

## **Colorado Workers' Compensation 2003 Closed Claim Study**

The 2003 Closed Claim Study has reviewed approximately 8,550 closed claims with permanency from 49 commercial carriers and from 62 self insurers. This includes approximately 348 new claims involving permanency that closed between July 1, 2001 and June 30, 2002 as well as revised information for those claims that were already in the database. This sample represents approximately 82% of the commercial workers compensation market as well as approximately 82% of the self-insurance market.

The study sets forth the following conclusions:

- A small upward claim cost trend was identified for indemnity, medical and total costs
- Use of Claimant Attorneys continues to be significantly associated with higher indemnity, medical and total costs
- Claims closed by settlement are more expensive than claims closed by admission, by order or by other method

The accident year of the claim was significantly associated with higher costs for medical costs, indemnity costs and for total costs as it was in last year's study. The rate of increase, 2.6% for indemnity, 3.3% for medical and 3.4% for total, is again considered small. If there is not a trend in the frequency of claims (frequency trends are not examined in the study because exposure information is not available), the claim cost trend would need to exceed the trend in wages to necessitate an increase in workers compensation rates.

As in prior studies, use of claimant attorneys continued to be significantly associated with higher indemnity, medical, and total costs. However, this does not necessarily imply a cause and effect relationship. It is possible that the claimant attorney is present in the larger claims that have a greater opportunity for dispute due to their size. The study did not capture claimant attorney costs. Therefore it cannot be determined whether or not claimant attorneys are associated with higher or lower net claimant awards.

Claims closed by settlement are more expensive than claims closed by admission, by order or by other method. This is not unexpected as claims with settlement are likely to be complicated and disputed.

This is the first year that marital status has shown a significant impact on any cost. Married claimants had significant lower medical costs and total costs.

The study provides many comparisons of the information on the new claims collected in the 2003 study to the information collected in the two earlier studies. In addition, the study provides detailed charts, graphs, and tables of the data.



# COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY 2003

A MILLIMAN GLOBAL FIRM



**Milliman** USA

*Consultants and Actuaries*

**State of Colorado  
Department of Regulatory Agencies  
Division of Insurance**

**COLORADO WORKERS COMPENSATION  
CLOSED CLAIM STUDY  
2003**

Prepared by:

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# COLORADO WORKERS' COMPENSATION CLOSED CLAIM STUDY 2003 EXECUTIVE SUMMARY

## INTRODUCTION

Colorado Senate Bill 91-218 (SB 218) was enacted by the Colorado General Assembly July 1, 1991 in response to widespread concern about the spiraling cost of workers compensation insurance. Among the many changes implemented by SB 218 were improvements in workers' compensation data collection and reporting that would lead to a better understanding of the costs that are driving the system.

The Division of Insurance identified the data to be collected by the National Council on Compensation Insurance (NCCI) from insurance carriers. Senate Bill 109, effective April 24, 1997, requires the Executive Director of the Department of Labor and Employment to collect similar information from self insurers. In general, the required elements include:

- Basic claim information about the accident, claimant, employer, and claim administration details;
- Benefit payment information such as medical, indemnity, vocational rehabilitation, and expenses; and
- Legal information such as claimant attorney involvement.

Milliman USA, Inc. (Milliman) was engaged by the Division of Insurance to conduct the 2003 Colorado Workers' Compensation Closed Claim Study (2003 study).

The purpose of this study is threefold:

1. To search for and obtain cost drivers associated with claims involving permanency;
2. To compare the results of this study with the results of the prior studies; and
3. To summarize and present the data collected (Cross-Tabulation Analysis).

The objective of this executive summary is to give an overview of the information contained in the report. It will summarize the statistically significant conclusions of the report regarding those cost drivers that affect the amount of a workers' compensation claim. This executive summary will also highlight the noteworthy differences between the 2003 study and the prior two studies, and it will present several data cross-tabulations. The report that supports this summary shows more extensive comparisons and greater detail.

## THE 2003 STUDY

The 2003 study continues to build upon the data collected in the earlier studies. A total sample of 8,550 claims involving permanency are now included (up from 7,411 last year). The carriers represented in the sample are Pinnacol Assurance (approximately 47% of the commercial market), 49 commercial insurers (approximately 35 % of the commercial market), and 62 self insurers (approximately 82% of self insurer market). Up until 1999, Pinnacol Assurance was known as CCIA (Colorado Compensation Insurance Authority).

For the commercial carriers and Pinnacol Assurance we relied on Detailed Claim Information (DCI) collected by NCCI along with supplemental information that we collected from the carriers on the same claims. The DCI is a continuing random sample of claims that began with accidents on or after January 1, 1991. We obtained an electronic copy of this database from NCCI as of August 2002.

For self insurer claims, we relied on data provided by the Colorado Division of Workers' Compensation (DWC). This data was also supplemented by data we collected directly from self insurers on the same claims.

For the comparison section of this study, we isolated the 134 DCI claims, and 214 self insurer claims that involved permanency and

were closed between July 1, 2001 and June 30, 2002.

For the regression analysis in this study, we utilized all claims from the prior studies since 1996 along with this year's claims. We then eliminated 1,421 claims with unknown values for any of the variables used in the regressions. This produced a total of 7,129 claims used in the regression analysis.

The chart numbers used in this executive summary are from the report. They will not necessarily be consecutively numbered in this summary.

## CONCLUSIONS

- A small upward claim cost trend was identified for indemnity, medical and total costs.
- Use of claimant attorneys continues to be significantly associated with higher indemnity, medical, and total costs.
- Claims closed by settlement are more expensive than claims closed by other methods.

