

ALTERNATIVE DISPUTE RESOLUTION/CARVE-OUT  
PROGRAM

**Labor Code sections 3201.5, 3201.7 and 3201.9**

REPORT ON ACTIVITIES 2004-2009



**Department of Industrial Relations**

**Division of Workers' Compensation  
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ALTERNATIVE DISPUTE RESOLUTION/CARVE-OUT PROGRAM  
**Labor Code sections 3201.5, 3201.7 and 3201.9**

**REPORT ON ACTIVITIES**  
**2004-2009**

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Labor Code section 3201.9 requires the Administrative Director of the Division of Workers' Compensation (DWC) to report to the Legislature, the Department of Insurance (DOI), the designated rating organization, and the programs and insurers participating in this study, on Labor Code sections 3201.5 and 3201.7 alternative dispute resolution (ADR)/carve-out program activities.

In 2009, 25 ADR/carve-out programs were operating in California. Of these, 24 programs were required to report on 2009<sup>1</sup> activities by March 31, 2010. One program was excused from reporting because it did not become active until December 2009. At the close of the data collection process, 23 programs reported correctly; one program failed to report accurate, usable data.

Overall, 2009 reported activities for carve-outs included:

- 23 Carve-out programs
  - 19 construction programs, Labor Code section 3201.5
  - 4 non-construction programs, Labor Code section 3201.7
  
- 876 Employers
  - \$3.39 billion in payroll
  - 49,618 full-time equivalent (FTE)<sup>2</sup> employees
  
- 3,282 claims
  - 1,554 medical-only claims
  - 1,728 indemnity claims
  
- \$16,339,173 in paid costs
- \$32,545,150 in incurred costs

#### **I. Brief Overview of ADR/Carve-out Programs**

With Senate Bill (SB) 983 (Chapter 117, Statutes of 1993), the California Legislature established the "Construction Carve-Out Program" under Labor Code section 3201.5. In doing so, it permitted employers, groups of employers, and employee organizations involved in the construction industry to use collective bargaining as a way to create alternatives to the traditional workers' compensation dispute resolution process.

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<sup>1</sup> Programs in operation and eligible to report prior to 2009 were also required to report on 2006, 2007 and 2008 activities when applicable.

<sup>2</sup> One full-time employee is equivalent to 2,000 person hours worked.

The passage of SB 228 (Chapter 639, Statutes of 2003) amended Labor Code section 3201.7 to allow non-construction employers, groups of employers, and employee organizations to participate in carve-out programs.

## **II. Reporting Requirements of Labor Code sections 3201.5, 3201.7 and 3201.9 and California Code of Regulations, title 8, section 10203.**

### **DWC reporting requirements under Labor Code sections 3201.5 and 3201.7**

California Code of Regulations, title 8, section 10203 requires that, as of March 31 of each year, all employers participating in a section 3201.5 or 3201.7 ADR/carve-out program report annual claims and payroll data to the DWC.

Labor Code section 3201.5 requires the Administrative Director of the Division of Workers' Compensation to prepare a report to the Legislature by June 30 of each year based upon aggregate data that shall include the following:

- (1) Person-hours worked and payroll covered by agreements filed.
- (2) The number of claims filed.
- (3) The average cost per claim reported by cost components whenever practical.
- (4) The number of litigated claims, including the number of claims submitted to mediation, the Workers' Compensation Appeals Board (WCAB), or the Court of Appeal.
- (5) The number of contested claims resolved prior to arbitration.
- (6) The projected incurred and actual costs of claims.
- (7) Safety history.
- (8) The number of workers participating in vocational rehabilitation programs.
- (9) The number of workers participating in light-duty programs.

Labor Code section 3201.7 requires that the report on non-construction ADR/carve-outs also include a measure of overall worker satisfaction.

### **DWC and DOI reporting requirements under Labor Code section 3201.9**

Prior to the passage of SB 899 (Chapter 34, Statutes of 2004), the scope of the DWC's reporting to the Legislature on ADR/carve-out system activity was limited to ADR/carve-out activity from the prior year, as required by Labor Code sections 3201.5 and 3201.7. With SB 899, Labor Code section 3201.9 expanded the scope of data collection and reporting to require a report that gives an historical and comparative perspective on all program activity from 2003 forward, using information from both DWC and DOI.

Labor Code section 3201.9 requires that the DWC biannually expand its reporting under Labor Code sections 3201.5 and 3201.7 by providing updated loss experience data for all employers and groups of employers participating in a program established under those sections. According to Labor Code section 3201.9, the report should also include updated data on each item set forth in subdivision (i) of section 3201.5 and subdivision (h) of section 3201.7 for the previous year for injuries in 2003 and beyond<sup>3</sup>. In addition, Labor Code section 3201.9 requires that the Insurance Commissioner or Commissioner's designee prepare for inclusion in the report both a review of the adequacy of rates charged for these programs and a comparative analysis of ADR/carve-out program rates to other

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<sup>3</sup> Data on Labor Code sections 3201.5 (i) and 3201.7 (h) were not kept by DWC until 2004. Therefore, this report is based on calendar data from 2004-2009.

programs not subject to Labor Code section 3201.5 or 3201.7. DOI's reporting and data analysis were performed by the Workers' Compensation Insurance Rating Bureau (WCIRB) of California.

### **ADR/carve-out reporting requirements under Title 8 CCR, section 10203**

The ADR/carve-out data reporting requirements, initially adopted by DWC in 1996, can be found in California Code of Regulations, title 8, section 10203. Section 10203 requires that every employer subject to either Labor Code section 3201.5 or 3201.7 shall provide the DWC with the required information for the previous calendar year on or before March 31 of each year. For each claim with a date of injury on or after January 1, 2004, the information shall be updated annually for the following three calendar years, thereby allowing longer-term claims trajectories and costs to be determined. In order to fulfill the reporting requirement, groups of employers must, on behalf of their members, either submit data directly to the DWC, or "(a)(2)(B) provide the Administrative Director with written authorization to collect the information from the appropriate claims administrator. [However], [i]f the Administrative Director is unable to obtain the information with the written authorization, the employer shall remain responsible for obtaining and submitting the information." Employers are required to submit data using the Aggregate Employer Annual Report (DWC Form GV-1) (Cal. Code Regs., tit.8, section 10103.1) and the Individual Employer Annual Report (DWC Form GV-2) (Cal. Code Regs., tit.8, section 10103.2).

The required elements for data reporting under section 10203 are:

- The name of the individual employer and the union.
- The principal business of the employer.
- The dates that the 3201.5 or 3201.7 provision was in effect during the previous calendar year.
- The name of all insurers, if any, and the insurance policy number of all policies. If self-insured, the name and certificate number of the self-insured employer.
- The name, address and telephone number of any administrator, ombudsperson, mediator or arbitrator employed in an alternative dispute resolution system.
- Payroll reported in accordance with the rules of the Workers' Compensation Insurance Rating Bureau (WCIRB), reported by WCIRB class code.
- Hours worked by covered employees, reported by WCIRB class code.
- The number of claims filed in the previous calendar year pursuant to Labor Code section 5401. The claims shall be reported in the following categories:
  - The number of claims that were medical only, and the total amounts of paid and incurred costs on those claims.
  - The number of claims that included indemnity payments, and the total amounts of paid and incurred costs in each of the following categories: temporary disability, permanent disability, life pensions, death benefits, vocational rehabilitation, medical services, and medical-legal expenses.
- The number of claims filed pursuant to Labor Code section 5401 in the previous calendar year that were resolved and the number that remained unresolved on December 31 of the previous calendar year. These numbers together should equal the total number reported in subdivision (b)(8). For the purpose of this section, "resolved" means a claim in which ultimate liability has been determined, even though payments may continue beyond the reporting period.
- Of the claims filed and/or resolved in the previous calendar year, the number resolved with a denial of compensability.
- Of the claims filed and/or resolved in the previous calendar year, the number resolved at each of the following stages: before mediation, at or after mediation, at or after arbitration, at or after the Workers' Compensation Appeals Board (WCAB), or at or after the Court of Appeal. If the 3201.5 or 3201.7 provision contains another dispute resolution procedure, whether

instead of or in addition to arbitration or mediation, the report must identify the type of procedure, its stage in the overall alternate dispute resolution process, and the same information regarding the resolution of claims.

- The title and case number of every application filed with the WCAB in the previous calendar year concerning a claim alleged by any party to fall within the 3201.5 or 3201.7 provisions, regardless of whether the employee had the right to file such an application.
- The title and court number of every civil action, including petitions for writs and injunctions in any court, state or federal, filed in the previous calendar year that concerned a claim alleged by any party to fall within the 3201.5 or 3201.7 provisions.
- The number of injuries and illnesses reported on the United States Department of Labor OSHA form no. 300 for those employees covered by the 3201.5 or 3201.7 provisions.
- The number of employees covered by the 3201.5 or 3201.7 provision who participated in vocational rehabilitation programs.
- If the 3201.5 or 3201.7 provision established a light-duty or return-to-work program, the number of employees who participated in that program.
- For employers covered by a 3201.7 provision, an employee survey that measures worker satisfaction with the 3201.7 alternative dispute resolution procedures. The survey shall be designed and administered by agreement between the employer and the union.
- In addition to the data above, the employer may include in its report any explanatory material, narrative account, or comment that the employer considers necessary to understand the data.

### **III. Data Collection and Presentation**

#### **DWC**

The DWC's data collection for Labor Code sections 3201.5 and 3201.7 began January 26, 2010, with an initial mailing to all participating 3201.5 and 3201.7 programs. This mailing included a letter highlighting the March 31, 2010 reporting deadline, copies of the regulations' requirements, copies of DWC Forms GV-1 and GV-2, a 2010 Excel spreadsheet version of the carve-out reporting forms, and a guide for completing the spreadsheet.

As of the March 31, 2010 reporting deadline, four out of the 24 programs (17 percent) required to report on activities performed in 2009 had done so accurately and on time. Of the 20 programs that failed to report on time, 19 gave the primary reason for delay an inability to get timely and/or accurate information from their insurance carriers. One program stated that the delay in accurate reporting was due to a two-week vacation.

After the reporting deadline, the DWC worked individually with the 20 non-reporting ADR/carve-out programs and their insurance carriers in an attempt to obtain the data required by California Code of Regulations, title 8, section 10203. This effort resulted in obtaining data on 23 out of the 24 carve-out programs (96 percent) required to report. One program failed to report accurate and usable data. DWC repeatedly asked this program to clarify its data submission, but in the end proved unsuccessful in obtaining a response. Efforts to collect the data from the one non-reporting program lasted until June 24, 2010.

The resulting dataset for the 2010 Carve-out Report contains data from 19 construction carve-out programs (Labor Code section 3201.5) and 4 non-construction carve-out programs (Labor Code section 3201.7).

**Number of Carve-out Programs Reporting Data by Year**

<b>Programs</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Total Reporting Programs</b>	13	16	20	20	23	23
<b>3201.5 Construction</b>	13	16	19	19	19	19
<b>3201.7 Non-Construction</b>			1	1	4	4

Data collected as part of Labor Code section 3201.9 on individual construction and non-construction carve-out programs are compiled in Appendix A.

**DOI/WCIRB**

For Labor Code section 3201.9, the WCIRB compiled two databases for its comparative analysis: (1) a database of all claims and (2) a carve-out program/employer claims database for the latest available report level Unit Statistical Reporting data for policy years 2005, 2006 and 2007.<sup>4</sup>

In order to help facilitate the creation of the carve-out program/employer claims database, the DWC provided the WCIRB with the 4,625 carve-out employer records collected during the 2009 reporting process. To identify carve-out program/claims within the WCIRB’s Unit Statistical Reporting data, the WCIRB used a combination of DWC-provided employer name, Federal Employer Identification Number (FEIN), and policy number to match DWC employer data to WCIRB Bureau Numbers (BNs)<sup>5</sup>. The WCIRB matched more than 99 percent of carve-out employers to a BN. Some self-insured employers could not be matched. After removing duplicate employer records and instances where more than one employer mapped to a single BN, 1,639 unique BNs were used to represent carve-out employers.

Next, since all claims for a carve-out employer might not be covered under the carve-out program (e.g. clerical workers would not be covered as part of a construction carve-out) the WCIRB used class code information on each claim provided by DWC to filter out some uncovered claims. However, since different programs provided different levels of class code refinement, the WCIRB handled the use of class code filters in three different ways:

1. If class codes were provided for a program at the employer level, only employer claims for those class codes were assigned to an employer BN.
2. If class codes were provided for at the program level only, all employers were assigned those class codes and employer claims for those class codes were assigned to an employer BN.
3. If no class codes were provided, all employer claims were assigned to an employer BN.

**Level of Claim Refinement using Class Code by Program Type**

<b>Level of Class Code Refinement Provided</b>	<b>3201.5 Construction Programs</b>	<b>3201.7 Non-Construction Programs</b>
<b>Employer</b>	<b>14</b>	<b>4</b>
<b>Program</b>	<b>2</b>	<b>0</b>
<b>None</b>	<b>3</b>	<b>0</b>

<sup>4</sup> Policy year 2005 experience is evaluated as of third report level (42 months from policy inception), policy year 2006 experience is evaluated as of second report level (30 months from policy inception) and policy year 2007 experience is evaluated as of first report level (18 months from policy inception).

<sup>5</sup> WCIRB Bureau Numbers (BN) is a unique file number assigned by the WCIRB to each California insured risk.

**Level of Claim Refinement using Class Code per Carve-out Program**

<b>3201.5 Construction Programs</b>	<b>Level of Class Refinement Provided</b>	<b>3201.5 Construction Programs</b>	<b>Level of Class Refinement Provided</b>	<b>3201.7 Non-Construction Programs</b>	<b>Level of Class Refinement Provided</b>
<b>A</b>	None	<b>K</b>	Employer	<b>T</b>	Employer
<b>B</b>	Program	<b>L</b>	Employer	<b>U</b>	Employer
<b>C</b>	None	<b>M</b>	Employer	<b>V</b>	Employer
<b>D</b>	Employer	<b>N</b>	Employer	<b>W</b>	Employer
<b>E</b>	Employer	<b>O</b>	Employer		
<b>F</b>	Employer	<b>P</b>	Employer		
<b>G</b>	Employer	<b>Q</b>	Employer		
<b>H</b>	Employer	<b>R</b>	Program		
<b>I</b>	None	<b>S</b>	Employer		
<b>J</b>	Employer				

**IV. Data Findings Section 3201.5 and Section 3201.7**

**(1) Person–hours worked and payroll covered by agreements filed**

California Code of Regulations, title 8, sections 10203(b)(6) and 10203(b)(7) require ADR/carve-outs to report employees’ hours worked and payroll in accordance with WCIRB class codes (Table 1.1).

**Table 1.1: Estimated Person-hours Worked and Payroll 2009**

<b>Programs</b>	<b>Person-hours worked (estimated)</b>	<b>Payroll (estimated)</b>	<b>FTE (estimated)</b>	<b>Hourly Wage (estimated)</b>	<b>Number of Programs Reporting</b>
3201.5 Construction	91,658,588	\$3,235,146,092	45,829	\$35	18
3201.7 Non-Construction	7,577,424	\$158,882,567	3,789	\$21	3
<b>3201.5 and 3201.7 Total Programs</b>	<b>99,236,012</b>	<b>\$3,394,028,659</b>	<b>49,618</b>	<b>\$34</b>	<b>21</b>

Twenty-one of the 23 reporting ADR/carve-out programs submitted person-hour and payroll data with corresponding class codes. One 3201.5 program reported person-hour and payroll data without class codes. One 3201.7 program reported that they failed to report person-hour and payroll data because of their inability to “collect that data with [their] antiquated HR/payroll system.”

In 2009, ADR/carve-out programs reported an estimated 99,236,012 in person-hours worked and \$3,394,028,659 in payroll.<sup>6</sup> Using a scale of 2,000 person-hours worked to one full-time equivalent employee (FTE), the person-hours worked equaled 49,618 FTE, with an estimated hourly wage of \$34.

Eighteen of 19 construction programs reported person-hours worked and payroll data for 2009. Construction programs covered an estimated 91,658,588 person-hours worked and \$3,235,146,092 in payroll, the equivalent of approximately 45,829 FTEs earning an hourly wage of \$35 per hour. Construction programs accounted for 95 percent of payroll and 92 percent of person-hours worked.

<sup>6</sup> The person-hour and payroll data for 2009 are estimates. Because of varying policy lengths and start dates, many insurance carriers are not able to provide final person-hour and payroll data until 12-18 months after the end of a calendar year. Therefore, the final person-hour and payroll numbers for 2009 may not be available until the middle of 2011.

Three out of the four reporting non-construction programs submitted person-hours worked and payroll data. For 2009, non-construction programs covered 7,577,424 person-hours worked and \$158,882,567 in payroll, which equaled 3,789 FTEs earning an hourly wage of \$21. Non-construction programs accounted for five percent of payroll and eight percent of person-hours worked.

## (2) Number of Claims Filed

California Code of Regulations, title 8, section 10203(b)(8) requires that ADR/carve-out programs report the number of medical-only claims and indemnity claims filed in the previous calendar year (Table 2.1).<sup>7</sup>

**Table 2.1: Number of Claims Filed 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Reporting Programs</b>	13	16	19	19	19	19
<b>Medical-Only Claims</b>	480	1,119	1,111	1,305	1,291	806
<b>Indemnity Claims</b>	723	1,226	1,331	1,280	1,160	715
<b>Total 3201.5 Claims</b>	1,203	2,345	2,442	2,585	2,451	1,521
<b>3201.7 Non-Construction Programs</b>						
<b>Reporting Programs</b>			1	1	4	4
<b>Medical-Only Claims</b>			1	4	431	748
<b>Indemnity Claims</b>			0	2	482	1,013
<b>Total 3201.7 Claims</b>			1	6	913	1,761
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Reporting Programs</b>	13	16	20	20	23	23
<b>Medical-Only Claims</b>	480	1,119	1,112	1,309	1,722	1,554
<b>Indemnity Claims</b>	723	1,226	1,331	1,282	1,642	1,728
<b>Total 3201.5 &amp; 3201.7 Claims</b>	1,203	2,345	2,443	2,591	3,364	3,282

In 2009, 3,282 total claims were reported filed, of which 1,554 (47 percent) were medical-only and 1,728 (53 percent) were indemnity. From 2008 to 2009, the total number of claims reported decreased by 82 claims, or 2 percent.

