

Table 2. Average temporary disability days and claim costs paid for resolved accepted disabling claims by resolution year and insurer type, Oregon, 1996-2009

Resolution year/Insurer		Claims resolved	Median temporary disability days	Mean temporary disability days	Average claim costs	Medical services	Indemnity	Temporary disability costs	PPD	CDA	DCS	Vocational assistance
1996	SAIF	9,001	17	64	\$12,480	\$4,810	\$7,670	\$3,250	\$2,250	\$1,540	\$230	\$400
	Private insurer	14,136	17	64	11,890	4,500	7,380	3,280	2,060	1,490	310	240
	Self-insured employer	5,772	16	54	10,360	4,230	6,130	2,990	1,890	860	220	170
	Non-complying employer	182	55	142	19,770	5,890	13,880	6,160	3,360	2,740	980	640
1997	SAIF	8,519	15	56	11,200	4,290	6,900	2,810	2,130	1,460	210	300
	Private insurer	13,483	16	59	11,340	4,190	7,140	3,140	1,990	1,480	310	230
	Self-insured employer	5,489	14	50	10,440	4,370	6,070	2,810	1,900	930	290	150
	Non-complying employer	111	53	126	19,110	6,550	12,560	5,480	3,990	2,130	230	730
1998	SAIF	8,101	16	57	12,100	4,680	7,420	3,030	2,310	1,570	220	290
	Private insurer	13,521	18	57	11,200	4,270	6,930	3,130	1,960	1,310	340	200
	Self-insured employer	5,069	16	47	9,930	4,350	5,580	2,680	1,880	700	210	110
	Non-complying employer	85	73	147	26,180	8,630	17,550	7,940	4,370	4,060	650	520
1999	SAIF	7,674	16	52	11,410	4,560	6,840	2,780	2,150	1,480	230	190
	Private insurer	12,826	18	60	12,350	4,860	7,490	3,400	2,110	1,440	350	190
	Self-insured employer	4,771	16	49	11,250	4,790	6,460	2,990	2,060	1,050	280	90
	Non-complying employer	79	54	146	32,180	11,930	20,250	5,570	5,900	6,050	2,310	410
2000	SAIF	7,919	16	52	12,700	5,520	7,180	2,930	2,240	1,540	240	220
	Private insurer	12,235	18	57	12,720	5,030	7,690	3,420	2,090	1,560	420	200
	Self-insured employer	4,427	16	53	12,530	5,550	6,980	3,290	2,270	920	350	160
	Non-complying employer	73	40	93	22,530	6,840	15,690	5,500	5,520	3,260	800	620
2001	SAIF	8,542	17	53	12,800	5,060	7,740	3,150	2,480	1,590	280	240
	Private insurer	11,217	19	62	13,900	5,590	8,310	3,810	2,190	1,650	460	200
	Self-insured employer	4,315	16	49	11,330	4,930	6,390	3,150	2,120	730	250	140
	Non-complying employer	85	51	98	20,500	7,740	12,760	4,870	5,930	830	760	380
2002	SAIF	8,586	18	56	14,060	5,930	8,120	3,370	2,580	1,670	280	220
	Private insurer	10,028	21	68	16,390	6,430	9,960	4,320	2,620	2,070	710	230
	Self-insured employer	4,308	16	51	12,850	5,670	7,180	3,340	2,220	1,090	400	140
	Non-complying employer	85	20	80	17,450	5,140	12,320	5,040	3,460	3,190	390	230
2003	SAIF	8,949	19	55	14,530	6,130	8,400	3,450	2,650	1,790	330	190
	Private insurer	8,442	20	71	17,620	7,240	10,380	4,720	2,790	1,940	640	280
	Self-insured employer	4,092	17	53	13,100	5,590	7,510	3,470	2,250	1,290	380	120
	Non-complying employer	100	20	72	\$18,460	\$8,430	\$10,030	\$4,030	\$3,620	\$1,400	\$590	\$400