In performing the regression analysis, it was found that the accident year of the claim was significantly associated with higher indemnity, medical and total costs. The rate of increase (2.6% for indemnity, 3.3% for medical and 3.4% for total) is considered small. Since the exposure base for workers' compensation is payroll, it also increases with wage trend. Absent a trend in the frequency of claims, only a claim cost trend which exceeds the wage trend will lead to increasing workers' compensation rates. This study examined only workers' compensation claims, and not the exposures underlying those claims. Therefore, there is no information from this study to test whether there is a frequency trend (positive or negative).

A claim cost trend was first found in the 2000 study for medical and total costs. An indemnity

claim cost trend was first found in the 2001 study.

As in prior studies, claimant attorneys continued to be associated with the higher indemnity, medical, and total claim costs, and this result was significant. However, this does not necessarily imply a cause and effect relationship. Although we did control for the severity of an injury through other variables, it is possible that the presence of a claimant attorney is another indicator of the severity of a claim as larger claims may have greater opportunity for a dispute, due to their complexity. Note that the data analyzed in this study did not capture claimant attorney costs. We are therefore unable to conclude whether or not claimant attorneys are associated with higher or lower net claimant awards.

A “significant” association implies that the statistical model indicated a 5% chance or less that the association could have been caused by randomness alone.

## REGRESSION RESULTS

### Cost Drivers Affecting the Amount of a Workers' Compensation Claim

A cross-tabulation analysis is informative, but it does not establish whether a relationship is statistically significant. A multivariate analysis is used for this purpose, that is, an analysis that looks at the pattern of relationships among several variables simultaneously.

Multivariate statistical analysis was performed to determine the marginal impact of claim characteristics on workers' compensation costs. Least squares regression was used to model indemnity, medical, and total costs as a function of claim characteristics. This technique allows us to identify those characteristics that have a significant relationship with the cost of a workers' compensation claim.

The following characteristics were significantly associated with *higher* workers' compensation costs for the identified categories of costs:

- Higher Pre-Injury Wage - Indemnity, Medical and Total Costs
- Accident Year - Indemnity, Medical and Total Costs
- Claimant is Male - Indemnity, Medical and Total Costs
- Claimant Attorney Involvement - Indemnity, Medical and Total Costs
- Self Insurer Claim - Indemnity, Medical and Total Costs

- Greater Number of Days to Close - Indemnity, Medical and Total Costs
- Vocational Rehabilitation Used - Indemnity, Medical, and Total Costs
- Hospital Used - Indemnity, Medical, and Total Costs
- Surgery Used - Indemnity, Medical, and Total Costs
- Closure by Negotiated Settlement - Indemnity, Medical and Total Costs
- Permanent Total Claim - Indemnity and Total Costs
- Fatal Claim- Indemnity and Total Costs
- Case Manager Involved - Indemnity, Medical and Total Costs
- Utilization Review Involved- Medical and Total Costs
- Chiropractor Used- Indemnity, Medical and Total Costs
- Physical Therapy Used - Indemnity, Medical Costs and Total Costs
- Greater Number of Days to Report - Indemnity, Medical and Total Costs

The following characteristics were significantly associated with *lower* workers' compensation costs for the identified categories of cost:

- Greater Lag to First Indemnity Payment - Indemnity, Medical, and Total Costs
- Closure by Admission - Indemnity and Total Costs

- Permanent Partial Schedule Claim - Indemnity and Total Costs
- Fatal Claim - Medical Costs
- Other Permanent Benefit Types - Indemnity, Medical, and Total Costs
- Early Reporting Phone Number Used - Indemnity Costs
- Claimant is Married - Medical and Total Costs

The regression model also tested the following characteristics, and did not find significant associations with costs:

- Claimant Age
- Employer Designated Provider
- Pinnacol Assurance Claim

If a characteristic is listed as significant for one type of costs, but not another, this means that there was no significant association with the type of cost not listed. For example, closures by admission were found to be significantly associated with lower indemnity costs and total costs, but were not significantly associated with medical costs.

Note that while the indemnity and total costs were significantly higher for fatal claims, the medical costs were significantly lower than the base group (permanent partial unscheduled claims). It is not unexpected that the medical portion of costs for fatal claims are lower than the medical costs for permanent partial unscheduled claims, while the total costs are higher.

It is important to point out the difference between association and cause and effect. Regression techniques can only determine associations; they cannot determine cause and effect. For example, a hospital stay was found to be significantly associated with higher indemnity costs. It is likely that the more serious injuries are more likely to require a hospital stay and consequently would involve higher indemnity costs. It does not imply that the hospital stay caused the higher indemnity costs.

This is the first year that marital status shows a significant impact on any costs.

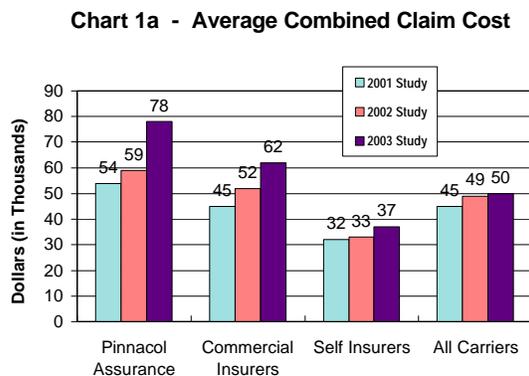
Additional variables were included primarily as controls. These were body part and nature of injury groupings, and industry groupings based on SIC code (Standard Industry Classification).

