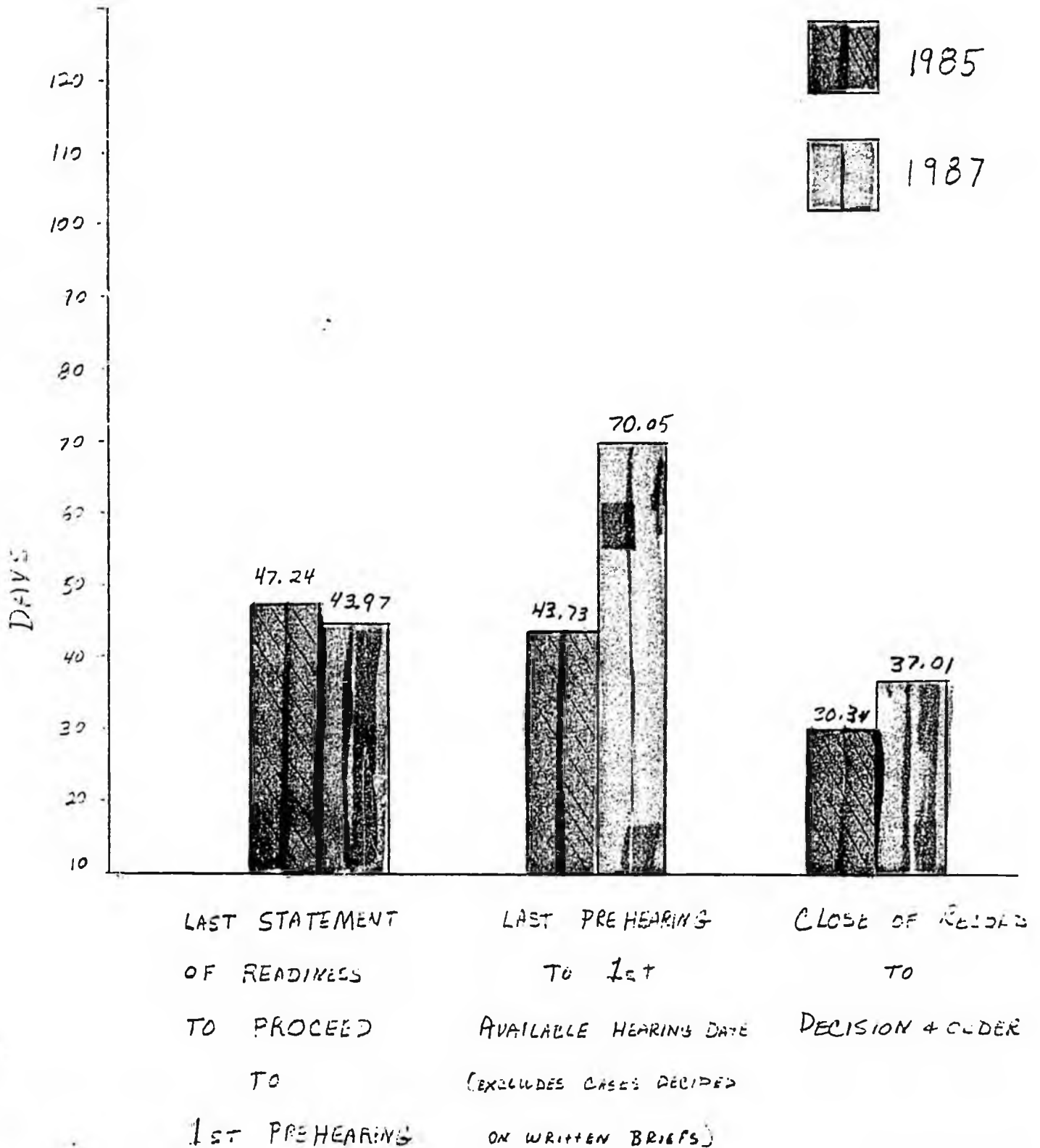
	Number of Years Temporary Benefits Paid				Total
	0-1	1-2	2-3	>3	
1982	100%	100%	83%	41%	79%
1983	100%	100%	84%	42%	76%
1984	100%	100%	82%	48%	78%
	100%	100%	83%	44%	78%

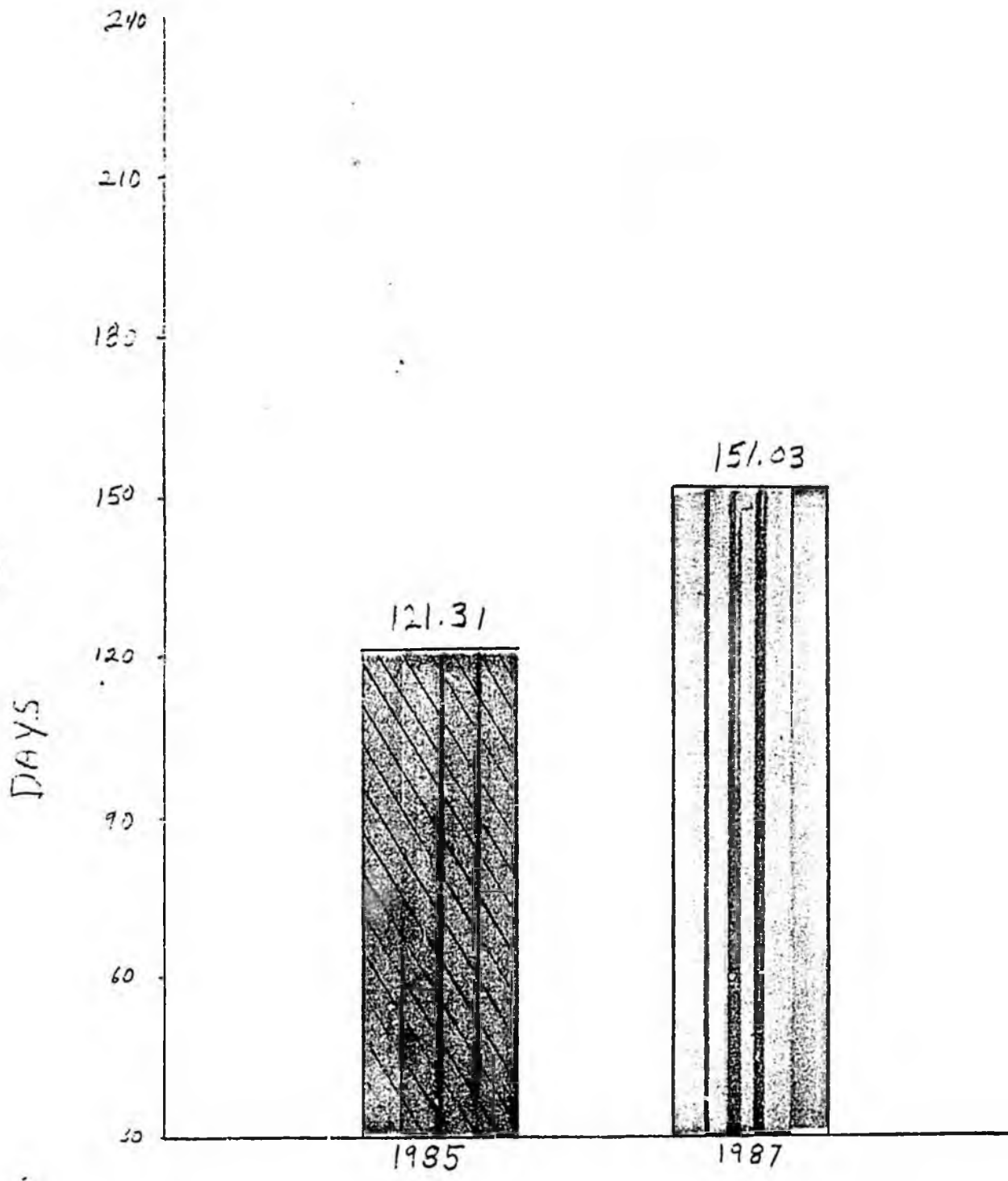
Date: 02/10/88 08:01:42  
 Title: Alaska Workers Compensation  
 Distribution of Claimants' ZIP Codes  
 Data from the Alaska Workers Compensation Information System (January 1988)

ZIP Code	(1) Fatal	(2) Permanent Total	(3) Open Temporary Total	(4) Total (1)+(2)+(3)	(5) Distribution of (4)
Alaska	65	11	884	962	69%
9	21	3	236	260	19%
8	4	1	49	54	4%
7	3	2	36	41	3%
6	0	0	4	4	0%
5	0	1	33	34	2%
4	3	0	7	10	1%
3	1	0	11	12	1%
2	2	1	4	7	1%
1	1	0	4	5	0%
0	0	0	3	3	0%
<b>Total:</b>	<b>100</b>	<b>19</b>	<b>1,273</b>	<b>1,392</b>	

Note: \* Open = Disability not ended.

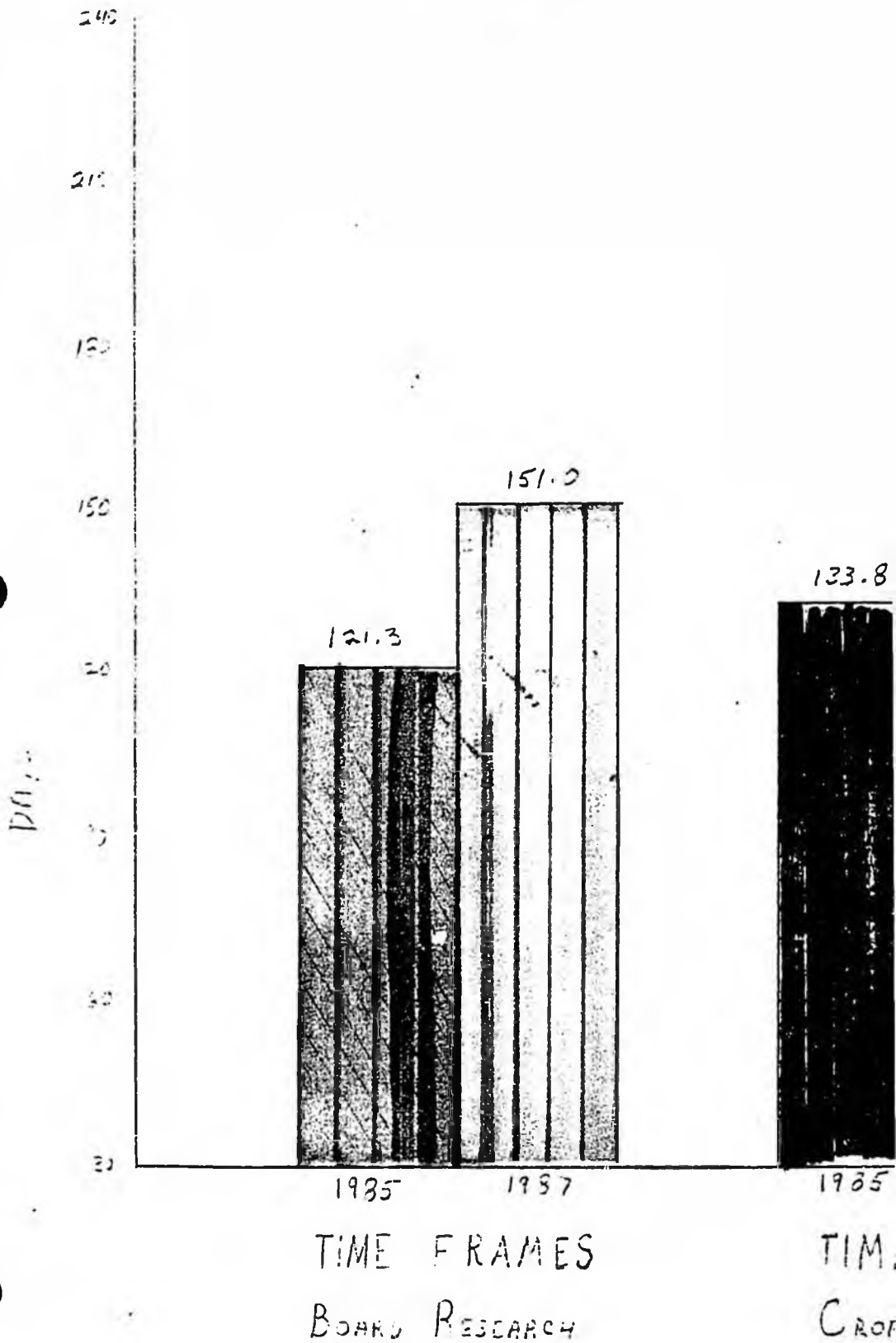
# WORKERS' COMPENSATION HEARING TIME PERIODS





THE OVERALL EFFECT

# THE REAL STORY



JANUARY

FEBRUARY

MARCH

APRIL

MAY

JUNE

JULY

AUGUST

SEPTEMBER

29 STATEMENT OF READINESS  
TO PROCEED

14 VALENTINE'S DAY

25 SEWARD'S DAY

3 EASTER

9 LEGISLATURE  
ADJOURNS (120 DAYS)

30 MEMORIAL DAY

28 ~~DECISION + ORDER (151)~~

4 INDEPENDENCE  
DAY

4 SPACE SHUTTLE LAUNCH

5 LAZOR DAY

7 ~~DECISION + ORDER (224)~~

DAYS OF WAITING

## Reasons for Differences - Board/Croft Graphs

Both Mr. Croft's and the Board's comparative analysis graphs show increases in the number of days to resolve workers' compensation disputes from 1985 to 1987. However, a recap of the steps in the Board's hearing process clearly shows that the more substantial delays are the result of action or inaction by the parties, i.e. claimant, claimant's attorney, defendant, defendant's attorney.

If it was Mr. Croft's intent to show the overall delays in the system, including those caused by the parties, then his graphs are helpful in the Legislature's analysis of delays in the workers' compensation system as a whole. However, if it was his intent, as implied in his January 29, 1988 testimony before the Joint House/Senate Labor and Commerce Committee, to illustrate Board delays his charts are misleading. The Committee will recall that Mr. Croft was specially asked how his data was computed.

1. Mr. Croft states in Chart #3 that he used "the 60 cases decided between October and December 31, 1987. As shown on the Board's chart, the Board issued 103 decisions during this time period. (The Board's total does not include Board actions or oral decisions on procedural matters). In 1985 the Board issued 74 decisions. Therefore, fewer cases are included in Mr. Croft's analysis than in the Board's.
2. Scheduling of prehearing dates are at the request of the parties, subject to a 20-30 day prehearing docket. Column III of the Board's chart, for instance, shows cases in which Statements were filed 153 and 190 days before a prehearing was ever requested. To the extreme, one case shows a statement filed in 1981, but no prehearing was requested until 1987. It is unknown how Mr. Croft included data on this type of case.

The days shown in Column III reflect scheduling records for prehearing dates requested by the parties. Realistically, a prehearing can be held within 20-30 days of request, but for the purpose of this analysis the numbers reflected in the records have been used.

3. Mr. Croft apparently used the time period between the 1st prehearing to hearing to show delays in obtaining a hearing date. The Board's chart, Column V shows that 21 prehearings were held in one case, and as many as 8 to 10 prehearing in other cases. Therefore, the time period between the first prehearing on a case and the regular hearing is not indicative of actual delays in the system by either the Board or parties. In many cases, the prehearing resolved the particular dispute and there was no need for a hearing until another dispute arose.

Mr. Croft's graph also does not taken into consideration cancellations or continuances on scheduled hearings. The following shows the number of hearings scheduled, heard, settled and continued in Anchorage during 1987.

# Cases Scheduled	875
# Heard	173 (20%)
# Settled	311 (35%)
# Continued	393 (45%)

Croft's Hearing Record:

# Cases Scheduled	211
# Heard	25 (13%)
# Settled	88 (43%)
# Continued	92 (44%)

As an example, a hearing on case #325152 was requested on March 27, 1987; prehearing held on April 30, 1987; 1st available hearing date May 19, 1987; hearing scheduled June 30, 1987; case continued to July 14, 1987; continued again to September 8, 1987. How are these hearing dates reflected in Mr. Croft's chart?

4. Mr. Croft's chart shows the delays in issuance of Board Decision and Orders from the Regular Hearing Date to the date the decision and order was issued; however, fails to include data on the number of days the record was held open at the parties' request. The increased number of days shown on his chart are illustrative of the increasing number of days (717) on 27 cases held open in 1987 over the number of days (91) on 5 cases in 1985, which were the result of the parties' requests. The Board's chart shows the number of days from Record Closure to decision and order, and also shows those cases where the Board's decisions were issued past the 30 days statutory time period (35 cases in 1985/38 cases in 1987).

The proposed amendment to AS 23.30.110(c) addresses the delay problems being experienced by the parties, i.e., injured workers and employers, and the docketing problems for the Alaska Workers' Compensation Board.

Board Recap of October, November, December 1985 and 1987 Cases

Column I. Workers' Compensation Case Number

Column II: Claimant's Last Name

Column III: Number of days between claimant's filing of the last Statement of Readiness to Proceed to 1st prehearing.

The Statement of Readiness to Proceed initiates Board action only to the extent that a prehearing is scheduled on a date specified by the parties. Currently, prehearings can be scheduled within time periods of 20-30 days, with shorter time periods available for hardship cases or if the parties agree to short notice.

Time frames in this column reflect the scheduling requests of the parties, not the scheduling efforts of the Board's prehearing officers.

Column IV: Number of Statements of Readiness to Proceed filed on case.

This column shows the total number of Statements filed throughout the history of the claim on various issues, many of which are settled before a Board hearing is scheduled.

Column V: Number of prehearings scheduled on case.

This column shows the total number of prehearings scheduled on a case, many of which resolve disputed issues at this level.

Column VI: Number of Hearing Dates assigned to case.

This column shows the total number of Board hearing dates scheduled that resulted in cancellations, continuances or hearings.

Column VII: Number of days from Last prehearing to 1st available hearing date.

Hearing dates are scheduled at the specific request and convenience of the parties, subject to availability on the Board's hearing dockets.

As noted, hearings can often be set at an earlier date, but are scheduled for a later date when parties request longer time frames. Statewide, the Board is docketed through May and June, however, many of the docketed cases will be cancelled or continued. Hardship cases can be docketed within 30 days or less as can cases in which the parties agree to short notice.

7a: This column shows the number of days Board hearing dates were extended at the specific request of the parties and also shows those cases decided on the record and on written briefs. (Briefed cases are not included in totals shown on comparative analysis graphs).

Column VIII: Number of days from Close of Hearing Record to D&O.

This column reflects the number of days for the Board to issue its Decision and Order after the close of the hearing record.

As noted, the hearing record is often left open at the specific request of the parties to supplement the record with briefs, depositions or further evidence. The Board can only decide the disputed and issue its decision after all hearing materials have been submitted and the official record closes.

8a: This column shows the number of days issuance of the Board's decision and orders were extended at the specific request of the parties in order to supplement the hearing record.

