

2009 Claims Processing table updates

Insurer claim acceptance and denial, median time lag days, 1988-2008			
Year	Accepted	Denied	
1988	33	49	<p>In 1990, SB 1197 extended the time allowed for insurers to accept or deny a claim from 60 to 90 days. SB 485 (2001) reduced the allowed time back to 60 days.</p> <p>Since 2002, the median time taken to accept a disabling claim has been about 40 calendar days; the median time to deny a disabling claim has been about 48 days.</p>
1989	35	43	
1990	31	35	
1991	35	39	
1992	40	45	
1993	34	48	
1994	40	48	
1995	43	50	
1996	44	60	
1997	50	66	
1998	52	64	
1999	49	62	
2000	49	61	
2001	46	60	
2002	40	50	
2003	40	51	
2004	39	45	
2005	41	48	
2006	41	48	
2007	40	47	
2008	41	48	

Insurer timeliness of acceptance or denial and of first payments, 1990-2008			
Year	Acceptance/denial timely	First temporary disability payment timely	
1990	85.4%	80.1%	<p>Insurer performance on timeliness of acceptance or denial of claims improved between 1990 and 1994, to 96.1 percent, after which it generally declined to a low of 89.5 percent in 2005. However, it has improved for the past three years, to 92.8 percent in 2008.</p> <p>Timeliness of first payments has also improved since 1990. In 2008, 89.9 percent of the first payments of temporary disability benefits were made timely.</p> <p>Note: These data are self-reported by the insurers. The reports are audited by WCD.</p>
1991	91.5%	85.0%	
1992	94.2%	87.2%	
1993	96.0%	89.0%	
1994	96.1%	88.3%	
1995	95.1%	88.4%	
1996	94.5%	88.2%	
1997	93.2%	87.9%	
1998	92.6%	87.4%	
1999	92.8%	87.2%	
2000	92.9%	88.3%	
2001	92.3%	88.2%	
2002	93.1%	89.5%	
2003	90.2%	90.3%	
2004	90.1%	91.5%	
2005	89.5%	90.1%	
2006	90.9%	88.3%	
2007	91.2%	90.0%	
2008	92.8%	89.9%	

Claim closures, with insurer closures, 1987-2008

Year	Claim closures	Insurer closures	Percent insurer closures
1987	50,587	18,153	35.9%
1988	50,223	14,194	28.3%
1989	48,732	14,053	28.8%
1990	46,488	14,884	32.0%
1991	38,351	18,483	48.2%
1992	34,506	19,876	57.6%
1993	33,823	19,256	56.9%
1994	34,631	20,192	58.3%
1995	35,657	20,742	58.2%
1996	33,838	20,676	61.1%
1997	31,671	20,949	66.1%
1998	30,810	22,071	71.6%
1999	28,894	22,191	76.8%
2000	27,675	26,287	95.0%
2001	27,033	27,033	100.0%
2002	25,425	25,425	100.0%
2003	23,877	23,877	100.0%
2004	23,916	23,916	100.0%
2005	23,184	23,184	100.0%
2006	24,081	24,081	100.0%
2007	25,098	25,098	100.0%
2008	23,637	23,637	100.0%

The number of total closures, which includes insurers' disabling status reclassifications, has generally trended downward since 1995. The decline has averaged 3 percent per year.

SB 220, passed in 1999, phased out the department's former role in closing claims. After Jan. 1, 2001, insurers, self-insured employers, and third-party administrators have handled all claim closures, so all values since then for insurer closures are 100 percent.

Time lag from injury date to first closure, 1987-2008

Year	Average days	Median days
1987	255	169
1988	260	170
1989	271	181
1990	277	184
1991	271	176
1992	241	152
1993	231	148
1994	229	151
1995	232	155
1996	228	153
1997	224	150
1998	222	156
1999	225	156
2000	230	154
2001	243	160
2002	245	155
2003	239	154
2004	256	153
2005	236	154
2006	240	154
2007	230	149
2008	240	154

The average calendar days from injury to first closure for claims first closed in 2008 was 240 days. The average has fluctuated with no consistent trend since the early 1990s.

The median number of days from injury to first closure was 154 days in 2008. There has been almost no change in the median number of days over the past decade.

Civil penalties issued, 1990-2008

Year	Citations	Penalty amount	Citations and penalties against insurers have been trending upward since 2004. Not included in these statistics are stipulated agreements. These may encompass various violations of rules and statutes under ORS Chapters 656 and 731 and set up various performance expectations.
1990	407	\$158,325	
1991	420	156,775	
1992	506	163,101	
1993	621	166,650	
1994	679	197,025	
1995	525	139,325	
1996	491	140,850	
1997	629	244,175	
1998	813	254,925	
1999	789	243,375	
2000	844	248,875	
2001	738	204,400	
2002	947	301,900	
2003	1,241	343,875	
2004	677	206,675	
2005	745	360,600	
2006	951	588,150	
2007	915	575,800	
2008	1,140	596,775	

Abuse complaint investigations, FY 2002-2009

Fiscal year	Opened	Closed	In FY 2009, 23 investigations were opened concerning complaints of inappropriate actions by employers, providers, insurers, workers, and other parties. The counts exclude inquiries that did not require issuing a director's order or warning notice. In FY 2008, there were 92 such inquiries. These inquiries were usually resolved with educational counseling, referred to other agencies, or dropped after callers withdrew their complaints.
2002	110	93	
2003	87	94	
2004	63	76	
2005	62	70	
2006	20	21	
2007	7	7	
2008	8	8	
2009	23	13	

Workers' compensation information line calls for assistance, 1990-2008

Year	Worker calls	Other calls	Total calls	WCD has an information line to assist workers and others. In 2008, there were more than 6,700 calls from workers with questions about their claims, the claims process, or the workers' compensation system. Seven percent of these calls were fielded by bilingual benefit consultants. The line also received 4,715 calls from insurers, medical providers, attorneys, employers, legislators, and others in 2008.
1990	23,263	N/A	N/A	
1991	21,475	N/A	N/A	
1992	15,181	N/A	N/A	
1993	18,243	N/A	N/A	
1994	19,678	7,575	27,253	
1995	17,503	6,699	24,202	
1996	16,938	7,701	24,639	
1997	15,737	8,425	24,162	
1998	14,960	8,098	23,058	
1999	13,711	7,930	21,641	
2000	12,155	6,490	18,645	
2001	11,662	6,936	18,598	
2002	10,000	7,056	17,056	
2003	9,813	7,397	17,210	
2004	10,129	7,703	17,832	
2005	9,463	6,270	15,733	
2006	7,898	6,056	13,954	
2007	7,359	4,947	12,306	
2008	6,713	4,715	11,428	