## COMPARISONS

### Average Costs

Chart 1a compares the average combined (indemnity and medical) claims cost of the latest three studies. Pinnacle Assurance generally shows the highest average costs, followed by the commercial insurers and then the self insurers.

The reader will note that in the regression section the report states that self-insured claims are significantly associated with *higher* costs (medical, indemnity and total) while in chart 1A the self insured costs are *lower* than the other entities. In the regressions the length to close variable has a large explanatory power. Thus, the implication for self-insurers is that they may pay more per day, but claims close more quickly so that average combined costs are less.



### Claim Size

Chart 2 displays the distributions by size of claim as both percent of claims and percent of dollars for each of the studies. Both the percentage of claims and the percentage of

dollars in the \$100,000-\$125,000 range have been increasing since the 2001 study.

**Chart 2a - Distribution by Claim Size**

**Incremental Count Distribution (Percent)**  
Excluding Claims Over \$100,000

Size of Claim	2001 Study	2002 Study	2003 Study
Under 10,000	16.3	12.4	12.6
10,001 - 20,000	22.4	19.6	17.7
20,001 - 30,000	17.3	16.5	13.5
30,001 - 40,000	9.2	10.3	11.4
40,001 - 50,000	9.2	9.3	11.1
50,001 - 60,000	4.1	7.2	7.5
60,001 - 70,000	4.1	5.2	6.6
70,001 - 80,000	3.1	4.1	3.6
80,001 - 90,000	2.0	3.1	4.2
90,001 - 100,000	2.0	2.1	2.7
100,001 - 125,000	3.1	5.2	5.4
Over 125,000	8.2	6.2	8.1

**Chart 2b - Distribution by Claim Size**

**Incremental Dollar Distribution (Percent)**  
Excluding Claims Over \$100,000

Size of Claim	2001 Study	2002 Study	2003 Study
Under 10,000	1.1	1.1	1.5
10,001 - 20,000	7.4	6.3	5.1
20,001 - 30,000	9.6	8.4	6.5
30,001 - 40,000	6.4	7.4	7.9
40,001 - 50,000	9.6	8.4	10.1
50,001 - 60,000	5.3	7.4	8.1
60,001 - 70,000	5.3	7.4	8.5
70,001 - 80,000	5.3	6.3	5.4
80,001 - 90,000	6.4	5.3	7.0
90,001 - 100,000	4.3	4.2	5.0
100,001 - 125,000	6.4	11.6	11.8
Over 125,000	38.3	31.6	30.0

### Claimant Attorney Involvement

Attorney involvement in the studies since 1996 is defined as the use of a claimant attorney. The percent of claims closing with claimant attorney involvement has stayed at about 40% for the last three studies.

Chart 5d shows the comparison of average claim costs by attorney involvement. The pattern shown in prior studies is continued this

year. That is, claims involving an attorney are more expensive.

**Chart 5d - Comparison of Average Claim Costs by Attorney Involvement**

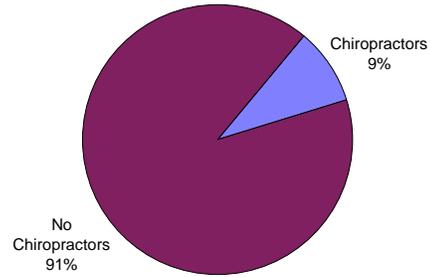
	2001 Study	2002 Study	2003 Study
<b>Pinnacol Assurance</b>			
Claimant Attorney	\$81,205	\$82,692	\$89,088
No Claimant Attorney	27,291	31,576	59,664
<b>Commercial Insurers</b>			
Claimant Attorney	\$48,875	\$60,328	\$68,404
No Claimant Attorney	46,033	53,079	64,976
<b>Self Insurers</b>			
Claimant Attorney	\$59,624	\$58,851	\$59,831
No Claimant Attorney	21,264	21,811	27,037
<b>All Carriers</b>			
Claimant Attorney	\$72,829	\$72,597	\$71,319
No Claimant Attorney	31,228	35,830	38,178

### Chiropractor Involvement

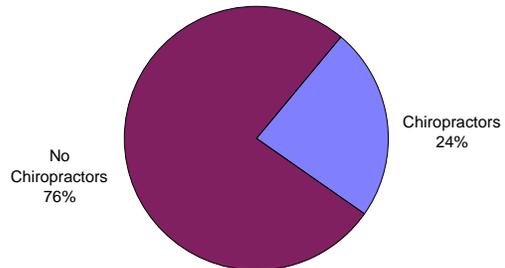
As shown in Charts 6a to 6c, the percent of claims with chiropractors is down slightly from last year's study. In the 2002 study this percentage had more than doubled from the 2001 study.

The costs of chiropractor claims are addressed in the regression section where total medical costs are taken into account. This allows the incorporation of all the medical services that a chiropractor might provide. A comparison of the average cost of a chiropractor to the average cost of another medical provider might not consider all these services.