Oct, Nov, Dec. 1987

I	II	III	IV	V	VI	VII	7a	VIII	8a
Claim No.	Name	No. Days SRP to 1st PH	No. SRP's	No. PH's	No. Hearing Dates	No. Days from 1st Available (Date Heard/Comments)	Last PH to Hearing Date	No. Days Close to D&O (Hearing Date to	of Record D&O)
707899	Sawvell	57	1	1	1	12		48	(60)
100135	Griffith	53	4	7	3	14	(Briefs)	41	
624921	Gilbert	21	1	1	1	44		42	(57)
101827	Dukowitz	47	4	8	11	96		32	(43)
326609	Galbraith	43	1	3	1	105		72	(99)
509799	Hawkins	57	2	5	3	14	(Briefs)	30	
625770	Morrison	35	1	1	2	14	(Briefs)	30	
313079	Pugh	51	5	6	5	92	(120)	70	
602445	Strahmann	22	3	1	3	85	(196)	19	(34)
627181	Conner	11	2	1	1	14	(Briefs)	8	
514557	Hintsala	53	4	5	4	81		20	
615133	Robertson	27	1	1	1	96		20	
622089)	Warrick	11	1	4	1	93		8	(16)
622090)									
424570	Gernandt	19	2	5	2	59	(Briefs)	62	
101651	Pohlman	87	2	4	6	87		29	
514783	Wainscott	22	3	4	3	59		78	(106)
617690	Kuharich	73	2	1	2	44		3	(10)
615912	Alderson	47	3	8	3	14	(Briefs)	61	
101462	Stovall	85	4	3	3	2	(71) (Briefs)	56	
512883	Tuthill	134	1	2	3	9	(122) (Briefs)	68	
318098	Ousley	25	4	3	2	30	(57) (Briefs)	99	
427839	Kramer	62	3	6	3	17		84	
531783	Gossett	23	2	3	2	46		118	
431363	Osborne	(27 days to Hrg)	1	0	1	27	(Briefs)	7	
705108	Lawson	93	1	1	1	56		31	
325152	Aumiller	28	3	2	3	20	(131) (Briefs)	7	
328279	Barry	33	2	2	1	29	(Briefs)	28/28	
517845	Hunt	36	1	2	2	65	(84)	22	
215571	Davis	65	1	1	1	14	(Briefs)	29	
526071	Millwood	(14 days to Hrg)				14	(Briefs)	29	
100427	Phillips	(File in court)				14	(Briefs)	29	
401807	Ostby	43	2	2	5	117	(145)	31	
101266	Hill	(1981)	1	1	1	31	(1987)	33	
702689	Brookins	33	1	1	2	109	(173)	13	

Oct, Nov, Dec. 1987

I	II	III	IV	V	VI	VII	7a	VIII	8a
Claim No.	Name	No. Days SRP to 1st PH	No. SRP's	No. PH's	No. Hearing Dates	No. Days from 1st Available (Date Heard/Comments)	Last PH to Hearing Date	No. Days Close to D&O (Hearing Date to	of Record D&O)
517702)	Svejkovsky	28	2	2	1	94		50	(79)
620761)									
101396	Bailey	28	3	4	2	49		2	(29)
319502	Hardy	47	3	3	4	68	(264)	79	(105)
421557	Eckman	45	3	2	5	92	(220)	14	
513922	Galindo	65	2	2	2	95		6	(17)
715452	Wilkerson	4	1	1	1	45		10	
620467	Bruns	42	2	2	3	14	(Briefs)	83	
224248	Tilghman	20	1	1	2	87	(116)	12	
323506	Lane	37	4	4	1	13	(Briefs)	29	
402405	Epperson	20	5	6	5	107		17	
101862	Rapp	153	1	1	1	87		76	
219459	King	54	5	10	5	85		7	
218424	Lucas	28	2	2	1	108		22	
414378	Starr	29	3	6	1	102		51	(80)
621295	Woods	37	1	1	1	101		26	(109)
506910	Cook	39	6	4	4	14	(Briefs)	27	
507721	Thornton	42	2	3	1	14	(Briefs)	28	
421658	Miller	21	2	3	2	107	(135)	31	
505753)	Bell	32	2	9	5	49	(180)	7	
522069)									
410173	Gillen	121	2	3	2	90		78	
627451	Haskins	23	2	2	1	102	(108)	24	(64)
704925	Scales	30	1	1	2	61	(106)	49	
627534	Douglas	36	2	2	2	29		14	
619904	Fischer	24	1	1	1	29		81	
425369	Moretz	(Superior Court Remand)			1	49	(Briefs)	35	
615385	Ford	28	3	3	3	22		30	(57)
509455	Harris	14	6	2	2	17	(Briefs)	85	
301102	Johnson	51	4	5	2	89	(115)	30	
301087	Castleberry	46	8	6	8	36	(134)	35	
424779	Bassett	65	2	2	1	19		152	(164)
619959	Chmela	32	1	1	1	108	(139)	94	
410421	Schwab	40				24	(Briefs)	23	
620053	Scott	22	1	1	1	65	(351)	12	

Oct, Nov, Dec. 1987

I	II	III	IV	V	VI	VII	VIII	8a
Claim No.	Name	No. Days SRP to 1st PH	No. SRP's	No. PH's	No. Hearing Dates	No. Days from Last PH to 1st Available Hearing Date (Date Heard/Comments)	No. Days Close of Record to D&O (Hearing Date to D&O)	Close of Record to D&O
607585	Smith	73	1	2	1	82 (108)	22	(37)
708627)	Ince	89	1	2	1	65	15	
511015)								
509536	Jones	1	3	4	3	95 (185)	5	(18)
315000	Phelan	56	5	6	5	114 (177)	5	
101171	Munson	(1983)	4	6	8	65 (158)	188	
500125)	Carlson	17	2	3	3	36	28	(43)
707992)								
524424)	McMahon	47	4	2	2	35	15	
501099)								
101784	Sherrod	8	1	6	3	23 (Briefs)	19	
213136	Cessnun	55	2	2	1	14 (Briefs)	151	
709187	Cortay	20	1	1	1	52	53	
704308	Cortay	12	1	1	1	59	56	
101258	Odom	(1983)	3	1	2	56 (Board Reopened)	21	(146)
203244	Moran	26	3	2	3	69	22	
529939)	Earwood	44	1	4	3	39	9	(38)
622925)								
305966	Mendez	44	3	3	3	35	29	
513982	Owens	17	1	3	1	83	21	
100253)	Miller	34	7	9	1	26 (Briefs)	9	
220551)								
431391	Hayes	55	1	1	1	103 (142)	36	(50)
624999	Nichols	46	1	1	1	58	30	
623352	Woodward	46	1	1	1	58	30	
319152	Rock	25	5	3	1	21 (Briefs)	93	
206851	Cuffe	31	3	6	5	62	34	
431462	Turnbull	29	1	3	1	89 (113)	26	
101449	Crouch	29	3	4	3	16 (Briefs)	7	
209520	Alles	53	2	3	1	7 (Briefs)	8	
42655	Fernandez	59	3	1	1	61	8	
511182	Urioste	50	2	2	2	78 (202)	23	
621897	Patterson	27	3	2	1	21	12	(40)
701714	Brooks	27	1	2	3	30 (90)	14	(28)
620457	Hopkins	53	1	2	1	70	15	
421830	MacMartin	77	1	1	1	71	15	

Oct, Nov, Dec. 1987

I	II	III	IV	V	VI	VII	7a	VIII	8a
Claim No.	Name	No. Days SRP to 1st PH	No. SRP's	No. PH's	No. Hearing Dates	No. Days from Last PH to 1st Available Hearing Date (Date Heard/Comments)		No. Days Close of Record to D&O (Hearing Date to D&O)	
623535	Miller	43	2	2	1	91		23	(37)
501855	Grove	145	3	1	1	98	(126)	29	(72)
602403	Nickerson	23	2	4	3	78		22	
601434	Stockley	117	3	2	1	14	(Briefs)	15	

w/Briefed Cases    w/o Briefed Cases

TOTALS:	95/4177	102/5668	(73/5114)	103/3812 (4529)
AVERAGES:	43.97	55.57	(70.05)	37.01 (43.97)

Oct, Nov, Dec. 1985

I	II	III	IV	V	VI	VII	7a	VIII	8a
Claim No.	Name	No. Days SRP to 1st PH	No. SRP's	No. PH's	No. Hearing Dates	No. Days from 1st Available (Date Heard/Comments)	Last PH to Hearing Date	No. Days Close to D&O (Hearing Date to	of Record D&O)
429989	Ensley	37	1	2	1	55	(63)	25	
100960	Money	(18 days to Hrg)	2	0	1	18	(Briefs)	33	
420471	Davis	43	1	2	1	67		34	
101063)	Smith	Superior Court Remanded				24	14	(Briefs)	43
101178									
321760	Connolly	34	3	2	2	14	(Briefs)	21	
300501	Parenteau	78	4	4	3	35	(82)	32	
422406	Scholl	19	2	1	2	24	(Briefs)	34	
215673)	Seymour	65	6	5	8	64		34	
21492?;									
100598	Eggleston	51	1	6	7	14	(Briefs)	42	
504217	Osborn	43	1	1	1	57		48	
100568)									
227824	Stephens	(1981)	3	4	6	14	(Briefs)	23	
101473)	Wade	15	3	4	5	10	(95)	42	
227574									
101663	Stites	41	3	2	5	23		40	
315538)	Beebe	32	2	2	2	63		42	
320596)									
302161	Kinter	48	8	6	4	30	(66)	51	
502860	Smith	69	3	2	4	31		60	
100743	Newton	(30 days to Hrg)	2	0	5	14	(Briefs)	19	
428078)	Davis	21	2	5	4	62		22	
100843	VonAlvensleben	35	2	3	4	14	(Briefs)	21	
213235)	Willis	62	3	6	5	66		35	
304273)									
312752)									
426267)									
503729	Hogan	36	1	1	1	51	(80)	37	(50)
401155	Garcia	116	2	2	2	63		11	
100427	Phillips	125	1	2	1	30		63	(69)
101061	Keyes	40	1	1	5	31	(114)	43	(72)
216721	Aragon	(33 days to Hrg)	1	0	1	33	(Briefs)	15	
422429	Standord	22	2	1	2	77		15	
516560	Sullivan	24	1	1	1	34		7	
202965	Baker	36	2	2	3	59	(76)	6	(22)

Oct, Nov, Dec. 1985

I	II	III	IV	V	VI	VII	7a	VIII	8a
Claim No.	Name	No. Days SRP to 1st PH	No. SRP's	No. PH's	No. Hearing Dates	No. Days from Last PH to 1st Available (Date Heard/Comments)	Hearing Date	No. Days Close to D&O (Hearing Date to D&O)	of Record (D&O)
101787	Hester	(70 days to Hrg)	1	0	2	14	(Briefs)	6	
101702	Kincaid	(100 days to Hrg)	1	0	1	29	(Briefs)	40	
415670	McClure	14	4	3	7	23	(Briefs)	40	
330505	Brossow	13	5	6	6	53		19	
506480	Williams	35	6	7	7	16	(58)	43	
204055	Lewis	62	1	1	1	14	(Briefs)	30	
405876	Standley	22	2	3	2	7	(Briefs)	30	
207923	Thompson	157	1	2	1	51		19	
101705	Eldridge	190	3	1	2	14	(Briefs)	15	
100843	Estabrook	39	4	8	3	11	(Briers)	36	
311130	Ribeiro	48	3	4	3	14		29	
425395	Taylor	22	1	1	1	30		15	
509455	Harris	14	1	1	2	14		20	
429257	Landresse	58	1	1	2	65	(227)	30	
400607	Sutton	39	2	2	2	52		30	
413328	Eby	36	2	3	2	41	(75)	3	
326905)	Fahlsing	52	1	1	1	20		72	
405854)									
101662	Hewitt	(18 days to Hrg)	1	0	1	14	(Briefs)	16	
100528	Fitzgerald	47	1	1	1	25		43	
325002	Morrison	66	2	2	2	14	(Briefs)	30	
402362	Shannon	62	1	2	2	14	(84) (Briefs)	35	
204915	Donovan	36	4	4	3	37		30	
101712	Shippy	23	4	3	4	14	(Briefs)	51	
101794	Zeddies	(45 days to Hrg)	1	0	1	45	(Briefs)	43	
328505	Day	62	4	5	4	44	(87)	30	(57)
203498	Giles	20	1	4	3	14	(Briefs)	16	
514403	Marll	7	6	4	4	64	(105)	40	
101458	Engfer	(1979)	4	3	10	14	(Briefs)	30	
220243	Gray	236	3	3	2	56		34	
405269	Harding	16	1	1	2	43	(50)	27	
101530)	Losky	36	3	3	6	53		14	
318827)									
219459	King	53	6	11	5	30	(Briefs)	26	
507089	Goodwin	43	4	3	4	23		22	
101026)	Spurlin	36	5	6	4	14	(Briefs)	40	
300928)									

Oct, Nov, Dec. 1985

I Claim No.	II Name	III No. Days SRP to 1st PH	IV No. SRP's	V No. PH's	VI No. Hearing Dates	VII No. Days from Last PH to 1st Available Hearing Date (Date Heard/Comments)	7a	VIII No. Days Close of Record to D&O (Hearing Date to D&O)	8a
100212	Rowe	(1981)	5	4	10	36		29	
100366	James	(1979)	7	2	7	30	(Briefs)	31	
100716	Marick	29	4	2	5	62		31	
100241	Stites	40	1	2	1	1	(Briefs)	17	
100253	Miller	34	7	9	1	14	(Briefs)	20	
101726)	Gertsch	7	3	5	5	49		53	
330639)									
402424	Green	20	2	2	2	14	(Briefs)	28	
101639	Beauchamp	42	5	8	6	38	(Briefs)	8	
205812	McClain	41	4	4	5	37		49	
101524	Stoeffen	30	2	3	3	65	(Briefs)	2	
101268	Diamond	29	3	6	2	30	(Briefs)	36	
502828)	Rudolph	24	2	3	2	7	(Briefs)	39	
510285)									
516755)									

w/Briefed Cases    w/o Briefed Cases

TOTALS:	62/2929	74/2436	(41/1793)	74/2245 (2336)
AVERAGES:	47.24	32.92	(43.73)	30.34 (31.57)

WORKLOAD REPORT

<u>Activity</u>	<u>FY87</u>		<u>FY86</u>		<u>FY85</u>
1. Injuries:					
Time Loss	9,251	-13.4%	10,686	-8%	11,636
No Time Loss & Other	16,550	-10.3%	18,459	-5%	19,374
Fatality	40	-9.0%	44	-10%	49
TOTAL INJURIES:	25,841	-11.5%	29,189	-5%	31,059
2. Controversions	5,663	-5.0%	5,934	+28%	4,641
3. Decision and Orders	316	-10.0%	355	-2%	363
4. Board Actions (includes 16 oral D&O's)	46	-10.0%	51	-16%	61
5. Compromise & Releases:					
Approved	1,006	+44.0%	701	+49%	472
Denied	174	+12.0%	156	-9%	172
6. Hearings:					
Scheduled	1,370	+20.0%	1,146	+6%	1,083
Heard	425	+25.0%	340	-9%	372
Partially Resolved/ Settled	383	+41.0%	271	+13%	239
Continued	565	+5.0%	537	+11%	484
7. Applications Processed	1,794	+15.0%	1,562	+23%	1,274
8. Statements Processed	1,275	+23.0%	1,037	+36%	762
9. Petitions Processed	266	+158.0%	103	+23%	84
10. Compensation Reports Received	25,223	+4.0%	24,151	-4%	25,281
11. Prehearings Held	2,890	+18.0%	2,445	+24%	1,971

WORKERS' COMPENSATION  
QUARTERLY REPORT

1st Quarter, FY88

1. Claims scheduled for Board Hearing.

<u>MONTH</u>	<u>ANCHORAGE</u>	<u>FAIRBANKS</u>	<u>JUNEAU</u>	
<u>July</u>	<u>66</u>	<u>13</u>	<u>4</u>	
<u>August</u>	<u>75</u>	<u>15</u>	<u>15</u>	
<u>September</u>	<u>77</u>	<u>20</u>	<u>3</u>	
<u>TOTALS</u>	<u>218</u>	<u>48</u>	<u>22</u>	<u>288</u>

2. AVERAGE number of DAYS between statement rcvd/Pre-hearing notice and date case is schedule for hearing process.

<u>MONTH</u>	<u>ANCHORAGE</u>	<u>FAIRBANKS</u>	<u>JUNEAU</u>	<u>AVG # DAYS</u>
<u>July</u>	<u>79.36</u>	<u>20.75</u>	<u>-</u>	<u>69.38</u>
<u>August</u>	<u>82.80</u>	<u>21.20</u>	<u>20.75</u>	<u>66.19</u>
<u>September</u>	<u>77.18</u>	<u>25.00</u>	<u>36.00</u>	<u>68.54</u>
<u>TOTALS</u>	<u>80.05</u>	<u>22.43</u>	<u>22.40</u>	<u>67.87</u>

3. AVERAGE number of DAYS after close of hearing record until Board decision is issued.

<u>MONTH</u>	<u>ANCHORAGE</u>	<u>FAIRBANKS</u>	<u>JUNEAU</u>	<u>AVG. # DAYS</u>
<u>July</u>	<u>32.24</u>	<u>52.89</u>	<u>53.50</u>	<u>38.43</u>
<u>August</u>	<u>37.33</u>	<u>59.13</u>	<u>51.25</u>	<u>45.51</u>
<u>September</u>	<u>41.58</u>	<u>24.88</u>	<u>63.75</u>	<u>38.90</u>
<u>TOTAL</u>	<u>37.22</u>	<u>45.92</u>	<u>56.70</u>	<u>42.01</u>

4. Percentage of worker compensation claims in which employers timely file injury reports within 10 days.

# of time loss claims files 2,764 ; # filed within 10 days 1,576 = 57 %

Total # of claims filed 7,692 - 86 (jurisdiction) = 7606

5. Percentage of workers compensation claims in which timely first payments is made to injured worker within 21 days (excl. CNTR). for current fiscal year injuries.

	<u># of Payments.</u>	<u># Pymts. 21 days</u>	<u>%</u>
CARRIERS.....	<u>959</u>	<u>805</u>	<u>84</u>
SELF-INSURED.....	<u>213</u>	<u>172</u>	<u>81</u>
TOTALS CLAIMS.....	<u>1,172</u>	<u>977</u>	<u>83</u>

6. Percentages of ~~fixxx~~ payments reported within 28 days (injuries during this qtr. only)

CARRIERS.....	<u>99.786%</u>
SELF-INSURED.....	<u>100.0%</u>

cc: Jacque  
~~Bozza~~ Jan  
 Elaine  
 File

WORKERS' COMPENSATION  
QUARTERLY REPORT

2nd Quarter FY 88

1. Claims scheduled for Board Hearing.

<u>MONTH</u>	<u>ANCHORAGE</u>	<u>FAIRBANKS</u>	<u>JUNEAU</u>	
<u>October</u>	<u>86</u>	<u>16</u>	<u>5</u>	
<u>November</u>	<u>63</u>	<u>13</u>	<u>4</u>	
<u>December</u>	<u>89</u>	<u>12</u>	<u>5</u>	
<u>TOTALS</u>	<u>238</u>	<u>41</u>	<u>14</u>	<u>293</u>

2. AVERAGE number of DAYS between statement rcvd/Pre-hearing notice and date case is schedule for hearing process.

<u>MONTH</u>	<u>ANCHORAGE</u>	<u>FAIRBANKS</u>	<u>JUNEAU</u>	<u>AVG # DAYS</u>
<u>October</u>	<u>89.52</u>	<u>24.60</u>	<u>-0-</u>	<u>77.42</u>
<u>November</u>	<u>84.10</u>	<u>24.00</u>	<u>18.00</u>	<u>73.96</u>
<u>December</u>	<u>86.14</u>	<u>23.67</u>	<u>33.50</u>	<u>77.86</u>
<u>TOTALS</u>	<u>86.72</u>	<u>24.21</u>	<u>28.33</u>	<u>76.57</u>

3. AVERAGE number of DAYS after close of hearing record until Board decision is issued.

<u>MONTH</u>	<u>ANCHORAGE</u>	<u>FAIRBANKS</u>	<u>JUNEAU</u>	<u>AVG. # DAYS</u>
<u>October</u>	<u>37.00</u>	<u>30.63</u>	<u>80.50</u>	<u>40.15</u>
<u>November</u>	<u>35.20</u>	<u>19.91</u>	<u>53.50</u>	<u>31.74</u>
<u>December</u>	<u>32.05</u>	<u>16.86</u>	<u>57.40</u>	<u>32.65</u>
<u>TOTAL</u>	<u>34.92</u>	<u>22.38</u>	<u>65.09</u>	<u>34.97</u>

4. Percentage of worker compensation claims in which employers timely file injury reports within 10 days.

# of time loss claims files 2074 ; # filed within 10 days 1120 = 54 %  
 Total # of claims filed 5532 - 40 (jurisdiction) = 5492

5. Percentage of workers compensation claims in which timely first payments is made to injured worker within 21 days (excl. CNTR). for current fiscal year injuries.

	<u># of Payments.</u>	<u># Pymts. 21 days</u>	<u>%</u>
CARRIERS.....	<u>676</u>	<u>508</u>	<u>84</u>
SELF-INSURED.....	<u>198</u>	<u>158</u>	<u>80</u>
TOTALS CLAIMS.....	<u>874</u>	<u>726</u>	<u>83</u>

6. Percentages of ~~xxxx~~ payments reported within 28 days for injuries occurring in this qtr.

CARRIERS.....	<u>99.922</u>
SELF-INSURED.....	<u>99.365</u>

cc: Jacque  
~~Bxxxx~~ Jan  
 Elaine  
 File

WORKERS' COMPENSATION

QUARTERLY REPORT

2nd Quarter - FY '86

1. Claims scheduled for Board Hearing.

<u>MONTH</u>	<u>ANCHORAGE</u>	<u>FAIRBANKS</u>	<u>JUNEAU</u>	
October	69	19	7	
November	59	10	13	
December	75	10	3	
TOTALS	203	39	23	= 265

2. AVERAGE number of DAYS between statement rcvd/Pre-hearing notice and date case is scheduled for hearing process.

<u>MONTH</u>	<u>ANCHORAGE</u>	<u>FAIRBANKS</u>	<u>JUNEAU</u>	<u>TOTAL AVG.</u>
October	48.2	32.0	21.5	44.0
November	37.6	29.9	29.8	35.5
December	32.9	27.3	35.0	32.2
TOTALS	40.2	30.3	28.4	37.9

3. AVERAGE number of days AFTER close of hearing record until Board decision is issued.

<u>MONTH</u>	<u>ANCHORAGE</u>	<u>FAIRBANKS</u>	<u>JUNEAU</u>	<u>TOTAL AVG.</u>
October	30.1	27.0	30.0	29.5
November	34.1	16.4	42.3	29.0
December	31.3	27.3	22.3	26.2
TOTALS	31.8	21.8	25.9	28.0

4. Percentage of worker compensation claims in which employers timely file injury reports within 10 days.

54%

5. Percentage of worker compensation claims in which timely first payment to injured worker is made within 21 days (excl. cntr).

CARRIERS -- 82%  
 SELF-INSUREDS -- 83%

Promptness for reporting first payments within 28 days (excl cntr).