In 2009, construction programs reported filing 1,521 claims, of which 806 (53 percent) were medical-only and 715 (47 percent) were indemnity. This total was 930 claims (38 percent) less than the 2,451 claims filed in 2008. In 2009, non-construction programs reported filing 1,761 claims of which 748 (43 percent) were medical-only and 1,013 (58 percent) were indemnity. Between 2008 and 2009, the number of non-construction claims almost doubled, increasing by 848 (93 percent).

Overall, 2009 was the first year more claims were filed by non-construction programs (1,761) than construction programs (1,521). Comparing 2009 totals, the 806 medical-only claims filed by construction programs were 7 percent greater than the 748 filed by non-construction programs; but the 1,013 indemnity claims filed by non-construction programs were 42 percent greater than the 715 filed by construction programs.

<sup>7</sup> The number of claims filed is counted by calendar year, based upon the date of claim administrator knowledge.

### **(3) Average cost per claim by cost component**

California Code of Regulations, title 8, section 10203(b)(8)(B) requires that ADR/carve-out programs report the total amounts of paid and incurred costs for claims filed in each of the following categories (Tables 3.1 and 3.2).<sup>8</sup>

- Medical Services
- Temporary Disability
- Permanent Disability
- Life Pensions
- Death Benefits
- Vocational Rehabilitation
- Medical-Legal Expenses

For total programs (construction and non-construction), the average paid cost per claim filed in 2009 was \$4,978 (Table 3.1). This average was \$5,457 (52 percent) less than the \$10,435 average paid cost in 2008. The average paid cost for medical services was \$2,160 per claim. For disability, costs were \$2,610 for temporary disability, \$125 for permanent disability, and \$5 each for life pensions and death benefits. An average of \$1 per claim was paid for vocational rehabilitation; \$71 for medical-legal expenses.

In 2009, construction programs paid on average \$6,293 per claim filed, which was 39 percent greater than the \$3,843 paid by non-construction programs. The average cost for medical services for construction carve-out programs was \$2,706 per claim, which was 38 percent greater than the \$1,689 paid by non-construction carve-outs.

In 2009, disability payments for construction programs averaged \$3,279 for temporary disability, \$203 for permanent disability, \$11 for life pensions, and \$12 for death benefits per claim. All of the average amounts paid for benefits by construction programs were greater than the average amount paid for benefits by non-construction programs. Temporary disability payments for construction programs were 38 percent greater than the \$2,033 paid by non-construction programs. Permanent disability payments for construction programs were 71 percent greater than the \$58 paid by non-construction programs. Non-construction programs did not make payments for life pensions, death benefits or vocational rehabilitation. Construction programs paid \$3 per claim for vocational rehabilitation and \$79 per claim for medical-legal expenses, or 20 percent more than the \$63 paid by non-construction programs.

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<sup>8</sup> Average paid and incurred costs per program for this section are calculated using the total number of claims filed (medical only + indemnity). For calculations of average paid and incurred costs calculated using either the number of medical-only claims, or the number of indemnity claims see Appendix B.

**Table 3.1: Average Paid Cost per Total Claim by Cost Component 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Average Paid Cost (3201.5)</b>	<b>\$12,154</b>	<b>\$10,044</b>	<b>\$14,082</b>	<b>\$13,009</b>	<b>\$11,319</b>	<b>\$6,293</b>
Medical Services	\$5,154	\$5,090	\$6,548	\$4,916	\$4,404	\$2,706
Temporary Disability	\$4,775	\$3,823	\$5,466	\$6,595	\$5,848	\$3,279
Permanent Disability	\$1,595	\$642	\$1,683	\$1,126	\$653	\$203
Life Pensions	\$394	\$126	\$0	\$3	\$0	\$11
Death Benefits	\$0	\$216	\$187	\$125	\$317	\$12
Vocational Rehab	\$41	\$23	\$17	\$7	\$2	\$3
Medical-Legal	\$196	\$122	\$181	\$236	\$95	\$79
Reporting Programs (#)	13	16	19	19	19	19
Total Claims (#)	1,203	2,345	2,442	2,585	2,451	1,521
<b>3201.7 Non-Construction Programs</b>						
<b>Average Paid Cost (3201.7)</b>			<b>\$1,668</b>	<b>\$15,888</b>	<b>\$8,063</b>	<b>\$3,843</b>
Medical Services			\$1,668	\$8,773	\$2,842	\$1,689
Temporary Disability			\$0	\$2,707	\$4,831	\$2,033
Permanent Disability			\$0	\$4,408	\$285	\$58
Life Pensions			\$0	\$0	\$0	\$0
Death Benefits			\$0	\$0	\$0	\$0
Vocational Rehab			\$0	\$0	\$0	\$0
Medical-Legal			\$0	\$0	\$106	\$63
Reporting Programs (#)			1	1	4	4
Total Claims (#)			1	6	913	1,761
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Average Paid Cost (Total)</b>	<b>\$12,154</b>	<b>\$10,044</b>	<b>\$14,077</b>	<b>\$13,016</b>	<b>\$10,435</b>	<b>\$4,978</b>
Medical Services	\$5,154	\$5,090	\$6,546	\$4,925	\$3,980	\$2,160
Temporary Disability	\$4,775	\$3,823	\$5,463	\$6,586	\$5,572	\$2,610
Permanent Disability	\$1,595	\$642	\$1,683	\$1,134	\$553	\$125
Life Pensions	\$394	\$126	\$0	\$3	\$0	\$5
Death Benefits	\$0	\$216	\$187	\$125	\$231	\$5
Vocational Rehab	\$41	\$23	\$17	\$7	\$2	\$1
Medical-Legal	\$196	\$122	\$181	\$235	\$98	\$71
Reporting Programs (#)	13	16	20	20	23	23
Total Claims (#)	1,203	2,345	2,443	2,591	3,364	3,282

The average incurred cost per claim in 2009 was \$9,916, which was \$8,760 (47 percent) less than the \$18,676 average incurred cost in 2008 (Table 3.2). The average incurred cost for medical services was \$4,869. For disability, incurred costs were \$3,813 for temporary disability, \$1,057 for permanent disability, and \$5 each for life pensions and death benefits. Carve-out programs incurred \$65 per claim in vocational rehabilitation costs, and \$101 per claim in medical-legal expenses

**Table 3.2: Average Incurred Cost per Claim by Cost Component 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Average Incurred Cost (3201.5)</b>	<b>\$19,990</b>	<b>\$19,645</b>	<b>\$20,449</b>	<b>\$19,683</b>	<b>\$21,648</b>	<b>\$12,722</b>
Medical Services	\$7,941	\$10,728	\$9,302	\$8,446	\$8,245	\$4,801
Temporary Disability	\$7,577	\$5,663	\$7,159	\$7,792	\$7,798	\$5,735
Permanent Disability	\$3,542	\$2,331	\$2,921	\$2,749	\$4,024	\$1,920
Life Pensions	\$394	\$126	\$0	\$4	\$0	\$11
Death Benefits	\$0	\$357	\$708	\$247	\$1,299	\$12
Vocational Rehab	\$325	\$273	\$114	\$134	\$134	\$130
Medical-Legal	\$211	\$167	\$246	\$311	\$147	\$113
Reporting Programs (#)	13	16	19	19	19	19
Total Claims (#)	1,203	2,345	2,442	2,585	2,451	1,521
<b>3201.7 Non-Construction Programs</b>						
<b>Average Incurred Cost (3201.7)</b>			<b>\$1,668</b>	<b>\$15,888</b>	<b>\$10,697</b>	<b>\$7,493</b>
Medical Services			\$1,668	\$8,773	\$4,664	\$4,928
Temporary Disability			\$0	\$2,707	\$5,244	\$2,153
Permanent Disability			\$0	\$4,408	\$631	\$312
Life Pensions			\$0	\$0	\$0	\$0
Death Benefits			\$0	\$0	\$0	\$0
Vocational Rehab			\$0	\$0	\$15	\$9
Medical-Legal			\$0	\$0	\$142	\$91
Reporting Programs (#)			1	1	4	4
Total Claims (#)			1	6	913	1,761
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Average Incurred Cost (Total)</b>	<b>\$19,990</b>	<b>\$19,645</b>	<b>\$20,441</b>	<b>\$19,674</b>	<b>\$18,676</b>	<b>\$9,916</b>
Medical Services	\$7,941	\$10,728	\$9,299	\$8,447	\$7,274	\$4,869
Temporary Disability	\$7,577	\$5,663	\$7,156	\$7,781	\$7,105	\$3,813
Permanent Disability	\$3,542	\$2,331	\$2,920	\$2,753	\$3,103	\$1,057
Life Pensions	\$394	\$126	\$0	\$4	\$0	\$5
Death Benefits	\$0	\$357	\$707	\$247	\$946	\$5
Vocational Rehab	\$325	\$273	\$114	\$133	\$102	\$65
Medical-Legal	\$211	\$167	\$246	\$310	\$146	\$101
Reporting Programs (#)	13	16	20	20	23	23
Total Claims (#)	1,203	2,345	2,443	2,591	3,364	3,282

In 2009, construction programs incurred on average \$12,722 per claim, which was \$5,229 (41 percent) greater than the \$7,493 incurred by non-construction programs. Construction programs incurred \$4,801 for medical services, which was only 3 percent less than the \$4,928 incurred for medical

services for non-construction claims. Construction programs averaged incurred disability costs of \$5,735 for temporary disability, \$1,920 for permanent disability, \$11 for life pensions, and \$12 for death benefits. Non-construction programs incurred disability costs on average 62 percent less for temporary disability (\$2,153), and 84 percent less for permanent disability (\$312). Non-construction programs incurred no life pension or death benefit costs in 2009.

In 2009, construction programs incurred \$130 per claim in vocational rehabilitation costs; non-construction programs incurred \$9 per claim. Construction programs incurred \$113 per claim in medical-legal services; non-construction incurred \$91, or 19 percent less per claim.

**(4) Number of Litigated Claims, Including the Number of Claims Submitted to Mediation, to Arbitration, to the Workers' Compensation Appeals Board (WCAB), or to the Court of Appeal**

California Code of Regulations, title 8, section 10203(b)(11) requires carve-outs to submit data on the number of claims resolved before mediation, at or after mediation, at or after arbitration, at or after the Workers' Compensation Appeals Board, and at or after the Court of Appeal (Table 4.1).

**Table 4.1: Number of Claims Resolved at Litigation by Type 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b># Reporting Programs (3201.5)</b>	13	16	19	19	19	19
Before Mediation	510	941	1,959	1,945	1,721	1,025
At Mediation	20	29	71	71	116	55
At Arbitration	7	6	26	15	19	12
At WCAB	5	5	7	12	1	5
At Court of Appeal	0	2	0	0	0	0
<b>Total Litigated Claims</b>	<b>542</b>	<b>983</b>	<b>2,063</b>	<b>2,043</b>	<b>1,857</b>	<b>1,097</b>
<b>3201.7 Non-Construction Programs</b>						
<b># Reporting Programs (3201.7)</b>			1	1	4	4
Before Mediation			1	4	919	1,842
At Mediation			0	0	2	4
At Arbitration			0	0	0	0
At WCAB			0	0	0	0
At Court of Appeal			0	0	0	0
<b>Total Litigated Claims</b>			<b>1</b>	<b>4</b>	<b>921</b>	<b>1,846</b>
<b>3201.5 and 3201.7 Total Programs</b>						
<b># Reporting Programs (Total)</b>	13	16	20	20	23	23
Before Mediation	510	941	1,960	1,949	2,640	2,867
At Mediation	20	29	71	71	118	59
At Arbitration	7	6	26	15	19	12
At WCAB	5	5	7	12	1	5
At Court of Appeal	0	2	0	0	0	0
<b>Total Litigated Claims</b>	<b>542</b>	<b>983</b>	<b>2,064</b>	<b>2,047</b>	<b>2,778</b>	<b>2,943</b>

In 2009, carve-out programs reported resolving 59 litigation claims at mediation, 12 at arbitration, five at the WCAB, and none at the Court of Appeals. Of these litigated claims, non-construction programs litigated only four claims at mediation; the rest were litigated by construction carve-outs.

**Validity of Claims Data Received**

The validity of claims data received during the reporting process is determined by comparing claims data from the carve-out reports submitted by individual programs under the following three Labor Code sections:

- 1) Labor Code section 10203(b)(8): Total claims filed (medical-only + indemnity claims)
- 2) Labor Code section 10203(b)(9): Claims resolved and unresolved
- 3) Labor Code section 10203(b)(11): Claims resolved before mediation, at or after mediation, at or after arbitration, at or after the WCAB, at or after the Court of Appeals

According to the reporting regulations, the total claims filed per year under section 10203(b)(8) should equal the number of claims resolved and unresolved under section 10203(b)(9). In 2009, the number of claims reported as resolved or unresolved (3,387) exceeded the total claims filed (3,282) (Table 4.2).

**Table 4.2: Comparing Reported Labor Code section 10203(b)(8): Total Claims Filed versus Labor Code section 10203(b)(9) Claims Resolved and Unresolved**

	2004	2005	2006	2007	2008	2009
<b>Total Claims Resolved and Unresolved LC section 10203 (b)(9)</b>	935	2,262	2,430	2,577	3,342	3,387
<b>Total Claims Filed LC section 10203 (b)(8)</b>	1,203	2,345	2,443	2,591	3,364	3,282
<b>Ratio of Total Claims Resolved/Unresolved versus Claims Filed</b>	<b>0.78</b>	<b>0.97</b>	<b>1</b>	<b>1</b>	<b>0.99</b>	<b>1.03</b>

An evaluation of the data reported by individual programs (Appendix A, Table A4.2) shows that 20 out of 23 programs reported total claims filed data that matched their total claims resolved and unresolved data. Two programs reported total numbers for resolved and unresolved claims that exceeded their total claims filed, and one program’s resolved and unresolved claims accounted for only about half of its total claims filed.

The sum of the number of claims resolved at each stage of litigation under section 10203(b)(11) should equal or exceed the number of claims in the previous calendar year that were resolved under section 10203(b)(9). In 2009, the number of claims reported as being resolved before or after litigation under section 10203(b)(11) was less than the number of claims reported as resolved under 10203(b)(9) (Table 4.3).

A closer examination of the individual program data (Appendix A, Table A4.3) shows that 16 of 23 programs reported an equal number of resolved claims and claims resolved before or after litigation. Six programs reported fewer resolved claims than claims resolved before or after litigation. One program reported a number of claims resolved before or after litigation, which was 222 percent greater than its resolved claims.

**Table 4.3: Comparing Labor Code section 10203(b)(11): Number of Claims Resolved Before, At, and After Litigation to Labor Code section 10203(b)(9): Number of Resolved Claims 2004-2009**

	2004	2005	2006	2007	2008	2009
Claims resolved before, at, and after litigation stages LC section 10203 (b)(11)	542	983	2,064	2,047	2,778	2,943
Claims resolved LC section 10203 (b) (9)	866	1,991	2,169	2,308	2,984	3,028
Ratio of claims resolved LC section 10203 (b)(11) to claims resolved LC section 10203 (b)(9)	<b>0.63</b>	<b>0.49</b>	<b>0.95</b>	<b>0.89</b>	<b>0.93</b>	<b>0.97</b>

**(5) The number of claims resolved<sup>9</sup> prior to arbitration**

California Code of Regulations, title 8, section 10203(b)(11) requires carve-outs to report the number of claims resolved at different stages of litigation. The two stages that can be considered prior to arbitration are (1) the number of claims resolved before mediation, and (2) the number resolved at or after mediation. Under this reporting requirement, claims resolved prior to arbitration do not include those resolved at or after arbitration, at or after the WCAB, or at or after the Court of Appeals (Table 5.1).

**Table 5.1: Number and Percentage of Claims Resolved Prior to Arbitration**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
(3201.5) Reporting Programs (#)	13	16	19	19	19	19
Resolved Prior to Arbitration LC section (b)(11) (#)	530	970	2,030	2,016	1,837	1,080
Resolved LC section (b)(11) (#)	542	983	2,063	2,043	1,857	1,097
Percentage Resolved Prior to Arbitration (%)	97.8%	98.7%	98.4%	98.7%	98.9%	98.5%
<b>3201.7 Non-Construction Programs</b>						
(3201.7) Reporting Programs (#)			1	1	4	4
Resolved Prior to Arbitration LC section (b)(11) (#)			1	4	921	1,846
Resolved LC section (b)(11) (#)			1	4	921	1,846
Percentage Resolved Prior to Arbitration (%)			100%	100%	100%	100%
<b>3201.5 and 3201.7 Total Programs</b>						
(Total) Reporting Programs (#)	13	16	20	20	23	23
Resolved Prior to Arbitration LC section (b)(11) (#)	530	970	2,031	2,020	2,758	2,926
Resolved LC section (b)(11) (#)	542	983	2,064	2,047	2,778	2,943
Percentage Resolved Prior to Arbitration (%)	97.8%	98.7%	98.4%	98.7%	99.3%	99.4%

In 2009, carve-out programs resolved 2,926 claims prior to arbitration, which was 99 percent of all claims filed. Construction programs resolved 1,080 claims (99 percent), and non-construction programs resolved 1,846 (100 percent).

<sup>9</sup> A resolved claim for the purpose of this report is defined in section 10203(b)(9) as one in which ultimate liability has been determined, even though payments may be made beyond the reporting period.

## **(6) Projected incurred and actual costs<sup>10</sup> of claims**

California Code of Regulations, title 8, section 10203(b)(8)B. requires that carve-out programs report the total amount of paid costs and incurred costs for claims filed in each of the following categories (Tables 6.1 and 6.2):

- Medical Services
- Temporary Disability
- Permanent Disability
- Life Pensions
- Death Benefits
- Vocational Rehabilitation
- Medical-Legal Expenses

In 2009, carve-out programs paid \$16,339,173 in claim costs, a 54 percent decrease from the \$35,103,852 paid in 2008 (Table 6.1). Carve-outs paid \$7,090,387 in medical-services, \$8,566,584 in temporary disability, \$410,727 in permanent disability, \$17,267 in life pensions, \$18,015 in death benefits, \$4,000 in vocational rehabilitation, and \$232,194 in medical-legal expenses. Medical services accounted for 44 percent of all paid costs and temporary disability, 52 percent. The remaining cost categories accounted for less than 6 percent of total paid costs.