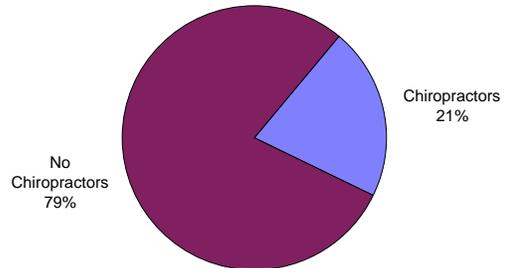
**Chart 6a - 2001 Study**



**Chart 6b - 2002 Study**



**Chart 6c - 2003 Study**

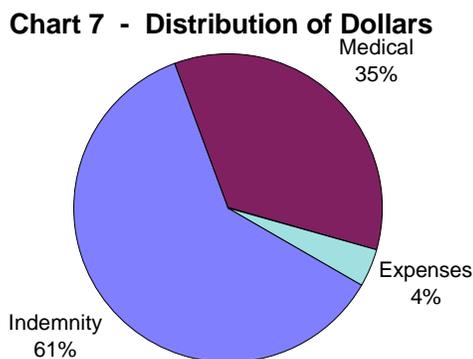


## CROSS TABULATION RESULTS

Averages are shown in this report for descriptive purposes only; they demonstrate neither a correlation nor a cause and effect relationship between variables. The averages help the reader obtain a general view of the data. "Total cost" in this section refers to the sum of indemnity (including lump sum payments), medical, vocational rehabilitation, and loss adjustment expenses. Since the definition of total cost in the Comparisons section above did not include the vocational rehabilitation and expense values, there will be slight differences between the results in this section and the results in the Comparisons section.

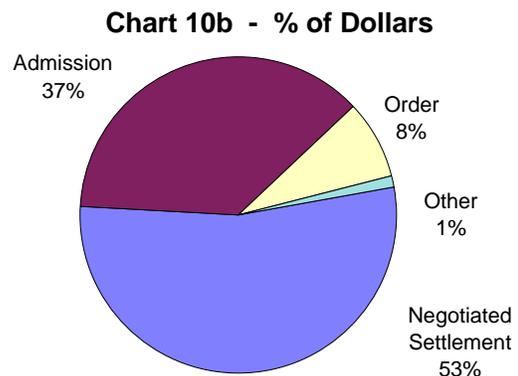
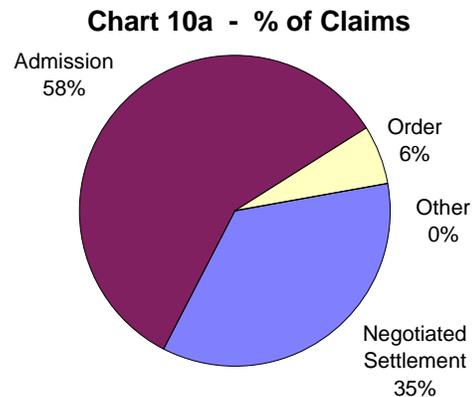
### Total Cost

The total cost in the sample of new claims was approximately \$18 million. The distribution of costs by type are shown in Chart 7.



## Claims and Costs by Method of Closure

Method of closure is categorized as negotiated settlement, admission of liability, order, or other. The distribution of claims in this year's study shows a slightly lower level of claims closed by negotiated settlement, and a slightly higher percent of claims closed by admission from the prior two studies. Chart 10a shows that, of the claims where method of closure was coded, 58% closed with an admission, 35% closed with a negotiated settlement, and 6% closed by an order. Chart 10b shows that claims closed by admission represented 37% of total cost, claims closed by negotiated settlement represented 53% of total cost, and claims closed by an order represented 8% of total cost.



The average total cost of claims closed by negotiated settlement continues to be approximately two and one half times the cost of claims closed by admission.

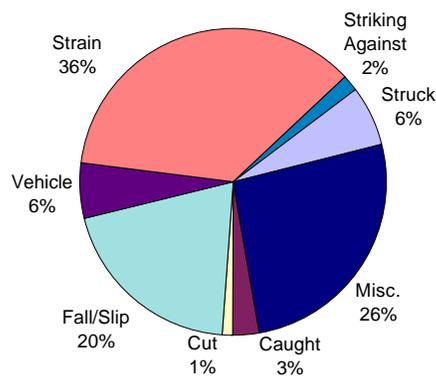
**Chart 10c - Method of Closure**

Method of Closure	Number of Claims	Dollar Cost of Claims	Average Cost of Claims
Negotiated Settlement	122	\$9,600,698	\$78,694
Admission	201	\$6,695,914	\$33,313
Order	21	\$1,404,840	\$66,897
Other	1	\$129,932	\$129,932
Not Reported	3	\$193,789	\$64,596
Totals/Average	348	\$18,025,173	\$51,796

**Claims and Costs by Cause of Injury**

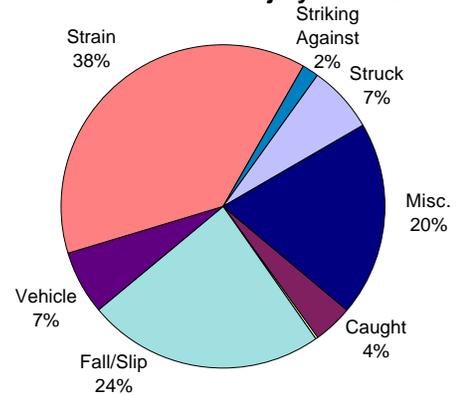
The two most common causes of injury observed were strain and fall/slip. Chart 11a shows that 36% of the injuries in the sample were caused by a strain and 20% were caused by a fall or slip.

**Chart 11a - Cause of Injury - % of Claims**



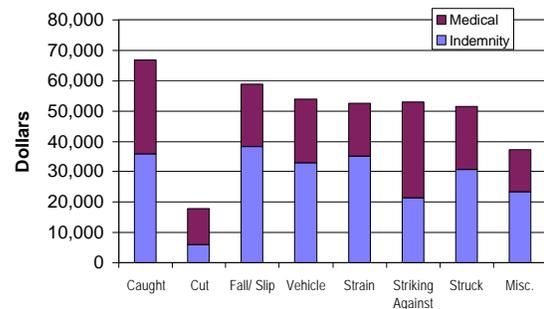
Correspondingly, the causes of injury representing the largest proportion of total costs were strain and fall/slip. Chart 11b shows that 38% of the total dollars included in the sample were from injuries caused by strain and 24% were from injuries caused by a fall or slip.