CARRIERS -- 100%  
 SELF-INSUREDS -- 100%

cc: Jacque  
 Becca  
 Elaine

MEDICAL TREATMENT DATA  
FROM  
DECISIONS BY THE ALASKA WORKERS' COMPENSATION BOARD

<u>Case No.</u>	<u>Approx. No. Treatment Time Frame</u>	<u>Approx. Total Treatments</u>	<u>Approx. Frequency Treatments</u>	<u>Notes to Decisions</u>
1) 225522 417689	1/29/79 - 5/8/86	279	1 per 1.75 days to 1 per 2 weeks	Board finds employee is dependent on chiropractic care per testimony of expert witness Dr. Scott Haldeman
2) 301087	1/31/83 - 8/3/87	420	1.7 per week	Addictive quality of chiropractic treatment cited by Dr. Haldeman
3) 223942	10/82 - 2/87	261	4-5 per week to 4-6 per month	
4) 101141	9/81 - 9/86	239	1 per 2 days to 1 per 10.5 days	
5) 309291	4/82 - 10/86	168	4 per week to 1 per month	Treatments exceed standard cited by Dr. Haldeman
6) 620042	9/16/86 - 8/25/87	127	1 per 2-14 days	
7) 430147	10/17/85 - 4/86	59	1 per 3.08 days	Treatments exceed standard cited by Dr. Haldeman
8) 78-09-0255	11/8/78 - 4/81	Unknown	1 per day to 3 per week (at 2 x day)	
9) 76-03-0664	3/19/80 - 3/4/81	100	1 per 3 days	

<u>Case No.</u>	<u>Treatment Time Frame</u>	<u>Approx. No. Total Treatments</u>	<u>Approx. Frequency Treatments</u>	<u>Notes to Decisions</u>
10) 100335	7/25/80 - 1/23/81	53	1 per 3.45 days	Board find disability caused by metastasized cancer and not by chiropractic treatment for injury
11) 226696	1/5/83 - 4/13/83	45	4 per week to 1 per week	Board member in concurrent opinion admonishes chiropractor for "excessive and costly care."
12) 325011	1/84 - 1/86	35	1 per week to 1 per month	Board denies myotherapy treatment referral by chiropractor
13) 76-10-0061	1/25/78 - 8/3/88	18	1 per 10.5 days	Back treatment by chiropractor not related to on-the-job knee injury.

HIAA SURGICAL PREVAILING HEALTHCARE CHARGES SYSTEM  
RULES AND REQUIREMENTS FOR PURCHASING 1987 OUTPUTS

I. Categories of Eligible Subscribers

Eligible subscribers are classified into four categories.

- A. Claims Subscribers - organizations which directly administer medical claims. Examples of claims subscribers are: Commercial insurance companies, Blue Cross and/or Blue Shield Plans, third-party administrators and self-administering organizations.
- B. HMOs and PPOs - Health Maintenance Organizations and Preferred Provider Organizations.
- C. Research Subscribers - non-profit organizations who use the output data for research purposes only. Examples of research organizations are: academic institutions and governmental agencies.
- D. Consulting Organizations and Utilization Review Organizations - Examples of consulting organizations are: actuarial and/or employee benefit consulting organizations and claims and/or medical auditing organizations.

NOTE: If an organization does consulting and/or utilization review but also directly administers any medical claims, then the organization MUST subscribe as a claims subscriber.

IMPORTANT: Requests for subscription MUST be accompanied by documentation sufficient to classify the subscriber into one of the above four categories. At minimum, this documentation will include some current annual published report which describes the organization's business.

IN ADDITION: for a claims subscriber, the documentation MUST indicate the size of the subscribing organization, i.e., the number of employees for whom medical expense benefits are directly administered; for an HMO or PPO, the documentation MUST indicate the size of the subscribing organization, i.e., the number of enrollees in the HMO or PPO; and for a research subscriber, the documentation MUST include a copy of the (proposed) research project for which PHCS output would be used [For a more detailed characterization of "size", see the Footnote on page 9.].

The ONLY exceptions to this documentation requirement are member HIAA companies, who have already provided this documentation to HIAA.

Please note that previous subscription to the PHCS does not constitute membership in HIAA. Also, please note that, even if you subscribed in 1986 and submitted documentation with your 1986 order, documentation MUST also accompany your 1987 order.

II. Classes of Subscribers

Subscribers to the Surgical PHCS are classified as either Data Contributors (DCs) or Non-Contributors. DCs are classified as either Required DCs or Optional DCs.

- A. Data Contributors - data contributors are limited to claims subscribers. [In 1987, we will consider the issues and possibilities of capturing HMO and PPO data]. A data contributor is a claims subscriber who inputs data and whose input meets the minimum semi-annual input requirement. The minimum semi-annual input requirement is a volume of acceptable records equal to at least 5% of the number of employees for whom medical expense benefits are directly administered by the claims subscriber, or 5,000 acceptable records, whichever is larger.

An acceptable input record is an input record which successfully passes all HIAA edits. The number of employees for whom medical expense benefits are directly administered includes the following: (1) employees under employer-employee group plans; (2) members of associations, unions, etc., and (3) primary insureds under individual policies that reimburse surgical expenses. "The number of employees for whom medical expense benefits are directly administered" does NOT include the dependents of the employees.

1. Required DCs - a required DC is a claims subscriber who administers medical expense benefits on behalf of at least 100,000 employees. As the name implies, a required DC is required to input data.

If a required DC does not meet the minimum semi-annual input requirement, the required DC will not receive output for the "cycle" in which the input requirement was not met. (See XI. B. 4.)

2. Optional DCs - an optional DC is a claims subscriber who administers medical expense benefits on behalf of less than 100,000 employees. An optional DC has the option of inputting data. If the option is exercised and the minimum semi-annual input requirement is met, the optional DC may be eligible for reimbursement and credits. (See XII.)

An optional DC will receive output for any "cycle" in which the input requirement was not met. (See II. B.)

- B. Non-Contributors - a non-contributor is either (1) an optional DC who chooses to input data but who does not meet the minimum semi-annual input requirement, or (2) a subscribing organization (other than a required DC) who does not input data.

### III. Special Notes for DCs

While outputs are presented on a CPT-4 coding basis only, 1986 DCs had the option of inputting CPT-4 codes, 1964 CRVS codes or 1969 CRVS codes. However, EFFECTIVE with the FIRST CYCLE of 1987, ONLY CPT-4 codes may be inputted.

### IV. Subscription Period for ALL BUT Research Subscribers

Subscription for all but research subscribers is on an annual basis only. The subscription period is for the two consecutive semi-annual cycle outputs for the

calendar year. The initial subscription begins with the 87-1 output. A subscriber who subscribes after either the 87-1 or the 87-2 output is available will be charged the full-year subscription rate. However, such a subscriber will be entitled to both 87-1 and 87-2 output.

The first cycle (87-1) ends on February 28, 1987. Cycle 87-1 contains data on claims dated March 1, 1986 through February 28, 1987. DCs have until March 31, 1987, to submit their data. The output, which will be dated March, 1987, will be available for distribution to subscribers on or about May 15, 1987.

The second cycle (87-2) ends on August 31, 1987. Cycle 87-2 contains data on claims dated September 1, 1986 through August 31, 1987. DCs have until September 30, 1987, to submit their data. The output, which will be dated September, 1987, will be available for distribution to subscribers on or about November 15, 1987.

#### V. Subscription Period for Research Subscribers

Subscription for research subscribers is for any one cycle only, on an annual basis. Research subscribers MUST specify, in writing, whether they are ordering output for 87-1 OR 87-2.

#### VI. Outputs

Several outputs are available for 1987 Subscribers.

##### A. The Procedure Summary Report is available in three formats.

1. The Procedure Summary Report is available in bound volume. Two sample pages of this report are attached.
2. The Procedure Summary Report is available on magnetic tape (the print tape). This tape's file format, information content and data element definitions are IDENTICAL to the bound volume. The file is in fixed format with ASA print characteristics.
3. The Procedure Summary Report is available in microfiche format.

NOTE: For any format of the Procedure Summary Report, if the number of claims for a given procedure within a given geographical area is less than five (5), the procedure for that area will not appear in the Procedure Summary Report.

##### B. The Statistical Data File is available only on magnetic tape (the stat tape). This tape's data element definitions are identical to those of the print tape; however, it does not contain the "over-head" of the print tape, e.g., page headings. This tape MAY be more appropriate for strictly data base applications.

NOTE: For the Statistical Data File, if the number of claims for a given procedure within a given geographical area is at least one (1), the procedure for that area will appear in the Statistical Data File.

- C. The Sort Claims Tape is a file of all partially edited claims, prior to accumulations by either procedure or geographical area.

NOTE: All claims entering the PHCS System are subjected to edits. All claim-record fields are edited in each of several edit stages. In the first edit stage, the claim-record is edited for , e.g., a valid zip code and a valid claim date. At this stage, the amount of claim is edited to insure that the amount of claim is neither blank nor zero.

If and only if a claim-record successfully passes this edit stage does it eventually move to the final edit stage. The final stage edits for "reasonableness" of the amount of claim. For example, assume, for CPT-4 code 12345 in geographical area 987, that there are the following ten claim-records whose amounts of claims are \$1.00, \$950.00, \$950.00, \$975.00, \$1,000.00, \$1,100.00, \$1,250.00, \$1,500.00, \$1,750.00 and \$10,250.00. The final edit would edit out the \$1.00 claim and the \$10,250.00 claim as "unreasonable" relative to the other eight "reasonable" claims.

However, the final edit stage of "reasonableness" is applicable only to claim-records which have been accumulated by both procedure and geographical area. Consequently, since the Sort Claims Tape is a file of claims prior to such accumulations, the Sort Claims Tape (and only the Sort Claims Tape) is partially edited.

- D. The CRVS-CPT Conversion Tape contains tables for the following conversions:

Source Code System		Destination Code System
1964 CRVS	to	CPT - 4
1969 CRVS	to	CPT - 4
1974 CRVS	to	CPT - 4
CPT - 4	to	1964 CRVS

The tables show a translation, or "fate", for every code in the source code system. Translations are of the following:

1. 1-to-1 Conversions

Procedures in the source code have identical or equivalent wording to procedures in the destination code.

2. 1-to-N Conversions

One procedure in the source code has been split into multiple procedures in the destination code.

3. N-to-1 Conversions

Multiple procedures in the source code have been grouped into one procedure in the destination code.

4. No Conversion

The procedure in the source code is either obsolete, new, or for some other reason cannot be matched to any procedure in the destination code.

NOTE: For the CRVS-CPT Conversion Tape, the conversions are to (or from) the codes of CPI, Fourth Edition, Ninth Revision. This edition/revision was published in 1983. Thus, the CRVS-CPT Conversion tape will NOT convert to (or from) CPI codes added since 1983.

## VII. Standard PHCS File Characteristics of Magnetic Tapes

The following are the standard PHCS file characteristics of magnetic tapes:

### A. Procedure Summary Report (the print tape):

- o File Organization: Physical Sequential
- o Logical Record Length: 133 Bytes Fixed Length  
Position 1 is Print Control
- o Block Size: 1330 (Blocked 10)
- o Tape Density: 6250 BPI
- o Tape Format: 9 Track
- o Labelling: IBM OS Internal Labels Are Used.  
No User Labels Are Present.

### B. Statistical Data File (the STAT tape):

- o File Organization: Physical Sequential
- o Logical Record Length: 133 Bytes Fixed Length
- o Block Size: 13300 (Blocked 100)
- o Tape Density: 6250 BPI
- o Tape Format: 9 Track
- o Labelling: IBM OS Internal Labels Are Used.  
No User Labels Are Present.

### C. Sort Claims Tape:

- o File Organization: Physical Sequential
- o Logical Record Length: 64 Bytes Fixed Length
- o Block Size: 32704 (Blocked 511)
- o Tape Density: 6250 BPI
- o Tape Format: 9 Track
- o Labelling: IBM OS Internal Labels Are Used.  
No User Labels Are Present.

### D. CRVS-CPT Conversion Tape:

- o File Organization: Physical Sequential
- o Logical Record Length: 50 Bytes Fixed Length
- o Block Size: 6100 (Blocked 122)
- o Tape Density: 6250 BPI
- o Tape Format: 9 Track
- o Labelling: IBM OS Internal Labels Are Used.  
No User Labels Are Present.

IMPORTANT: The Sort Claims Tape is available only in 6250 BPI. However, for all other tapes, although the standard is 6250 BPI, the tapes are available in 1600 BPI at an additional charge of \$100.00 per type ordered.

Any other departure from standard PHCS file characteristics must be requested, in writing, AT THE TIME THAT THE ORDER IS PLACED. All such requested departures will be considered on a case by case basis, and all honored requests will involve additional charges.

#### VIII. Basic Subscription Price and Output

The schedule of prices is contained on page 9. For Claims Subscribers and for HMOs and PPOs, the price is fixed within each size bracket as shown. For Claims Subscribers, size is determined by the number of employees for whom medical expense benefits are directly administered by the subscribing organization. For HMOs and PPOs, size is determined by the number of enrollees in the HMO and PPO. For Research Subscribers and for Consulting Organizations and Utilization Review Organizations, the respective price is a flat rate.

The basic subscription price includes (1) one copy of the Procedure Summary Report output in bound volume format and/or EITHER one copy of the Procedure Summary Report in magnetic tape format OR one copy of the Statistical Data File on magnetic tape.

#### IX. Additional Output Prices

Additional copies of any format are available at the additional charges indicated on the PHCS Output Order Form. For all but research organizations, additional copies of any format are available only on an annual basis, i.e., additional copies of any format are available only for BOTH the 87-1 AND 87-2 cycles.

For Research Subscribers, additional copies are available at the additional charges indicated on the PHCS Output Order Form, but the additional copies are available only for the one cycle of the research organization's current (1987) subscription period.

Once the PHCS Output Order Form has been received by HIAA, any subsequent order for additional output must be submitted in writing and must be accompanied by a check for the full amount of the additional output.

IMPORTANT: Once any PHCS Output Order Form has been received by HIAA, any request to CHANGE the order will be treated as if it were a request for an ADDITIONAL copy at the additional charge indicated on the order form. For example, if a subscriber orders a print tape and then requests to change the order to a stat tape, HIAA will treat the request as if it were a request for an additional copy of the stat tape at the additional charge for a stat tape. All such requests to change the order must be submitted in writing and must be accompanied by a check in the proper amount.

#### X. Purchase of Previous Data

HIAA maintains a history file, on magnetic tape, of the PHCS data for the previous two full years, i.e., 1985 and 1986. This previous data may be purchased in magnetic tape format and/or microfiche format. Magnetic tapes are available in any format, i.e., print tape, stat tape or sort claims tape. Microfiche format is available only for the procedure summary report.

Bound volumes are not available for 1985. Bound volumes for 1986 are available while limited supplies last.

The sort claims tape is available only in 6250 BPI. However, for all other tapes, although the standard is 6250 BPI, the tapes are available in 1600 BPI at an additional charge of \$100.00 per type ordered.

All current (1987) subscribers may order previous data, on a calendar year basis only, i.e., for both cycle of 1985 and/or 1986, at the current additional output prices. Thus, any current subscriber may order, for example, the 86-1 and 86-2 STAT tapes in standard 6250 BPI for an additional \$100.00 or in 1600 BPI for a total additional cost of \$200.00.

For Research Subscribers only, who are not current (1987) subscribers, but who wish to purchase previous data, the previous data may be purchased, for one cycle only per year, at the Research Organization purchase price for that year. For example, if a Research Organization did not wish to purchase the current (1987) data, but did wish to purchase the 86-1 STAT tape in standard 6250 BPI, then the purchase price would be \$5,000.00 -- the purchase price for a research subscriber in 1986. If the tape were ordered in 1600 BPI, the price would be an additional \$100.00.

If the research subscriber in the above example also wished to order the 85-1 OR 85-2 STAT tape in standard 6250 BPI, then the additional tape would be available for an additional \$100.00 or available in 1600 BPI for an additional \$200.00.

For the schedule of prices for additional copies of 1985 and/or 1986 outputs, see p. 10.

Inasmuch as the purchase of such previous data is a special order, all such orders must be submitted in writing and accompanied by a check in the proper amount.

XI. Payment Policy

A. Non-Contributors - for any non-contributor, full payment of the subscription rate is required BEFORE any output will be released.

B. Data Contributor

1. For any DC who has not shown through the previous full year that it can meet both minimum semi-annual input requirements, full payment of the subscription rate is required BEFORE any output will be released.
2. For any DC who has shown through the previous full year that it can meet both minimum semi-annual input requirements, no pre-payment is required.
3. If an optional DC has not prepaid (having met the previous year's minimum annual input requirement), then:

- (a) if the optional DC meets their minimum semi-annual input requirement for one cycle only without thereby meeting their minimum annual input requirement, the optional DC will be billed for one-half their basic subscription rate;
  - (b) if the optional DC meets neither semi-annual input requirement, the optional DC will be billed for their full basic subscription rate.
4. For a required DC who has met all minimum semi-annual input requirements for the previous two full years, it will be excused, without penalty, for missing one cycle during 1987. In other words, one "Excused Cycle Credit" will be given for the previous two years of acceptable performance. However, only one "Excused Cycle Credit" will be allowed per year.

If both cycles are missed, then (i) no output will be provided for the second cycle, (ii) the required DC will be billed for one-half their current subscription rate and (iii) the required DC will be required to prepay for the following year.

Also, for any required DC who does not have an "Excused Cycle Credit" available, if any cycle is missed, then (i) no output will be provided for that cycle and (ii) the required DC will be required to prepay for the following year.

Repeated failure by a required DC to meet input requirements could result, at the discretion of HIAA, in ineligibility for future subscriptions.

## XII. Reimbursement and Credits for DCs

For any Data Contributor who meets both minimum semi-annual input requirements, the basic subscription rate (excluding charges for additional copies) is waived.

Also, the basic subscription rate is waived for any data contributor who does not meet one of the two minimum semi-annual input requirements, but who, during the other semi-annual cycle, inputs a volume of acceptable records equal to 10% of the number of employees for whom medical expense benefits are directly administered, or 10,000 acceptable records, whichever is larger.

If the basic subscription rate is waived, then those DCs who were required to prepay will be reimbursed their full basic subscription rate. If an optional DC who was required to prepay met the minimum semi-annual input requirement for one cycle only without thereby meeting their annual input requirement, then that optional DC will be reimbursed one-half of their basic subscription rate.

In addition, for acceptable records inputted which exceed the minimum annual number required (. . . 10% . . . or 10,000 acceptable records, whichever is larger) the DC will receive a cash credit for each such additional record up to, but not to exceed, 40% of the number of employees for whom medical expense benefits are directly administered.

HIAA Surgical PHCS Base Schedule of Prices  
for Claims Subscribers and HMOs and PPOs

<u>Size *</u>	<u>HIAA Member</u>	<u>HIAA Non-Member</u>
0 - 99,999	\$ 6,900	\$ 8,625
100,000 - 249,999	\$ 12,075	\$ 13,800
250,000 - 499,999	\$ 18,975	\$ 21,275
500,000 - 749,999	\$ 25,875	\$ 29,325
750,000 - 999,999	\$ 34,500	\$ 39,100
1,000,000 & over	\$ 46,000	\$ 51,750

HIAA Surgical PHCS Base Price for Research Organizations

(One cycle only, on an annual basis)

\$ 8,625

HIAA Surgical PHCS Base Price for  
Consulting and Utilization Review  
Organizations

\$ 13,800

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\* For Claims Subscribers, size refers to the number of employees for whom medical expense benefits are directly administered. The number includes the following: (1) employees under employer-employee group plans; (2) members of associations, unions, etc., and (3) primary insureds under individual policies that reimburse surgical expenses. "The number of employees for whom medical expense benefits are directly administered" does NOT include the dependents of the employees.

For HMOs and PPOs, size refers to the number of enrollees in the HMO or PPO. "The number of enrollees in the HMO or PPO" does NOT include the dependents of the enrollees.

**IMPORTANT:** Even if a Claims Subscriber or HMO or PPO intends to use the PHCS data for a limited number of their covered employees or enrollees, the subscription nevertheless must be in terms of the total number of covered employees or enrollees.

HIAA SURGICAL PHCS SCHEDULE OF ADDITIONAL COPY PRICES  
FOR 1985 and 1986 OUTPUTS

<u>Output</u>		<u>Price/Yr</u>
(1) Procedure Summary Report in Bound Volume (1986 <u>ONLY</u> , while limited supplies last)		\$200.00
(2) Procedure Summary Report on Magnetic Tape	6250 BPI	\$100.00
	1600 BPI	\$200.00
(3) Statistical Data File on Magnetic Tape	6250 BPI	\$100.00
	1600 BPI	\$200.00
(4) Sort Claims Tape (available <u>ONLY</u> in 6250 BPI)		\$750.00
(5) Microfiche		\$200.00

Any one or combination of these 1985 and 1986 outputs may be ordered as ADDITIONAL copies. All such orders MUST be submitted in writing and accompanied by a check in the proper amount. DO NOT USE THE OUTPUT ORDER FORM FOR 1987 FOR THESE SPECIAL ORDERS OF 1985 AND/OR 1986 OUTPUTS.

Any questions on the foregoing should be referred to Bruce L. Harris, (202) 223-7867, Health Insurance Association of America, 1025 Connecticut Avenue, N.W., Suite 1200, Washington, D.C. 20036.