In 2009, construction programs paid \$9,572,317 in claims, an \$18,170,178 (66 percent) decrease from the \$27,742,495 paid in 2008. Construction carve-outs paid costs for medical services were \$4,115,811, temporary disability payments \$4,987,246, permanent disability payments \$309,311, life pension payments \$17,267, and death benefit payments \$18,015, vocational rehabilitation \$4,000 and medical-legal expenses, \$120,667. For construction programs, 43 percent of payments were for medical services and 52 percent were for temporary disability. Permanent disability, life pensions, death benefits, vocational rehabilitation, and medical-legal expenses accounted for 5 percent of total payments.

Non-construction carve-out programs paid \$6,766,856 for claims filed in 2009, a \$594,502 (8 percent) decrease from the \$7,361,358 paid in 2008. Non-construction programs paid \$2,974,575 for medical services, \$3,579,338 for temporary disability, \$101,415 for permanent disability and \$111,527 in medical-legal expenses, but did not pay for life pensions, death benefits, or vocational rehabilitation. Forty-four percent of total payments were for medical services, 53 percent for temporary disability, and 3 percent for permanent disability and medical-legal expenses.

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<sup>10</sup> Actual cost is reported under California Code of Regulations, title 8, section 10203 as paid cost.

**Table 6.1: Paid Cost by Cost Component 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Paid Cost (3201.5)</b>	<b>\$14,621,415</b>	<b>\$23,520,556</b>	<b>\$34,387,366</b>	<b>\$33,627,925</b>	<b>\$27,742,495</b>	<b>\$9,572,317</b>
Medical Services	\$6,200,467	\$11,905,140	\$15,990,214	\$12,709,050	\$10,793,295	\$4,115,811
Temporary Disability	\$5,744,315	\$8,965,471	\$13,346,864	\$17,047,327	\$14,333,470	\$4,987,246
Permanent Disability	\$1,918,633	\$1,506,638	\$4,111,012	\$2,911,261	\$1,599,975	\$309,311
Life Pensions	\$473,537	\$295,360	\$0	\$8,752	\$0	\$17,267
Death Benefits	\$0	\$507,013	\$455,652	\$323,655	\$777,663	\$18,015
Vocational Rehab	\$49,264	\$54,189	\$41,470	\$18,993	\$6,019	\$4,000
Medical-Legal	\$235,199	\$286,745	\$442,154	\$608,887	\$232,072	\$120,667
Reporting Programs (#)	13	16	19	19	19	19
Total Claims (#)	1,203	2,345	2,442	2,585	2,451	1,521
<b>3201.7 Non-Construction Programs</b>						
<b>Paid Cost (3201.7)</b>			<b>\$1,668</b>	<b>\$95,330</b>	<b>\$7,361,358</b>	<b>\$6,766,856</b>
Medical Services			\$1,668	\$52,638	\$2,594,326	\$2,974,575
Temporary Disability			\$0	\$16,242	\$4,410,520	\$3,579,338
Permanent Disability			\$0	\$26,450	\$260,039	\$101,415
Life Pensions			\$0	\$0	\$0	\$0
Death Benefits			\$0	\$0	\$0	\$0
Vocational Rehab			\$0	\$0	\$0	\$0
Medical-Legal			\$0	\$0	\$96,473	\$111,527
Reporting Programs (#)			1	1	4	4
Total Claims (#)			1	6	913	1,761
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Paid Cost (total)</b>	<b>\$14,621,415</b>	<b>\$23,552,567</b>	<b>\$34,389,033</b>	<b>\$33,723,255</b>	<b>\$35,103,852</b>	<b>\$16,339,173</b>
Medical Services	\$6,200,467	\$11,937,151	\$15,991,881	\$12,761,688	\$13,387,621	\$7,090,387
Temporary Disability	\$5,744,315	\$8,965,471	\$13,346,864	\$17,063,569	\$18,743,990	\$8,566,584
Permanent Disability	\$1,918,633	\$1,506,638	\$4,111,012	\$2,937,712	\$1,860,014	\$410,727
Life Pensions	\$473,537	\$295,360	\$0	\$8,752	\$0	\$17,267
Death Benefits	\$0	\$507,013	\$455,652	\$323,655	\$777,663	\$18,015
Vocational Rehab	\$49,264	\$54,189	\$41,470	\$18,993	\$6,019	\$4,000
Medical-Legal	\$235,199	\$286,745	\$442,154	\$608,887	\$328,545	\$232,194
Reporting Programs (#)	13	16	20	20	23	23
Total Claims (#)	1,203	2,345	2,443	2,591	3,364	3,282

In 2009, carve-outs incurred \$32,545,150 in costs, a \$30,279,621 (48 percent) decrease from a high of \$62,824,771 incurred in 2008 (Table 6.2). Carve-outs incurred \$15,980,133 in medical service costs, \$12,514,209 temporary disability payments, \$3,469,911 in permanent disability, \$17,267 for life pensions, \$18,015 for death benefits, \$214,000 for vocational rehabilitation and \$331,616 for medical-legal expenses. In 2009, 49 percent of incurred costs were for medical services, 38 percent for temporary disability costs, and 11 percent for permanent disability.

**Table 6.2: Incurred Cost by Cost Component 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Incurred Cost (3201.5)</b>	<b>\$24,048,036</b>	<b>\$46,014,048</b>	<b>\$49,936,802</b>	<b>\$50,880,870</b>	<b>\$53,058,858</b>	<b>\$19,350,737</b>
Medical Services	\$9,552,970	\$25,102,282	\$22,715,663	\$21,832,792	\$20,209,605	\$7,302,698
Temporary Disability	\$9,114,772	\$13,279,934	\$17,481,251	\$20,143,586	\$19,113,881	\$8,723,023
Permanent Disability	\$4,261,378	\$5,466,083	\$7,134,170	\$7,105,378	\$9,863,281	\$2,919,917
Life Pensions	\$473,436	\$295,403	\$0	\$10,000	\$0	\$17,267
Death Benefits	\$0	\$837,199	\$1,727,915	\$639,425	\$3,183,119	\$18,015
Vocational Rehab	\$391,135	\$641,129	\$277,524	\$345,344	\$327,900	\$198,000
Medical-Legal	\$254,344	\$392,018	\$600,280	\$804,345	\$361,071	\$171,816
Reporting Programs (#)	13	16	19	19	19	19
Total Claims (#)	1,203	2,345	2,442	2,585	2,451	1,521
<b>3201.7 Non-Construction Programs</b>						
<b>Incurred Cost (3201.5)</b>			<b>\$1,668</b>	<b>\$95,330</b>	<b>\$9,765,913</b>	<b>\$13,194,414</b>
Medical Services			\$1,668	\$52,638	\$4,258,552	\$8,677,434
Temporary Disability			\$0	\$16,242	\$4,788,127	\$3,791,186
Permanent Disability			\$0	\$26,450	\$575,794	\$549,993
Life Pensions			\$0	\$0	\$0	\$0
Death Benefits			\$0	\$0	\$0	\$0
Vocational Rehab			\$0	\$0	\$14,000	\$16,000
Medical-Legal			\$0	\$0	\$129,440	\$159,800
Reporting Programs (#)			1	1	4	4
Total Claims (#)			1	6	913	1,761
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Incurred Cost (Total)</b>	<b>\$24,048,036</b>	<b>\$46,068,464</b>	<b>\$49,938,470</b>	<b>\$50,976,200</b>	<b>\$62,824,771</b>	<b>\$32,545,150</b>
Medical Services	\$9,552,970	\$25,156,698	\$22,717,331	\$21,885,430	\$24,468,158	\$15,980,133
Temporary Disability	\$9,114,772	\$13,279,934	\$17,481,251	\$20,159,827	\$23,902,008	\$12,514,209
Permanent Disability	\$4,261,378	\$5,466,083	\$7,134,170	\$7,131,829	\$10,439,075	\$3,469,911
Life Pensions	\$473,436	\$295,403	\$0	\$10,000	\$0	\$17,267
Death Benefits	\$0	\$837,199	\$1,727,915	\$639,425	\$3,183,119	\$18,015
Vocational Rehab	\$391,135	\$641,129	\$277,524	\$345,344	\$341,900	\$214,000
Medical-Legal	\$254,344	\$392,018	\$600,280	\$804,345	\$490,511	\$331,616
Reporting Programs (#)	13	16	20	20	23	23
Total Claims (#)	1,203	2,345	2,443	2,591	3,364	3,282

Construction programs incurred \$19,350,737 for claims filed in 2009, a \$33,708,121 (64 percent) decrease from the \$53,058,858 incurred in 2008. Component incurred costs were \$7,302,698 for medical services, \$8,723,023 for temporary disability, \$2,919,917 for permanent disability, \$17,267 for life pensions, \$18,015 for death benefits, \$198,000 in vocational rehabilitation, and \$171,816 in medical-legal expenses. In 2009, 38 percent of total incurred costs were for medical services, 45 percent were for temporary disability, and 15 percent were for permanent disability. The remaining cost categories accounted for less than 2 percent of total incurred costs.

In 2009, non-construction programs incurred \$13,194,414 in claim costs, which was a \$3,428,501 (35 percent) more than the \$9,765,913 in 2008. Non-construction programs incurred \$8,677,434 in medical service costs, \$3,791,186 in temporary disability, \$549,993 in permanent disability, \$16,000 in

vocational rehabilitation, and \$159,800 in medical-legal expenses. Non-construction programs did not incur costs for life pensions or death benefits in 2009. Medical services were 66 percent of the total incurred costs, temporary disability payments were 29 percent, and permanent disability payments were 4 percent.

**(7) Safety History**

To determine safety history, California Code of Regulations, title 8, section 10203(b)(14) requires that carve-out programs report incidence rates based on the number of injuries and illness as per 100 full-time employees. For this calculation, carve-outs first multiply the number of injuries and illnesses reported on the United States Department of Labor OSHA form no.300 by 200,000<sup>11</sup>, then divide by the number of person-hours worked, reported under California Code of Regulations, title 8, section 10203(b)(6).

However, because of reporting issues, the safety history information provided by carve-outs currently serves more as accounting of the completeness of record keeping than an accounting of incidence rates. OSHA requires employers to file an injury and/or illness report using form no. 300 if a work-related injury results in death, loss of consciousness, days away from work, restricted work activity, and/or medical care beyond first aid.

In 2009, carve-out programs reported 2,694 injuries and illnesses on OSHA form 300, or 82 percent of the 3,282 claims filed. This was an improvement over 2008, when the number of reported form 300 injuries and illnesses was 1,587, only 47 percent of total claims filed (Table 7.1).

**Table 7.1: Number of OSHA Injuries and Illnesses 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Reporting Programs (#)</b>	13	16	19	19	19	19
<b>OSHA Injuries and Illnesses Reported (#)</b>	0	3	824	873	676	847
<b>Total Claims (#)</b>	1,203	2,345	2,442	2,585	2,451	1,521
<b>Percentage of OSHA forms to Claims Filed</b>	0.0%	0.1%	34%	34%	28%	56%
<b>3201.7 Non-Construction Programs</b>						
<b>Reporting Programs (#)</b>			1	1	4	4
<b>OSHA Injuries and Illnesses Reported (#)</b>			1	6	911	1,847
<b>Total Claims (#)</b>			1	6	913	1,761
<b>Percentage of OSHA forms to Claims Filed</b>			100%	100%	99.8%	105%
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Reporting Programs (#)</b>	13	16	20	20	23	23
<b>OSHA Injuries and Illnesses Reported (#)</b>	0	3	825	879	1,587	2,694
<b>Total Claims (#)</b>	1,203	2,345	2,443	2,591	3,364	3,282
<b>Percentage of OSHA forms to Claims Filed</b>	0%	0.1%	34.0%	34%	47%	82%

<sup>11</sup> The 200,000 hours in the formula represents the equivalent of 100 employees working 40 hours per week, 50 weeks per year, and provides the standard base for the incidence rates. Bureau of Labor Statistics, U.S. Department of Labor, Survey of Occupational Injuries and Illnesses, 2010 “How To Compute a Firm's Incidence Rate for Safety Management” <http://www.bls.gov/iif/osheval.htm>.

For construction programs, a significant portion of injuries and illnesses reported as claims to DWC are unaccounted for in the OSHA form no. 300 reports submitted by the carve-out programs. In addition, section 10203 (b)(6) of the regulations requires carve-out programs only to submit person-hours information for the previous year and not for the full four years covered by the majority of carve-out data; thus, a full report of safety history is not possible.

For construction, 847 injuries and illnesses were reported to OSHA, which was 56 percent of the 1,521 claims filed. In 2008, the total number reported to OSHA was 676, or 28 percent of the 2,451 claims filed. For non-construction programs in 2009, the number of illnesses and injuries reported to OSHA, 1,847, was 105 percent of the 1,761 claims filed. In 2008, OSHA form no. 300s accounted for 99.8 percent of the claims filed.

**(8) The number of workers participating in vocational rehabilitation programs**

Despite the 2009 discontinuation of vocational rehabilitation programs in the California workers' compensation system, California Code of Regulations, title 8, section 10203(b)(15) continues to require carve-outs to report the number of workers participating in vocational rehabilitation programs (Table 8.1).

**Table 8.1: Worker Participation in Vocational Rehabilitation 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Reporting Programs (#)</b>	13	16	19	19	19	19
<b>Vocational Rehab Participants(#)</b>	5	6	10	5	4	8
<b>3201.7 Non-Construction Programs</b>						
<b>Reporting Programs (#)</b>			1	1	4	4
<b>Vocational Rehab Participants(#)</b>			0	0	2	2
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Reporting Programs (#)</b>	13	16	20	20	23	23
<b>Vocational Rehab Participants(#)</b>	5	6	10	5	6	10

Since 2004, the number of participants in vocational rehabilitation has fluctuated annually between five and ten workers. In 2009, ten workers were covered by carve-outs participating in vocational rehabilitation programs.

**(9) The number of workers participating in light-duty or modified return-to-work programs**

California Code of Regulations, title 8, section 10203(b)(16) requires carve-outs to report the number of workers participating in light-duty or modified return-to-work programs. Table 9.1 compares the number of injured workers participating in light-duty or modified work programs. (Table 9.1)

In 2009, 881 workers participated in light-duty or modified work programs, up 650 (281 percent) from 2008, and up 735 (503 percent) from 2007. For 2009, 3.7 claims were filed for every one worker participating in light-duty or modified work, down from ratios of 14.6 to one in 2008 and 17.8 to one in 2007.

In 2009, 137 construction program workers participating in light-duty or modified work programs was 78 percent more than the 77 participating in 2008. The ratio of claims filed per each light-duty or modified work participant was 11.1 to one.

In 2009, 744 workers participated in light-duty or modified work programs offered by non-construction programs. The ratio of total claims filed to the number filed by light-duty or modified workers was 2.4 to one.

**Table 9.1: Worker Participation in Light-Duty or Modified Return-to-Work 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Programs</b>						
<b>Reporting Programs (#)</b>	13	16	19	19	19	19
<b>Total Claims Filed</b>	1,203	2,345	2,442	2,585	2,451	1,521
<b>Light-Duty and Modified Work Participants</b>	2	61	264	141	77	137
<b>Ratio Claims Filed to Light-Duty or Modified Work Participant</b>	601.5	38.4	9.3	18.3	31.8	11.1
<b>3201.7 Programs</b>						
<b>Reporting Programs (#)</b>			1	1	4	4
<b>Total Claims Filed</b>			1	6	913	1,761
<b>Light-Duty and Modified Work Participants</b>			1	5	154	744
<b>Ratio Claims Filed to Light-Duty or Modified Work Participant</b>			1	1.2	5.9	2.4
<b>3201.5 and 3201.7 Programs</b>						
<b>Reporting Programs (#)</b>	13	16	20	20	23	23
<b>Total Claims Filed</b>	1203	2345	2443	2591	3364	3282
<b>Light-Duty and Modified Work Participants</b>	2	61	265	146	231	881
<b>Ratio Claims Filed to Light-Duty or Modified Work Participant</b>	601.5	38.4	9.2	17.8	14.6	3.7

**(10) Overall Worker Satisfaction (3201.7 Programs only)**

In order to fulfill the reporting requirements of section 10203, non-construction carve-out programs are required to submit the results of a self-administered worker-satisfaction survey. For 2009, of the four reporting 3201.7 programs, only one submitted results. Two 3201.7 programs failed to respond to repeated requests for results during the follow-up phase of the reporting process. One replied that because of staffing cuts, it did not have time to submit results for the previous year. The one carve-out program that reported results for 2009 found that 34 percent of injured workers surveyed were satisfied or very satisfied with their ADR/carve-out program.

In 2008, a different ADR/carve-out program reported that overall 78.3 percent of injured workers surveyed were satisfied with the way their workers' compensation claims were handled by their ADR/carve-out program.

**V. Data Findings under Labor Code section 3201.9**

The WCIRB compared the average pricing level relative to pure premium rate level and average loss ratios of ADR/carve-out programs versus those of all other employers for the policy years 2005 through 2007. Columns A and B of Table V.1 display the average ratio of premium at insurer rates<sup>12</sup>

<sup>12</sup> After all rating plan adjustments including schedule rating premium credits and debits; excludes the impact of deductible credits or retrospective rating premium adjustments.

to premium at pure premium rates (modified by experience). Columns C and D display the average ratio of reported incurred losses to premium. Using the North American Industrial Classification (NAICS), the information is shown separately for experience reported within classifications mapped to the construction sector, the manufacturing sector, and other sectors combined. For comparison purposes, the information is also shown for the statewide experience of employers in all sectors.

**Table V.1: Comparison of Carve-Out Employers Ratio of Premium to Modified Pure Premium and Reported (Undeveloped, Incurred) Losses to Premium with All Other Employers for Policy Years 2005 through 2007**

NAICS Industrial Sector Classifications	Ratio of Premium to Modified Pure Premium		Ratio of Reported (Incurred) Losses to Premium	
	Carve-Out Employers (A)	All Other Employers (B)	Carve-Out Employers (C)	All Other Employers (D)
Construction (NAICS 23)	1.531	1.622	0.308	0.322
Manufacturing (NAICS 31-33)	1.606	1.567	0.226	0.261
Other Sectors	1.571	1.575	0.278	0.268
<b>Total ALL Sectors</b>	<b>1.542</b>	<b>1.611</b>	<b>0.298</b>	<b>0.309</b>

As shown in Table V.1 (columns A & B), the average pricing level for carve-out employers relative to the modified pure-premium rates was generally less than for all other employers, except in the manufacturing sector. The average reported loss ratio<sup>13</sup> for policy years 2005 through 2007 is slightly less for carve-outs than for all other employers.