**Chart 11b - Cause of Injury - % of Dollars**



The average indemnity plus medical costs were highest for injuries in the “caught in or between” category, followed closely by most other categories.

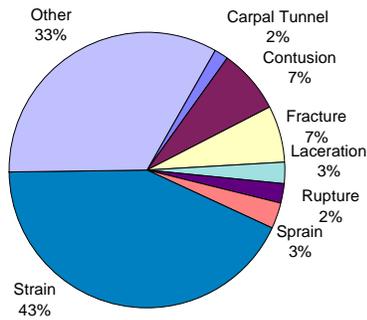
**Chart 11c - Cause of Injury Average Cost for Indemnity & Medical**



### Claims and Costs by Nature of Injury

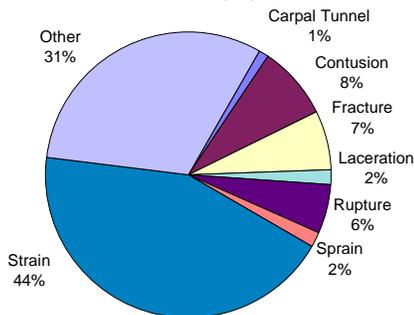
The most common natures of injury, based on percent of claims, were strain (43%), fracture (7%) and contusion (7%). Carpal Tunnel Syndrome represented approximately 2% of the claims in the study. The category of “other” shown on the charts below not only includes the “all other” that was coded, but also contains the classes that each had less than 2% of the claims sampled. These included such natures of injury as amputation, inflammation, and puncture.

Chart 12a - Nature of Injury - % of Claims



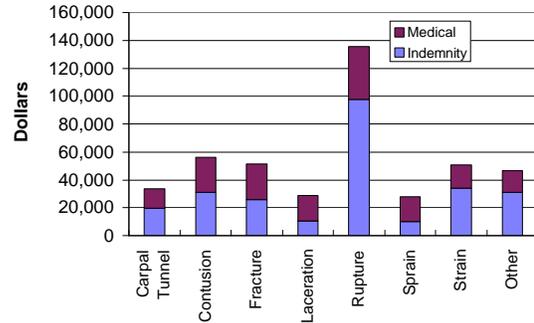
The natures of injury representing the largest proportion of total cost were strain (44%), fracture (7%) and contusion (8%). Carpal Tunnel Syndrome represented less than 2% of the dollars in the study.

Chart 12b - Nature of Injury - % of Dollars



Among the natures of injury with greater than 2% of claims, the average medical plus indemnity costs were higher by far for ruptures.

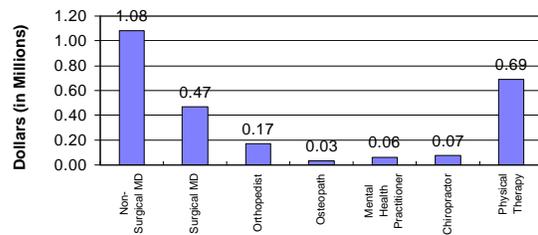
Chart 12c - Nature of Injury  
Average Cost for Indemnity & Medical



### Components of Medical Costs

The distribution of charges by type of doctor is broken down in chart 17b.

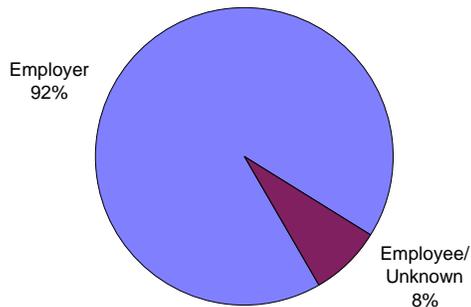
Chart 17b - Distribution of Charges by Type of Doctor



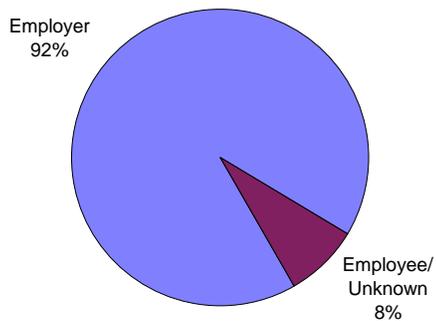
Payments to physical therapists appeared in 87% of claims and accounted for 11% of the total medical costs. Payments to chiropractors appeared in 21% of the claims and accounted for 1% of the total medical costs (see Table 17 in Appendix C).

Charts 18a and 18b show that in 92% of the claims as well as 92% of the dollars, the employer designated the medical provider for the claimant. For the remaining claims, the employer did not designate or the designation was unknown.

**Chart 18a - Designator of Medical Provider  
% of Medical Claims**



**Chart 18b - Designator of Medical Provider  
% of Medical Dollars**



### Managed Care

In this study, a claim is considered a managed care claim if one or more of the following parameters is present:

- An 800 telephone number for early reporting
- A Case Manager
- A network of doctors as in a PPO or an HMO
- Utilization Review, either prospective or retrospective

Managed care claims represent 91% of the total number of claims. Managed care was used for all of the Pinnacle Assurance claims.