H.I.A.A. - SURGICAL PREVAILING HEALTHCARE CHARGES SYSTEM 09/01/83 - 08/31/84

AREA - 917

PROCEDURE	NAME	NUMBER OF CHARGES	MEAN CHARGE	MODE CHARGE	PERCENTILES								
					50	60	70	75	80	85	90	95	
UN 28735	ARTHRRODESIS TARSAL MULT W OSTEOTOMY	8	1365	1680	420	420	1680	1680	1680	1680	1680	1680	1680
28750	ARTHRRODESIS M-P JOINT GREAT TOE	10	280	17	192	383	475	480	480	528	528	570	
28755	ARTHRRODESIS I-P JOINT GREAT TOE	15	265	184	184	192	383	475	475	480	528	570	
29065	CAST LONG ARM	91	64	60	60	65	67	68	74	79	90	98	
29075	CAST SHORT ARM	189	58	50	53	55	61	65	73	76	87	90	
29085	CAST HAND AND LOWER FOREARM	11	49	55	50	55	55	55	55	55	55	55	
29105	SPLINT LONG ARM	16	46	56	45	53	56	56	56	56	56	60	
29125	SPLINT SHORT ARM STATIC TYPE	37	56	50	51	60	70	72	75	76	83	100	
UN 29325	CAST HIP SPICA BILATERAL OR I 1/2	7	221	226	78	85	226	226	268	292	375		
29345	CAST LONG LEG	51	104	98	98	105	113	123	125	145	147	159	
29355	CAST LONG LEG AMBULATORY TYPE	94	108	130	105	120	122	130	130	130	144	150	
29365	CAST LEC CYLINDER	9	86	60	80	90	112	112	124	124	140	140	
29405	CAST SHORT LEG	156	81	70	75	78	90	100	108	112	120	150	
29425	CAST SHORT LEG AMBULATORY TYPE	183	109	130	110	120	130	130	130	138	150	160	
29450	CAST CLUBFOOT UNILATERAL	23	50	51	50	51	51	51	51	51	53	53	
29455	CAST CLUBFOOT BILATERAL	29	73	70	70	75	75	75	80	87	87	87	
29505	SPLINT LONG LEG	21	44	50	39	50	50	50	52	60	70	70	
29515	SPLINT SHORT LEG	79	47	30	50	55	56	57	60	60	70	100	
UN 29540	STRAPPING ANKLE	7	21	32	10	15	15	20	25	32	32		
29580	STRAPPING UNNA BOOT	61	43	60	40	45	45	57	60	60	60	60	
29700	REMOVAL CAST GAUNTLET BOOT BODY	29	28	25	25	30	35	35	35	35	50	50	
29705	REMOVAL CAST FULL ARM/FULL LEG	27	30	25	23	30	35	35	35	45	50	50	
UN 29799	UNLISTED PROCEDURE CAST/STRAPPING	7	93	90	30	37	67	70	90	90	270		
UN 30110	EXC POLYPS NASAL SIMPLE UNILAT	8	195	190	100	125	150	170	190	190	190	450	
30111	EXC POLYPS NASAL SIMPLE BILAT	9	157	190	150	170	190	190	190	190	190	190	
30115	EXC POLYPS NASAL EXTENSIVE UNIL	19	262	250	230	243	250	250	250	446	450	460	
30116	EXC POLYPS NASAL EXTENSIVE BIL	19	262	250	230	243	250	250	250	446	450	460	
30140	RESECTION SUBMUCOUS TURBINATE	35	364	321	355	388	400	400	400	435	450	480	
UN 30200	INJECT TURBINATES THERAPEUTIC	7	65	60	10	45	45	60	60	80	160		
30420	RHINOPLASTY PRIMARY MAJ SEPTAL REP	36	2082	2062	2062	2062	2175	2200	2295	2295	2533	2650	
UN 30500	RESECTION SUBMUCOUS NASAL SEPTUM	7	896	850	450	700	700	850	850	875	1850		
30520	SEPTOPLASTY W/WO CARTILAGE IMPLANT	116	1280	1270	1270	1300	1440	1450	1545	1870	1900	2012	
30620	RECONSTRUCTION NOSE INT FUNCTIONAL	13	1776	1800	1860	1900	1930	1930	2050	2062	2062	3000	
30800	CAUTERIZE TURBINATES SUPERFICIAL	14	76	150	65	80	85	100	100	100	150	150	
30805	CAUTERIZE TURBINATES INTRAMURAL	14	82	150	80	85	100	100	140	140	150	150	
30901	CONTROL HEMORR NASAL ANT SIMPL UNIL	40	56	50	50	55	60	65	68	85	85	85	
30902	CONTRDL HEMORR NASAL ANT SIMPL BIL	39	56	50	50	55	60	68	68	85	85	90	
30903	CONTROL HEMORR NASAL ANT COMPLX UNI	39	56	50	50	55	60	68	68	85	85	90	
30904	CONTROL HEMORR NASAL ANT COMPLX BIL	39	56	50	50	55	60	68	68	85	85	90	
30905	CONTROL HEMORR NASAL POST INITIAL	14	198	221	210	215	221	221	221	221	221	221	
31000	LAVAGE MAXILLARY SINUS UNILATERAL	12	71	81	75	81	81	81	82	100	100	145	
31001	LAVAGE MAXILLARY SINUS BILATERAL	17	68	65	65	70	75	75	90	90	108	108	
31020	SINUSOTOMY MAXILLARY INTRANASL UNIL	9	369	570	412	412	469	469	570	570	570	570	
31021	SINUSOTOMY MAXILLARY INTRANASL BIL	26	554	627	627	627	646	646	677	712	712	757	
31030	SINUSOTOMY MAXILL RAD UNIL WO POLYP	19	1104	1232	1250	1270	1270	1300	1332	1332	1460	1578	
31031	SINUSOTOMY MAXILL RAD BIL WO POLYP	9	2175	2118	1945	2118	2118	2118	2300	2300	3559	3559	

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PROCEDURE	NAME	NUMBER OF CHARGES	MEAN CHARGE	MODE CHARGE	PERCENTILES								
					50	60	70	75	80	85	90	95	
	31032 SINUSOTOMY MAXILL RAD UNIL W POLYPS	16	1125	1270*	1250	1270	1270	1270	1300	1332	1460	1578	
UN	31033 SINUSOTOMY MAXILL RAD BIL W POLYPS	8	2003	2118*	1850	1897	1898	1898	1945	2118	2118	2300	
	31200 ETHMOIDECTOMY INTRANASAL ANTERIOR	9	510	250	388	416	710	710	892	892	982	982	
	31201 ETHMOIDECTOMY INTRANASAL TOTAL	9	510	250	388	416	710	710	892	892	982	982	
	31205 ETHMOIDECTOMY EXTRANASAL TOTAL	9	510	250	388	416	710	710	892	892	982	982	
	31500 INTUBATION ENDOTRACHEAL EMERGENT	49	116	188*	110	115	132	150	150	170	188	188	
	31510 LARYNGOSCOPY INDIRECT W BIOPSY	10	65	40	61	68	82	98	98	111	111	122	
	31520 LARYNGOSCOPY DIRECT DX NB	46	310	300	300	315	380	380	380	380	404	450	
	31525 LARYNGOSCOPY DIRECT DIAGNOSTIC	63	321	300	315	350	380	380	380	380	420	450	
	31535 LARYNGOSCOPY DIRECT W BIOPSY	11	447	550*	459	460	479	479	550	550	550	550	
	31540 LARYNGOSCOPY DIR EXCISION/STRIPPING	14	622	600	600	650	750	765	820	820	820	888	
	31600 TRACHEOSTOMY PLANNED	21	467	527	527	527	545	550	558	560	560	600	
	31603 TRACHEOSTOMY EMERGENT TRANSTRACH	17	475	560*	527	545	550	558	560	560	600	732	
UN	31605 TRACHEOSTOMY EMERGENT CRICOTH/ROID	6	440	527	296	325	420	527	527	545			
	31620 BRONCHOSCOPY DIAGNOSTIC-RIGID SCOPE	35	384	400	400	400	404	413	432	435	450	490	
	31621 BRONCHOSCOPY DIAGNOSTIC-FLEX SCOPE	34	392	400	400	400	404	432	435	435	460	490	
	31625 BRONCHOSCOPY BIOPSY-RIGID SCOPE	43	472	500	500	500	539	550	560	575	600	662	
	31626 BRONCHOSCOPY BIOPSY-FLEX SCOPE	44	469	500	480	500	530	550	560	560	600	625	
UN	31645 BRONCHOSCOPY ASPIR THERAP INITIAL	7	359	450*	245	245	250	430	445	450	450		
	32000 THORACENTESIS	30	94	100	85	90	100	100	100	100	100	200	
	32020 THORACOSTOMY TUBE W WATER SEAL	30	187	250	195	202	216	230	242	250	250	250	
	32100 THORACOTOMY MAJOR EXPLORE/BIOPSY	14	790	1280*	568	1175	1280	1280	1280	1280	1280	1662	
UN	32420 PNEUMOCENTESIS	7	179	225*	130	135	150	195	195	225	225		
	32480 LOBECTOMY TOTAL/SEGMENTAL	13	2805	2945	2669	2945	2945	2945	3225	3432	3432	3500	
UN	32500 RESECT LUNG WEDGE SINGL/MULTIPLE	7	1445	400	400	400	450	2000	2153	2250	2465		
UN	33200 INSERT PACEMAKER EPICARDIAL THORAX	5	976	1200	30	450	1200	1200	2000				
	33210 INSERT PACEMAKER TRANSVENOUS TEMP	11	614	550*	550	620	650	785	785	800	800	925	
	33512 BYPASS CORONARY AUTOGRAFT 3 ARTERY	9	4251	6500	6000	6500	6500	6500	6500	6500	6500	6500	
	33513 BYPASS CORONARY AUTOGRAFT 4 ARTERY	9	4251	6500	6000	6500	6500	6500	6500	6500	6500	6500	
UN	33570 ANGIOPLASTY CORONARY W BYPASS	7	1537	2475*	495	495	500	1600	2475	2475	2725		
UN	34001 EMBOLECTOMY CAROTID ETC VIA NECK	8	1096	563	214	563	563	563	753	1072	2520	2520	
UN	34101 EMBOLECTOMY AXILLARY ETC VIA ARM	6	1176	NONE	141	563	668	1206	1500	2980			
	35001 REP ANEURYSM ABDOMINAL AORTA	30	2583	4340*	3200	3300	3440	3444	3444	4340	4340	4340	
	35141 REP ANEURYSM COMMON FEMORAL ARTERY	21	1890	3440*	1600	2268	2755	2813	3000	3420	3440	3440	
	35301 THROMBOENDARTERECT CAROTID ETC	46	2514	2583	2583	2644	2755	3076	3255	3255	3375	3375	
	35381 THROMBOENDARTERECT FEMORAL ETC	11	1576	2688*	1932	2015	2015	2688	2688	2688	2688	2700	
UN	36000 INTRO NEEDLE/CATH VEIN UNILAT	8	40	35	30	35	35	35	35	35	45	73	
	36010 INTRO CATH VENA CAVA/RT HEART	21	43	35	35	35	45	45	52	73	75	75	
UN	36140 INTRO NEEDLE/CATH EXTREMITY ARTERY	6	159	225	92	92	100	225	225	225			
	36200 INTRO CATHETER AORTA	23	305	350	315	350	350	350	350	350	350	375	
	36220 INTRO CATH CEREBRAL ART MULTIPLE	15	525	650*	575	575	620	650	650	650	650	750	
	36400 VENIPUNCTURE <3 YRS FEMORAL/JUGULAR	54	33	35	30	35	40	40	45	50	50	75	
	36405 VENIPUNCTURE <3 YRS SCALP	22	50	100*	30	48	50	80	100	100	100	100	
	36420 CUTDOWN VENIPUNCTURE AGE >1 YEAR	9	109	NONE	90	103	120	120	190	190	290	290	
	36425 CUTDOWN VENIPUNCTURE AGE <1 YEAR	12	78	40	66	75	75	75	100	100	100	250	
UN	36470 INJECT SCLEROSING AGENT 1 VEIN	6	38	44	15	25	44	44	45	55			

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HEALTH INSURANCE ASSOCIATION OF AMERICA  
Surgical Prevailing Healthcare Charges System

1987

**IMPORTANT:** Before completing this form, please read carefully the accompanying Rules and Requirements for Purchasing 1987 Outputs. Your signature on this Form A and your submittal of the PHCS Order Form indicate acceptance of the rules and requirements for purchasing 1987 outputs.

1. Type of Subscribing Organization (Check one)

- A. Commercial Insurance Company \_\_\_\_\_
- B. Blue Cross and/or Blue Shield Plan \_\_\_\_\_
- C. Third Party Administrator \_\_\_\_\_
- D. Self-administered employer/employee benefit plan \_\_\_\_\_
- E. HMO \_\_\_\_\_
- F. PPO \_\_\_\_\_
- G. Research Organization \_\_\_\_\_
- H. Consulting Organization \_\_\_\_\_
- I. Utilization Review Organization \_\_\_\_\_

2. Type of accompanying documentation (Check at least one)

- A. HIAA member who has already provided documentation to HIAA \_\_\_\_\_
- B. Annual Report \_\_\_\_\_
- C. Annual Statement \_\_\_\_\_
- D. Marketing Publication \_\_\_\_\_
- E. Research Proposal \_\_\_\_\_
- F. Other (please specify) \_\_\_\_\_

3. Participation Status for 1987 (Check one)

- A. Required Data Contributor \_\_\_\_\_
- B. Optional Data Contributor \_\_\_\_\_
- C. Non-Contributor \_\_\_\_\_

4. Our current size, i.e., the number of covered employees or enrollees, as defined in the footnote on p. 9 of the Rules and Requirements for Purchasing 1987 Outputs, is: \_\_\_\_\_

5. The Prevailing Healthcare Charges System is copyrighted and any reproduction and/or distribution of the data without the express written consent of HIAA is strictly prohibited.

6. All Prevailing Healthcare Charges System output, in any format, is to be used exclusively within the subscribing organization.

If the subscribing organization has a wholly owned subsidiary, then and only then may the data be provided to that wholly owned subsidiary. However, the number of covered employees or enrollees of the wholly owned subsidiary MUST be included in the count of the size of the subscribing organization.

In the event that the subscribing organization uses another organization to pay claims for the subscribing organization, the output is NOT to be made available to the other claims paying organization. However, the other claims paying organization may subscribe to the PHCS. The subscription may be made directly by the claims paying organization or on its behalf by the subscribing organization. The ONLY alternative to this independent purchase requirement is the following: the subscribing organization may develop its own guidelines from the PHCS for use by its independent claims paying organization, without providing the actual data.

7. The Prevailing Healthcare Charges System data provides a range of charges -- by procedure, by geographical area. This range of charges is expressed in terms of (i) mean charge, (ii) mode charge and (iii) charge at various percentiles.

The data are provided to subscribers for informational purposes only and the HIAA disclaims any endorsement, approval or recommendation of the data. There is neither a stated nor an implied "reasonable and customary" charge. Any interpretation and/or use of the data by the subscribing organization is solely and exclusively at the discretion of the subscribing organization. The subscribing organization MUST NOT represent the HIAA's PHCS data in any way other than as expressed in this paragraph #7.

8. Observance of these rules is mandatory. Non-compliance will be construed as a breach of the terms for purchasing outputs.

Having completed the above information and having understood the rules and requirements for purchasing outputs from the PHCS, the undersigned, and the subscribing organization, agree to comply with the rules and requirements and certify that the number of employees or enrollees reported in Item 4 above is correct.

Date: \_\_\_\_\_

Signature (Company Officer) \_\_\_\_\_

Name (Please Print or Type) \_\_\_\_\_

Company Name and Street \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Return to: Bruce L. Harris  
Associate Director - Statistics  
Health Insurance Association of America  
1025 Connecticut Avenue, N.W., Suite 1200  
Washington, D.C.

20036

# SURGICAL PHCS OUTPUT ORDER FORM FOR 1987

PLEASE READ CAREFULLY THE ACCOMPANYING RULES AND REQUIREMENTS FOR PURCHASING 1987 OUTPUTS AND THE TERMS AND CONDITIONS OF PURCHASE ON THE REVERSE SIDE OF THIS DOCUMENT. YOUR ORDER INDICATES ACCEPTANCE OF THE RULES AND REQUIREMENTS AND THE TERMS AND CONDITIONS.

No order will be accepted without an accompanying completed Form A and required documentation. Orders accepted for the Surgical Prevailing Healthcare Charges System are for an annual, calendar year period to include two cycles of output produced semi-annually with availability about mid-May and mid-November.

Please Allow Four (4) To Six (6) Weeks To Process Your Order

Basic Purchase Price (see attached Rules and Requirements, p.9) \$ \_\_\_\_\_

If tapes are being ordered, please specify BPI [ ] 6250 [ ] 1600.

	Price/Yr	Quantity	Total
Initial Output (ONE bound volume and/or CHOICE of ONE tape included at no additional cost)**			
Procedure Summary Report in Bound Volume	\$ 0	_____	\$ 0
Procedure Summary Report on Magnetic Tape	0	_____	0
Statistical Data File on Magnetic Tape	0	_____	0
 If 1600 BPI, add \$100.00			_____
Subtotal			_____

Additional Output			
Procedure Summary Report in Bound Volume	200	_____	_____
Procedure Summary Report on Magnetic Tape	100	_____	_____
Statistical Data File on Magnetic Tape	100	_____	_____
 If 1600 BPI: add \$100 if you are ordering only one type of tape; add \$200.00 if you are ordering BOTH types of tape.			_____
Subtotal			_____

Special Orders			
Sort Claims Tape [Available only in 6250 BPI]	750	_____	_____
Microfiche	200	_____	_____
CRVS-CPT Conversion Tape	175	_____	_____
 If 1600 BPI conversion tape, add \$100.00			_____
Subtotal			_____

Total Amount Enclosed \_\_\_\_\_

Output should be directed to

Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Address (DO NOT SHOW A P.O. BOX #) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Phone \_\_\_\_\_

Please make checks payable to HIAA-PHCS

Mail check, this output order form, Form A and accompanying documentation to:  
 Bruce L. Harris  
 Associate Director-Statistics  
 Health Insurance Association of America  
 1025 Connecticut Avenue, N.W.  
 Washington, DC 20036

\*\* The above Initial Output Order should indicate no more than one Bound Volume and no more than one tape.