In summary, the 2005 through 2007 Unit Statistical Reporting data for carve-out employers suggests the rates charged on these policies after application of schedule rating credits and debits appear to be comparable to those charged on other policies. The rates charged and loss experiences incurred on these policies were generally comparable to other policies.

<sup>13</sup> These are losses reported as of the latest report level and have not been developed to an ultimate level. Final ultimate losses for those policy years will be considerably higher.

## Appendix A: Individual Program Data<sup>14</sup>

### (2) Number of Claims Filed

Table A2.1: Number of Total Claims Filed<sup>15</sup> 2004-2009

Program	2004	2005	2006	2007	2008	2009
A	121	476	237	251	186	127
B	490	643	463	454	455	267
C	122	75	122	157	122	77
D	158	248	330	364	484	114
E	19	17	11	35	7	37
F	116	210	188	154	143	106
G	21	226	19	18	5	29
H	1	3	30	20	15	10
I	109	262	233	370	349	212
J	4	18	19	18	5	29
K	13	35	37	48	32	30
L	23	47	102	64	52	41
M		5	16	9	12	8
N		11	8	3	13	9
O	6	18	8	8	6	4
P			0	1	1	0
Q			547	504	473	310
R		51	53	68	28	44
S			19	39	63	67
T			1	6	15	10
U					48	56
V					814	1,643
W					36	52
<b>Total Claims Filed</b>	<b>1,203</b>	<b>2,345</b>	<b>2,443</b>	<b>2,591</b>	<b>3,364</b>	<b>3,282</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

<sup>14</sup> For individual program data, programs lettered A-S represent construction programs, and programs lettered T-W represent non-construction programs.

<sup>15</sup> Total claims filed under section 10203(b)(8).

**Table A2.2: Number of Medical-Only Claims Filed 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	69	312	152	160	127	62
B	188	265	206	215	266	150
C	60	31	46	88	78	32
D	42	65	123	144	206	52
E	7	12	7	29	4	32
F	38	86	76	75	77	55
G	10	141	8	14	4	21
H	0	2	24	16	8	5
I	56	109	107	199	197	110
J	1	13	8	14	4	21
K	6	13	13	36	19	19
L	2	19	41	23	24	12
M		2	14	7	9	3
N		5	1	2	5	4
O	1	8	5	4	3	0
P			0	0	1	0
Q			248	224	222	177
R		36	25	39	9	19
S			7	16	28	32
T			1	4	9	3
U					18	25
V					385	692
W					19	28
<b>Total Medical-Only Claims Filed</b>	<b>480</b>	<b>1,119</b>	<b>1,112</b>	<b>1,309</b>	<b>1,722</b>	<b>1,554</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A2.3: Number of Indemnity Claims Filed 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	52	164	85	91	59	65
B	302	378	257	239	189	117
C	62	44	76	69	44	45
D	116	183	207	220	278	62
E	12	5	4	6	3	5
F	78	124	112	79	66	51
G	11	85	11	4	1	8
H	1	1	6	4	7	5
I	53	153	126	171	152	102
J	3	5	11	4	1	8
K	7	22	24	12	13	11
L	21	28	61	41	28	29
M		3	2	2	3	5
N		6	7	1	8	5
O	5	10	3	4	3	4
P			0	1	0	0
Q			299	280	251	133
R		15	28	29	19	25
S			12	23	35	35
T			0	2	6	7
U					30	31
V					429	951
W					17	24
<b>Total Indemnity Claims Filed</b>	<b>723</b>	<b>1,226</b>	<b>1,331</b>	<b>1,282</b>	<b>1,642</b>	<b>1,728</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A3.1: Average Paid Cost Per Claim 2004-2009**

**Table A3.2: Average Incurred Cost Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$9,001	\$6,566	\$4,672	\$5,606	\$5,022	\$4,634
B	\$15,597	\$10,730	\$12,386	\$12,754	\$9,523	\$4,383
C	\$4,058	\$18,118	\$4,832	\$8,372	\$7,104	\$6,765
D	\$13,057	\$13,313	\$13,756	\$6,773	\$8,570	\$6,352
E	\$6,619	\$27,259	\$9,258	\$6,638	\$42,776	\$6,111
F	\$17,352	\$16,719	\$17,750	\$16,212	\$12,747	\$5,698
G	\$3,328	\$3,329	\$21,527	\$10,232	\$9,740	\$8,018
H	\$95,447	\$26,067	\$17,496	\$17,889	\$15,713	\$6,067
I	\$7,961	\$13,271	\$19,041	\$13,689	\$12,731	\$7,333
J	\$15,665	\$5,243	\$21,527	\$10,232	\$9,740	\$8,018
K	\$4,327	\$2,146	\$13,573	\$1,732	\$13,323	\$6,208
L	\$1,348	\$4,297	\$18,771	\$8,028	\$33,316	\$14,709
M		\$170	\$599	\$1,312	\$751	\$3,978
N		\$5,713	\$4,707	\$17,436	\$9,839	\$9,412
O	\$1,719	\$2,642	\$16,473	\$2,802	\$2,481	\$7,409
P			\$0	\$21,986	\$197	\$0
Q			\$17,579	\$17,442	\$13,353	\$5,287
R		\$2,016	\$12,550	\$4,924	\$16,700	\$2,968
S			\$16,943	\$110,263	\$23,309	\$14,225
T			\$1,668	\$15,888	\$10,885	\$16,292
U					\$19,545	\$6,354
V					\$4,604	\$3,121
W					\$69,776	\$21,551
Average Paid Costs	\$12,154	\$10,044	\$14,077	\$13,016	\$10,435	\$4,978
Total Claims Filed	1,203	2,345	2,443	2,591	3,364	3,282
# Reporting Programs	13	16	20	20	23	23

Program	2004	2005	2006	2007	2008	2009
A	\$11,492	\$9,254	\$6,002	\$6,280	\$6,124	\$10,325
B	\$22,335	\$22,429	\$18,019	\$18,566	\$14,368	\$9,406
C	\$12,285	\$42,859	\$8,905	\$9,938	\$8,140	\$10,959
D	\$21,356	\$30,728	\$28,590	\$25,940	\$20,607	\$8,864
E	\$6,691	\$54,561	\$9,258	\$7,259	\$55,601	\$8,945
F	\$34,611	\$29,303	\$21,234	\$20,821	\$22,357	\$9,412
G	\$16,121	\$4,478	\$21,626	\$15,977	\$9,740	\$11,887
H	\$112,586	\$35,181	\$19,726	\$24,133	\$21,092	\$17,812
I	\$17,600	\$28,113	\$25,749	\$17,347	\$17,768	\$13,321
J	\$15,671	\$6,493	\$21,626	\$15,977	\$9,740	\$11,887
K	\$4,626	\$3,044	\$25,714	\$2,201	\$20,621	\$9,315
L	\$7,266	\$4,587	\$29,356	\$15,654	\$46,240	\$18,682
M		\$1,364	\$890	\$1,440	\$1,504	\$9,833
N		\$14,979	\$4,707	\$18,587	\$18,894	\$19,464
O	\$6,483	\$5,518	\$20,687	\$3,011	\$2,690	\$13,606
P			\$0	\$27,867	\$197	\$0
Q			\$23,148	\$25,418	\$33,135	\$9,550
R		\$2,596	\$13,351	\$7,367	\$21,246	\$4,111
S			\$32,130	\$112,730	\$73,057	\$62,067
T			\$1,668	\$15,888	\$19,805	\$44,110
U					\$31,192	\$18,632
V					\$6,707	\$6,445
W					\$69,777	\$21,551
Average Incurred Costs	\$19,990	\$19,645	\$20,441	\$19,674	\$18,676	\$9,916
Total Claims Filed	1,203	2,345	2,443	2,591	3,364	3,282
# Reporting Programs	13	16	20	20	23	23

(3) Average Cost Per Claim<sup>16</sup> By Cost Component

<sup>16</sup> Average cost per claim calculated using total claims filed per section 10203(b)(3). For average cost per claim calculated using the number of indemnity claims, see Appendix B, Tables B1-2.

**Average Medical Services Costs:**

**Table A3.3: Average Paid Medical Services Cost Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$5,651	\$2,898	\$2,442	\$3,363	\$1,961	\$3,929
B	\$6,193	\$5,528	\$5,072	\$4,764	\$3,690	\$1,682
C	\$2,193	\$12,648	\$3,314	\$2,720	\$3,045	\$2,467
D	\$4,226	\$6,645	\$8,913	\$4,567	\$3,883	\$2,787
E	\$1,645	\$20,103	\$4,194	\$2,667	\$18,747	\$2,199
F	\$7,771	\$6,968	\$7,648	\$5,495	\$4,776	\$2,573
G	\$2,160	\$1,168	\$12,118	\$3,528	\$4,862	\$2,489
H	\$50,065	\$9,329	\$10,660	\$9,488	\$8,329	\$2,455
I	\$4,398	\$7,794	\$6,031	\$4,990	\$5,093	\$2,753
J	\$3,848	\$1,778	\$12,118	\$3,528	\$4,862	\$2,489
K	\$146	\$863	\$10,035	\$931	\$8,537	\$4,073
L	\$651	\$1,705	\$9,853	\$3,049	\$3,705	\$4,999
M		\$169	\$469	\$864	\$256	\$593
N		\$3,486	\$1,553	\$6,653	\$1,974	\$1,864
O	\$1,199	\$2,118	\$8,200	\$2,762	\$1,992	\$1,488
P			\$0	\$7,706	\$197	\$0
Q			\$7,351	\$6,090	\$4,173	\$1,787
R		\$937	\$7,129	\$2,123	\$7,931	\$1,356
S			\$9,867	\$25,615	\$16,362	\$8,734
T			\$1,668	\$8,773	\$5,886	\$14,181
U					\$6,314	\$2,944
V					\$1,754	\$1,081
W					\$21,534	\$17,140
<b>Average Paid Medical Services Cost</b>	<b>\$5,154</b>	<b>\$5,090</b>	<b>\$6,546</b>	<b>\$4,925</b>	<b>\$3,980</b>	<b>\$2,160</b>
<b>Total Claims Filed</b>	<b>1,203</b>	<b>2,345</b>	<b>2,443</b>	<b>2,591</b>	<b>3,364</b>	<b>3,282</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A3.4: Average Incurred Medical Services Cost Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$7,799	\$5,094	\$2,746	\$3,372	\$2,472	\$4,809
B	\$6,491	\$11,526	\$6,197	\$5,725	\$4,897	\$3,076
C	\$8,138	\$32,511	\$3,813	\$3,509	\$3,355	\$4,015
D	\$6,499	\$17,350	\$18,457	\$19,086	\$13,935	\$3,951
E	\$1,716	\$47,405	\$4,194	\$2,726	\$19,704	\$2,365
F	\$15,718	\$15,434	\$8,663	\$6,838	\$5,830	\$4,116
G	\$10,456	\$1,902	\$12,118	\$4,753	\$4,862	\$3,389
H	\$64,500	\$12,494	\$11,897	\$14,462	\$11,861	\$11,103
I	\$10,991	\$13,736	\$7,347	\$6,673	\$7,447	\$5,253
J	\$3,853	\$3,023	\$12,118	\$4,753	\$4,862	\$3,389
K	\$444	\$1,761	\$22,104	\$1,338	\$15,679	\$5,998
L	\$710	\$1,996	\$18,760	\$7,495	\$12,550	\$8,226
M		\$169	\$760	\$991	\$829	\$643
N		\$10,456	\$1,553	\$6,962	\$3,402	\$4,053
O	\$5,616	\$3,687	\$9,412	\$2,971	\$2,115	\$5,113
P			\$0	\$13,350	\$197	\$0
Q			\$9,080	\$8,648	\$7,439	\$3,887
R		\$1,464	\$7,696	\$4,420	\$9,929	\$1,897
S			\$12,074	\$39,516	\$24,654	\$19,376
T			\$1,668	\$8,773	\$10,870	\$30,762
U					\$11,303	\$9,678
V					\$3,412	\$4,222
W					\$21,534	\$17,140
<b>Average Incurred Medical Services Cost</b>	<b>\$7,941</b>	<b>\$10,728</b>	<b>\$9,299</b>	<b>\$8,447</b>	<b>\$7,274</b>	<b>\$4,869</b>
<b>Total Claims Filed</b>	<b>1,203</b>	<b>2,345</b>	<b>2,443</b>	<b>2,591</b>	<b>3,364</b>	<b>3,282</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Average Temporary Disability Costs:**

**Table A3.5: Average Paid Temporary Disability Cost  
Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$2,392	\$2,984	\$1,513	\$1,401	\$2,696	\$295
B	\$6,044	\$4,225	\$5,481	\$6,595	\$5,023	\$2,655
C	\$660	\$4,903	\$402	\$4,251	\$2,905	\$3,681
D	\$6,674	\$4,980	\$4,155	\$1,610	\$3,633	\$3,196
E	\$2,659	\$6,728	\$3,208	\$3,120	\$23,815	\$3,391
F	\$7,706	\$5,989	\$7,516	\$8,178	\$6,315	\$3,035
G	\$1,116	\$1,307	\$8,591	\$6,070	\$3,478	\$4,845
H	\$16,468	\$13,291	\$4,857	\$6,681	\$5,592	\$3,612
I	\$2,734	\$4,619	\$8,347	\$7,040	\$6,729	\$4,256
J	\$6,175	\$3,091	\$8,591	\$6,070	\$3,478	\$4,845
K	\$3,710	\$1,265	\$1,022	\$791	\$4,175	\$1,668
L	\$0	\$2,591	\$6,657	\$4,816	\$29,382	\$9,069
M		\$0	\$130	\$33	\$0	\$3,060
N		\$2,225	\$2,921	\$10,783	\$7,116	\$7,478
O	\$520	\$524	\$4,717	\$40	\$0	\$5,372
P			\$0	\$11,067	\$0	\$0
Q			\$7,501	\$8,747	\$7,625	\$3,182
R		\$1,025	\$3,486	\$1,369	\$5,841	\$1,493
S			\$5,102	\$82,836	\$5,914	\$5,066
T			\$0	\$2,707	\$3,264	\$1,772
U					\$10,478	\$2,100
V					\$2,611	\$1,957
W					\$48,149	\$4,411
<b>Average Paid Temporary Disability Cost</b>	<b>\$4,775</b>	<b>\$3,823</b>	<b>\$5,463</b>	<b>\$6,586</b>	<b>\$5,572</b>	<b>\$2,610</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A3.6: Average Incurred Temporary Disability Cost  
Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$2,392	\$3,267	\$1,987	\$1,897	\$3,211	\$4,633
B	\$10,089	\$6,817	\$7,549	\$9,157	\$5,952	\$4,276
C	\$2,102	\$5,230	\$3,580	\$4,460	\$3,410	\$4,951
D	\$9,344	\$8,102	\$5,833	\$4,326	\$4,045	\$4,505
E	\$2,659	\$6,728	\$3,208	\$3,120	\$26,672	\$3,503
F	\$12,435	\$8,433	\$8,156	\$9,894	\$7,946	\$4,347
G	\$2,329	\$1,578	\$8,690	\$6,430	\$3,478	\$5,091
H	\$16,468	\$13,293	\$4,857	\$6,827	\$6,242	\$4,719
I	\$3,476	\$8,906	\$10,814	\$8,068	\$7,257	\$6,547
J	\$6,175	\$3,091	\$8,690	\$6,430	\$3,478	\$5,091
K	\$3,710	\$1,265	\$1,027	\$792	\$4,253	\$2,840
L	\$5,808	\$2,591	\$7,169	\$7,475	\$33,299	\$9,433
M		\$315	\$130	\$33	\$179	\$5,785
N		\$3,061	\$2,921	\$11,459	\$12,724	\$13,461
O	\$867	\$859	\$4,717	\$40	\$0	\$7,737
P			\$0	\$11,067	\$0	\$0
Q			\$9,784	\$11,976	\$11,733	\$4,625
R		\$1,025	\$3,486	\$1,440	\$6,683	\$1,989
S			\$11,587	\$39,811	\$26,642	\$23,666
T			\$0	\$2,707	\$3,947	\$3,123
U					\$14,174	\$4,259
V					\$2,844	\$2,004
W					\$48,149	\$4,411
<b>Average Incurred Temporary Disability Cost</b>	<b>\$7,577</b>	<b>\$5,663</b>	<b>\$7,156</b>	<b>\$7,781</b>	<b>\$7,105</b>	<b>\$3,813</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Average Permanent Disability Costs:**

**Table A3.7: Average Paid Permanent Disability Cost  
Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$658	\$596	\$661	\$557	\$322	\$306
B	\$2,294	\$488	\$1,301	\$955	\$561	\$24
C	\$812	\$542	\$1,060	\$958	\$856	\$532
D	\$2,023	\$1,322	\$536	\$507	\$699	\$324
E	\$758	\$427	\$1,152	\$598	\$214	\$286
F	\$1,406	\$1,219	\$2,303	\$1,798	\$1,104	\$54
G	\$0	\$338	\$818	\$635	\$1,400	\$251
H	\$28,914	\$3,447	\$1,979	\$1,721	\$1,792	\$0
I	\$612	\$694	\$3,143	\$1,361	\$552	\$288
J	\$1,572	\$342	\$818	\$635	\$1,400	\$251
K	\$215	\$0	\$2,502	\$0	\$575	\$457
L	\$604	\$0	\$1,999	\$88	\$217	\$474
M		\$0	\$0	\$415	\$496	\$324
N		\$0	\$173	\$0	\$617	\$0
O	\$0	\$0	\$3,436	\$0	\$489	\$550
P			\$0	\$3,213	\$0	\$0
Q			\$2,401	\$1,940	\$678	\$144
R		\$55	\$1,936	\$1,309	\$1,327	\$120
S			\$1,930	\$1,662	\$712	\$94
T			0	\$4,408	\$1,735	\$338
U					\$1,791	\$455
V					\$178	\$44
W					\$94	\$0
<b>Average Paid Permanent Disability Cost</b>	<b>\$1,595</b>	<b>\$642</b>	<b>\$1,683</b>	<b>\$1,134</b>	<b>\$553</b>	<b>\$125</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A3.8: Average Incurred Permanent Disability Cost  
Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$665	\$730	\$1,123	\$570	\$368	\$598
B	\$4,459	\$3,268	\$2,619	\$2,334	\$1,360	\$1,839
C	\$1,632	\$4,293	\$1,374	\$1,348	\$1,005	\$1,811
D	\$4,899	\$3,122	\$2,083	\$2,434	\$1,168	\$350
E	\$758	\$427	\$1,152	\$988	\$8,082	\$2,464
F	\$5,257	\$2,664	\$3,762	\$2,776	\$2,078	\$746
G	\$3,336	\$457	\$818	\$4,128	\$1,400	\$2,562
H	\$30,578	\$8,397	\$2,972	\$2,844	\$2,988	\$1,990
I	\$2,512	\$4,493	\$5,133	\$2,093	\$1,511	\$1,320
J	\$1,572	\$342	\$818	\$4,128	\$1,400	\$2,562
K	\$215	\$0	\$2,568	\$61	\$625	\$467
L	\$655	\$0	\$3,163	\$569	\$378	\$802
M		\$880	\$0	\$415	\$496	\$2,904
N		\$1,460	\$173	\$0	\$2,463	\$1,436
O	\$0	\$972	\$6,438	\$0	\$575	\$757
P			\$0	\$3,450	\$0	\$0
Q			\$3,690	\$3,826	\$12,751	\$667
R		\$88	\$2,170	\$1,338	\$3,033	\$225
S			\$8,425	\$33,253	\$21,440	\$18,694
T			\$0	\$4,408	\$4,055	\$8,626
U					\$4,066	\$2,978
V					\$389	\$181
W					\$94	\$0
<b>Average Incurred Permanent Disability Cost</b>	<b>\$5,894</b>	<b>\$4,458</b>	<b>\$5,360</b>	<b>\$5,563</b>	<b>\$6,358</b>	<b>\$2,008</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Average Life Pension Costs:**