## LIMITATIONS

In preparing this report, we relied upon data from a variety of sources. These sources included the DCI data collected by NCCI, self insurer data collected by the Colorado Department of Labor, and supplemental information collected by Milliman from each of the participants. While we did review the data for reasonableness and consistency, we did not audit the data for accuracy. Such an audit is beyond the scope of this assignment. If the data submitted is inaccurate or incomplete, the results of this report may likewise be inaccurate or incomplete.

Workers' compensation data is subject to a wide range of potential costs. We reviewed a sample of 8,550 claims. Many of the summaries and cross-tabulations will contain substantially fewer claims. Caution must be used in comparing various costs as the results may not be statistically significant or may be related to other undisclosed factors. The regression analysis in this report identifies relationships in the data that show significance.

Note that a statistically significant relationship does not imply cause and effect. It is only indicative of a relationship. Although we do discuss potential reasons for the results

observed, it is highly likely that there are other plausible explanations that we have not identified.

Pinnacol Assurance operates as a market of last resort in Colorado. It is possible that their mix of business by employer represents greater hazard and potential for large loss than that of commercial insurers or self insurers.

This study is a closed claim study. For lines of insurance like workers' compensation where claims may remain open for a substantial length of time, a closed claim study will encompass claims across several time periods. Differences in benefit levels, market shares across time, and claim settlement practices will have a large impact on costs and cost comparisons. Identification of market shares across time and claim settlement practices involve exposure information that was not collected in this study. The lack of such exposure information increases the variability of results and decreases the significance of any comparisons. In addition, the comparison of averages from different time periods will be affected by the limitation of Pinnacol Assurance and commercial carrier claims to only those occurring subsequent to January 1, 1991.

## **CLOSING REMARKS**

We appreciate the opportunity to provide this report. We would like to thank the Division of Insurance, the Division of Workers' Compensation, NCCI, and the participants from Pinnacol Assurance, commercial insurers, and self insurers who submitted data. We recognize that provision of the data requested represented a significant contribution of time and effort. We would especially like to thank the participants for their prompt and courteous responses to our questions concerning the data submitted.



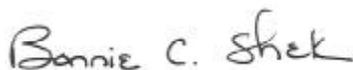
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January 31, 2003

## **COLORADO WORKERS' COMPENSATION CLOSED CLAIM STUDY 2003**

### **INTRODUCTION**

Colorado Senate Bill 91-218 (SB218) was enacted by the Colorado General Assembly July 1, 1991 in response to widespread concern about the spiraling cost of workers compensation insurance. Among the many changes implemented by SB 218 were improvements in workers' compensation data collection and reporting that would lead to a better understanding of the costs that are driving the system.

Senate Bill 218 was a substantial reform to the then existing Colorado Workers' Compensation Act. It became quite apparent during the 1980's that workers' compensation costs were spiraling upward. However, the existing workers' compensation databases were geared to the identification of overall costs for the purpose of ratemaking and did not identify the factors driving the increases. There was some ancillary and explanatory information in the existing database, but this was considerably short of the desirable information needed to identify and correct the drivers impacting workers' compensation costs.

The lack of critical information concerning the existing workers' compensation system affected the general assembly's ability to draft the appropriate change. There was often considerable dispute concerning the potential

impact of changes and a lack of agreement concerning the problems with the system as it existed. This informational void created uncertainty concerning the costs and benefits of changes proposed.

In response to the workers' compensation reforms enacted in 1991 by the Colorado legislature, the Division of Insurance promulgated Regulation 5-3-2 which identified the data to be collected by the NCCI from insurance carriers. Senate Bill 109, effective April 24, 1997, requires the Executive Director of the Department of Labor and Employment to collect similar information from self-insurers. Self insurers contributed data in the 1996 and prior studies as well as the 1998 and subsequent studies, but were exempt from the data collection requirement during the 1997 study. In general, the required elements include:

- Basic claim information about the accident, claimant, employer, and claim administration details;
  - Benefit information such as medical, indemnity, vocational rehabilitation, and expenses; and
  - Legal information such as claimant attorney involvement.
-

These workers' compensation data reports are designed to fill the informational void concerning the cost drivers of workers' compensation. Future costs will need to be monitored to determine the effectiveness of the Senate Bill 218 reform, and to provide information so costs can continue to be controlled as changes occur and the system evolves.

Milliman USA, Inc. was engaged by the Division of Insurance to conduct the 2003 Colorado Workers' Compensation Closed Claim Study (2003 Study). Prior reports were prepared in 1996 - 2002 by Milliman and in 1990, and 1993 - 1995 by Tillinghast, a Towers Perrin Company. The Milliman reports are descriptive in nature: our objective is to present a snapshot picture of the variables affecting workers' compensation costs.

## THE 2003 STUDY

The 2003 study continues to build upon the data collected in the earlier studies. A total sample of 8,550 claims involving permanency are now included (up from 7,411 last year). The carriers represented in the sample are Pinnacol Assurance (approximately 47% of the commercial market), 49 commercial insurers (approximately 35% of the commercial market), and 62 self insurers (approximately 82% of the self insurer market). Up until 1999, Pinnacol Assurance was known as CCIA (Colorado Compensation Insurance Authority).

For the commercial carriers and Pinnacol Assurance we relied on Detailed Claim Information (DCI) collected by NCCI along with supplemental information that we collected from the carriers on the same claims. The DCI is a continuing random sample of claims that began with accidents on or after January 1, 1991. We obtained an electronic copy of this database from NCCI as of August 2002.