## DESCRIPTION OF TERMS

SEE ACCOMPANYING RULES AND REQUIREMENTS FOR A MORE COMPLETE DESCRIPTION

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CHART VII

INCOME BENEFITS FOR SCHEDULED INJURIES

January 1, 1987

JURISDICTION	ARM AT SHOULDER	HAND	THUMB	FIRST FINGER	SECOND FINGER	THIRD FINGER	FOURTH FINGER	LEG AT HIP	FOOT	GREAT TOE	OTHER TOES	ONE EYE	HEARING ONE EAR	HEARING BOTH EARS
IN THIS GROUP OF STATES, COMPENSATION FOR TEMPORARY DISABILITY IS ALLOWED IN ADDITION TO ALLOWANCE FOR SCHEDULED INJURY														
ALABAMA*	\$48,840	\$37,400	\$13,640	\$ 9,460	\$ 8,820	\$ 4,840	\$ 3,520	\$44,000	\$30,580	\$ 7,040	\$ 2,420	\$27,280	\$11,660	\$35,800
ALASKA*	59,000	45,400	14,000	8,700	7,700	4,700	2,800	54,400	37,700	7,200	3,000	30,200	9,800	37,800
AMERICAN SAMOA PPD benefits paid at 68-2/3% of wages for specified number of weeks, no maximum*														
ARIZONA*	43,775	38,437	10,931	6,559	5,101	3,844	2,915	38,437	29,150	5,101	1,822	21,862	14,575	43,725
ARKANSAS*	32,300	24,332	9,702	5,898	4,928	3,234	2,464	28,336	20,174	4,928	1,694	18,170	6,468	24,332
CALIFORNIA*	58,975**	43,540	7,595	3,360	3,360	2,520	2,520	64,575**	33,740	4,235	840	21,105**	6,335	43,540
COLORADO*	17,472	8,736	4,200	2,184	1,512	924	1,092	17,472	8,736	2,184	924	11,878	2,940	11,878
CONNECTICUT*	127,298	102,813	38,780	22,032	17,932	12,648	10,608	97,104	76,704	17,136	5,304	95,880	21,216	63,648
DELAWARE*	61,055	53,728	18,317	12,211	9,769	7,327	4,884	61,055	39,075	9,769	3,683	48,844	18,317	42,739
DISTRICT OF COLUMBIA	141,829	110,761	34,046	20,781	13,618	11,349	6,809	130,735	93,058	13,618	7,263	72,630	23,605	90,788
FLORIDA No schedule. Benefits paid according to degree of impairment and loss of earnings.*														
GEORGIA	39,375	28,000	10,500	7,000	6,125	5,250	4,375	39,375	23,625	5,250	3,500	28,250	13,125	28,250
GUAM	39,200	29,680	7,140	3,920	2,520	2,380	980	34,720	24,220	3,640	1,120	19,600	7,280	28,000
HAWAII*	99,216	77,592	23,550	14,628	9,540	7,850	4,770	91,584	65,190	12,084	5,088	50,880	16,538	33,600
IDAHO*	50,985	45,887	18,695	11,897	9,347	4,249	2,549	33,980	23,793	7,138	1,100	29,741	—	29,741
ILLINOIS*	127,840	103,360	38,080	21,760	19,040	13,600	10,880	108,800	84,320	19,040	6,528	81,600	27,200	108,800
IOWA*	141,000	107,160	33,840	19,740	16,920	14,100	11,280	124,080	84,600	22,560	8,460	78,960	28,200	98,700
MAINE*	39,110	32,266	9,778	6,258	5,475	3,911	3,324	39,110	32,266	4,889	1,956	19,525	9,778	39,110
MARYLAND*	97,600	81,252	12,200	4,880	4,770	3,660	3,050	97,600	81,252	4,880	1,220	81,252	15,250	81,252
MASSACHUSETTS*	18,494	13,041	—	—	—	—	—	14,959	11,124	—	—	14,959	11,124	29,535
MICHIGAN*	105,179	84,065	25,415	14,858	12,903	8,602	6,256	84,065	63,342	12,903	4,301	63,342	(..)	(..)
MINNESOTA No schedule. Benefits paid according to degree of impairment and loss of earnings.*														
MISSISSIPPI	28,000	21,000	8,400	4,900	4,200	2,800	2,100	24,500	17,500	4,200	1,400	14,000	5,600	21,000
MISSOURI*	36,357	27,424	9,403	7,052	5,485	5,485	3,448	32,439	24,290	6,268	2,194	21,934	6,895**	28,327**
MONTANA*	41,860	29,900	11,213	5,980	5,532	3,738	2,243	44,850	28,910	5,532	2,392	24,658	5,980	29,900
NEBRASKA*	50,625	39,375	13,500	7,875	6,750	4,500	3,375	48,375	33,750	6,750	2,250	28,125	11,250	(..)
NEVADA No schedule. Degree of disability determined in relation to whole man.*														
NEW HAMPSHIRE	103,320	92,588	37,392	23,124	18,696	9,348	4,428	68,880	48,216	8,856	1,476	41,328	14,760	60,516
NEW JERSEY*	72,983	44,321	6,030	4,020	3,216	2,412	1,608	69,647	38,984	3,216	1,206	35,378	4,824	28,140
NEW MEXICO	59,726	37,329	16,425	8,362	6,570	5,077	4,181	59,728	34,342	10,452	4,181	38,822	11,845	44,795
NORTH CAROLINA	73,920	61,600	23,160	13,860	12,320	7,700	6,160	61,600	44,352	10,780	3,080	36,960	21,560	46,200
NORTH DAKOTA*	18,750	15,000	4,875	3,000	2,250	1,500	1,200	14,040	9,000	1,800	720	9,000	3,000	12,000
OHIO*	84,600	65,800	22,560	13,160	11,280	7,520	5,640	75,200	56,400	11,280	3,760	47,000	9,400	47,000
OREGON*	24,000	18,750	6,000	3,000	2,750	1,250	750	18,750	18,875	2,250	500	12,500	7,500	24,000
PUERTO RICO*	10,000	9,000	3,375	1,800	1,350	1,125	675	10,000	7,875	1,350	675	(..)	2,250	9,000
RHODE ISLAND*	28,080	21,960	6,750	4,140	2,700	2,250	1,800	28,080	18,450	3,420	900	14,400	5,400	18,000
SOUTH CAROLINA	67,813	57,024	20,036	12,230	10,788	7,708	6,185	60,107	43,154	10,788	3,082	33,906	24,659	50,860
SOUTH DAKOTA*	52,400	39,300	13,100	9,170	7,860	5,240	3,930	41,920	32,750	7,860	2,620	39,300	13,100	39,300
TENNESSEE	37,800	28,350	11,340	6,615	5,870	3,780	2,835	37,800	23,625	5,870	1,890	18,900	14,175	28,350
UTAH*	40,953	36,792	14,873	9,198	7,446	3,723	1,752	27,375	18,272	5,694	876	26,280	3,650**	21,900
VERMONT*	99,975	81,375	23,250	14,880	11,625	9,300	5,560	99,975	81,375	11,625	4,650	58,125	24,180**	99,975
VIRGINIA*	65,200	48,900	19,560	11,410	9,780	6,520	4,890	57,050	40,750	9,780	3,280	32,600	18,300	32,600
VIRGIN ISLANDS*	40,260	32,940	14,640	14,640	14,640	14,640	13,725	32,940	21,960	14,640	13,725**	35,685	21,960	32,940
WASHINGTON*	54,000	48,600	19,440	12,150	9,720	4,660	2,430	54,000	37,800	11,340	4,140	21,600	7,200	43,200
WEST VIRGINIA*	54,890	45,742	18,298	9,148	6,403	4,574	4,574	54,890	32,019	9,148	3,659	30,189	20,583	50,316
WISCONSIN*	58,500	46,800	18,720	7,020	5,265	4,12	3,276	58,500	29,250	9,750	2,925**	32,175	4,212	25,272**
WYOMING*	36,842	29,964	10,807	7,123	3,684	3,684	3,684	36,842	24,561	4,912	1,719	23,087	9,824	—
F.E.C.A.*	314,892	246,262	75,695	46,426	30,278	25,232	15,139	290,870	208,900	38,352	16,148	161,483	52,482	201,854
LONGSHORE ACT	188,860	147,698	45,399	27,845	18,160	15,133	9,080	174,332	124,091	160	9,685	96,851	31,477	121,064
IN THIS GROUP OF STATES, COMPENSATION FOR TEMPORARY DISABILITY IS ALLOWED IN ADDITION TO SCHEDULED INJURY WITH CERTAIN LIMITATIONS AS TO PERIOD														
INDIANA*	18,750	15,000	4,500	3,000	2,625	2,250	1,500	18,875	13,125	4,500	2,250**	13,125	5,625	15,000
KANSAS*	51,870	37,050	14,820	9,139	7,410	4,940	3,705	49,400	30,875	7,410	2,470	29,640	7,410	27,170
NEW YORK*	46,800	36,600	11,250	6,900	4,500	3,750	2,250	43,200	30,750	5,700	2,400	24,000	9,000	22,500
PENNSYLVANIA*	148,010	120,935	36,100	18,050	14,440	10,830	10,108	148,010	90,250	14,440	5,776	99,275	21,660	93,860
IN THIS GROUP OF STATES, COMPENSATION FOR TEMPORARY DISABILITY IS DEDUCTED FROM THE ALLOWANCE FOR SCHEDULED INJURY														
KENTUCKY No schedule. PP benefits paid at 66-2/3% of wages up to 425 weeks according to degree of disability.**														
LOUISIANA*	52,200	39,150	13,050	7,830	5,220	5,220	5,220	45,675	32,825	5,220	2,610	28,100	—	28,100**
OKLAHOMA*	40,750	32,600	9,780	5,705	4,890	3,260	2,445	40,750	32,600	4,890	1,630	32,600	16,300	48,900
TEXAS	44,800	33,600	13,440	10,080	6,720	4,704	3,360	44,800	28,000	6,720	2,240	22,400	—	33,600

NOTE—Amounts in chart reflect maximum potential entitlement. In Canada, permanent physical impairments generally are compensated by degree of disability using medical rating schedules as guidelines. Numbers in italics are computations for loss of major member, loss of leg precluding use of artificial limb, or loss of eye by enucleation.

# CHART VII □ INCOME BENEFITS FOR SCHEDULED INJURIES □ January 1, 1987 (continued)

Ala. \*Effective 2/1/85, maximum weekly PP benefit is lesser of \$220 or 100% SAWW.

Alaska \*Maximum dollar amount fixed by statute.

Ariz. \*Arm—312, hand—244, thumb—75, first finger—48, second finger—30, third finger—25, fourth finger—15, leg—288, foot—205, great toe—30, other toes—18, one eye—160, one ear—62, both ears—200.

Ariz. \*\*PP benefit is 55% of monthly compensation up to \$1,325 (= \$168.01 weekly).

Ariz. \*Maximum amount for PP is \$69,300.

Calif. \*Maximum PP benefit is \$140.00, effective 1/1/84. Duration varies according to percentage of permanent disability, adjusted for age and occupation. Chart reflects standard rating for individual age 39 and loss of major arm.

\*\*Chart reflects benefits for loss of eye if unable to wear artificial eye. Life pension up to \$64.21 weekly also payable for loss of arm or leg.

Calif. \*Maximum weekly benefit is \$84.

Conn. \*Commission may award additional benefits based on loss of earnings.

Fla. \*Permanent impairment caused by amputation, loss of 80% of vision in either eye after correction, or serious facial disfigurement—\$250 per 1% of disability up to 10%, and \$500 per 1% of disability over 10%. Wage-loss benefits also payable in all permanent impairment cases—95% of difference between 85% of pre-injury wages and earnings after maximum medical improvement, up to 100% of SAWW weekly. Social Security retirement benefits are deducted from wage loss benefits.

Hawaii \*In cases in which the disability is determined as a percentage of total loss or impairment of physical or mental function of the whole man, the maximum compensation is the corresponding percentage of 312 times SAWW (= \$99,216 effective 1/1/87).

Idaho \*Maximum weekly PP benefit is 55% of SAWW for year in which injury occurred (= \$169.95 for 1987).

Ill. \*Effective January 15, figures reflect benefits for amputation of member—maximum 133-1/3% of SAWW (= \$544.00 as of 1/15/87). For other PP benefits, wage replacement rate is 60% and maximum is \$293.61 from 7/1/84-6/30/87, and thereafter increased by percentage increase in SAWW.

Ind. \*Payable for 52 weeks; maximum weekly PP benefit is \$75.

\*\*Second toe—\$2,250, third toe—\$1,500, fourth toe—\$1,125, fifth toe—\$750.

Iowa \*Maximum weekly PP benefit is 184% of SAWW (= \$564.00).

Kan. \*Additional healing period up to 15 weeks may be allowed. Maximum weekly PP benefit is 75% of SAWW.

Ky. \*Maximum weekly PP benefit is 75% of SAWW (= \$247.00). Degree of disability is determined by American Medical Association Guide or decrease in earning capacity, whichever is greater.

\*\*Since 1980, an employee sustaining work-related hearing loss is entitled to either functional loss to the body as a whole or occupational disability, whichever is greater. Hearing loss claims receive same treatment as occupational diseases and injuries, with a final determination by the Board as to degree of disability.

La. \*Schedule applies to amputation or disability greater than 25%. Supplemental earnings benefits are 66-2/3% of the difference between 90% of pre-injury wages and post-injury earnings, maximum 520 weeks; cease 2 years after termination of temporary total disability (unless paid for 13 consecutive weeks during that time) or upon retirement or receipt of Social Security retirement benefits.

\*\*Permanent hearing loss due to single traumatic accident.

Md. \*Maximum weekly PP benefit is 33-1/3% of SAWW (= \$122.00); where benefits are payable for 250 weeks or more, the number of weeks are increased by 1/3, and maximum is 66-2/3% of SAWW (= \$244.00).

Mass. \*Maximum PP benefit is 100% of SAWW (= \$383.57). Proportional benefits for partial loss of limbs (fingers, toes).

Mich. \*Wage-loss benefits payable for life.

\*\*Hearing loss compensable based on lost earnings.

Minn. \*For permanent partial disability, impairment compensation (IC) is paid in lump sum if take job. If no job offer made, economic recovery compensation (ER) is paid weekly. IC equals scheduled dollar amount (\$75,000 to \$400,000) times percent whole body disability. ER equals percent disability times scheduled number of weeks (600 to 1200 weeks) times weekly IT rate. Concurrent payment of PPD and TPD benefits allowed if employee has returned to work for at least 6 months, and, if applicable, completed rehabilitation program.

Mo. \*Maximum weekly PP benefit is 45% of SAWW (\$156.71 effective 7/1/86); minimum is \$40. If amputation or 100% loss of use, additional 10% compensation.

\*\*Occupational hearing loss law provides benefits up to 40 weeks (1 ear) or 148 weeks (both ears).

Mont. \*Maximum weekly PP benefit is 50% of SAWW (= \$149.50, effective 7/1/86). Claimant may elect schedule or wage-loss indemnity.

Nebr. \*Terms run consecutively for loss of, or loss of use of, more than 1 member but less than total disability.

\*\*Permanent total loss of hearing is compensated as permanent total disability.

Nev. \*Each 1% of impairment is compensated by .6% of worker's monthly wage up to maximum, payable for 5 years or until age 66 (rising 1 year annually until age 70 begins); 7/1/86), whichever is later. Maximum monthly wages are \$2,200.45 as of 7/1/86.

N.J. \*Computations include allowance for amputation of member (30% additional compensation). Compensation is payable weekly at 70% of pre-injury weekly wages, up to a maximum of 55% of SAWW for arm or leg, 45% of SAWW for hand, 40% of SAWW for foot or one eye, 35% of SAWW for hearing—both ears, 20% of SAWW for other scheduled injuries in chart.

N.Y. \*Additional weeks for TT in excess of statutory healing period, maximum \$150 as of 7/1/85. Compensation for wage-loss in addition to schedule if impairment due to loss of 50% or more of member.

ND. \*PP benefit is \$60 weekly for scheduled number of weeks; amount includes 25% additional for master hand.

Ohio \*Maximum weekly PP benefit is 100% of SAWW (= \$378.00 for 1987). Compensation payable for 200 weeks if percentage of disability is 90% or greater.

Okl. \*Maximum PP benefit is 50% of SAWW (= \$163.00 effective 11/1/85).

Ore. \*Calculated at \$125 per degree for scheduled injury; \$100 per degree for unscheduled injury.

Pa. \*Healing period is 25 weeks for leg or foot; 20 weeks for an arm or hand; 12 weeks for great toe; 10 weeks for thumb, eye, or hearing; 6 weeks for finger or toe.

PR. \*Maximum PP benefit is \$45 weekly; increased to \$60 as of 7/1/77.

\*\*Permanent visual disability is compensated according to percentage of total disability; in addition, loss of eye by enucleation is compensated at 10% of permanent total disability.

RI. \*Maximum scheduled PP benefit is \$90.00 weekly. Maximum is 100% of SAWW for unscheduled injury.

Utah \*Maximum per week, including allowance for dependents, is 66-2/3% of SAWW (= \$219 effective 7/1/86).

\*\*Entry presumes total loss of hearing in one ear and no loss of hearing in the other (15-2/3 weeks). Benefits are based on the percentage of bilateral hearing loss, adjusted for claimant's age.

Vt. \*In addition to TT except for loss of hearing in 1 ear.

Va. \*Benefits for scheduled injuries are payable in addition to compensation for temporary disability. *County of Spotsylvania v. Hart*, 218 Va. 565, 238 S.E.2d 613 (1977). After expiration of scheduled award, claimant may file for further benefits within 1 year if still incapacitated.

Vt. \*PP benefit is 66-2/3% of SAWW weekly (= \$183.00 effective 1/1/85).

\*\*For loss of two or more digits or one or more phalanges of two or more digits on a hand or foot, benefits may be proportioned to the loss of use of the hand or foot.

Wash. \*Benefits fixed at amount reflected in chart.

W.Va. \*Maximum is 66-2/3% of SAWW (= \$228.71 effective 7/1/86).

Wis. \*Maximum weekly PP benefit is \$117 effective 1/1/86.

\*\*Second toe—\$2,925, other toes—\$2,340.

\*\*\*Under occupational hearing loss law, maximum is \$4,212/36 weeks for one ear and \$25,272/216 weeks for both ears, as of 1/1/87.

Wyo. \*PP benefit is 66-2/3% of SAWW. (= \$245.61 as of 1/1/87).

F.C.A. \*Includes allowance for dependents.

JURISDICTION	PERCENT OF WAGES	MAXIMUM WEEKLY PAYMENT		MINIMUM WEEKLY PAYMENT		TIME LIMIT	AMOUNT LIMIT <sup>2</sup>	AUTOMATIC COST OF LIVING INCREASE	OFFSETS <sup>3</sup>	NOTATIONS
		AMOUNT	RATE	AMOUNT	RATE					
ALABAMA	66-2/3	\$ 319.00	100% SAWW	\$88.00 <sup>1</sup>	27.5% SAWW <sup>1</sup>	Disability				Annual increase in maximum effective July 1 <sup>*</sup>
ALASKA	80% of spendable earnings	1,108.00	200% SAWW	110.00		Disability			Social Security, unemployment compensation	Annual increase in maximum effective January 1 <sup>*</sup>
AMERICAN SAMOA	66-2/3	205.00		40.00		Disability				Compensation increased 10% if installment without award unpaid after 14 days, 20% if installment following award unpaid after 10 days.
ARIZONA	66-2/3	205.59				TT—Disability PT—Life				Benefits payable monthly. Additional \$10 monthly if 1 or more total dependents, not subject to maximum.
ARKANSAS	66-2/3	175.00 <sup>1</sup>		20.00		TT—450 weeks PT—Disability	TT—78,750 <sup>**</sup>		Unemployment compensation, Social Security	25% penalty for employer's violation of safety laws <sup>***</sup>
CALIFORNIA	66-2/3	224.00		112.00		TT—Disability PT—Life		TT—after 2 years	Unemployment compensation, Social Security	50% increased compensation if injury due to employer's serious, willful misconduct.
COLORADO	66-2/3	351.68	80% SAWW			TT—Disability PT—Life			Social Security	Annual increase in maximum effective July 1. Compensation increased 50% if employer failed to comply with insurance provisions. Compensation decreased 50% if injury results from worker's failure to obey safety regulations or from intoxication.
CONNECTICUT	66-2/3	408.00 to 612.00	100% SAWW	81.60 <sup>*</sup>	20% SAWW	Disability		October 1		Annual increase in maximum effective October 1. Additional \$10 weekly per dependent child under 18, maximum 50% of basic benefit or 75% of wage (whichever is less). Compensation increased to 75% of wages if employer violated OSHA regulation. <sup>**</sup>
DELAWARE	66-2/3	244.22	66-2/3% SAWW	81.41 <sup>1</sup>	22-25% SAWW <sup>1</sup>	Disability				Annual increase in maximum effective June 15
DISTRICT OF COLUMBIA	66-2/3 up to 80% of spendable earnings <sup>1</sup>	453.94 <sup>*</sup>	100% SAWW <sup>*</sup>	113.48 <sup>*</sup>	25% SAWW <sup>*</sup>	Disability		PT—October 1, maximum 5% <sup>*</sup>	Social Security, employer-funded pension	Annual increase in maximum effective January 1 <sup>*</sup>
FLORIDA	66-2/3	230.00	100% SAWW	20.00		TT—350 weeks PT—Disability	TT—115,500		Unemployment compensation, Social Security	Annual increase in maximum effective January 1. Compensation increased 10% if installment unpaid after 14 days. <sup>*</sup>
GEORGIA	66-2/3	175.00		25.00 <sup>1</sup>		Disability				Board may assess \$500 penalty for refusal, unreasonable delay, or willful neglect to make payment. <sup>*</sup>
GUAM	66-2/3	140.00	66-2/3% SAWW	50.00 <sup>1</sup>		Disability	40,000			Compensation increased 10% for late payment without award, 20% if award.
HAWAII	66-2/3	318.00	100% SAWW	TT—79.50 <sup>1</sup> PT—79.50	TT—25% SAWW <sup>*</sup> PT—25% SAWW	Disability		PT—injuries prior to June 18, 1980		Annual increase in maximum effective January 1. Compensation may be increased 10% for failure to pay within 31 days after decision or award, or within 10 business days for uncontested temporary total disability case.
IDAHO	60	278.10 to 386.25	90% SAWW	139.05	45% SAWW	Disability		After 52 weeks		Annual increase in maximum effective January 1. For first 52 weeks benefit is 60% of worker's wages if there are no dependent children under 18, after 52 weeks benefit is 60% of SAWW. Benefit is increased 7% of SAWW per dependent child (up to 5), but may not exceed 90% of wages. 8% interest on late payments.
ILLINOIS	66-2/3	544.00	133-1/3% SAWW	TT—100.90 <sup>1</sup> PT—204.00	PT—50% SAWW	TT—Disability PT—Life		PT—July 15 of 2nd year		Semiannual increases in maximum effective January 15 and July 15 <sup>**</sup>
INDIANA	66-2/3	190.00 <sup>1</sup>		75.00 <sup>1</sup>		500 weeks	95,000			After 500 weeks, additional benefits are payable from second injury fund in 150-week increments <sup>**</sup>
IOWA	80% of spendable earnings	613.00	200% SAWW	107.00 <sup>*</sup>	35% SAWW <sup>*</sup>	Disability				Annual increase in maximum effective July 1. Benefits increased 50% if late or stopped without good cause.
KANSAS	66-2/3	247.00	75% SAWW	25.00		Disability	TT— 75,000 PT—100,000 (includes TT)			Annual increase in maximum effective July 1. Compensation may be increased up to \$100 per week past due (plus up to \$25 per week past due for failure to pay medical bill).
KENTUCKY	66-2/3 <sup>1</sup>	322.19	100% SAWW	64.44	20% SAWW	Disability				Annual increase in maximum effective January 1. Compensation increased or decreased 15% if injury caused by safety violation. 12% interest on late payments.

<sup>1</sup>Actual weekly wage if less.

<sup>2</sup>Amounts shown in italics have been calculated.

<sup>3</sup>Social Security offsets generally apply by formula up to 50% of basic benefit.

Ala. \*Compensation may be increased up to 10% for failure to pay within 30 days after award.

Alaska \*Spendable weekly earnings if less.

Ark. \*Increased to \$189 as of 7-1-87.

\*\*Increased to \$85,050 after 7-1-87.

\*\*\*18% penalty for failure to pay without an award, 20% penalty for failure to pay with an award.

Conn. \*80% of average weekly wages, if less.

\*\*12% interest benefits added if undue delay in payment, 6% interest added if undue delay in adjustment (4 weeks presumed undue delay).

D.C. \*Maximum is no less than \$453.94, minimum is 25% SAWW or 80% of actual earnings if less. Benefits for D.C. government employees are similar to F.E.C.A.

Fla. \*Compensation increased 20% if unpaid 30 days after award.

Ga. \*Income payable without award increased 15% if not paid within 14 days unless claim is controverted or Board excuses. Awarded benefits increased 20% if not paid within 20 days unless Board grants review.

Hawaii \*Actual wages if less, but no less than \$38.

Ill. \*Minimum TT benefit is \$100.90 if unmarried and ranges up to \$124.30 if 4 or more dependents. In all cases claimant receives actual weekly wage if less.

\*\*TT benefits may be increased \$10 per day, up to \$2,500, for unreasonable delay in payment; 14 days is presumed unreasonable. Compensation may be increased 50% for unreasonable or verabulous delay in payment. Compensation may be increased 25% for employer's willful violation of safety standard.

Ind. \*Effective 7-1-80.

\*\*Award is increased 5% if employer loses on court appeal; court may increase to 10%.

Iowa \*Employee's spendable earnings if less.

Ky. \*80% of AWW during rehabilitation.

