

Table 5c. Average time loss days and claim costs for accepted disabling claims by nature of injury or disease - neck, Oregon 2007

Nature of injury or disease	Claims resolved	Median time loss days paid	Mean time loss days paid	Average claim costs	Medical costs paid	Indemnity	Time loss dollars paid	PPD	CDA	DCS	Vocational assistance
Total	429	27	93	\$26,570	\$10,420	\$16,140	\$6,910	\$4,700	\$2,980	\$1,340	\$210
Traumatic injuries (0*)	381	20	79	21,780	9,160	12,630	5,640	3,740	2,070	1,010	180
Trauma to bones, nerves, spinal cord (01*)	45	135	184	71,830	31,510	40,320	14,710	16,600	5,370	2,750	900
Sprains, strains (02*)	307	14	56	11,290	4,280	7,010	3,920	930	1,260	810	80
Multiple traumatic injuries (08*)	22	92	174	54,410	23,380	31,030	9,840	14,480	6,250	470	0
Other/unknown traumatic injuries	7	20	107	54,490	31,260	23,230	9,230	10,460	3,360	0	180
Systemic diseases and disorders (1*)	23	85	158	57,770	21,170	36,600	12,950	13,110	8,890	900	740
Musculoskeletal, connective tissue diseases (17*)	21	100	171	61,760	21,810	39,960	14,050	14,360	9,740	990	820
Other/unknown systemic diseases and disorders	2	29	29	17,430	16,080	1,350	1,350	0	0	0	0
Multiple injuries, diseases and conditions (7,8,9)	24	192	247	74,540	24,240	50,300	19,370	11,570	11,920	7,150	290
Other/unknown diseases or conditions	1	276	276	\$81,180	\$15,320	\$65,860	\$54,470	\$11,390	\$0	\$0	\$0

Accepted disabling claims are claims, accepted by insurers, arising from occupational injuries or diseases that entitle workers to compensation for disability or death.

Claims are reported by the year of claim resolution, which is the year of latest claim closure or claim disposition agreement. Fatality and permanent total disability claims and their associated costs are excluded.

Body part and nature of injury are classified according to the Bureau of Labor Statistics' Occupational Injury and Illness Classification System (OIICS).

Claim cost figures have been rounded, thus component averages 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 all accepted disabling claims. The time loss days and dollars include estimates of time loss for claims with claim disposition agreements prior to claim closure. Insurers do not report this data to the department. Worker or employer reimbursements from the Workers' Benefit Fund are not included.

Indemnity costs incurred after claim closure that were paid through mid-May 2008 are included in this table. This primarily includes permanent partial disability and disputed claim settlements awarded at reconsideration or at hearings and vocational assistance costs. These costs after closure will increase over time.

Medical costs are reported at the time of claim closure for approximately 88 percent of claims. The average medical costs of claims without data (12 percent of claims) 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.

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

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 it is anticipated that the average time loss costs and time loss days 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, January 2009