For self insurer claims, we relied on data provided by the Colorado Division of Workers' Compensation (DWC). This data was also supplemented by data we collected directly from self insurers on the same claims.

To supplement the DCI and DWC data, we collected a breakdown of medical dollars by type of provider, information on managed care, method of closure, designator of medical provider, and the number of days hospitalized.

For the comparison section of this study, we isolated all DCI claims involving permanency that closed between July 1, 2001 and June 30, 2002. This produced 134 new Pinnacol Assurance and commercial carrier claims. For self insurers, we included 214 new claims closed between July 1, 2001 and June 30, 2002.

The demographic characteristics of the new claims are set forth below:

**Demographic Characteristics of the 2003 Study**

	Male	Female
Average Age	45.7	46.7
Percent Married	63.6%	55.6%
Percent of Claims	63.5%	36.5%
Percent of Dollars	66.9%	33.1%

For the regression analysis in this study, we utilized all DCI closed claims involving permanency and all self insurer claims from our prior studies. We then eliminated 1,421 claims with unknown values for any of the variables used in the regressions. This produced a total of 7,129 claims.

This report provides the results of the 2003 study. It is divided into the following sections: regression analysis; comparisons to the two earlier studies and cross-tabulations. Information on the sample is included in Appendix A. Appendix B contains the regression analysis, and Appendix C contains the tables of the cross-tabulation results.

## REGRESSION ANALYSIS RESULTS

Regression analysis is concerned with modeling the relationships between variables. Through the use of regression, we seek to evaluate the relationship between the cost of a claim (indemnity, medical and total) and other potential explanatory variables. Regression can be used to both determine whether a particular variable is significant in explaining the cost and to describe the nature of the relationship. When a characteristic is listed as significant, it implies that the statistical model indicated a 5% chance or less that the association could have been caused by randomness alone. In this case, we would say that the result was significant at the 0.05 (5%) level.

When interpreting the results of a regression analysis, it is important to recognize the difference between association and cause and effect. Regression only establishes whether or not there is an association between variables. It cannot determine whether a cause and effect relationship is involved. For example, the use of a case manager was found to be significantly associated with higher costs. It is likely that the more serious cases, those with potentially higher costs, require a case manager. It does not imply that the use of a case manager caused the higher cost.

In the regression analysis we are attempting to understand as many of the impacts of explanatory variables as possible. We represent total costs (indemnity, medical, and total) by a

multiplicative function of the potential explanatory variables. The use of a multiplicative function allows us to express the impact in terms of percentage changes in cost. Where we show a percentage impact in the tables below, it also implies that the relationship is significant at the 5% level. Where a variable is not shown, it implies that the variable tested was not significant. If a variable is listed, but no percentage impact is shown, it implies that the particular impact was not significant for that category of loss (indemnity, medical, or total), but was significant for at least one other category of loss. Appendix B to this report shows the impact of each variable that is significant for any category of loss along with the level of significance. The shaded variables on each sheet are the ones that are not significant.

### Nature of Injury and Part of Body

We grouped the various nature of injury and part of body codes into one of nineteen different classes. A total of ten of these showed differences in cost that were significant. In the next table, we show the impact in terms of the percentage deviation of each group from the comparison group which is the average of the remaining nine groups not shown.

1. Type of Injury	Percentage Impact on		
	Indemnity	Medical	Total
Back Sprains and Strains	65%		30%
All Other Back Injuries	76%		36%
Intermediate Fractures/Dislocations		21%	
Fractures/Dislocations Hands and Digits	-33%	-10%	-23%
Cut/Laceration/Contusion Hand and Finger	-62%	-25%	-44%
Sprains/Strains to Lower Body	14%		
Knee Disorders		26%	7%
Neck & Head	29%		19%
Major Trauma	27%	11%	19%
Burns		33%	

It is important to recognize that the chart shows the impact of only those groups exhibiting a significant difference in cost. It is often the case that some combinations of nature of injury and part of body are more expensive (e.g., burns and face), but if the variation of the costs of that particular category is also large (e.g., many burns can be quite minor), then the difference will not be significant. Of the categories exhibiting significant differences, injuries to the back are the most expensive, 30% more than the comparison group for back sprains and strains, and 36% more expensive for all other back injuries. It is apparent that this difference results from the difference in indemnity costs, where back sprains are 65% more expensive than the comparison group, and all other back injuries are 76% more expensive than the comparison group. Medical costs were not significantly different from the comparison group for back injuries. The differences in costs between the other groups exhibit little surprise.

### Type of Industry

We grouped claims by Standard Industrial Code (SIC) groupings. We initially selected the following eleven broad groups:

- Agriculture
- Mining
- Construction
- Manufacturing
- Transportation
- Wholesale Trade
- Retail Trade
- Finance, Insurance and Real Estate
- Services
- Public Administration
- Non Classifiable or Unknown

Of these groups, only the following three showed a significant difference in cost from the average of the other groups:

2. Type of Industry	Percentage Impact on		
	Indemnity	Medical	Total
Mining			17%
Construction	24%		12%
Transportation	26%		16%

It is interesting that the differences in indemnity costs for construction and transportation are driving the difference in total cost. The difference in medical costs were *not* significant for any of these groups. One potential explanation for the significantly higher indemnity costs for these two SIC groups and no similar difference in medical costs may be that a given physical injury in these industries (proxied by average medical costs) is more disabling, leading to longer time loss. This could be true even though permanent partial disability benefits are impairment based. It could be that the healing periods are longer, or that the system compensates by assigning higher impairment ratings.

### Claimant Characteristics

We initially tested the following four claimant characteristics for potential significant differences in cost.