**CHART VI □ INCOME BENEFITS FOR TOTAL DISABILITY □ January 1, 1987 (continued)**

JURISDICTION	PERCENT OF WAGES	MAXIMUM WEEKLY PAYMENT		MINIMUM WEEKLY PAYMENT		TIME LIMIT	AMOUNT LIMIT <sup>2</sup>	AUTOMATIC COST OF LIVING INCREASE	OFFSETS <sup>3</sup>	NOTATIONS
		AMOUNT	RATE	AMOUNT	RATE					
LOUISIANA	66-23	\$ 261.00	75% SAWW	69.60	20% SAWW <sup>1</sup>	Disability			Social Security, unemployment compensation, employer-funded disability, federal workers compensation	Annual increase in maximum effective September 1. 12% interest on late payments.
MAINE	66-23	447.92 <sup>*</sup>	( <sup>1</sup> )	\$25.00 <sup>**</sup>		Disability		Anniversary July 1 if maximum benefit or date of injury is prior to 7/1/83	Employer funded benefits, old age Social Security, unemployment benefits.	Annual increase in maximum effective July 1. Compensation may be increased 10% for failure to pay unconverted claim within 10 days. <sup>***</sup>
MARYLAND	66-23	365.00	100% SAWW	TT—50.00 <sup>1</sup>		Disability		(-)		Annual increase in maximum effective January 1. If permanent disability exceeds 50% of whole body, worker receives additional compensation from Subsequent Injury Fund after completion of payments by employer.
MASSACHUSETTS	66-23	383.57	100% SAWW	TT—20.00 <sup>*</sup> PT—76.71	PT—20% SAWW	Disability	TT—93,730 <sup>**</sup>		Unemployment compensation, pension, old age Social Security	Annual increase in maximum effective October 1. Additional \$6 weekly per dependent if total benefit does not exceed \$150 or 100% of wages. <sup>***</sup>
MICHIGAN	80% of spendable earnings	391.00	90% SAWW	PT—108.47	PT—25% SAWW	Disability		PT (injury prior to 1/1/82)	Disability, unemployment compensation, pension, old age Social Security retirement <sup>**</sup>	Annual increase in maximum effective January 1. Additional \$50 per day for award unpaid after 30 days, maximum \$1,500
MINNESOTA	66-23	360.00	100% SAWW	180.00	50% SAWW <sup>**</sup>	Disability		Anniversary of injury	Social Security after \$25,000 paid <sup>*</sup>	Annual increase in maximum effective October 1. Late payment may be increased 10% if inexcusably delayed, plus interest.
MISSISSIPPI	66-23	140.00 <sup>*</sup>		25.00		450 weeks	63,000 <sup>*</sup>			Additional rehabilitation allowance up to \$10 weekly for 52 weeks.
MISSOURI	66-23	261.19	75% SAWW	40.00		TT—400 weeks PT—Life	TT—104,476			Annual increase in maximum effective July 1. 8% interest for late payments. <sup>*</sup>
MONTANA	66-23	299.00	100% SAWW			Disability <sup>1</sup>			Social Security	Annual increase in maximum effective July 1. TT and PT benefits may be paid out in a lump sum, subject to a discount of 7%. Compensation may be increased 20% if payment unreasonably delayed or refused.
NEBRASKA	66-23	225.00		49.00 <sup>1</sup>		Disability				
NEVADA	66-23	341.95	100% SAWW			TT—Disability PT—Life			Social Security	TT benefits payable bi-weekly. PT benefits payable monthly. Annual increase in maximum effective July 1.
NEW HAMPSHIRE	66-23	492.00	150% SAWW	131.00 <sup>1</sup>	40% SAWW <sup>1</sup>	Disability		July 1—after 3 years		Annual increase in maximum effective July 1. Double compensation if employer violated prior recorded safety standard.
NEW JERSEY	70	302.00	75% SAWW	80.00	20% SAWW	TT—400 weeks PT—Life	TT—120,800		Social Security	Annual increase in maximum effective January 1. After 450 weeks at reduced rate if employed; at full rate if not able to be rehabilitated.
NEW MEXICO	66-23	298.63 <sup>*</sup>	100% SAWW	36.00 <sup>1</sup>		600 weeks	179,178			Annual increase in maximum effective January 1. 10% additional compensation payable by employer for failure to provide safety devices.
NEW YORK	66-23	300.00		TT—20.00 <sup>1</sup> PT—30.00 <sup>1</sup>		Disability			Social Security	Persons receiving PT benefits may collect full compensation and wages, but not in excess of pre-injury wage base. <sup>*</sup>
NORTH CAROLINA	66-23	308.00	100% SAWW	30.00		TT—Disability PT—Life			Unemployment benefits	Annual increase in maximum effective January 1.
NORTH DAKOTA	66-23	296.00 plus dependents	100% SAWW	178.00 <sup>1</sup>	60% SAWW <sup>1</sup>	Disability			Social Security	Annual increase in maximum effective July 1. Additional \$5 weekly per dependent child under 18, or to age 22 if child is attending a full-time educational institution, total benefits may not exceed claimant's net take-home pay.
OHIO	72—first 12 weeks 66-23—after 12 weeks	376.00 <sup>*</sup>	100% SAWW	TT—125.33 <sup>1</sup> PT—188.00 <sup>1</sup>	TT—33-13% SAWW <sup>1</sup> PT—50% SAWW <sup>1</sup>	TT—Disability <sup>**</sup> PT—Life			Employer funded benefits	Annual increase in maximum effective January 1. If PT benefit plus Social Security are less than \$161.92 weekly, Disabled Workers' Relief Fund pays the lesser of the difference between the DWRIF rate and PT or the DWRIF rate and social security; amount increased annually by increase in Consumer Price Index.
OKLAHOMA	66-23	217.00	66-23% SAWW	30.00 <sup>1</sup>		TT—150 weeks <sup>1</sup> PT—Disability	TT—32,550			Annual increase in maximum effective November 1. TT may be extended to 500 weeks.

La. <sup>1</sup>PT benefits reduced so that combined Social Security and PT benefits do not exceed 80% of pre-injury wages.  
 Maine <sup>\*</sup>Frozen at \$447.92 until 6/30/88.  
<sup>\*\*</sup>Minimum not applicable to handicapped persons employed by a sheltered workshop.  
<sup>\*\*\*</sup>Carer may be assessed up to \$25 per day for failure to pay award within 10 days. Added benefits during rehabilitation—\$35 weekly.  
 Md. <sup>\*</sup>Benefits increased October 1 for persons injured any time during July 1, 1965, through June 30, 1978, and receiving PT benefits in July, 1973.  
 Mass. <sup>\*</sup>Actual wages if less, but no less than \$20 if working at least 15 hours a week.  
<sup>\*\*</sup>260 times SAWW; includes permanent partial disability.  
<sup>\*\*\*</sup>Double compensation if injury due to employer's serious and willful misconduct. If no benefits are paid prior to final decision of claim, award is based on benefits in effect at time of decision instead of date of injury.  
 Mich. <sup>\*</sup>For supplementary benefits after 24 months, calculated on October 1, equal to base benefit times percent increase in SAWW over SAWW at time of injury.  
 Minn. <sup>\*</sup>Conclusive presumption of PT disability does not extend beyond 800 weeks from injury; thereafter determined in accordance with facts.  
<sup>\*\*</sup>Benefits reduced if claimant is eligible for Social Security and such benefits are not being coordinated.  
 Miss. <sup>\*</sup>Actual wages if less, but not less than 20% of SAWW; \$72.00 through 9/30/87. After 208 weeks total disability, supplementary benefits bring compensation to 65% of SAWW; \$234.00 through 9/30/87.  
<sup>\*\*</sup>Other government disability benefits from same injury also offset.

Mo. <sup>\*</sup>Effective 7/1/86.  
 Mo. <sup>\*</sup>Compensation increased 15% if injury caused by failure to comply with statute or order, decreased 15% if caused by worker's failure to use safety device.  
<sup>\*\*</sup>Compensation terminates upon receipt of Social Security retirement benefits.  
 N.M. <sup>\*</sup>SAWW frozen at 7/1/85 levels, Effective 7/1/86 to 7/1/87.  
 Nevada <sup>\*</sup>Maximum monthly wages on which benefits are computed are \$2,230.45, effective 7/1/86.  
 N.Y. <sup>\*</sup>Wage base at time of earning (150% of maximum payable).  
 Ohio <sup>\*</sup>Maximum PT rate is 66 2/3% SAWW unless claimant receives Social Security, which, combined with PT, brings maximum up to 100% SAWW.  
<sup>\*\*</sup>After 200 weeks claimant examined to determine if disability is permanent.  
 Oklahoma <sup>\*</sup>Court order may extend benefits for up to 300 weeks.

**CHART VI □ INCOME BENEFITS FOR TOTAL DISABILITY □ January 1, 1987 (continued)**

JURISDICTION	PERCENT OF WAGES	MAXIMUM WEEKLY PAYMENT		MINIMUM WEEKLY PAYMENT		TIME LIMIT	AMOUNT LIMIT <sup>2</sup>	AUTOMATIC COST OF LIVING INCREASE	OFFSETS <sup>3</sup>	NOTATIONS
		AMOUNT	RATE	AMOUNT	RATE					
GREGON	66-2/3	TT-344.77 PT-389.77	100% SAWW	50.00 <sup>1</sup>		Disability			PT—Social Security	Annual increase in maximum effective July 1. Additional \$5 weekly per dependent liv PT (up to 5).
PENNSYLVANIA	66-2/3	361.00	100% SAWW	180.50 <sup>1</sup>	50% SAWW <sup>1</sup>	Disability				Annual increase in maximum effective January 1.
PUERTO RICO	66-2/3	TT—65.00 PT—28.86		TT—20.00 PT—11.54		TT—312 weeks PT—Life	TT—20,280 PT—18,900 <sup>1</sup>			Compensation doubled if due to employer's violation of safety or health law or regulation.
RHODE ISLAND	66-2/3	320.00 plus 9.00 per dependent	100% SAWW			Disability				Annual increase in maximum effective September 1. Additional \$9 per dependent child under 18. Total benefit may not exceed 80% of pre-injury wages. <sup>1</sup>
SOUTH CAROLINA	66-2/3	308.24	100% SAWW	75.00 <sup>1</sup>		500 weeks <sup>1</sup>	154,120 <sup>1</sup>			Annual increase in maximum effective January 1.
SOUTH DAKOTA	66-2/3	262.00	100% SAWW	131.00 <sup>1</sup>	50% SAWW <sup>1</sup>	TT—Disability PT—Life				Annual increase in maximum effective July 1.
TENNESSEE	66-2/3	189.00 <sup>1</sup>		25.00		TT—Disability PT—550 weeks <sup>1</sup>	75,600			After 400 weeks PT benefit is reduced to \$15.
TEXAS	66-2/3	224.00	( <sup>1</sup> )	\$38.00	( <sup>1</sup> )	401 weeks <sup>1</sup>	89,824			Annual increase in maximum effective September 1. <sup>1</sup>
UTAH	66-2/3	TT—329.00 PT—280.00	TT—100% SAWW PT—85% SAWW	45.00 <sup>1</sup>		Disability <sup>1</sup>			Social Security	Annual increase in maximum effective July 1. Additional \$5 if spouse, plus \$5 per dependent child under 18 (up to 4); total benefit may not exceed maximum. <sup>1</sup>
VERMONT	66-2/3	465.00 plus dependents	150% SAWW	155.00 <sup>1</sup>	50% SAWW <sup>1</sup>	Disability <sup>1</sup>		July 1		Annual increase in maximum effective July 1. Additional \$10 per dependent child under 21; total benefits may not exceed pre-injury wages. <sup>1</sup>
VIRGIN ISLANDS	TT—66-2/3 <sup>1</sup> PT—75	183.00 <sup>1</sup>	66-2/3% SAWW <sup>1</sup>	60.00 <sup>1</sup>		Disability		After 2 years on January 1		Annual increase in maximum effective January 1. Total disability benefits begin after medical and vocational rehabilitation end. Compensation increased 15% for injury caused by employer's failure to obey safety order. <sup>1</sup>
VIRGINIA	66-2/3	326.00	100% SAWW	81.50 <sup>1</sup>	25% SAWW <sup>1</sup>	TT—500 weeks PT—Disability <sup>1</sup>	TT—163,000	October 1 <sup>1</sup>		Annual increase in maximum effective July 1. Compensation increased 20% for failure to pay within 2 weeks after due.
WASHINGTON	60 to 75, depending on conjugal status	271.78	75% SAWW	43.02 <sup>1</sup>		Disability		July 1	Social Security under age 65	Benefits payable monthly. Annual increase in maximum effective July 1. 60% of wage, additional 5% of wages for spouse, plus 2% of wages per dependent child (up to 5), up to maximum.
WEST VIRGINIA	70	343.06	100% SAWW	114.35	33-1/3% SAWW	TT—208 weeks PT—Life	TT—71,356			All but TT benefits payable monthly. Annual adjustment in maximum effective July 1.
WISCONSIN	66-2/3	338.00	100% SAWW	30.00		TT—Disability PT—Life			Social Security	Annual increase in maximum effective January 1. <sup>1</sup>
WYOMING	TT—66-2/3	TT—368.42 PT—245.61 plus dependents	TT—100% SAWW PT—66-2/3% SAWW	TT—184.21 PT—245.61	PT—66-2/3% SAWW	TT—Disability PT—Life	( <sup>1</sup> )			Benefits payable monthly. Quarterly increases in maximum effective January 1, April 1, July 1, and October 1. PT benefit fixed at 66-2/3% of SAWW plus \$100 per child monthly.
F.E.C.A.	66-2/3 or 75	1009.27	66-2/3% or 75% of highest rate for GS-15	156.00 <sup>1</sup>	66-2/3% or 75% of lowest rate for GS-2 <sup>1</sup>	TT—Disability PT—Life		October 1	( <sup>1</sup> )	Benefits payable monthly. Increase effective 1 <sup>1</sup> & 85. Higher percentage payable if 1 or more dependent.
LONGSHORE ACT	66-2/3	605.32 <sup>1</sup>	200% NAWW <sup>1</sup>	151.33 <sup>1</sup>	50% NAWW <sup>1</sup>	Disability		PT—October 1	Jones Act, other workers' compensation benefits	Annual increase in maximum effective October 1.

Or: 90% of actual wages, if less.

Pa: 90% of wages if less, but no less than 33-1/3% of SAWW (\$120.33, effective 1/1/87).

P.R.: May be paid in monthly installments of \$100 to \$125 for life.

RI: No compensation for PT disability if worker is earning pre-injury wages. Lump sum benefits available after benefits have been received for 6 months.

S.C.: Person who is para or quadriplegic or has suffered brain damage shall receive PT benefits for life. Compensation may not order lump sum payment in such cases.

Tenn.: From date injury is determined to be permanent.

Texas: For life in case of amputation or paralysis of two limbs, loss of vision in both eyes, or permanent insanity.

<sup>1</sup>Maximum increased \$7 and minimum increased \$1 per \$10 increase in SAWW.

Utah: Disability beyond 312 weeks is payable from Second Injury Fund, minimum \$120 weekly.

Vt: PT benefits payable at least 330 weeks, after temporary disability benefits cease. After 330 weeks, PT benefits continue while there is lost earning capacity.

<sup>1</sup>Benefits may be disallowed if injury results from worker's failure to use safety device.

VI: During vocational rehabilitation, income benefits are 75% of AWW, maximum SAWW, minimum \$75 or actual wages if less.

Va: 500 week limit for certain PT cases.

<sup>1</sup>Recipient of Social Security ineligible for cost of living increases.

Wash: Plus \$8.53 for first child, \$7.15 for second child, \$5.30 each for third through fifth children, and \$6.92 for spouse.

Wisc: Compensation may be adjusted up or down by 15% (up to \$15,000) for failure to use safety device or obey code of order. 10% interest payable on late payments. Employer, insurer, or both may be assessed penalty up to double the amount of compensation (not to exceed \$15,000) for bad faith failure to make payments.

Wyo: Court must approve PT payments after \$63,122.00 (257 times 66-2/3% SAWW).

F.E.C.A.: Civil Service Retirement and Disability Fund (CSRA) overpayments.

Longshore: Effective 9/29/84, Nonappropriated Fund Instrumentalities Act employees subject to same maximum minimum weekly rates as employees covered under Longshore Act.

**CHART VI □ INCOME BENEFITS FOR TOTAL DISABILITY □ January 1, 1987 (continued)**

JURISDICTION	PERCENT OF WAGES	MAXIMUM WEEKLY PAYMENT		MINIMUM WEEKLY PAYMENT		TIME LIMIT	AMOUNT LIMIT <sup>2</sup>	AUTOMATIC COST OF LIVING INCREASE	OFFSETS <sup>3</sup>	NOTATIONS
		AMOUNT	RATE	AMOUNT	RATE					
ALBERTA	90% of weighted net income	509.73		160.00 <sup>1</sup>		TT—Disability PT—Life				PT payable monthly. Maximum annual earnings is \$40,000.
BRITISH COLUMBIA	75	591.17		205.86 <sup>1</sup>		TT—Disability PT—Life		January 1 and July 1		PT payable monthly. Maximum annual earnings \$41,100. Annual increase in maximum effective January 1.
MANITOBA	75	461.54	(*)	TT—159.94 <sup>1</sup> PT—159.94		TT—Disability PT—Life				PT payable monthly. Maximum annual earnings \$32,000. Annual increase in maximum effective January 1.
NEW BRUNSWICK	90% of weighted net income	392.63 to 424.75*	110% of provincial average wage			TT—Disability** PT—Life			Can Pension Disability Benefits	PT payable monthly. Maximum annual earnings is \$31,900. Annual increase in maximum effective January 1.
NEWFOUNDLAND	90% of weighted net income	587.82		200.00*		to age 65			Canadian Pension Disability Benefits	PT payable monthly. Maximum annual earnings \$45,500, effective 1/1/83. Board may raise compensation as it deems equitable.
NORTHWEST TERRITORIES	90% of net income	438.46		192.92 <sup>1</sup>		TT—Disability PT—Life				Benefits payable monthly. Maximum annual earnings \$36,800.
NOVA SCOTIA	75	403.85 plus dependents		120.00*		TT—Disability PT—Life		January 1		PT payable monthly. Maximum annual earnings \$28,000, effective 1/1/83. Additional \$33.00 weekly per child; total benefit may exceed maximum.
ONTARIO	90% of net average earnings*	404.28 to 429.66		215.62 <sup>1</sup>		TT—Disability PT—Life		In accordance with increases in the C.P.I.		PT payable monthly. Maximum annual earnings \$32,100.
PRINCE EDWARD ISLAND	75	288.47		60.00*		TT—Disability PT—Life				PT payable monthly. Maximum annual earnings \$20,000, effective January 1, 1987.
QUEBEC	90% of weighted net income	400.70 to 443.78	150% of provincial average wages	Minimum salary		TT—Disability PT—Lump Sum			TT—Anniversary of accident PT—January 1	PT lump sum. Maximum annual earnings \$35,500.
SASKATCHEWAN	90% of net income	558.38 to 593.21*	(**)	203.54***		TT—Disability PT—Life		Payments indexed by CPI on anniversary of earnings loss.	Canada Pension after 1 year	PT payable monthly. Maximum annual earnings \$48,000, effective 9/1/85. For assessment purposes, maximum is equal to \$34,000 per annum. After 2 years' disability, an amount equal to 10% of compensation is set aside to purchase annuity for benefits after age 65.**
YUKON TERRITORY	75	474.67	(*)	137.00 <sup>1,2</sup>		TT—Disability PT—Life		January 1		Maximum annual earnings \$33,000.
CANADIAN MERCHANT SEAMEN'S ACT	75	443.01		127.00		TT—Disability PT—Life				Benefits payable monthly. Maximum annual earnings \$30,800. Gov.-in-Council may raise benefits to level paid in maritime provinces.

Man: <sup>1</sup>Maximum earning ceiling increased by \$1,000 if 10% of workers injured in preceding year earn in excess of maximum.

N.B.: <sup>2</sup>Annual review of maximum. Lower figure for single, higher figure for married claimant with 2 children.

<sup>3</sup>If 63 or older at time of loss, maximum is 2 years.

Nfld: <sup>1</sup>100% of weighted net earnings if less.

N.S.: <sup>1</sup>Minimum for temporary total disability is 75% of minimum wage.

Ont.: <sup>1</sup>For accidents on or after April 1, 1985. Net average earnings are gross wages, minus probable income taxes, Canadian pension plan premiums and Unemployment Insurance. Lower figure for single, higher figure for married claimant with one child.

P.E.I.: <sup>1</sup>Actual wages if less, but Board may set minimum at \$15.

Sask.: <sup>1</sup>Lower figure for single; higher figure for married claimant with 2 children under 16 years old.

<sup>2</sup>Maximum earning ceiling increased by \$1,000 if 10% of workers injured in preceding year earn in excess of maximum.

<sup>3</sup>Actual wages if less for first 2 years' disability.

Yukon: <sup>1</sup>Benefits increased annually based on Consumer Price Index.