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2004	SAIF	9,447	18	56	\$15,210	\$6,620	\$8,590	\$3,590	\$2,680	\$1,790	\$320	\$210
	Private insurer	8,218	20	69	18,480	7,730	10,750	4,680	2,950	2,200	680	250
	Self-insured employer	3,927	18	59	14,750	6,440	8,310	3,910	2,490	1,300	410	200
	Non-complying employer	92	37	75	21,170	8,690	12,470	4,400	4,640	2,140	820	480
2005	SAIF	9,978	18	58	15,540	6,620	8,920	3,760	2,900	1,740	290	230
	Private insurer	7,597	21	73	19,010	7,730	11,280	4,880	2,960	2,440	680	320
	Self-insured employer	3,730	19	58	15,170	6,770	8,410	3,920	2,530	1,290	450	220
	Non-complying employer	75	49	116	24,210	9,240	14,970	5,670	5,680	1,850	1,570	200
2006	SAIF	10,465	18	57	15,820	6,810	9,010	3,700	2,710	2,050	290	250
	Private insurer	7,923	22	70	18,330	7,680	10,650	4,780	2,610	2,430	590	230
	Self-insured employer	4,075	20	57	15,190	6,790	8,400	3,970	2,340	1,540	420	140
	Non-complying employer	66	59	115	27,620	11,400	16,220	5,770	6,660	2,180	1,240	380
2007	SAIF	10,945	18	59	15,950	6,860	9,090	3,900	2,490	2,080	390	230
	Private insurer	7,966	21	68	19,680	8,760	10,920	4,840	2,830	2,310	640	290
	Self-insured employer	4,246	20	64	17,290	7,390	9,900	4,800	2,580	1,850	460	210
	Non-complying employer	75	54	129	34,780	8,040	26,740	6,130	7,690	10,630	1,890	390
2008	SAIF	10,242	20	63	18,420	7,700	10,720	4,380	2,840	2,720	470	320
	Private insurer	7,746	24	74	21,240	8,710	12,530	5,450	3,060	3,040	750	230
	Self-insured employer	4,334	21	62	16,080	7,000	9,080	4,670	2,270	1,570	430	140
	Non-complying employer	78	138	207	32,440	12,860	19,580	9,480	3,760	2,880	3,210	250
2009	SAIF	9,306	28	77	22,440	9,420	13,020	5,470	3,360	3,160	640	390
	Private insurer	7,128	30	86	25,120	10,680	14,440	6,550	3,580	3,170	860	290
	Self-insured employer	4,369	22	70	18,450	7,920	10,530	5,150	2,770	1,880	600	120
	Non-complying employer	62	138	177	\$42,320	\$14,540	\$27,780	\$10,190	\$4,160	\$9,190	\$4,060	\$180

Footnotes on following page

Average temporary disability days and claim costs paid for resolved accepted disabling claims by resolution year and insurer type, Oregon, 1996-2009

Footnotes:

Accepted disabling claims are claims, accepted by insurers, arising from occupational injuries or diseases that entitle workers to compensation for disability or death. Fatality and permanent total disability (PTD) claims and their associated costs are excluded from this analysis.

Claims are reported by the year of claim resolution, which is the year of the latest notice of claim closure, determination order, or claim disposition agreement. This may be different than the year of injury or year of claim acceptance.

PPD = Permanent partial disability; CDA = Claim disposition agreement; DCS = Disputed claim settlement.

Claim cost is the composite of medical and indemnity costs. The components of indemnity are temporary disability, PPD, CDA, DCS, and vocational assistance. Reported cost statistics are means, unless otherwise specified. Costs have been rounded, and components may not sum to composite averages. In addition, due to the estimation process, conclusions should not be drawn for rows with a small number of claims.

Average costs for the indemnity components are computed over the total claims resolved. The temporary disability days and dollars include estimates of temporary disability for claims with claim disposition agreements prior to claim closure. Insurers do not report this data to the department. Indemnity costs incurred after claim closure that were paid through mid-May 2010 are also included in this table. This primarily includes permanent partial disability modified by dispute resolution, disputed claim settlements, and vocational assistance costs. These costs after resolution generally increase over time. Worker, employer, and insurer reimbursements from the Workers' Benefit Fund are also excluded.

Medical costs are reported at the time of claim resolution for approximately 88 percent of claims. The average medical costs of claims without data (mostly CDAs) are assumed to be the same as those with reported data. Medical costs after claim resolution, which are often substantial, are not included in this report.

Data in this table will change. The claim counts will change as claims are reopened and resolved. Also, as mentioned above, post-closure costs will increase over time. However, if past trends continue then the temporary disability days and costs for the most recent year will decline as claims are reopened and then closed in future years.

Source: Information Management Division, Oregon Department of Consumer and Business Services, June 2010