**Table A3.9: Average Paid Life Pension Costs  
Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$204	\$0	\$0	\$0	\$0	\$0
B	\$805	\$314	\$0	\$0	\$0	\$0
C	\$0	\$0	\$0	\$0	\$0	\$0
D	\$0	\$0	\$0	\$24	\$0	\$0
E	\$0	\$0	\$0	\$0	\$0	\$0
F	\$351	\$0	\$0	\$0	\$0	\$0
G	\$0	\$412	\$0	\$0	\$0	\$0
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$0	\$0	\$0	\$0	\$0	\$0
J	\$3,415	\$0	\$0	\$0	\$0	\$0
K	\$0	\$0	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$0
N		\$0	\$0	\$0	\$0	\$0
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$0	\$0	\$0	\$56
R		\$0	\$0	\$0	\$0	\$0
S			\$0	\$0	\$0	\$0
T			\$0	\$0	\$0	\$0
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Average Paid Life Pension Costs</b>	<b>\$394</b>	<b>\$126</b>	<b>\$0</b>	<b>\$3</b>	<b>\$0</b>	<b>\$5</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A3.10: Average Incurred Life Pension Costs  
Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$204	\$0	\$0	\$0	\$0	\$0
B	\$805	\$315	\$0	\$0	\$0	\$0
C	\$0	\$0	\$0	\$0	\$0	\$0
D	\$0	\$0	\$0	\$27	\$0	\$0
E	\$0	\$0	\$0	\$0	\$0	\$0
F	\$351	\$0	\$0	\$0	\$0	\$0
G	\$0	\$412	\$0	\$0	\$0	\$0
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$0	\$0	\$0	\$0	\$0	\$0
J	\$3,415	\$0	\$0	\$0	\$0	\$0
K	\$0	\$0	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$0
N		\$0	\$0	\$0	\$0	\$0
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$0	\$0	\$0	\$56
R		\$0	\$0	\$0	\$0	\$0
S			\$0	\$0	\$0	\$0
T			\$0	\$0	\$0	\$0
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Average Incurred Life Pension Costs</b>	<b>\$394</b>	<b>\$126</b>	<b>\$0</b>	<b>\$4</b>	<b>\$0</b>	<b>\$5</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Average Death Benefit Costs:**

**Table A3.11: Average Paid Death Benefit Costs  
Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$0	\$0	\$0	\$0	\$0	\$0
B	\$0	\$23	\$330	\$238	\$181	\$0
C	\$0	\$0	\$0	\$0	\$0	\$0
D	\$0	\$205	\$93	\$0	\$334	\$0
E	\$0	\$0	\$0	\$0	\$0	\$0
F	\$0	\$2,101	\$0	\$701	\$533	\$0
G	\$0	\$0	\$0	\$0	\$0	\$0
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$0	\$0	\$1,167	\$0	\$283	\$0
J	\$0	\$0	\$0	\$0	\$0	\$0
K	\$0	\$0	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$0
N		\$0	\$0	\$0	\$0	\$0
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$0	\$214	\$674	\$58
R		\$0	\$0	\$0	\$1,429	\$0
S			\$0	\$0	\$0	\$0
T			\$0	\$0	\$0	\$0
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Average Paid Death Benefit Costs</b>	<b>\$0</b>	<b>\$216</b>	<b>\$187</b>	<b>\$125</b>	<b>\$231</b>	<b>\$5</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A3.12: Average Incurred Death Benefit Costs  
Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$0	\$0	\$0	\$0	\$0	\$0
B	\$0	\$23	\$1,289	\$933	\$1,872	\$0
C	\$0	\$0	\$0	\$0	\$0	\$0
D	\$0	\$1,536	\$2,078	\$0	\$1,417	\$0
E	\$0	\$0	\$0	\$0	\$0	\$0
F	\$0	\$2,101	\$0	\$701	\$5,957	\$0
G	\$0	\$0	\$0	\$0	\$0	\$0
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$0	\$0	\$1,912	\$0	\$1,246	\$0
J	\$0	\$0	\$0	\$0	\$0	\$0
K	\$0	\$0	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$0
N		\$0	\$0	\$0	\$0	\$0
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$0	\$214	\$674	\$58
R		\$0	\$0	\$0	\$1,429	\$0
S			\$0	\$0	\$0	\$0
T			\$0	\$0	\$0	\$0
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Average Incurred Death Benefit Costs</b>	<b>\$0</b>	<b>\$357</b>	<b>\$707</b>	<b>\$247</b>	<b>\$946</b>	<b>\$5</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Average Vocational Rehabilitation Costs:**

**Table A3.13: Average Paid Vocational Rehabilitation Costs Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$66	\$9	\$6	\$0	\$0	\$0
B	\$25	\$8	\$49	\$15	\$0	\$0
C	\$161	\$0	\$0	\$38	\$0	\$0
D	\$2	\$56	\$0	\$0	\$0	\$0
E	\$87	\$0	\$0	\$0	\$0	\$0
F	\$12	\$23	\$35	\$5	\$0	\$0
G	\$0	\$101	\$0	\$0	\$0	\$0
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$1	\$12	\$28	\$11	\$0	\$0
J	\$657	\$0	\$0	\$0	\$0	\$0
K	\$256	\$4	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$0
N		\$0	\$0	\$0	\$0	\$0
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$8	\$2	\$0	\$0
R		\$0	\$0	\$6	\$0	\$0
S			\$0	\$0	\$86	\$60
T			\$0	\$0	\$0	\$0
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Average Paid Vocational Rehabilitation Costs</b>	<b>\$41</b>	<b>\$23</b>	<b>\$17</b>	<b>\$7</b>	<b>\$2</b>	<b>\$1</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A3.14: Average Incurred Vocational Rehabilitation Costs Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$403	\$29	\$88	\$24	\$22	\$0
B	\$249	\$289	\$130	\$129	\$167	\$187
C	\$180	\$800	\$66	\$153	\$0	\$0
D	\$475	\$492	\$0	\$0	\$0	\$0
E	\$87	\$0	\$0	\$171	\$1,143	\$378
F	\$651	\$171	\$169	\$208	\$196	\$151
G	\$0	\$101	\$0	\$667	\$0	\$414
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$368	\$764	\$157	\$162	\$206	\$132
J	\$657	\$0	\$0	\$667	\$0	\$414
K	\$256	\$4	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$500
N		\$0	\$0	\$0	\$0	\$444
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$220	\$260	\$0	\$174
R		\$0	\$0	\$52	\$0	\$0
S			\$0	\$0	\$86	\$60
T			\$0	\$0	\$933	\$1,600
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Average Incurred Vocational Rehabilitation Costs</b>	<b>\$325</b>	<b>\$273</b>	<b>\$114</b>	<b>\$133</b>	<b>\$102</b>	<b>\$65</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Average Medical-Legal Expenses:**

**Table A3.15: Average Paid Medical-Legal Expenses Per Claim  
2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$29	\$79	\$50	\$284	\$42	\$105
B	\$236	\$143	\$152	\$187	\$67	\$22
C	\$232	\$25	\$55	\$404	\$298	\$86
D	\$132	\$105	\$58	\$64	\$21	\$45
E	\$1,471	\$0	\$704	\$253	\$0	\$234
F	\$107	\$418	\$248	\$37	\$19	\$36
G	\$51	\$3	\$0	\$0	\$0	\$432
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$216	\$152	\$325	\$287	\$74	\$36
J	\$0	\$32	\$0	\$0	\$0	\$432
K	\$0	\$14	\$14	\$10	\$37	\$10
L	\$93	\$0	\$262	\$76	\$13	\$166
M		\$1	\$0	\$0	\$0	\$0
N		\$2	\$61	\$0	\$133	\$69
O	\$0	\$0	\$120	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$319	\$448	\$201	\$60
R		\$0	\$0	\$116	\$172	\$0
S			\$44	\$150	\$235	\$271
T				\$0	\$0	\$0
U					\$962	\$855
V					\$62	\$39
W					\$0	\$0
<b>Average Paid Medical-Legal Expenses</b>	<b>\$196</b>	<b>\$122</b>	<b>\$181</b>	<b>\$235</b>	<b>\$98</b>	<b>\$71</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A3.16: Average Incurred Medical-Legal Expenses Per Claim 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$29	\$135	\$58	\$417	\$52	\$285
B	\$242	\$190	\$235	\$287	\$120	\$27
C	\$232	\$25	\$72	\$468	\$371	\$181
D	\$139	\$125	\$139	\$66	\$41	\$59
E	\$1,471	\$0	\$704	\$253	\$0	\$234
F	\$200	\$500	\$484	\$404	\$351	\$53
G	\$0	\$28	\$0	\$0	\$0	\$432
H	\$1,040	\$997	\$0	\$0	\$0	\$0
I	\$253	\$215	\$387	\$351	\$101	\$69
J	\$0	\$37	\$0	\$0	\$0	\$432
K	\$0	\$14	\$16	\$10	\$64	\$10
L	\$93	\$0	\$264	\$115	\$13	\$221
M		\$0	\$0	\$0	\$0	\$0
N		\$2	\$61	\$167	\$306	\$69
O	\$0	\$0	\$120	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$373	\$494	\$253	\$83
R		\$19	\$0	\$117	\$172	\$0
S			\$44	\$150	\$235	\$271
T			\$0	\$0	\$0	\$0
U					\$1,649	\$1,717
V					\$62	\$39
W					\$0	\$0
<b>Average Incurred Medical-Legal Expenses</b>	<b>\$211</b>	<b>\$167</b>	<b>\$246</b>	<b>\$310</b>	<b>\$146</b>	<b>\$101</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**(4) Number of Litigated Claims, Including the Number of Claims Submitted to Mediation, to Arbitration, to the Workers' Compensation Appeals Board (WCAB), or to the Court of Appeals**

**Table A4.1: Number of Litigated Claims Resolved<sup>17</sup>: Before Mediation (without Litigation) and, At Mediation, Arbitration. WCAB and Court of Appeals (with Litigation) 2004-2009**

Program	Total Claims Resolved Before Mediation (without Litigation)						Total Claims Resolved at Mediation, Arbitration, WCAB, or Court of Appeal						Total Claims Resolved with and without Litigation					
	2004	2005	2006	2007	2008	2009	2004	2005	2006	2007	2008	2009	2004	2005	2006	2007	2008	2009
A	39	91	218	226	171	111	0	5	2	1	0	2	39	96	220	227	171	113
B	116	253	317	329	259	162	21	12	54	54	79	34	137	265	371	383	338	196
C	110	48	90	128	112	46	0	0	0	2	1	0	110	48	90	130	113	46
D	106	166	295	314	402	67	0	7	20	26	36	21	106	173	315	340	438	88
E	0	0	8	34	4	35	0	0	0	0	0	0	0	0	8	34	4	35
F	57	128	156	124	119	89	6	2	8	6	7	2	63	130	164	130	126	91
G	20	47	19	15	5	26	0	4	0	0	0	0	20	51	19	15	5	26
H	0	2	22	14	10	5	1	2	4	1	2	0	1	4	26	15	12	5
I	54	148	111	166	128	96	2	9	6	1	1	0	56	157	117	167	129	96
J	1	0	19	15	5	26	0	0	0	0	0	0	1	0	19	15	5	26
K	0	0	30	42	20	20	0	0	2	1	3	2	0	0	32	43	23	22
L	1	3	96	59	50	21	2	1	4	0	0	4	3	4	100	59	50	25
M		0	16	8	12	8	0	0	0	1	0	0	0	0	16	9	12	8
N		7	6	2	6	4	0	0	1	0	1	1	0	7	7	2	7	5
O	6	18	7	6	6	9	0	0	0	0	0	0	6	18	7	6	6	9
P			0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0
Q			497	393	379	249	0	0	3	2	2	0	0	0	500	395	381	249
R		30	50	65	23	37	0	0	0	2	0	0	0	30	50	67	23	37
S			2	5	9	14	0	0	0	1	4	6	0	0	2	6	13	20
T			1	4	12	7	0	0	0	0	0	0	0	0	1	4	12	7
U					48	49					0	0	0	0	0	0	48	49
V					847	1,773					0	0	0	0	0	0	847	1,773
W					12	13					2	4	0	0	0	0	14	17
<b>Total Claims</b>	<b>510</b>	<b>9,41</b>	<b>1,960</b>	<b>1,949</b>	<b>2,640</b>	<b>2,867</b>	<b>32</b>	<b>42</b>	<b>104</b>	<b>98</b>	<b>138</b>	<b>76</b>	<b>542</b>	<b>983</b>	<b>2,064</b>	<b>2,047</b>	<b>2,778</b>	<b>2,943</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

<sup>17</sup> Resolved claim is defined in section 10203(b)(9) as a report for which ultimate liability has been determined.

**Table A4.1 (Continued): Number of Litigated Claims Resolved At Mediation, At Arbitration, At WCAB, and At Court of Appeal, and 2004-2009**

Program	At Mediation						At Arbitration						At WCAB						At Court of Appeal					
	2004	2005	2006	2007	2008	2009	2004	2005	2006	2007	2008	2009	2004	2005	2006	2007	2008	2009	2004	2005	2006	2007	2008	2009
A	0	2	0	0		2	0	3	2	1			0	0	0	0	0	0	0	0	0	0	0	0
B	14	11	41	40	72	25	5	1	6	5	6	4	2	0	7	9	1	5	0	0	0	0	0	0
C	0	0	0	1	1		0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0		0
D	0	6	12	22	29	16	0	1	8	4	7	5	0	0	0	0	0	0	0	0	0	0	0	0
E	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
F	4	1	4	5	4	2	2	1	4	1	3	0	0	0	0	0	0	0	0	0		0	0	0
G	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
H	0	0	1	0	2	0	0	0	3	1	0	0	1	0	0	0	0	0	0	0	2	0	0	0
I	0	4	5	0	0	0	0	0	1	1	1	0	2	5	0	0	0	0	0	0	0	0	0	0
J	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
K	0	0	2	1	3	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0
L	2	1	4	0	0	4	0	0	0	0	0	0	0	0	0	0	0	0			0	0	0	0
M		0	0	0	0	0		0	0	1	0	0			0	0	0	0			0	0	0	0
N		0	1	0	1	1		0	0	0	0	0		0	0	0	0	0		0	0	0	0	0
O	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
P			0	0	0	0			0	0	0	0			0	0	0	0			0	0	0	0
Q			1	1	1	0			2	0	1	0			0	1	0	0			0	0	0	0
R		0	0	0	0	0		0	0	0	0	0		0	0	2	0	0		0	0	0	0	0
S			0	1	3	5			0	0	1	1			0	0	0	0			0	0	0	0
T			0	0	0	0			0	0	0	0			0	0	0	0			0	0	0	0
U					0	0					0	0					0	0					0	0
V					0	0					0	0					0	0					0	0
W					2	4					0	0					0	0					0	0
<b>Total Claims</b>	<b>20</b>	<b>29</b>	<b>71</b>	<b>71</b>	<b>118</b>	<b>59</b>	<b>7</b>	<b>6</b>	<b>26</b>	<b>15</b>	<b>19</b>	<b>12</b>	<b>5</b>	<b>5</b>	<b>7</b>	<b>12</b>	<b>1</b>	<b>5</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Validity of Claims Data Received**

**Table A4.2: Number of Total Claims Filed, Number of Resolved and Unresolved Claims, and Proportion of Total Claims Filed versus Resolved and Unresolved Claims by Program 2004-2009**

Program	Number Resolved and Unresolved Claims <sup>18</sup>						Number of Total Claims Filed 2004-2009 (Table A2.1) <sup>19</sup>						Resolved and Unresolved Claims as a Proportion of Total Claims Filed					
	2004	2005	2006	2007	2008	2009	2004	2005	2006	2007	2008	2009	2004	2005	2006	2007	2008	2009
A	118	480	237	251	186	127	121	476	237	251	186	127	0.98	1.01	1	1	1	1
B	294	634	463	454	436	267	490	643	463	454	455	267	0.6	0.99	1	1	0.96	1
C	122	74	122	157	122	77	122	75	122	157	122	77	1	0.99	1	1	1	1
D	138	205	330	364	484	114	158	248	330	364	484	114	0.87	0.83	1	1	1	1
E	19	17	11	35	7	37	19	17	11	35	7	37	1	1	1	1	1	1
F	91	169	188	154	143	106	116	210	188	154	143	106	0.78	0.81	1	1	1	1
G	20	225	19	18	5	29	21	226	19	18	5	29	0.95	1	1	1	1	1
H	1	3	30	20	14	10	1	3	30	20	15	10	1	1	1	1	0.93	1
I	94	231	233	370	349	212	109	262	233	370	349	212	0.86	0.88	1	1	1	1
J	1	89	19	18	5	29	4	18	19	18	5	29	0.25	4.94	1	1	1	1
K	9	25	37	48	32	30	13	35	37	48	32	30	0.69	0.71	1	1	1	1
L	22	28	102	64	52	41	23	47	102	64	52	41	0.96	0.6	1	1	1	1
M		5	16	9	12	8		5	16	9	12	8		1	1	1	1	1
N		8	8	3	13	9		11	8	3	13	9		0.73	1	1	1	1
O	6	18	8	8	6	10	6	18	8	8	6	4	1	1	1	1	1	2.5
P			0	1	1	0			0	1	1	0				1	1	0
Q			547	504	473	310			547	504	473	310			1	1	1	1
R		51	53	68	28	44		51	53	68	28	44		1	1	1	1	1
S			6	25	28	36			19	39	63	67			0.32	0.64	0.44	0.54
T			1	6	15	10			1	6	15	10			1	1	1	1
U					48	56				48	56						1	1
V					847	1,773				814	1,643						1.04	1.08
W					36	52				36	52						1	1
<b>Total Claims</b>	<b>935</b>	<b>2,262</b>	<b>2,430</b>	<b>2,577</b>	<b>3,342</b>	<b>3,387</b>	<b>1,203</b>	<b>2,345</b>	<b>2,443</b>	<b>2,591</b>	<b>3,364</b>	<b>3,282</b>	<b>0.78</b>	<b>0.97</b>	<b>1</b>	<b>1</b>	<b>0.99</b>	<b>1.03</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

<sup>18</sup> Number of resolved and unresolved claims under section 10203(b)(9)

<sup>19</sup> Total claims filed under section 10203(b)(8).