# State Workers' Compensation Laws

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U.S. Department of Labor  
Employment Standards Administration  
Office of State Liaison and Legislative Analysis  
Division of State Workers' Compensation Programs

January 1988

TABLE 18. ATTORNEY FEES IN WORKERS' COMPENSATION<sup>1/</sup>

State	Attorney fees established by statute, rule, operating policy, or on individual case basis	Determined by:	Statutory provision whereby attorney fees are added to award in certain cases	Statutory provision making unlawful acceptance of unapproved fees	Laypersons permitted to represent claimants	Attorney fees, upon approval, become liens against awards
Alaska	25% minimum on first \$1,000; 10% on balance, statute	Agency	Yes	Yes	Yes	No
Alabama	15%, statute	Court	None	None	No	No
Arizona	25%, statute	Agency	None	None	No	No
Arkansas	30% first \$1,000; 20% next \$2,000; 10% on balance, statute	Agency	Yes	None	Yes	No
California	Individual case basis	Agency	Yes	None	Yes	Yes
Colorado	Individual case basis	Agency	None	None	No	Yes
Connecticut	Individual case basis	Agency	Yes	None	Yes	No
Delaware	30% or \$2,250, whichever is smaller, statute	Agency	Yes	None	No	No
District of Columbia	Individual case basis	Agency	Yes	Yes	Yes	Yes
Florida	25% first \$5,000; 20% second \$5,000; 15% on balance, statute	Agency	Yes	Yes	No	Yes
Georgia	25% to 33 1/3%, rule	Agency	Yes	Yes	No	No
Hawaii	Individual case basis	Agency	Yes	Yes	Yes	Yes
Idaho	Individual case basis	Agency	Yes	None	Yes	No
Illinois	20%, statute	Agency	Yes	None	No	No
Indiana	20% first \$5,000; 15% next \$5,000; 10% on balance, rule	Agency	Yes	None	No	No
Iowa	Individual case basis	Agency	None	None	No	Yes

TABLE 18. ATTORNEY FEES IN WORKERS' COMPENSATION (cont.)

State	Attorney fees established by statute, rule, operating policy, or on individual case basis	Determined by:	Statutory provision whereby attorney fees are added to award in certain cases	Statutory provision making unlawful acceptance of unapproved fees	Laypersons permitted to represent claimants	Attorney fees, upon approval, become liens against awards
Kansas	25%, statute	Agency	None	None	No	Yes
Kentucky	20% first \$25,000; 15% next \$10,000; 5% balance, \$6,500 maximum, statute	Agency	Yes	No	No	No
Louisiana	20% first \$10,000; 10% on balance, statute	Court	Yes	Yes	No	Yes
Maine	Individual case basis	Agency	Yes	Yes	No	No
Maryland	20% first \$7,000; 15% next \$18,000; 10% balance, policy	Agency	Yes	None	No	Yes
Massachusetts	20% on lump sum settlement, individual case basis, statute	Agency	Yes	None	No	Yes
Michigan	30%, rule; up to time of trial; 15% first \$25,000; 10% balance on redemption settlements	Agency	None	None	No	No
Minnesota	25% first \$4,000; 20% next \$27,500, statute	Agency	Yes	Yes	No	Yes
Mississippi	25% before Commission; 33 1/3% in Court, statute	Agency	None	Yes	No	Yes
Missouri	25%, policy	Agency	None	None	No	Yes
Montana	25% - 40%, policy	Agency	Yes	None	Yes	Yes
Nebraska	20% - 25%, policy	Court	Yes	None	No	Yes
Nevada	No provision		Yes		Yes	
New Hampshire	20% - 25%, policy	Agency	Yes	None	No	No
New Jersey	20%, statute	Agency	Yes	Yes	No	Yes
New Mexico	Maximum of \$12,500, statute	Agency	Yes	Yes	No	No
New York	Individual case basis	Agency	None	Yes	Yes	Yes
North Carolina	Individual case basis	Agency	Yes	Yes	No	No
North Dakota	\$50 per hour, maximum, rule	Agency	Yes	None	No	No

# **CORRECTION**

**THIS DOCUMENT  
HAS BEEN REPHOTOGRAPHED  
TO ASSURE LEGIBILITY**

TABLE 18. ATTORNEY FEES IN WORKERS' COMPENSATION<sup>1/</sup>

State	Attorney fees established by statute, rule, operating policy, or on individual case basis	Determined by:	Statutory provision whereby attorney fees are added to award in certain cases	Statutory provision making unlawful acceptance of unapproved fees	Laypersons permitted to represent claimants	Attorney fees, upon approval, become liens against awards
Alaska	25% minimum on first \$1,000; 10% on balance, statute	Agency	Yes	Yes	Yes	No
Alabama	15%, statute	Court	None	None	No	No
Arizona	25%, statute	Agency	None	None	No	No
Arkansas	30% first \$1,000; 20% next \$2,000; 10% on balance, statute	Agency	Yes	None	Yes	No
California	Individual case basis	Agency	Yes	None	Yes	Yes
Colorado	Individual case basis	Agency	None	None	No	Yes
Connecticut	Individual case basis	Agency	Yes	None	Yes	No
Delaware	30% or \$2,250, whichever is smaller, statute	Agency	Yes	None	No	No
District of Columbia	Individual case basis	Agency	Yes	Yes	Yes	Yes
Florida	25% first \$5,000; 20% second \$5,000; 15% on balance, statute	Agency	Yes	Yes	No	Yes
Georgia	25% to 33 1/3%, rule	Agency	Yes	Yes	No	No
Hawaii	Individual case basis	Agency	Yes	Yes	Yes	Yes
Idaho	Individual case basis	Agency	Yes	None	Yes	No
Illinois	20%, statute	Agency	Yes	None	No	No
Indiana	20% first \$5,000; 15% next \$5,000; 10% on balance, rule	Agency	Yes	None	No	No
Iowa	Individual case basis	Agency	None	None	No	Yes

TABLE 18. ATTORNEY FEES IN WORKERS' COMPENSATION (cont.)

State	Attorney fees established by statute, rule, operating policy, or on individual case basis	Determined by:	Statutory provision whereby attorney fees are added to award in certain cases	Statutory provision making unlawful acceptance of unapproved fees	Laypersons permitted to represent claimants	Attorney fees, upon approval, become liens against awards
Kansas	25%, statute	Agency	None	None	No	Yes
Kentucky	20% first \$25,000; 15% next \$10,000; 5% balance, \$6,500 maximum; statute	Agency	Yes	No	No	No
Louisiana	20% first \$10,000; 10% on balance, statute	Court	Yes	Yes	No	Yes
Maine	Individual case basis	Agency	Yes	Yes	No	No
Maryland	20% first \$7,000; 15% next \$18,000; 10% balance, policy	Agency	Yes	None	No	Yes
Massachusetts	20% on lump sum settlement, individual case basis, statute	Agency	Yes	None	No	Yes
Michigan	30%, rule; up to time of trial; 15% first \$25,000; 10% balance on redemption settlements	Agency	None	None	No	No
Minnesota	25% first \$4,000; 20% next \$27,500, statute	Agency	Yes	Yes	No	Yes
Mississippi	25% before Commission; 33 1/3% in Court, statute	Agency	None	Yes	No	Yes
Missouri	25%, policy	Agency	None	None	No	Yes
Montana	25% - 40%, policy	Agency	Yes	None	Yes	Yes
Nebraska	20% - 25%, policy	Court	Yes	None	No	Yes
Nevada	No provision		Yes		Yes	
New Hampshire	20% - 25%, policy	Agency	Yes	None	No	No
New Jersey	20%, statute	Agency	Yes	Yes	No	Yes
New Mexico	Maximum of \$12,500, statute	Agency	Yes	Yes	No	No
New York	Individual case basis	Agency	None	Yes	Yes	Yes
North Carolina	Individual case basis	Agency	Yes	Yes	No	No
North Dakota	\$50 per hour, maximum, rule	Agency	Yes	None	No	No

TABLE 18. ATTORNEY FEES IN WORKERS' COMPENSATION (cont.)

State	Attorney fees established by statute, rule, operating policy, or on individual case basis	Determined by:	Statutory provision whereby attorney fees are added to award in certain cases	Statutory provision making unlawful acceptance of unapproved fees	Laypersons permitted to represent claimants	Attorney fees, upon approval, become liens against awards
Ohio	Individual case basis	Agency	None	None	No	No
Oklahoma	10% TTD; 20% other types, statute	Court	None	None	No	Yes
Oregon	25% not to exceed \$3,000, rule	Agency	Yes	None	Yes	Yes
Pennsylvania	20%, statute	Agency	Yes	None	No	Yes
Puerto Rico	Individual case basis	Agency	Yes	None	No	No
Rhode Island	Individual case basis	Agency	Yes	None	No	No
South Carolina	Individual case basis	Agency	Yes	Yes	No	No
South Dakota	Individual case basis	Agency	Yes	None	Yes	No
Tennessee	20%, statute	Court	None	Yes	No	Yes
Texas	25%, statute	Agency	Yes	None	Yes	Yes
Utah	20% first \$15,000; 15% next \$15,000; 10% balance, maximum \$9,051, rule	Agency	None	None	Yes	No
Vermont	20% maximum \$3,000, policy	Agency	Yes	None	No	Yes
Virginia	Individual case basis	Agency	Yes	None	No	No
Washington	30%, statute	Agency	Yes	Yes	Yes	No
West Virginia	20%, 208 week limit, statute	Agency	None	Yes	No	No
Wisconsin	20% in disputed cases, statute	Agency	None	Yes	Yes	No
Wyoming	Individual case basis	Court	Yes	Yes	Yes	No

1/ This table refers only to attorney fees for claimants. Attorney fees for employers and insurance carriers are not regulated by State statutes or regulations.

Guides to the

Evaluation

of

Permanent  
Impairment

2nd Edition



11-11

**TABLE 19**  
**IMPAIRMENT DUE TO AMPUTATION, ABNORMAL MOTION AND ANKYLOSIS OF THE SHOULDER JOINT—ROTATION**

Impairment of Upper Extremity		Impairment of Upper Extremity	
Amputation—At Joint			
		100%	
<b>Abnormal Motion</b>			
Average range of ROTATION is 130 degrees			
Value to total joint motion is 33%			
Internal rotation from neutral position (0°) to:	Degrees of Joint Motion		Impairment of Upper Extremity
	LOST	RETAINED	
0°	40	0	6%
10°	30	10	5
20°	20	20	3
30°	10	30	2
40°	0	40	0
<b>External rotation from neutral position (0°) to:</b>			
0°	90	0	14%
10°	80	10	12
20°	70	20	11
30°	60	30	9
40°	50	40	8
50°	40	50	6
60°	30	60	5
70°	20	70	3
80°	10	80	2
90°	0	90	0
<b>Ankylosis</b>			
Joint ankylosed at:			
0° (neutral position)			60%
10°			70
20°			80
30°			90
40° (full int. rotation)			100
Joint ankylosed at:			
0° (neutral position)			60%
10°			50
20°			40
30°			49
40°			57
50°			66
60°			74
70°			83
80°			91
90° (full ext. rotation)			100

\*position of function

**TABLE 20**  
**RELATIONSHIP OF IMPAIRMENT OF THE UPPER EXTREMITY TO IMPAIRMENT OF THE WHOLE PERSON**

% Impairment of Upper Extremity	% Impairment of Whole Person	% Impairment of Upper Extremity	% Impairment of Whole Person	% Impairment of Upper Extremity	% Impairment of Whole Person
0 = 0		35 = 21		70 = 42	
1 = 1		36 = 22		71 = 43	
2 = 1		37 = 22		72 = 43	
3 = 2		38 = 23		73 = 44	
4 = 2		39 = 23		74 = 44	
5 = 3		40 = 24		75 = 45	
6 = 4		41 = 25		76 = 46	
7 = 4		42 = 25		77 = 46	
8 = 5		43 = 26		78 = 47	
9 = 5		44 = 26		79 = 47	
10 = 6		45 = 27		80 = 48	
11 = 7		46 = 28		81 = 49	
12 = 7		47 = 28		82 = 49	
13 = 8		48 = 29		83 = 50	
14 = 8		49 = 29		84 = 50	
15 = 9		50 = 30		85 = 51	
16 = 10		51 = 31		86 = 52	
17 = 10		52 = 31		87 = 52	
18 = 11		53 = 32		88 = 53	
19 = 11		54 = 32		89 = 53	
20 = 12		55 = 33		90 = 54	
21 = 13		56 = 34		91 = 55	
22 = 13		57 = 34		92 = 55	
23 = 14		58 = 35		93 = 56	
24 = 14		59 = 35		94 = 56	
25 = 15		60 = 36		95 = 57	
26 = 16		61 = 37		96 = 58	
27 = 16		62 = 37		97 = 58	
28 = 17		63 = 38		98 = 59	
29 = 17		64 = 38		99 = 59	
30 = 18		65 = 39		100 = 60	
31 = 19		66 = 40			
32 = 19		67 = 40			
33 = 20		68 = 41			
34 = 20		69 = 41			

NOTE: Impairment of the whole person contributed by the upper extremity may be rounded to the nearest 5 percent only when it is the sole impairment involved.

TABLE 9  
RELATIONSHIP OF IMPAIRMENT OF THE HAND TO  
IMPAIRMENT OF THE UPPER EXTREMITY

% Impairment of Upper Hand Extremity		% Impairment of Upper Hand Extremity		% Impairment of Upper Hand Extremity		% Impairment of Upper Hand Extremity		% Impairment of Upper Hand Extremity		% Impairment of Upper Hand Extremity	
0 = 0	0	18 = 16	10	35 = 32	19	53 = 48	29	70 = 63	32	88 = 79	47
1 = 1	1	19 = 17	10	36 = 32	19	54 = 49	29	71 = 64	35	89 = 80	48
2 = 2	2	20 = 18	11	37 = 33	20	55 = 50	30	72 = 65	39	90 = 81	49
3 = 3	3	21 = 19	11	38 = 34	20	56 = 50	30	73 = 66	40	91 = 82	49
4 = 4	4	22 = 20	12	39 = 35	21	57 = 51	31	74 = 67	40	92 = 83	50
5 = 5	5	23 = 21	13	40 = 36	22	58 = 52	31	75 = 68	41	93 = 84	50
6 = 5	5	24 = 22	13	41 = 37	22	59 = 53	32	76 = 68	41	94 = 85	51
7 = 6	4			42 = 38	23			77 = 69	41		
8 = 7	4	25 = 23	14	43 = 39	23	60 = 54	32	78 = 70	42	95 = 86	52
9 = 8	5	26 = 23	14	44 = 40	24	61 = 55	33	79 = 71	43	96 = 86	52
10 = 9	5	27 = 24	14	45 = 41	25	62 = 56	34	80 = 72	43	97 = 87	52
11 = 10	6	28 = 25	15	46 = 41	25	63 = 57	34	81 = 73	44	98 = 88	53
12 = 11	7	29 = 26	16	47 = 42	25	64 = 58	35	82 = 74	44	99 = 89	53
13 = 12	7			48 = 43	26			83 = 75	45		
14 = 13	8	30 = 27	16	49 = 44	26	65 = 59	35	84 = 76	46	100 = 90	54
		31 = 28	17			66 = 59	35				
15 = 14	8	32 = 29	17	50 = 45	27	67 = 60	36	85 = 77	46		
16 = 14	8	33 = 30	16	51 = 46	26	68 = 61	37	86 = 77	46		
17 = 15	7	34 = 31	19	52 = 47	26	69 = 62	37	87 = 78	47		

NOTE: Impairment of the upper extremity contributed by the hand may be rounded to the nearest 5 percent only when it is the sole impairment involved. Consult Table 19 for converting upper extremity impairment to whole person impairment.

TABLE 10  
IMPAIRMENT OF THE HAND DUE TO AMPUTATION OR ANKYLOSIS OF DIGIT(S) IN THREE POSITIONS

Digit(s) Involved	% Impairment of Hand				Digit(s) Involved	% Impairment of Hand			
	Digit Ankylosed in					Digit Ankylosed in			
	Digit Amputated	Full Extension	Position of Function	Full Flexion		Digit Amputated	Full Extension	Position of Function	Full Flexion
Thumb	40	30	25	38	Index	25	23	20	25
Thumb, Index	65	53	45	63	Index, Middle	45	41	36	45
Thumb, Index, Middle	85	71	61	83	Index, Middle, Ring	55	50	44	55
Thumb, Index, Ring	75	62	53	73	Index, Middle, Little	50	46	40	50
Thumb, Index, Little	70	58	49	68	Index, Middle, Ring, Little	60	55	48	60
Thumb, Index, Middle, Ring	95	80	69	93	Index, Ring	35	32	28	35
Thumb, Index, Middle, Little	90	76	65	88	Index, Ring, Little	40	37	32	40
Thumb, Index, Ring, Little	80	67	57	78	Index, Little	30	28	24	30
Thumb, Index, Middle, Ring, Little	100	35	73	98	Middle	20	18	16	20
Thumb, Middle	60	48	41	58	Middle, Ring	30	27	24	30
Thumb, Middle, Ring	70	57	49	68	Middle, Ring, Little	35	32	28	35
Thumb, Middle, Little	65	53	45	63	Middle, Little	25	23	20	25
Thumb, Middle, Ring, Little	75	62	53	73	Ring	10	9	8	10
Thumb, Ring	50	39	33	48	Ring, Little	15	14	12	15
Thumb, Ring, Little	55	44	37	53	Little	5	5	4	5
Thumb, Little	45	35	29	43					

LEG

TABLE 44  
RELATIONSHIP OF IMPAIRMENT OF THE LOWER EXTREMITY TO IMPAIRMENT OF THE WHOLE PERSON

% Impairment of Lower Extremity	% Impairment of Whole Person	% Impairment of Lower Extremity	% Impairment of Whole Person	% Impairment of Lower Extremity	% Impairment of Whole Person	% Impairment of Lower Extremity	% Impairment of Whole Person
0 = 0	25 = 10	50 = 20	75 = 30	85 = 34	95 = 38		
1 = 0	26 = 10	51 = 20	76 = 30	86 = 34	96 = 38		
2 = 1	27 = 11	52 = 21	77 = 31	87 = 35	97 = 39		
3 = 1	28 = 11	53 = 21	78 = 31	88 = 35	98 = 39		
4 = 2	29 = 12	54 = 22	79 = 32	89 = 36	99 = 40		
5 = 2	30 = 12	55 = 22	80 = 32	90 = 36	100 = 40		
6 = 2	31 = 12	56 = 22	81 = 32	91 = 36			
7 = 3	32 = 13	57 = 23	82 = 33	92 = 37			
8 = 3	33 = 13	58 = 23	83 = 33	93 = 37			
9 = 4	34 = 14	59 = 24	84 = 34	94 = 38			
10 = 4	35 = 14	60 = 24					
11 = 4	36 = 14	61 = 24					
12 = 5	37 = 15	62 = 25					
13 = 5	38 = 15	63 = 25					
14 = 6	39 = 16	64 = 26					
15 = 6	40 = 16	65 = 26					
16 = 6	41 = 16	66 = 26					
17 = 7	42 = 17	67 = 27					
18 = 7	43 = 17	68 = 27					
19 = 8	44 = 18	69 = 28					
20 = 8	45 = 18	70 = 28					
21 = 8	46 = 18	71 = 28					
22 = 9	47 = 19	72 = 29					
23 = 9	48 = 19	73 = 29					
24 = 10	49 = 20	74 = 30					

NOTE: In case of shortening due to overriding or malalignment or fracture deformities, but not to include flexion or extension deformities, combine the following values with other functional sequelae, using the Combined Values Chart.

0 - 1/2 inch = 5% of lower extremity

1/2 - 1 inch = 10% of lower extremity

1 - 1 1/2 inch = 15% of lower extremity

1 1/2 - 2 inch = 20% of lower extremity

NOTE: Impairment of whole person contributed by lower extremity may be rounded to the nearest 5 percent only when it is the sole impairment involved.