**Table A4.3: Comparing Section 10203 (b)(11): Number of Claims Resolved Before, At, and After Litigation to Section 10203 (b)(9):  
Number of Resolved Claims 2004-2009**

Program	Total Claims Resolved Before, At and After Litigation (Table A4.1 continued) <sup>20</sup>						Total Claims Resolved <sup>21</sup>						Claims Reported as Resolved, Before, At, and After Litigation as a Proportion of Total Claims Resolved					
	2004	2005	2006	2004	2005	2006	2004	2005	2006	2004	2005	2006	2004	2005	2006	2004	2005	2006
A	39	96	220	227	171	113	118	480	237	251	186	127	0.33	0.21	1	1	1	1
B	137	265	371	383	338	196	294	634	463	454	436	267	0.51	0.44	1	1	1	1
C	110	48	90	130	113	46	122	74	122	157	122	77	0.95	0.79	1	1	1	1
D	106	173	315	340	438	88	138	205	330	364	484	114	0.82	0.92	0.97	0.95	0.95	0.97
E	0	0	8	34	4	35	19	17	11	35	7	37	0	0	0.73	1	0.67	1
F	63	130	164	130	126	91	91	169	188	154	143	106	0.77	0.85	1	1	1	1
G	20	51	19	15	5	26	20	225	19	18	5	29	1	0.25	1	1	1	1
H	1	4	26	15	12	5	1	3	30	20	14	10		2	0.9	0.88	1	1
I	56	157	117	167	129	96	94	231	233	370	349	212	0.63	0.77	0.7	0.56	0.51	0.6
J	1	0	19	15	5	26	1	89	19	18	5	29	1	0	1	1	1	1
K	0	0	32	43	23	22	9	25	37	48	32	30	0	0	0.91	0.92	1	0.92
L	3	4	100	59	50	25	22	28	102	64	52	41	0.21	0.44	1	1	1	1
M	0	0	16	9	12	8		5	16	9	12	8			1	1	1	1
N	0	7	7	2	7	5		8	8	3	13	9		1	1	1	1	1
O	6	18	7	6	6	9	6	18	8	8	6	10	1	1	1	1	1	1
P	0	0	0	0	1	0			0	1	1	0					1	0.00
Q	0	0	500	395	381	249			547	504	473	310			0.94	0.81	0.87	0.91
R	0	30	50	67	23	37		51	53	68	28	44		1	1	1	1	1
S	0	0	2	6	13	20			6	25	28	36			0.67	0.46	1.63	2.22
T	0	0	1	4	12	7			1	6	15	10			1	0.67	1	0.88
U	0	0	0	0	48	49					48	56					1	1
V	0	0	0	0	847	1,773					847	1,773					1	1
W	0	0	0	0	14	17					36	52					0.82	0.9
<b>Total Claims</b>	<b>542</b>	<b>983</b>	<b>2,064</b>	<b>2,047</b>	<b>2,778</b>	<b>2,943</b>	<b>935</b>	<b>2,262</b>	<b>2,430</b>	<b>2,577</b>	<b>3,342</b>	<b>3,387</b>	<b>0.63</b>	<b>0.49</b>	<b>0.95</b>	<b>0.89</b>	<b>0.93</b>	<b>0.97</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>	<b>12</b>	<b>16</b>	<b>19</b>	<b>19</b>	<b>23</b>	<b>23</b>

<sup>20</sup> Labor Code section 10203(b)(11)

<sup>21</sup> Labor Code section 10203(b)(9)

(5) The number of claims resolved prior to arbitration

**Table A5.1: Number of Litigated Claims Resolved Prior to Arbitration<sup>22</sup> 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	39	93	218	226	171	113
B	130	264	358	369	331	187
C	110	48	90	129	113	46
D	106	172	307	336	431	83
E	0	0	8	34	4	35
F	61	129	160	129	123	91
G	20	51	19	15	5	26
H	0	2	23	14	12	5
I	54	152	116	166	128	96
J	1	0	19	15	5	26
K	0	0	32	43	23	20
L	3	4	100	59	50	25
M		0	16	8	12	8
N		7	7	2	7	5
O	6	18	7	6	6	9
P			0	0	1	0
Q			498	394	380	249
R		30	50	65	23	37
S			2	6	12	19
T			1	4	12	7
U					48	49
V					847	1,773
W					14	17
<b>Total Claims Resolved prior to Arbitration</b>	<b>530</b>	<b>970</b>	<b>2,031</b>	<b>2,020</b>	<b>2,758</b>	<b>2,926</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A5.2: Percent of Litigated Claims that were Resolved Prior to Arbitration 2004-2009<sup>23</sup>**

Program	2004	2005	2006	2007	2008	2009
A	100%	97%	99%	100%	100%	100%
B	95%	100%	97%	96%	98%	95%
C	100%	100%	100%	99%	100%	100%
D	100%	99%	98%	99%	98%	94%
E	0%	0%	100%	100%	100%	100%
F	97%	99%	98%	99%	98%	100%
G	100%	100%	100%	100%	100%	100%
H	0%	50%	89%	93%	100%	100%
I	96%	97%	99%	99%	99%	100%
J	100%	0%	100%	100%	100%	100%
K	0%	0%	100%	100%	100%	91%
L	100%	100%	100%	100%	100%	100%
M		0%	100%	89%	100%	100%
N		100%	100%	100%	100%	100%
O	100%	100%	100%	100%	100%	100%
P			0%	0%	100%	0%
Q			100%	100%	100%	100%
R		100%	100%	97%	100%	100%
S			100%	100%	92%	95%
T			100%	100%	100%	100%
U					100%	100%
V					100%	100%
W					100%	100%
<b>Percent Claims Resolved prior to Arbitration</b>	<b>98%</b>	<b>99%</b>	<b>98%</b>	<b>99%</b>	<b>99%</b>	<b>99%</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

<sup>22</sup> The number of litigated claims resolved prior to arbitration equals the sum of the number of claims resolved before mediation and at mediation. See Table A4.1.

<sup>23</sup> Source Table A5.1/ A4.1

**(6) Projected incurred costs and actual costs of Claims**

**Total Paid and Incurred Costs:**

**Table A6.1: Paid Costs 2004-2009**

<b>Program</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>A</b>	\$1,089,097	\$3,125,330	\$1,107,202	\$1,407,026	\$934,019	\$588,549
<b>B</b>	\$7,642,321	\$6,899,317	\$5,734,632	\$5,790,251	\$4,332,773	\$1,170,300
<b>C</b>	\$495,090	\$1,358,858	\$589,451	\$1,314,364	\$866,696	\$520,920
<b>D</b>	\$2,063,000	\$3,301,615	\$4,539,381	\$2,465,242	\$4,147,950	\$724,148
<b>E</b>	\$125,765	\$463,395	\$101,835	\$232,333	\$299,434	\$226,089
<b>F</b>	\$2,012,867	\$3,510,932	\$3,337,048	\$2,496,695	\$1,822,821	\$603,957
<b>G</b>	\$69,880	\$752,416	\$409,008	\$184,175	\$48,698	\$232,513
<b>H</b>	\$95,447	\$78,202	\$524,879	\$357,785	\$235,702	\$60,671
<b>I</b>	\$867,707	\$3,476,978	\$4,436,517	\$5,064,779	\$4,442,955	\$1,554,518
<b>J</b>	\$62,661	\$94,382	\$409,008	\$184,175	\$48,698	\$232,513
<b>K</b>	\$56,255	\$75,107	\$502,200	\$83,146	\$426,333	\$186,247
<b>L</b>	\$31,012	\$201,949	\$1,914,628	\$513,818	\$1,732,416	\$603,049
<b>M</b>		\$850	\$9,585	\$11,810	\$9,016	\$31,825
<b>N</b>		\$62,843	\$37,658	\$52,308	\$127,907	\$84,705
<b>O</b>	\$10,313	\$47,561	\$131,785	\$22,417	\$14,888	\$29,635
<b>P</b>		\$0	\$0	\$21,986	\$197	\$0
<b>Q</b>			\$9,615,469	\$8,790,544	\$6,315,948	\$1,639,008
<b>R</b>		\$102,833	\$665,162	\$334,803	\$467,589	\$130,605
<b>S</b>			\$321,917	\$4,300,268	\$1,468,455	\$953,065
<b>T</b>			\$1,668	\$95,330	\$163,268	\$162,915
<b>U</b>					\$938,166	\$355,834
<b>V</b>					\$3,747,974	\$5,127,456
<b>W</b>					\$2,511,950	\$1,120,650
<b>Total Paid Costs</b>	<b>\$14,621,415</b>	<b>\$23,552,567</b>	<b>\$34,389,033</b>	<b>\$33,723,256</b>	<b>\$35,103,852</b>	<b>\$16,339,174</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A6.2: Incurred Costs 2004-2009**

<b>Program</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>A</b>	\$1,390,537	\$4,404,966	\$1,422,503	\$1,576,380	\$1,139,110	\$1,311,222
<b>B</b>	\$10,944,123	\$14,421,871	\$8,342,867	\$8,429,158	\$6,537,387	\$2,511,399
<b>C</b>	\$1,498,752	\$3,214,458	\$1,086,387	\$1,560,334	\$993,132	\$843,842
<b>D</b>	\$3,374,238	\$7,620,422	\$9,434,791	\$9,442,231	\$9,973,582	\$1,010,473
<b>E</b>	\$127,126	\$927,529	\$101,835	\$254,060	\$389,209	\$330,964
<b>F</b>	\$4,014,878	\$6,153,655	\$3,992,046	\$3,206,462	\$3,197,028	\$997,707
<b>G</b>	\$338,543	\$1,012,119	\$410,900	\$287,593	\$48,698	\$344,723
<b>H</b>	\$112,586	\$105,543	\$591,789	\$482,667	\$316,376	\$178,116
<b>I</b>	\$1,918,429	\$7,365,577	\$5,999,537	\$6,418,259	\$6,201,141	\$2,823,981
<b>J</b>	\$62,683	\$116,880	\$410,900	\$287,593	\$48,698	\$344,723
<b>K</b>	\$60,137	\$106,548	\$951,436	\$105,650	\$659,878	\$279,440
<b>L</b>	\$167,109	\$215,585	\$2,994,328	\$1,001,848	\$2,404,483	\$765,956
<b>M</b>		\$6,818	\$14,244	\$12,960	\$18,049	\$78,661
<b>N</b>		\$164,772	\$37,658	\$55,762	\$245,622	\$175,172
<b>O</b>	\$38,895	\$99,320	\$165,497	\$24,089	\$16,140	\$54,423
<b>P</b>		\$0	\$0	\$27,867	\$197	\$0
<b>Q</b>			\$12,662,002	\$12,810,505	\$15,672,622	\$2,960,539
<b>R</b>		\$132,401	\$707,612	\$500,982	\$594,901	\$180,880
<b>S</b>			\$610,472	\$4,396,470	\$4,602,604	\$4,158,518
<b>T</b>			\$1,668	\$95,330	\$297,082	\$441,104
<b>U</b>					\$1,497,213	\$1,043,398
<b>V</b>					\$5,459,649	\$10,589,261
<b>W</b>					\$2,511,970	\$1,120,650
<b>Total Incurred Costs</b>	<b>\$24,048,035</b>	<b>\$46,068,464</b>	<b>\$49,938,471</b>	<b>\$50,976,200</b>	<b>\$62,824,771</b>	<b>\$32,545,151</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Medical Service Costs:**

**Table A6.3: Paid Medical Services Costs 2004-2009**

<b>Program</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>A</b>	\$683,754	\$1,379,265	\$578,682	\$844,227	\$364,676	\$498,938
<b>B</b>	\$3,034,444	\$3,554,548	\$2,348,395	\$2,162,873	\$1,678,852	\$449,111
<b>C</b>	\$267,553	\$948,623	\$404,285	\$427,114	\$371,515	\$189,938
<b>D</b>	\$667,727	\$1,647,997	\$2,941,438	\$1,662,346	\$1,879,551	\$317,670
<b>E</b>	\$31,251	\$341,755	\$46,134	\$93,329	\$131,230	\$81,369
<b>F</b>	\$901,467	\$1,463,349	\$1,437,870	\$846,154	\$682,992	\$272,710
<b>G</b>	\$45,369	\$264,031	\$230,238	\$63,502	\$24,310	\$72,192
<b>H</b>	\$50,065	\$27,988	\$319,786	\$189,751	\$124,941	\$24,552
<b>I</b>	\$479,379	\$2,042,148	\$1,405,296	\$1,846,182	\$1,777,353	\$583,673
<b>J</b>	\$15,391	\$32,011	\$230,238	\$63,502	\$24,310	\$72,192
<b>K</b>	\$1,893	\$30,199	\$371,284	\$44,670	\$273,171	\$122,202
<b>L</b>	\$14,981	\$80,154	\$1,004,999	\$195,121	\$192,637	\$204,974
<b>M</b>		\$845	\$7,503	\$7,772	\$3,066	\$4,747
<b>N</b>		\$38,348	\$12,425	\$19,959	\$25,658	\$16,778
<b>O</b>	\$7,193	\$38,127	\$65,600	\$22,097	\$11,955	\$5,950
<b>P</b>			\$0	\$7,706	\$197	\$0
<b>Q</b>			\$4,020,732	\$3,069,404	\$1,974,015	\$553,995
<b>R</b>		\$47,764	\$377,830	\$144,345	\$222,059	\$59,642
<b>S</b>			\$187,478	\$998,996	\$1,030,807	\$585,178
<b>T</b>			\$1,668	\$52,638	\$88,294	\$141,814
<b>U</b>					\$303,081	\$164,884
<b>V</b>					\$1,427,732	\$1,776,612
<b>W</b>					\$775,219	\$891,265
<b>Paid Medical Service</b>	<b>\$6,200,467</b>	<b>\$11,937,151</b>	<b>\$15,991,881</b>	<b>\$12,761,688</b>	<b>\$13,387,621</b>	<b>\$7,090,387</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A6.4: Incurred Medical Service Costs 2004-2009**

<b>Program</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>A</b>	\$943,626	\$2,424,586	\$650,702	\$846,447	\$459,747	\$610,804
<b>B</b>	\$3,180,460	\$7,411,250	\$2,869,317	\$2,599,061	\$2,227,918	\$821,405
<b>C</b>	\$992,799	\$2,438,292	\$465,127	\$550,912	\$409,251	\$309,192
<b>D</b>	\$1,026,880	\$4,302,744	\$6,090,836	\$6,947,424	\$6,744,370	\$450,434
<b>E</b>	\$32,612	\$805,889	\$46,134	\$95,408	\$137,928	\$87,519
<b>F</b>	\$1,823,273	\$3,241,179	\$1,628,711	\$1,053,101	\$833,645	\$436,326
<b>G</b>	\$219,574	\$429,786	\$230,238	\$85,554	\$24,310	\$98,267
<b>H</b>	\$64,500	\$37,483	\$356,911	\$289,248	\$177,921	\$111,034
<b>I</b>	\$1,198,038	\$3,598,774	\$1,711,877	\$2,468,950	\$2,598,876	\$1,113,650
<b>J</b>	\$15,413	\$54,416	\$230,238	\$85,554	\$24,310	\$98,267
<b>K</b>	\$5,775	\$61,640	\$817,836	\$64,218	\$501,733	\$179,950
<b>L</b>	\$16,326	\$93,790	\$1,913,539	\$479,711	\$652,587	\$337,263
<b>M</b>		\$845	\$12,162	\$8,922	\$9,953	\$5,147
<b>N</b>		\$115,021	\$12,425	\$20,886	\$44,220	\$36,474
<b>O</b>	\$33,695	\$66,357	\$75,298	\$23,769	\$12,690	\$20,450
<b>P</b>			\$0	\$13,350	\$197	\$0
<b>Q</b>			\$4,967,008	\$4,358,597	\$3,518,743	\$1,204,888
<b>R</b>		\$74,646	\$407,890	\$300,575	\$278,025	\$83,467
<b>S</b>			\$229,414	\$1,541,105	\$1,553,181	\$1,298,162
<b>T</b>			\$1,668	\$52,638	\$163,048	\$307,615
<b>U</b>					\$542,542	\$541,986
<b>V</b>					\$2,777,723	\$6,936,568
<b>W</b>					\$775,239	\$891,265
<b>Incurred Medical Service</b>	<b>\$9,552,970</b>	<b>\$25,156,698</b>	<b>\$22,717,331</b>	<b>\$21,885,430</b>	<b>\$24,468,158</b>	<b>\$15,980,133</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

Temporary Disability Costs:

Table A6.5: Paid Temporary Disability Costs 2004-2009

Program	2004	2005	2006	2007	2008	2009
A	\$289,489	\$1,420,554	\$358,673	\$351,666	\$501,486	\$37,424
B	\$2,961,518	\$2,716,584	\$2,537,859	\$2,994,127	\$2,285,517	\$708,922
C	\$80,480	\$367,721	\$49,087	\$667,420	\$354,386	\$283,423
D	\$1,054,510	\$1,235,024	\$1,371,271	\$586,159	\$1,758,368	\$364,395
E	\$50,525	\$114,380	\$35,286	\$109,212	\$166,704	\$125,478
F	\$893,874	\$1,257,740	\$1,413,000	\$1,259,338	\$902,982	\$321,691
G	\$23,442	\$295,439	\$163,227	\$109,251	\$17,388	\$140,515
H	\$16,468	\$39,874	\$145,709	\$133,614	\$83,874	\$36,119
I	\$297,961	\$1,210,248	\$1,944,801	\$2,604,726	\$2,348,589	\$902,258
J	\$24,700	\$55,630	\$163,227	\$109,251	\$17,388	\$140,515
K	\$48,228	\$44,290	\$37,827	\$37,986	\$133,587	\$50,030
L	\$0	\$121,795	\$679,003	\$308,234	\$1,527,859	\$371,828
M		\$0	\$2,082	\$299	\$0	\$24,483
N		\$24,478	\$23,364	\$32,349	\$92,505	\$67,302
O	\$3,120	\$9,434	\$37,739	\$320	\$0	\$21,487
P			\$0	\$11,067	\$0	\$0
Q			\$4,103,027	\$4,408,620	\$3,606,729	\$986,277
R		\$52,280	\$184,737	\$93,091	\$163,552	\$65,683
S			\$96,945	\$3,230,597	\$372,556	\$339,416
T			\$0	\$16,242	\$48,956	\$17,722
U					\$502,921	\$117,606
V					\$2,125,289	\$3,214,625
W					\$1,733,354	\$229,385
<b>Paid Temporary Disability Costs</b>	<b>\$5,744,315</b>	<b>\$8,965,471</b>	<b>\$13,346,864</b>	<b>\$17,063,569</b>	<b>\$18,743,990</b>	<b>\$8,566,584</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A6.6: Incurred Temporary Disability Costs 2004-2009**

<b>Program</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>A</b>	\$289,489	\$1,554,896	\$470,981	\$476,133	\$597,301	\$588,369
<b>B</b>	\$4,943,462	\$4,383,616	\$3,495,157	\$4,157,501	\$2,708,008	\$1,141,803
<b>C</b>	\$256,487	\$392,276	\$436,785	\$700,263	\$415,987	\$381,220
<b>D</b>	\$1,476,287	\$2,009,376	\$1,924,871	\$1,574,745	\$1,957,891	\$513,517
<b>E</b>	\$50,525	\$114,380	\$35,286	\$109,212	\$186,704	\$129,627
<b>F</b>	\$1,442,500	\$1,770,837	\$1,533,247	\$1,523,658	\$1,136,274	\$460,759
<b>G</b>	\$48,919	\$356,717	\$165,119	\$115,739	\$17,388	\$147,632
<b>H</b>	\$16,468	\$39,880	\$145,717	\$136,539	\$93,631	\$47,186
<b>I</b>	\$378,925	\$2,333,251	\$2,519,606	\$2,985,124	\$2,532,852	\$1,387,937
<b>J</b>	\$24,700	\$55,630	\$165,119	\$115,739	\$17,388	\$147,632
<b>K</b>	\$48,228	\$44,290	\$38,000	\$38,000	\$136,110	\$85,190
<b>L</b>	\$133,582	\$121,795	\$731,284	\$478,399	\$1,731,570	\$386,742
<b>M</b>		\$1,573	\$2,082	\$299	\$2,146	\$46,283
<b>N</b>		\$33,674	\$23,364	\$34,376	\$165,408	\$121,150
<b>O</b>	\$5,200	\$15,463	\$37,739	\$320	\$0	\$30,947
<b>P</b>			\$0	\$11,067	\$0	\$0
<b>Q</b>			\$5,352,002	\$6,035,907	\$5,549,646	\$1,433,869
<b>R</b>		\$52,280	\$184,737	\$97,921	\$187,133	\$87,510
<b>S</b>			\$220,156	\$1,552,644	\$1,678,444	\$1,585,651
<b>T</b>			\$0	\$16,242	\$59,206	\$31,227
<b>U</b>					\$680,346	\$238,528
<b>V</b>					\$2,315,222	\$3,292,046
<b>W</b>					\$1,733,354	\$229,385
<b>Incurred Temporary Disability Costs</b>	<b>\$9,114,772</b>	<b>\$13,279,934</b>	<b>\$17,481,251</b>	<b>\$20,159,827</b>	<b>\$23,902,008</b>	<b>\$12,514,209</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Permanent Disability Costs:**

**Table A6.7: Paid Permanent Disability Costs 2004-2009**

<b>Program</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>A</b>	\$79,650	\$283,909	\$156,743	\$139,735	\$59,965	\$38,860
<b>B</b>	\$1,124,127	\$313,603	\$602,252	\$433,684	\$255,401	\$6,424
<b>C</b>	\$99,100	\$40,614	\$129,319	\$150,480	\$104,393	\$40,954
<b>D</b>	\$319,689	\$327,823	\$176,743	\$184,610	\$338,205	\$36,949
<b>E</b>	\$14,400	\$7,260	\$12,675	\$20,930	\$1,500	\$10,580
<b>F</b>	\$163,048	\$256,060	\$432,904	\$276,856	\$157,838	\$5,720
<b>G</b>	\$0	\$76,370	\$15,543	\$11,422	\$7,000	\$7,282
<b>H</b>	\$28,914	\$10,340	\$59,384	\$34,420	\$26,887	\$0
<b>I</b>	\$66,728	\$181,710	\$732,235	\$503,509	\$192,551	\$61,003
<b>J</b>	\$6,286	\$6,160	\$15,543	\$11,422	\$7,000	\$7,282
<b>K</b>	\$2,801	\$0	\$92,574	\$0	\$18,400	\$13,715
<b>L</b>	\$13,890	\$0	\$203,874	\$5,630	\$11,270	\$19,435
<b>M</b>		\$0	\$0	\$3,739	\$5,950	\$2,595
<b>N</b>		\$0	\$1,380	\$0	\$8,015	\$0
<b>O</b>	\$0	\$0	\$27,486	\$0	\$2,933	\$2,198
<b>P</b>			\$0	\$3,213	\$0	\$0
<b>Q</b>			\$1,313,095	\$977,790	\$320,662	\$44,748
<b>R</b>		\$2,789	\$102,595	\$89,011	\$37,150	\$5,280
<b>S</b>			\$36,667	\$64,810	\$44,856	\$6,286
<b>T</b>			\$0	\$26,450	\$26,018	\$3,379
<b>U</b>					\$85,969	\$25,480
<b>V</b>					\$144,675	\$72,556
<b>W</b>					\$3,377	\$0
<b>Paid Temporary Disability Costs</b>	<b>\$1,918,633</b>	<b>\$1,506,638</b>	<b>\$4,111,012</b>	<b>\$2,937,712</b>	<b>\$1,860,014</b>	<b>\$410,727</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A6.8: Incurred Permanent Disability Costs 2004-2009**

<b>Program</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
A	\$80,505	\$347,382	\$266,089	\$143,115	\$68,425	\$75,906
B	\$2,184,920	\$2,101,499	\$1,212,783	\$1,059,845	\$618,940	\$491,032
C	\$199,156	\$321,990	\$167,665	\$211,649	\$122,577	\$139,462
D	\$774,088	\$774,366	\$687,290	\$886,062	\$565,467	\$39,847
E	\$14,400	\$7,260	\$12,675	\$34,578	\$56,577	\$91,156
F	\$609,765	\$559,349	\$707,204	\$427,560	\$297,107	\$79,052
G	\$70,050	\$103,270	\$15,543	\$74,300	\$7,000	\$74,300
H	\$30,578	\$25,190	\$89,161	\$56,880	\$44,824	\$19,896
I	\$273,769	\$1,177,157	\$1,196,098	\$774,402	\$527,362	\$279,746
J	\$6,286	\$6,160	\$15,543	\$74,300	\$7,000	\$74,300
K	\$2,801	\$0	\$95,000	\$2,932	\$20,000	\$14,000
L	\$15,060	\$0	\$322,614	\$36,403	\$19,660	\$32,885
M		\$4,400	\$0	\$3,739	\$5,950	\$23,231
N		\$16,060	\$1,380	\$0	\$32,015	\$12,923
O	\$0	\$17,500	\$51,500	\$0	\$3,450	\$3,026
P			\$0	\$3,450	\$0	\$0
Q			\$2,018,565	\$1,928,356	\$6,031,269	\$206,733
R		\$4,500	\$114,985	\$90,951	\$84,915	\$9,903
S			\$160,075	\$1,296,856	\$1,350,743	\$1,252,520
T			\$0	\$26,450	\$60,828	\$86,262
U					\$195,163	\$166,747
V					\$316,426	\$296,984
W					\$3,377	\$0
<b>Incurred Permanent Disability Costs</b>	<b>\$4,261,378</b>	<b>\$5,466,083</b>	<b>\$7,134,170</b>	<b>\$7,131,829</b>	<b>\$10,439,075</b>	<b>\$3,469,911</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Life Pension Costs:**

**Table A6.9: Paid Life Pension Costs 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$24,680	\$0	\$0	\$0	\$0	\$0
B	\$394,535	\$202,215	\$0	\$0	\$0	\$0
C	\$0	\$0	\$0	\$0	\$0	\$0
D	\$0	\$0	\$0	\$8,752	\$0	\$0
E	\$0	\$0	\$0	\$0	\$0	\$0
F	\$40,664	\$0	\$0	\$0	\$0	\$0
G	\$0	\$93,145	\$0	\$0	\$0	\$0
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$0	\$0	\$0	\$0	\$0	\$0
J	\$13,658	\$0	\$0	\$0	\$0	\$0
K	\$0	\$0	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$0
N		\$0	\$0	\$0	\$0	\$0
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$0	\$0	\$0	\$17,267
R		\$0	\$0	\$0	\$0	\$0
S			\$0	\$0	\$0	\$0
T			\$0	\$0	\$0	\$0
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Paid Life Pension Costs</b>	<b>\$473,537</b>	<b>\$295,360</b>	<b>\$0</b>	<b>\$8,752</b>	<b>\$0</b>	<b>\$17,267</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A6.10: Incurred Life Pension Costs 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$24,680	\$0	\$0	\$0	\$0	\$0
B	\$394,434	\$202,258	\$0	\$0	\$0	\$0
C	\$0	\$0	\$0	\$0	\$0	\$0
D	\$0	\$0	\$0	\$10,000	\$0	\$0
E	\$0	\$0	\$0	\$0	\$0	\$0
F	\$40,664	\$0	\$0	\$0	\$0	\$0
G	\$0	\$93,145	\$0	\$0	\$0	\$0
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$0	\$0	\$0	\$0	\$0	\$0
J	\$13,658	\$0	\$0	\$0	\$0	\$0
K	\$0	\$0	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$0
N		\$0	\$0	\$0	\$0	\$0
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$0	\$0	\$0	\$17,267
R		\$0	\$0	\$0	\$0	\$0
S			\$0	\$0	\$0	\$0
T			\$0	\$0	\$0	\$0
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Incurred Life Pension Costs</b>	<b>\$473,436</b>	<b>\$295,403</b>	<b>\$0</b>	<b>\$10,000</b>	<b>\$0</b>	<b>\$17,267</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Death Benefit Costs:**

**Table A6.11: Paid Death Benefit Costs 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$0	\$0	\$0	\$0	\$0	\$0
B	\$0	\$15,000	\$152,816	\$107,885	\$82,470	\$0
C	\$0	\$0	\$0	\$0	\$0	\$0
D	\$0	\$50,814	\$30,844	\$0	\$161,475	\$0
E	\$0	\$0	\$0	\$0	\$0	\$0
F	\$0	\$441,199	\$0	\$107,885	\$76,244	\$0
G	\$0	\$0	\$0	\$0	\$0	\$0
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$0	\$0	\$271,992	\$0	\$98,714	\$0
J	\$0	\$0	\$0	\$0	\$0	\$0
K	\$0	\$0	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$0
N		\$0	\$0	\$0	\$0	\$0
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$0	\$107,885	\$318,760	\$18,015
R		\$0	\$0	\$0	\$40,000	\$0
S			\$0	\$0	\$0	\$0
T			\$0	\$0	\$0	\$0
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Paid Death Benefit Costs</b>	<b>\$0</b>	<b>\$507,013</b>	<b>\$455,652</b>	<b>\$323,655</b>	<b>\$777,663</b>	<b>\$18,015</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A6.12: Incurred Death Benefit Costs 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$0	\$0	\$0	\$0	\$0	\$0
B	\$0	\$15,000	\$596,670	\$423,655	\$851,724	\$0
C	\$0	\$0	\$0	\$0	\$0	\$0
D	\$0	\$381,000	\$685,854	\$0	\$685,854	\$0
E	\$0	\$0	\$0	\$0	\$0	\$0
F	\$0	\$441,199	\$0	\$107,885	\$851,820	\$0
G	\$0	\$0	\$0	\$0	\$0	\$0
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$0	\$0	\$445,391	\$0	\$434,961	\$0
J	\$0	\$0	\$0	\$0	\$0	\$0
K	\$0	\$0	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$0
N		\$0	\$0	\$0	\$0	\$0
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$0	\$107,885	\$318,760	\$18,015
R		\$0	\$0	\$0	\$40,000	\$0
S			\$0	\$0	\$0	\$0
T			\$0	\$0	\$0	\$0
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Incurred Death Benefit Costs</b>	<b>\$0</b>	<b>\$837,199</b>	<b>\$1,727,915</b>	<b>\$639,425</b>	<b>\$3,183,119</b>	<b>\$18,015</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Vocational Rehabilitation Costs:**

**Table A6.13: Paid Vocational Rehabilitation Costs 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$8,000	\$4,150	\$1,326	\$0	\$0	\$0
B	\$12,159	\$5,378	\$22,749	\$6,823	\$119	\$0
C	\$19,647	\$0	\$0	\$6,000	\$0	\$0
D	\$276	\$13,948	\$0	\$0	\$0	\$0
E	\$1,649	\$0	\$0	\$0	\$0	\$0
F	\$1,443	\$4,731	\$6,634	\$735	\$0	\$0
G	\$0	\$22,801	\$0	\$0	\$0	\$0
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$131	\$3,057	\$6,500	\$4,000	\$0	\$0
J	\$2,626	\$0	\$0	\$0	\$0	\$0
K	\$3,333	\$124	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$0
N		\$0	\$0	\$0	\$0	\$0
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$4,261	\$1,000	\$500	\$0
R		\$0	\$0	\$435	\$0	\$0
S			\$0	\$0	\$5,400	\$4,000
T			\$0	\$0	\$0	\$0
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Paid Vocational Rehabilitation Costs</b>	<b>\$49,264</b>	<b>\$54,189</b>	<b>\$41,470</b>	<b>\$18,993</b>	<b>\$6,019</b>	<b>\$4,000</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A6.14: Incurred Vocational Rehabilitation Costs 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$48,713	\$14,000	\$20,910	\$6,000	\$4,000	\$0
B	\$122,163	\$186,147	\$60,000	\$58,780	\$76,000	\$50,000
C	\$22,000	\$60,000	\$8,000	\$24,000	\$0	\$0
D	\$75,000	\$122,000	\$0	\$0	\$0	\$0
E	\$1,649	\$0	\$0	\$6,000	\$8,000	\$14,000
F	\$75,520	\$36,000	\$31,853	\$32,000	\$28,000	\$16,000
G	\$0	\$22,801	\$0	\$12,000	\$0	\$12,000
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$40,131	\$200,057	\$36,500	\$60,000	\$72,000	\$28,000
J	\$2,626	\$0	\$0	\$12,000	\$0	\$12,000
K	\$3,333	\$124	\$0	\$0	\$0	\$0
L	\$0	\$0	\$0	\$0	\$0	\$0
M		\$0	\$0	\$0	\$0	\$4,000
N		\$0	\$0	\$0	\$0	\$4,000
O	\$0	\$0	\$0	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$120,261	\$131,000	\$134,500	\$54,000
R		\$0	\$0	\$3,564	\$0	\$0
S			\$0	\$0	\$5,400	\$4,000
T			\$0	\$0	\$14,000	\$16,000
U					\$0	\$0
V					\$0	\$0
W					\$0	\$0
<b>Incurred Vocational Rehabilitation Costs</b>	<b>\$391,135</b>	<b>\$641,129</b>	<b>\$277,524</b>	<b>\$345,344</b>	<b>\$341,900</b>	<b>\$214,000</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Medical-Legal Expense Costs:**

**Table A6.15: Paid Medical-Legal Expenses 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$3,524	\$37,452	\$11,778	\$71,398	\$7,892	\$13,327
B	\$115,538	\$91,989	\$70,561	\$84,859	\$30,414	\$5,843
C	\$28,310	\$1,900	\$6,760	\$63,350	\$36,402	\$6,605
D	\$20,798	\$26,009	\$19,085	\$23,375	\$10,351	\$5,134
E	\$27,940	\$0	\$7,740	\$8,862	\$0	\$8,662
F	\$12,371	\$87,853	\$46,640	\$5,727	\$2,765	\$3,836
G	\$1,069	\$630	\$0	\$0	\$0	\$12,524
H	\$0	\$0	\$0	\$0	\$0	\$0
I	\$23,508	\$39,815	\$75,693	\$106,362	\$25,748	\$7,584
J	\$0	\$581	\$0	\$0	\$0	\$12,524
K	\$0	\$494	\$515	\$490	\$1,175	\$300
L	\$2,141	\$0	\$26,752	\$4,833	\$650	\$6,812
M		\$5	\$0	\$0	\$0	\$0
N		\$17	\$489	\$0	\$1,729	\$625
O	\$0	\$0	\$960	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$174,354	\$225,845	\$95,282	\$18,706
R		\$0	\$0	\$7,921	\$4,828	\$0
S			\$827	\$5,865	\$14,836	\$18,185
T			\$0	\$0	\$0	\$0
U					\$46,195	\$47,864
V					\$50,278	\$63,663
W					\$0	\$0
<b>Paid Medical-Legal Expenses</b>	<b>\$235,199</b>	<b>\$286,745</b>	<b>\$442,154</b>	<b>\$608,887</b>	<b>\$328,545</b>	<b>\$232,194</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