TABLE 45  
IMPAIRMENT OF THE DIGITS, FOOT, LOWER EXTREMITY AND WHOLE PERSON  
DUE TO AMPUTATIONS

	% Impairment of		
	Digit	Foot	Lower Extremity Whole Person
Hemipelvectomy			50
Disarticulation at hip joint			100 40
Amputation above knee joint with short thigh stump (3" or less below tuberosity of ischium)			100 40
Amputation above knee joint with functional stump			90 36
Disarticulation at knee joint			90 36
Gritti-Stokes amputation			90 36
Amputation below knee joint with short stump (3" or less below intercondylar notch)			90 36
Amputation below knee joint with functional stump			70 28
Amputation at ankle (Syme)		100	70 28
Partial amputation of foot (Chopart's)		75	53 21
Mid-metatarsal amputation		50	35 14
Amputation of all toes at metatarsophalangeal joints		30	21 8
Amputation of Great Toe			
With resection of metatarsal bone		30	21 8
At metatarsophalangeal joint	100	18	13 5
At interphalangeal joint	75	14	10 4
Amputation of Lesser Toe (2nd-5th)			
With resection of metatarsal bone		5	4 2
At metatarsophalangeal joint	100	3	2 1
At proximal interphalangeal joint	80	2	1 0
At distal interphalangeal joint	45	1	1 0

Figure 50

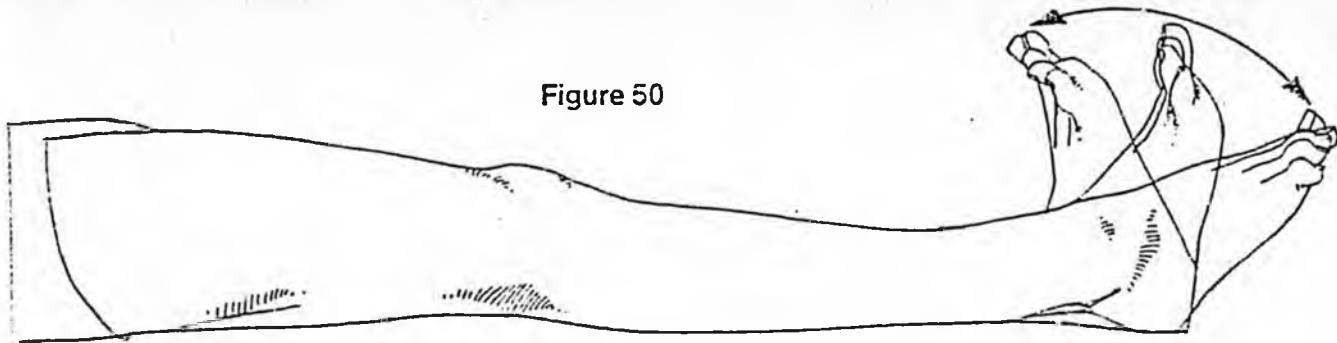


Figure 51

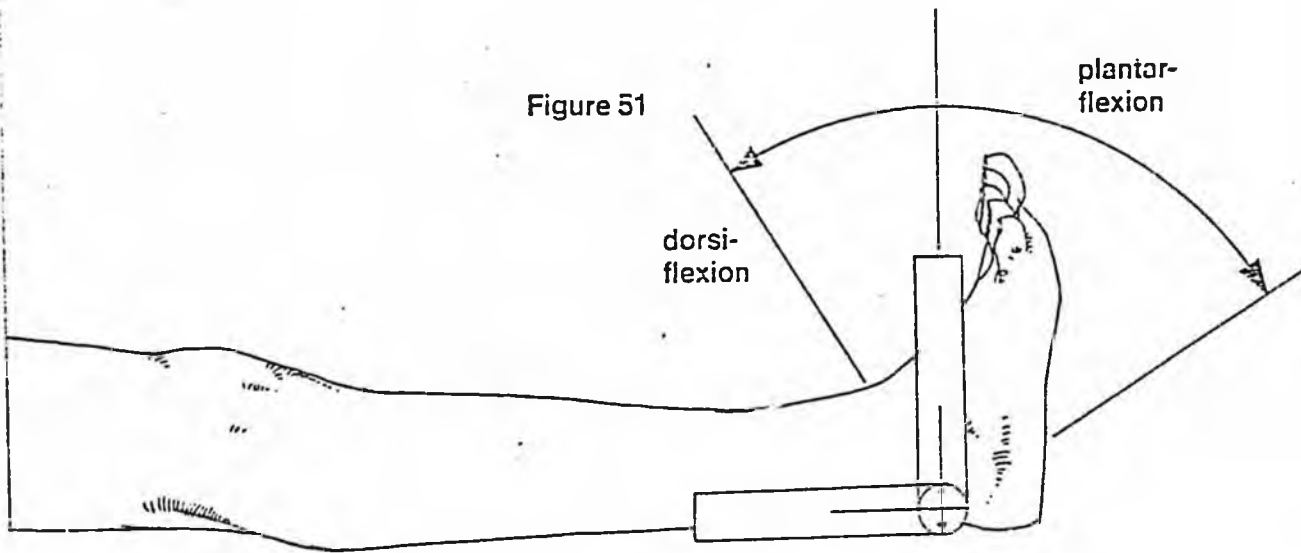


TABLE 34  
RELATIONSHIP OF IMPAIRMENT OF THE FOOT TO IMPAIRMENT OF THE LOWER EXTREMITY

% Impairment of Lower Foot Extremity		% Impairment of Lower Foot Extremity		% Impairment of Lower Foot Extremity		% Impairment of Lower Foot Extremity		% Impairment of Lower Foot Extremity		% Impairment of Lower Foot Extremity	
0 = 0	0	20 = 14	5	40 = 28	11	60 = 42	17	75 = 53	21	90 = 63	25
1 = 1	0	21 = 15	5	41 = 29	12	61 = 43	17	76 = 53	21	91 = 64	25
2 = 1	0	22 = 15	5	42 = 29	12	62 = 43	17	77 = 54	22	92 = 64	25
3 = 2	1	23 = 16	5	43 = 30	12	63 = 44	18	78 = 55	22	93 = 65	25
4 = 3	1	24 = 17	7	44 = 31	12	64 = 45	18	79 = 55	22	94 = 66	25
5 = 4	2	25 = 18	7	45 = 32	13	65 = 46	18	80 = 56	22	95 = 67	27
6 = 4	2	26 = 18	7	46 = 32	13	66 = 46	18	81 = 57	23	96 = 67	27
7 = 5	2	27 = 19	7	47 = 33	13	67 = 47	19	82 = 57	23	97 = 68	27
8 = 6	2	28 = 20	7	48 = 34	14	68 = 48	19	83 = 58	23	98 = 69	27
9 = 6	2	29 = 20	7	49 = 34	14	69 = 48	19	84 = 59	24	99 = 69	27
10 = 7	3	30 = 21	7	50 = 35	14	70 = 49	20	85 = 60	24	100 = 70	27
11 = 8	3	31 = 22	7	51 = 36	14	71 = 50	20	86 = 60	24		
12 = 8	3	32 = 22	7	52 = 36	14	72 = 50	20	87 = 61	24		
13 = 9	4	33 = 23	7	53 = 37	15	73 = 51	20	88 = 62	25		
14 = 10	4	34 = 24	10	54 = 38	15	74 = 52	21	89 = 62	25		
15 = 11	4	35 = 25	10	55 = 39	15						
16 = 11	4	36 = 25	10	56 = 39	15						
17 = 12	5	37 = 26	10	57 = 40	15						
18 = 13	5	38 = 27	11	58 = 41	15						
19 = 13	5	39 = 27	11	59 = 41	15						

NOTE: Impairment of the lower extremity as contributed by the foot may be rounded to the nearest 5% only when it is the sole impairment involved. Consult Table 44 for converting lower extremity impairment to whole person impairment.

# Stress

in the Workplace  
An Assessment of the Problem

By Donald T. DeCarlo  
Vice President and General Counsel  
National Council on Compensation  
Insurance

**S**tress! The word itself is one of the most distressing in the English language suggesting, as it does, constraints, pressures, aggravations, frustrations, inhibitions—overt or hidden, subtle or crass—that create physical pain and worse. More and more people recognize that stress is a commonplace part of everyday life. But, for some, that life can be severely affected, or even cut short, by its ravages.

Increasingly, a workers' compensation claim is viewed as a remedy for workplace stress. The increase in such claims is not limited to traditionally hazardous occupations, nor even to occupations in which unusual stress is apparent. Coal miners and airline pilots may be affected by emotional stress, but so may office workers and executives.

In particular, claims for mental disability caused by workplace stress are now quite common. A National Council on Compensation Insurance (NCCI) study of data from a random sampling of claims for 1980-82 in 13 states revealed that gradual mental stress claims accounted for about 11 percent of all occupational disease claims. About 59 percent of the claimants were age 39 or younger.

Nationwide, it has been estimated that there were 11,600 such claims, resulting in an estimated total cost of \$30 million during 1983, up from virtually no cases at all ten years ago.

Clearly, the rise of work-related stress claims must be scrutinized to determine, among other things, the present and possible future effects on the nation's workers' compensation systems. Pursuant to studying this issue, NCCI published a new monograph, "Emotional Stress in the Workplace—New Legal Rights in the Eighties." This study summarizes the past and present status of the laws in each state for work-related mental stress claims, and attempts to identify trends in this increasingly significant field.

Claims in which either the stimulus or the disability is mental in nature gener-

**Some state courts  
have concluded that  
mental injuries are  
to be treated no  
differently than  
physical injuries.**

ally have been brought within the scope of workers' compensation systems. Examples of these kinds of claims are a heart attack caused by a stressful job, or chronic depression caused by an injury that makes it difficult to do the job in the same manner as before the injury, sometimes called traumatic neurosis.

But mental stress-mental disability ("mental-mental") claims are even more problematic because there usually is no physical corroboration for either the source of stress or the disability. But, to the worker, the effects may be no less disabling than a physical injury.

Consider these examples of mental-

**A worker who has  
endured 30 years of  
tedium in a repetitive  
job suddenly can not  
tolerate another  
day.**

mental claims. A worker suffers a nervous breakdown after viewing the death of a fellow worker on the assembly line.

A worker is unable to concentrate on job duties following a co-worker's suicide. A worker fears further exposure to chemicals in the workplace after reading that workers in another factory contracted cancer following exposure to the same chemicals. A worker suffers emotional problems when unable to cope with new office procedures.

And there are others. A worker who has endured 30 years of tedium in a repetitive job suddenly cannot tolerate another day. A worker who is transferred

to a new department feels harassed by the supervisor. A worker suffers an emotional collapse upon being fired.

Stress has been suggested as a contributory element of many medical conditions, including high blood pressure, heart disease, cancer and sexual dysfunction, even if many of these causal relationships are debatable.

#### **Mental Stress Claims Will Continue**

Not every psychologically impaired or stressed worker files a claim, of course, nor is it clear what percentage of psychological disability can truly be attributed to the workplace. But the recent increase in mental stress claims probably will continue. This will be due in part to such factors as publicity of workers' compensation recoveries for such claims, increases in unemployment in certain industries that sometimes encourages filing of claims as a "substitute income," and growing legal recognition of compensation for mental injuries in contexts other than workers' compensation.

Not surprisingly, the potential compensability of mental-mental claims differs by state. There are nine states in which the case law has thus far disallowed such claims. They are Florida, Georgia, Kansas, Louisiana, Minnesota, Montana, Nebraska, Ohio and Oklahoma; although in at least three of these states, Nebraska, Ohio and Louisiana, recent case law suggests that mental-mentals may be on the verge of recognition.

Most state courts disallowing mental-mentals have relied on specific statutory

language defining "injury" and interpreted it to require a compensable injury to have a physical element.

There are eight states in which the claims may be compensable if the source of the mental stress is a sudden, frightening or shocking event: Illinois, Maryland, Missouri, Mississippi, South Carolina, Tennessee, Texas and Virginia.

In 11 states mental-mental claims may be compensable if the source of the mental stress is unusual in the sense that it is in excess of the stress of everyday life or employment: Arizona, Arkansas, Maine, Massachusetts, New Mexico, New York, Pennsylvania, Rhode Island, Washington, Wisconsin and Wyoming.

State courts adopting this standard generally have held that a workers' compensation injury need not have a physical aspect and need not occur suddenly or traumatically to be compensable.

#### **Claims May Be Compensable**

In seven states claims may be compensable even if the source of the mental stress is not unusual (i.e., not in excess of the stress of everyday life or employment): California, Hawaii, Kentucky, Michigan, New Jersey, Oregon and West Virginia.

State courts applying this standard usually have concluded that mental injuries are to be treated no differently than physical injuries, and that mental-mentals are potentially compensable if the stress arises out of the workplace and causes disability.

**Stress! The word itself is one of the most distressing in the English language.**

In the remainder of the states, the legal status of mental-mentals has not yet been addressed, or is unclear. A few state court decisions have adopted a purely subjective standard not requiring the proof of any source of stress in the workplace. Rather, it is sufficient if the claimant perceives, however incorrectly, a source of stress in the workplace, and suffers disability as a result. But this approach is rare, and has been criticized as extending workers' compensation to injuries having nothing to do with work. The subjective standard was abolished by the legislature in Michigan.

The uncertainty of psychiatry—particu-

**There is a trend  
toward increased  
recognition of  
gradual mental  
stress claims.**

larly the reliability of psychiatric testimony—is another factor that has been expressed in many legal contexts. Studies have suggested that psychiatrists have a greater tendency to err by diagnosing sickness in healthy people than to err by diagnosing health in sick people. Other studies have concluded that two psychiatrists examining the same patient rarely concur, and that their diagnostic standards are too subjective, vague and unreliable to be the basis for legal judgments.

The nature of the employer-employee relationship also is coming under increased scrutiny by the courts. Just as compensation for work-related traumatic

injuries is tied to the right of an employ to a safe workplace, compensation base on emotional disability caused by a termination or demotion can imply a ne legal right—the right not to be fired.

**A Trend Toward Increased Recognition**  
Since the compensability of mental-mentals has, in most states, been recognized only in the past 10 years, there can be little doubt that the trend is toward increased recognition. Recognition of gradual stress mental-mentals, where on sudden stress has been recognized, is yet another important trend.

It appears that mental-mentals are a new breed of claim which, if evaluated under realistic standards, can be successfully handled by the workers' compensation system. Mental-mentals do not present the same characteristics as asbestos-related diseases, which created uncertainties about the funding of the liabilities and who should pay them.

For example, a large number of mental-mentals have not arisen simultaneously, with heavy concentration in certain industries, as in the case of asbestos-related diseases. Most mental-mentals have not involved long latency periods, and, moreover, the legal standards applied in mental-mentals are more difficult to meet when the stress cannot be isolated to a single event or a series of ascertainable events. And mental-mentals do not involve a tangible product, such as asbestos, which can implicate several different responsible parties and thereby play havoc with the exclusive

nature of the workers' compensation remedy.

### **More Exacting Proof**

There is, however, a need for some refinements to workers' compensation systems in evaluating mental-mental claims. For example, one refinement might be to require a higher threshold of causation or more exacting proof of casual relationship when adjudicating mental-mental claims in light of the absence of physical corroboration.

Also, the Subcommittee on Current Laws and Proposals of the National Association of Insurance Commissioners' Advisory Committee on Occupational Diseases recently has recommended that all states establish a panel of impartial experts in occupational medicine, industrial science, industrial hygiene and epidemiology to determine the compensability and disability of individual occupational disease claims.

The NAIC subcommittee further suggests that administrative guidelines be developed addressing causation and diagnostic criteria, and that central depositories for the latest medical, scientific and epidemiology data relating to occupational disease be established. The report also supports further development of courses to educate and train the administrators who decide occupational disease cases. These recommendations can and should be applied in mental-mental claims.

NCCI favors establishment of panels of impartial experts which could lend

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greater credence to the reliability of medical determinations in mental-mental cases. More objective criteria to evaluate the effects of stress have recently become available, and should be used whenever practical. New administrative standards and uniform diagnostic standards would also be beneficial, as would increased statistical monitoring and continuous educational updates.

With reasonable limitations, these new legal rights of the eighties can be accommodated by the workers' compensation system which has served society well for the greater part of this century. ■

# Stress in the Workplace —What Can Be Done About It?

By Susan Banham

**W**orkers' allegations that transfers, demotions and changes in job duties are overly stressful and bring on a mental breakdown are not new. In the past, however, workers' compensation claims based on such allegations were rarely compensable. Today it's a different story. More and more mental stress claims are being brought to court and deemed compensable, and mental stress claims, overall, are on the rise.

A study conducted by the California Workers' Compensation Institute in 1983 confirmed a claims increase for neurosis (e.g., anxiety reactions) unrelated to a specific traumatic incident. During the years 1980-1982, such stress claims more than doubled while all other disabling work injuries decreased 11 percent during the same period, the study said.

Statistics, observers say, indicate a higher than expected percentage of claims by younger workers, which could indicate that a new generation of workers is more prone to stress—or at least more willing to exhibit emotional problems and more likely to regard them as compensable injuries.

In a recent survey conducted by the Canadian Mental Health Association, approximately 60 percent of the respondents reported experiencing "negative stress" on the job. Frequently cited sources of stress included work load and time pressures; quality of management; relationships with supervisors and co-workers; contact with the public or customers; and among men in blue-collar

and farming occupations, the threat of job loss or change due to economic conditions or technological innovations.

The survey also confirmed that younger workers, particularly those between the ages of 25 and 44, were more likely to feel adversely affected by negative stress in the workplace. Other recent research suggests that women are generally more likely than men to report physical problems caused by work stress. This could be due, observers say, to the dual role that most women play—at home as mother and wife, and at work. Women also may be experiencing more stress because they may believe they are not receiving equal pay for equal work.

## Publicity Spurs Claims

Moreover, highly publicized workers' compensation recoveries spur similar claims. This may be important in mental stress claims because of the seeming universality of mental stress. Accordingly, a claim based on such pressures is likely to draw the attention of a large number of workers who feel that they are no less subject to job stress and no less entitled to compensation.

According to Donald T. DeCarlo, vice president and general counsel of the National Council on Compensation Insurance, "Underwriters are not focusing on mental stress-related claims just yet. They are not as big an item, from an insurance standpoint, as the physical injury in a workers' compensation claim, even though mental stress claims are

on the rise.

"Employers, however, seem to be more afraid of this kind of claim and are trying to control it by offering in-house physical fitness facilities to relieve stress and stress management programs that counsel the distressed."

Robert Schuch, legal manager for Wausau Insurance, asserted that the number of stress cases are increasing but they still have a long way to go before they surpass back injury, which makes up 80 percent of workers' compensation claims.

"As a result, our underwriters place more emphasis on that which is more apparent. While the potential for mental stress claims can indeed snowball, it hasn't done so to the extent that I foresaw back in the early 1980s," he said.

#### **It Is Here To Stay**

Although the mental stress claim is new to workers' compensation, "it certainly isn't a passing fad," said Catherine McGee, compensation manager for Wausau Insurance in New York. "The more successful the claim is in the company, the more frequently we will see it," she said, adding that "it is here to stay."

Given the pervasive nature of stress in modern American life, and in the increasing incidence and prominence of so-called mental-mental disability claims, is there anything that managers can do to identify stressors in the workplace; to organize programs to eliminate and reduce them; to create conditions that maximize productivity and reduce the cost

of stress to the organization?

Some answers to these questions are beginning to emerge. According to Dr. John (Jack) Jones, Ph.D., chief industrial psychologist of the St. Paul Fire and Marine Insurance Company, companies should work out a corporate safety program that "gets at" the human element of employee stress reactions.

Through a new program, the St. Paul helps corporate risk managers to control losses resulting from work-related stress affecting the employee. Directed by Dr. Jones, the company's Human Factors Loss Control (HFLC) program is an extensive program that will help risk managers get a grip on the hefty cost of stress claims.

#### **Adverse Reactions Noted**

Stress, the adverse emotional and physical reactions employees have to any source of pressure in their environment, has a "negative impact on personal health and organizational effectiveness," Dr. Jones explained.

Before managers can develop programs to prevent stress-induced accidents, however, they must first understand how employees' stress causes mishap—how the stress-accident process works, Dr. Jones said.

"Stressed employees exhibit specific symptoms that pre-dispose them to accidents," he explained, noting that these symptoms include fatigue, poor judgment, impaired physical coordination, inattentiveness, distorted visual perception, indecision and alcohol and drug

problems.

"These stress reactions reduce awareness and avoidance of potential dangers and thus contribute to increased recklessness and risk taking," he added.

The way to deal with corporate stress is to establish a corporate self-help program, said Dr. Jones. The St. Paul offers a two-day program given four times a year for various U.S. companies interested in forming their own stress management system.

#### **Corporate Assistance**

Recently, the St. Paul and Control Data Health Care Corp. put into place an Employee Advisory Resource System (EARS) which provides 24-hour phone counseling, ranging from simple problems to suicide crisis issues for the employee and his family.

"We tailor-make an intervention program for any company interested in controlling the rise of mental stress claims within their organization. In addition, we offer risk managers the various skills necessary to control work-related accidents due to stress," he said.

"Managers need to determine whether a stress problem exists, how severe and lasting it is, whether intervention is within the manager's capability and if the employee should be referred to an expert. Monitoring suspected problems can help managers to determine the severity and the kind of intervention required. The alternatives—ignoring lingering problems or disciplining employees—may exacerbate difficulties," Dr. Jones said.

Mental stress is no respecter of persons and it turns up among a variety of occupations including professionals, laborers, clerical and service workers. Claims arise in sedentary occupations as well as physical ones, among managers as well as among the employees they supervise.

#### **Stress Related Problems**

According to Terry Monroe, president of Lifelong Ltd., a stress management consulting firm, there are several reasons for the prominence of stress-related problems: "Information overload is certainly a factor. Also our sedentary lifestyle characterized by little exercise and poor nutrition weakens our ability to withstand stress. Few of us take the time to relax, and this contributes to our problems. But the single most important cause of stress stems from our absolute depressed feelings about our inability to change—a sense of lack of control over our lives."

A recent national opinion survey conducted by Lou Harris and Associates reported that 92 percent of the American population agrees that if people stopped smoking, got better rest, exercised regularly, drank less alcohol, ate a more nutritious diet and found more time to relax these would do more to improve their health than anything the health care system could possibly do. There is a widespread public awareness that the individual is responsible for his health and that a positive lifestyle is a major factor in successfully managing life and job stress. ■

# **Economic Consequences of Job Injury**

A Report to the Industry

## SUMMARY

Workers' compensation is the oldest form of social insurance in the United States, the first to provide economic security to working men and women. In the event of a job injury, an employee is entitled to all necessary medical care, without deductible, coinsurance or other contribution. If the injury results in disability, the employee receives partial but tax-free replacement of lost wages at the employer's expense. Other employer-paid benefits — vocational rehabilitation and re-employment services, payments to surviving dependents in the event of death — complete the income protection objective.

By any measure California's workers' compensation program is the largest in the United States and exceeds the scope of parallel programs in most foreign countries. As a mechanism for delivering medical benefits, it has few challengers for effectiveness and efficiency. California's leadership in the rehabilitation of injured workers is established and accepted. But the record in income protection, particularly for permanently disabled employees, is less glowing and raises serious questions about the adequacy and equity of the California workers' compensation system. Consider:

- Income benefits replace less than 50 per cent of earnings lost because of a job injury, substantially beneath the two-thirds wage replacement promised by the statute.
- On average, a permanently disabled worker's uncompensated earnings loss will total \$18,000 over the working lifetime.

- Some workers fare better, others fare worse. Income benefits paid to younger workers who are permanently disabled replace 135 per cent of lost earnings, more than double the two-thirds goal established by law and three times the replacement rate of workers in the 25-50 age group.
- Similarly, income benefits for very minor disabilities restore 88 per cent of post-injury earnings loss, compared to only 32 per cent replacement for the severely disabled.

The income protection imbalance in California's workers' compensation program affects all injured employees to a greater or lesser degree, but the heaviest impact falls upon those with residual impairments, particularly the seriously disabled worker. The Institute's research examines this population in detail and provides baseline information about their characteristics, the nature of their disabilities, and their post-injury participation in the labor force.

The study confirms the conclusions of many observers: That income benefits provided by the California law are both inadequate and inequitable.