**Table A6.16: Incurred Medical-Legal Expenses 2004-2009**

Program	2004	2005	2006	2007	2008	2009
A	\$3,524	\$64,102	\$13,821	\$104,685	\$9,637	\$36,143
B	\$118,684	\$122,101	\$108,940	\$130,316	\$54,797	\$7,159
C	\$28,310	\$1,900	\$8,810	\$73,510	\$45,317	\$13,968
D	\$21,983	\$30,936	\$45,940	\$24,000	\$20,000	\$6,675
E	\$27,940	\$0	\$7,740	\$8,862	\$0	\$8,662
F	\$23,156	\$105,091	\$91,031	\$62,258	\$50,182	\$5,570
G	\$0	\$6,400	\$0	\$0	\$0	\$12,524
H	\$1,040	\$2,990	\$0	\$0	\$0	\$0
I	\$27,566	\$56,338	\$90,065	\$129,783	\$35,090	\$14,648
J	\$0	\$674	\$0	\$0	\$0	\$12,524
K	\$0	\$494	\$600	\$500	\$2,035	\$300
L	\$2,141	\$0	\$26,891	\$7,335	\$666	\$9,066
M		\$0	\$0	\$0	\$0	\$0
N		\$17	\$489	\$500	\$3,979	\$625
O	\$0	\$0	\$960	\$0	\$0	\$0
P			\$0	\$0	\$0	\$0
Q			\$204,166	\$248,760	\$119,704	\$25,767
R		\$975	\$0	\$7,971	\$4,828	\$0
S			\$827	\$5,865	\$14,836	\$18,185
T			\$0	\$0	\$0	\$0
U					\$79,162	\$96,137
V					\$50,278	\$63,663
W					\$0	\$0
<b>Incurred Medical-Legal Expenses</b>	<b>\$254,344</b>	<b>\$392,018</b>	<b>\$600,280</b>	<b>\$804,345</b>	<b>\$490,511</b>	<b>\$331,616</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

(7) Safety History

Title A7.1: Safety History 2004-2009

Program	Number of OSHA Injuries and Illnesses Reported						Number of Total Claims Filed (Table A2.1) <sup>24</sup>						Percentage of OSHA Injuries and Illnesses Reported					
	2004	2005	2006	2007	2008	2009	2004	2005	2006	2007	2008	2009	2004	2005	2006	2007	2008	2009
A	0	0	0	0	0	0	121	476	237	251	186	127	0%	0%	0%	0%	0%	0%
B	0	0	642	636	542	291	490	643	463	454	455	267	0%	0%	139%	140%	119%	109%
C	0	0	0	0	0	0	122	75	122	157	122	77	0%	0%	0%	0%	0%	0%
D	0	0	0	0	0	51	158	248	330	364	484	114	0%	0%	0%	0%	0%	45%
E	0	0	7	29	4	32	19	17	11	35	7	37	0%	0%	64%	83%	57%	87%
F	0	0	0	0	0	0	116	210	188	154	143	106	0%	0%	0%	0%	0%	0%
G	0	0	8	14	4	21	21	226	19	18	5	29	0%	0%	42%	78%	80%	72%
H		3	20	17	0	37	1	3	30	20	15	10	0%	100%	67%	85%	0%	370%
I	0	0	80	128	82	159	109	262	233	370	349	212	0%	0%	34%	35%	24%	75%
J	0	0	8	14	4	21	4	18	19	18	5	29	0%	0%	42%	78%	80%	72%
K	0	0	24	12	13	11	13	35	37	48	32	30	0%	0%	65%	25%	41%	37%
L	0	0	16	12	14	15	23	47	102	64	52	41	0%	0%	16%	19%	27%	37%
M		0	14	7	9	3		5	16	9	12	8		0%	88%	78%	75%	38%
N	0	0	0	0	0	0	0	11	8	3	13	9	0%	0%	0%	0%	0%	0%
O	0	0	5	4	3	0	6	18	8	8	6	4	0%	0%	63%	50%	50%	0%
P			0	0	1	0			0	1	1	0			0%	0%	100%	0%
Q			0	0	0	206			547	504	473	310			0%	0%	0%	67%
R		0	0	0	0	0		51	53	68	28	44		0%	0%	0%	0%	0%
S			0	0	0	0			19	39	63	67			0%	0%	0%	0%
T			1	6	14	10			1	6	15	10			100%	100%	93%	100%
U					33	40					48	56					69%	71%
V					847	1,773					814	1,643					104%	108%
W					17	24					36	52					47%	47%
Totals	0	3	825	879	1,587	2,694	1,203	2,345	2,443	2,591	3,364	3,282	0%	0%	34%	34%	47%	82%
# Reporting Programs	13	16	20	20	23	23	13	16	20	20	23	23	13	16	20	20	23	23

<sup>24</sup> Total claims filed under section 10203(b)(8).

8) *The number of workers participating in vocational rehabilitation programs*

**Table A8.1: Number of Workers Participating in Vocational Rehabilitation 2004-2009**

<b>Program</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>A</b>	0	3	1	0	0	0
<b>B</b>	2	1	5	1	1	0
<b>C</b>	0	0	0	1		0
<b>D</b>	2	2	0	0	0	0
<b>E</b>	0	0	0	0	0	0
<b>F</b>	1	0	2	0	0	0
<b>G</b>	0	0	0	0	0	0
<b>H</b>	0	0	0	0	0	0
<b>I</b>	0	0	2	1	0	2
<b>J</b>	0	0	0	0	0	0
<b>K</b>	0	0	0	0	0	0
<b>L</b>	0	0	0	0	0	0
<b>M</b>			0	0	0	1
<b>N</b>		0	0	0	0	0
<b>O</b>			0	0	0	0
<b>P</b>			0	0	0	0
<b>Q</b>			0	1	2	4
<b>R</b>		0	0	1	0	0
<b>S</b>			0	0	1	1
<b>T</b>			0	0	2	2
<b>U</b>					0	0
<b>V</b>					0	0
<b>W</b>					0	0
<b># of Workers Participating in Vocational Rehabilitation</b>	<b>5</b>	<b>6</b>	<b>10</b>	<b>5</b>	<b>6</b>	<b>10</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

9) The number of workers participating in light-duty or modified return to work programs

**Table A9.1: Number of Workers Participating in Light-Duty or Modified Work 2004-2009**

<b>Program</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>A</b>	0	1	5	1	0	24
<b>B</b>	1	3	82	3	3	4
<b>C</b>	0	0	2	1	4	0
<b>D</b>	1	0	17	11	2	4
<b>E</b>	0	0	0	0	0	0
<b>F</b>	0	14	4	8	9	1
<b>G</b>	0	2	0	0	0	0
<b>H</b>	0	0	20	11	8	4
<b>I</b>	0	8	30	35	12	41
<b>J</b>	0	0	0	0	0	0
<b>K</b>	0	0	2	0	2	3
<b>L</b>	0	0	6	2	0	4
<b>M</b>			5	0	0	0
<b>N</b>		0	0	0	0	0
<b>O</b>		0	0	0	0	0
<b>P</b>			0	0	0	0
<b>Q</b>			74	44	26	34
<b>R</b>		33	17	25	11	18
<b>S</b>			0	0	0	0
<b>T</b>			1	5	5	7
<b>U</b>					36	37
<b>V</b>					103	682
<b>W</b>					10	18
<b># of Workers Participating in Light-Duty or Modified Work</b>	<b>2</b>	<b>61</b>	<b>265</b>	<b>146</b>	<b>231</b>	<b>881</b>
<b># Reporting Programs</b>	<b>13</b>	<b>16</b>	<b>20</b>	<b>20</b>	<b>23</b>	<b>23</b>

## Appendix B: Additional Cost Component Data.

**Table B.1: Average Paid Cost per Indemnity Claim by Cost Component 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Average Paid Cost (3201.5)</b>	<b>\$19,891</b>	<b>\$18,811</b>	<b>\$25,338</b>	<b>\$25,622</b>	<b>\$23,214</b>	<b>\$12,708</b>
Medical Services	\$8,244	\$9,336	\$11,516	\$9,279	\$8,604	\$5,076
Temporary Disability	\$7,945	\$7,313	\$10,028	\$13,318	\$12,356	\$6,975
Permanent Disability	\$2,654	\$1,229	\$3,089	\$2,274	\$1,379	\$433
Life Pensions	\$655	\$241	\$0	\$7	\$0	\$24
Death Benefits	\$0	\$414	\$342	\$253	\$670	\$25
Vocational Rehab	\$68	\$44	\$31	\$15	\$5	\$6
Medical-Legal	\$325	\$234	\$332	\$476	\$200	\$169
Reporting Programs (#)	13	16	19	19	19	19
Total Claims (#)	723	1,226	1,331	1,280	1,160	715
<b>3201.7 Non-Construction Programs</b>						
<b>Average Paid Cost (3201.7)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$46,240</b>	<b>\$15,098</b>	<b>\$7,338</b>
Medical Services			\$0	\$24,892	\$4,727	\$2,582
Temporary Disability				\$8,121	\$9,150	\$3,533
Permanent Disability				\$13,225	\$539	\$100
Life Pensions			\$0	\$2	\$482	\$1,013
Death Benefits				\$0	\$0	\$0
Vocational Rehab				\$0	\$0	\$0
Medical-Legal				\$0	\$200	\$110
Reporting Programs (#)			1	1	4	4
Total Claims (#)			0	2	482	1,013
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Average Paid Cost (Total)</b>	<b>\$19,891</b>	<b>\$18,811</b>	<b>\$25,338</b>	<b>\$25,655</b>	<b>\$20,692</b>	<b>\$8,966</b>
Medical Services	\$8,244	\$9,336	\$11,516	\$9,304	\$7,466	\$3,614
Temporary Disability	\$7,945	\$7,313	\$10,028	\$13,310	\$11,415	\$4,958
Permanent Disability	\$2,654	\$1,229	\$3,089	\$2,292	\$1,133	\$238
Life Pensions	\$655	\$241	\$0	\$7	\$0	\$10
Death Benefits	\$0	\$414	\$342	\$252	\$474	\$10
Vocational Rehab	\$68	\$44	\$31	\$15	\$4	\$2
Medical-Legal	\$325	\$234	\$332	\$475	\$200	\$134
Reporting Programs (#)	13	16	20	20	23	23
Total Claims (#)	480	1,119	1,112	1,309	1,722	1,554

**Table B.2: Average Incurred Cost per Indemnity Claim by Cost Component 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Average Incurred Cost (3201.5)</b>	<b>\$32,868</b>	<b>\$37,102</b>	<b>\$37,007</b>	<b>\$39,034</b>	<b>\$44,992</b>	<b>\$26,344</b>
Medical Services	\$12,819	\$20,045	\$16,555	\$16,340	\$16,674	\$9,494
Temporary Disability	\$12,607	\$10,832	\$13,134	\$15,737	\$16,477	\$12,200
Permanent Disability	\$5,894	\$4,458	\$5,360	\$5,551	\$8,503	\$4,084
Life Pensions	\$655	\$241	\$0	\$8	\$0	\$24
Death Benefits	\$0	\$683	\$1,298	\$500	\$2,744	\$25
Vocational Rehab	\$541	\$523	\$209	\$270	\$283	\$277
Medical-Legal	\$352	\$320	\$451	\$628	\$311	\$240
Reporting Programs (#)	13	16	19	19	19	19
Total Claims (#)	723	1,226	1,331	1,280	1,160	715
<b>3201.7 Non-Construction Programs</b>						
<b>Average Incurred Cost (3201.7)</b>			<b>\$0</b>	<b>\$46,238</b>	<b>\$19,529</b>	<b>\$12,291</b>
Medical Services			\$0	\$24,892	\$8,102	\$7,831
Temporary Disability				\$8,121	\$9,934	\$3,743
Permanent Disability				\$13,225	\$1,195	\$543
Life Pensions				\$0	\$0	\$0
Death Benefits				\$0	\$0	\$0
Vocational Rehab				\$0	\$29	\$16
Medical-Legal				\$0	\$269	\$158
Reporting Programs (#)			1	1	4	4
Total Claims (#)			0	2	482	1,013
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Average Incurred Cost (Total)</b>	<b>\$32,868</b>	<b>\$37,102</b>	<b>\$37,007</b>	<b>\$39,045</b>	<b>\$37,519</b>	<b>\$18,105</b>
Medical Services	\$12,819	\$20,045	\$16,555	\$16,354	\$14,158	\$8,519
Temporary Disability	\$12,607	\$10,832	\$13,134	\$15,725	\$14,557	\$7,242
Permanent Disability	\$5,894	\$4,458	\$5,360	\$5,563	\$6,358	\$2,008
Life Pensions	\$655	\$241	\$0	\$8	\$0	\$10
Death Benefits	\$0	\$683	\$1,298	\$499	\$1,939	\$10
Vocational Rehab	\$541	\$523	\$209	\$269	\$208	\$124
Medical-Legal	\$352	\$320	\$451	\$627	\$299	\$192
Reporting Programs (#)	13	16	20	20	23	23
Total Claims (#)	480	1,119	1,112	1,309	1,722	1,554

**Table B.3: Average Paid and Incurred Medical Service Cost per Claim 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Reporting Programs (#)</b>	13	16	19	19	19	19
<b>Medical-Only Claims (#)</b>	480	1,119	1,111	1,305	1,291	806
Paid Costs	\$500	\$439	\$597	\$637	\$630	\$604
Incurred Costs	\$593	\$519	\$613	\$703	\$672	\$639
<b>Indemnity Claims (#)</b>	723	1,226	1,331	1,280	1,160	715
Paid Costs	\$8,244	\$9,336	\$11,516	\$9,279	\$8,604	\$5,076
Incurred Costs	\$12,819	\$20,045	\$16,555	\$16,340	\$16,674	\$9,494
<b>Total Claims (#)</b>	1,203	2,345	2,442	2,585	2,451	1,521
Paid Costs	\$5,154	\$5,077	\$6,548	\$4,916	\$4,404	\$2,706
Incurred Costs	\$7,941	\$10,728	\$9,302	\$8,446	\$8,245	\$4,801
<b>3201.7 Non-Construction Programs</b>						
<b>Reporting Programs (#)</b>			1	1	4	4
<b>Medical-Only Claims (#)</b>			1	4	431	748
Paid Costs			\$1,668	\$714	\$733	\$480
Incurred Costs			\$1,668	\$714	\$820	\$996
<b>Indemnity Claims (#)</b>			0	2	482	1,013
Paid Costs			\$0	\$24,892	\$4,727	\$2,582
Incurred Costs			\$0	\$24,892	\$8,102	\$7,831
<b>Total Claims (#)</b>			1	6	913	1,761
Paid Total Costs			\$1,668	\$8,773	\$2,842	\$1,689
Incurred Costs			\$1,668	\$8,773	\$4,664	\$4,928
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Reporting Programs (#)</b>	13	16	20	20	23	23
<b>Medical-Only Claims (#)</b>	480	1,119	1,112	1,309	1,722	1,554
Paid Costs	\$500	\$439	\$597	\$637	\$655	\$544
Incurred Costs	\$593	\$519	\$613	\$703	\$709	\$811
<b>Indemnity Claims (#)</b>	723	1,226	1,331	1,282	1,642	1,728
Paid Costs	\$8,244	\$9,336	\$11,516	\$9,304	\$7,466	\$3,614
Incurred Costs	\$12,819	\$20,045	\$16,555	\$16,354	\$14,158	\$8,519
<b>Total Claims (#)</b>	1,203	2,345	2,443	2,591	3,364	3,282
Paid Costs	\$5,154	\$5,090	\$6,546	\$4,925	\$3,980	\$2,160
Incurred Costs	\$7,941	\$10,728	\$9,299	\$8,447	\$7,274	\$4,869

**Table B.4: Paid and Incurred Medical Service Cost 2004-2009**

	2004	2005	2006	2007	2008	2009
<b>3201.5 Construction Programs</b>						
<b>Reporting Programs (#)</b>	13	16	19	19	19	19
<b>Medical-Only Claims (#)</b>	480	1,119	1,111	1,305	1,291	806
Paid Costs	\$240,020	\$491,265	\$662,748	\$831,471	\$812,824	\$486,642
Incurred Costs	\$284,507	\$580,951	\$680,499	\$917,157	\$867,767	\$514,724
<b>Indemnity Claims (#)</b>	723	1,226	1,331	1,280	1,160	715
Paid Costs	\$5,960,447	\$11,445,886	\$15,327,466	\$11,877,579	\$9,980,472	\$3,629,169
Incurred Costs	\$9,268,464	\$24,575,747	\$22,035,164	\$20,915,635	\$19,341,839	\$6,787,974
<b>Total Claims (#)</b>	1,203	2,345	2,442	2,585	2,451	1,521
Paid Costs	\$6,200,467	\$11,905,140	\$15,990,214	\$12,709,050	\$10,793,295	\$4,115,811
Incurred Costs	\$9,552,971	\$25,156,698	\$22,715,663	\$21,832,792	\$20,209,606	\$7,302,698
<b>3201.7 Non-Construction Programs</b>						
<b>Reporting Programs (#)</b>			1	1	4	4
<b>Medical-Only Claims (#)</b>			1	4	431	748
Paid Costs			\$1,668	\$2,854	\$315,769	\$359,389
Incurred Costs			\$1,668	\$2,854	\$353,562	\$745,085
<b>Indemnity Claims (#)</b>			0	2	482	1,013
Paid Costs			\$0	\$49,784	\$2,278,557	\$2,615,186
Incurred Costs			\$0	\$49,784	\$3,904,991	\$7,932,349
<b>Total Claims (#)</b>			1	6	913	1,761
Paid Total Costs			\$1,668	\$52,638	\$2,594,326	\$2,974,575
Incurred Costs			\$1,668	\$52,638	\$4,258,552	\$8,677,434
<b>3201.5 and 3201.7 Total Programs</b>						
<b>Reporting Programs (#)</b>	13	16	20	20	23	23
<b>Medical-Only Claims (#)</b>	480	1,119	1,112	1,309	1,722	1,554
Paid Costs	\$240,020	\$491,265	\$664,416	\$834,325	\$1,128,592	\$846,031
Incurred Costs	\$284,507	\$580,951	\$682,167	\$920,011	\$1,221,328	\$1,259,810
<b>Indemnity Claims (#)</b>	723	1,226	1,331	1,282	1,642	1,728
Paid Costs	\$5,960,447	\$11,445,886	\$15,327,466	\$11,927,363	\$12,259,029	\$6,244,355
Incurred Costs	\$9,268,464	\$24,575,747	\$22,035,164	\$20,965,419	\$23,246,830	\$14,720,323
<b>Total Claims (#)</b>	1,203	2,345	2,443	2,591	3,364	3,282
Paid Costs	\$6,200,467	\$11,937,151	\$15,991,881	\$12,761,688	\$13,387,621	\$7,090,387
Incurred Costs	\$9,552,970	\$25,156,698	\$22,717,331	\$21,885,430	\$24,468,158	\$15,980,133