- Pre-injury wage (percentage change)
- Claimant age (in years)
- Claimant gender is male (yes, no)
- Claimant is married (yes, no)

The table below shows the results for the characteristics exhibiting differences in cost that were significant.

3. Claimant Characteristics	Percentage Impact on		
	Indemnity	Medical	Total
Male	14%	6%	10%
Pre-injury Wage (Elasticity)	39%	8%	25%
Married		-8%	-5%

Males show significantly higher costs than females. This result is consistent with the results of prior studies in this regard. Since we separately measure differences in cost resulting from pre injury wages, wage differences between males and females is not an explanation. We would expect, however, that a larger proportion of males than females may be involved in physical work where there is a greater chance of being involved in a serious accident, or where substantial physical recovery is required prior to returning to work.

We show the impact of wages as an elasticity. An elasticity describes the relationship between percentage changes. In this case, it is the relative response in costs (indemnity, medical, or total) to a percentage change in the wage. The 25% for total costs means that we expect total costs

to increase by 25% of any percentage change in wages. For example, if one worker has wages that are 10% higher than another, we expect that total benefit costs for the higher paid worker will be 2.5% higher (25% of the 10% is passed through as a workers' compensation cost).

We were somewhat surprised not to find a higher relationship between wages and benefits (i.e. closer to 100%), particularly for indemnity. Except for permanent partial scheduled benefits and the impact of minimum and maximum benefits, the indemnity benefit formula is proportional to wages. There are several potential reasons why a stronger relationship is not observed. Higher wage workers may be more likely to be in supervisory roles, and consequently, not exposed to as much hazard as lower paid workers. Higher wage workers may also have a greater opportunity cost of lost wages than lower paid workers, and therefore return to work earlier. The maximum weekly benefit would flatten the response of benefits to wages. Finally, it is possible that injuries that are settled are compensated on the basis of the severity of the injury rather than as a function of wages (e.g., adjuster and claimant agree on a specific dollar amount).

The +8% result in Table 3 does confirm the widely held belief that higher medical costs are associated with higher pre-injury wages. This can result if wages and medical costs co-vary with geography (e.g., if urban workers are paid more and urban medical costs are also higher),

or if higher-paid workers are better educated and consequently demand more expensive medical treatment.

This is the first year that marital status showed a significant impact on medical and on total costs. The variable of age continues to not show a significant impact on costs

**Time Sensitive Components**

We test the following four variables for their potential impact on cost:

- Accident Year
- Length to Close (percentage change)
- Delay to Initial Report of Injury
- Delay to First Indemnity Payment

All four were significant.

4. Time Sensitive Components	Percentage Impact on		
	Indemnity	Medical	Total
Accident Year	2.6%	3.3%	3.4%
Length to Close (Elasticity)	77.2%	68.8%	73.5%
Report Lag	0.03%	0.04%	0.03%
First Indemnity Payment Lag	-0.1%	-0.1%	-0.1%

The positive association between accident year and costs implies that costs are increasing over time. However, the size of the relationship (3.4%) is not inconsistent with recent wage growth rates in Colorado, and is not by itself alarming. Absent a frequency trend, since the exposure base for workers' compensation premium is payroll, an increase in benefit costs equal to the exposure payroll growth rate implies a stable rate trend. We calculate that an annual exposure payroll growth rate of

approximately 4.6% or higher is enough to offset this accident year trend in costs. A growth of 4.6% in exposure payroll implies an increase in benefit costs of the same magnitude and consequently no contribution to a rate trend (1.2% for the wage elasticity above (25% of 4.6%), plus the 3.4% increase in costs for the accident year trend).

We found that the length-to-close was the single characteristic having the greatest explanatory power in the regression model. It was found that the longer a claim remains open the higher the associated costs. Like wages, the impact is expressed as an elasticity. That is, the 77% impact on indemnity costs implies that if the length-to-close is increased by 100% (e.g., from one year to two), indemnity costs are increased by 77%. This is expected since indemnity payments are often paid periodically, and the more serious injuries are expected to last longer. The somewhat lower impact for medical costs is also expected. Medical costs are often characterized by high initial expenses to diagnose, stabilize and cure followed by a leveling off.

The longer the delay to report a claim, the higher the medical costs. The result above is expressed as the percentage change in costs for each day delay in reporting a claim. For example, the 0.04% impact on medical costs implies that if a claim had a 100 day delay in reporting, the medical costs are expected to be 4% higher. As expected, earlier reporting allows a claim to be better managed. In fact, as we

will later show, the presence of an early reporting mechanism does indicate a reduction in costs comporting to the theory that claims that are reported earlier are better managed.

The number of days to the first indemnity payment is significantly associated with lower indemnity, medical, and total costs. In other words, the longer the delay in making the first indemnity payment, the lower the costs. This result is also expressed as the percentage change in costs for each day delay in the first indemnity payment. For example, the -0.1% impact on total costs implies that if a claim had a 50 day delay in first indemnity benefits, there is a 5% reduction in costs.

The delay in making the first indemnity payment is possibly due to the investigation of questionable claims, thereby resulting in the successful elimination of unnecessary costs. Another explanation for the delay is that the disability may surface at some time after the accident actually occurred. This delay causes the period of time in which payments are made to be shorter, thus resulting in fewer payments. Finally, if there is a delay in making indemnity payments, then it is likely that the initial injury was not as severe. Certainly, most serious traumatic injuries involve a period of immediate incapacity. If the initial injury was not severe enough to involve an immediate incapacity then it is also likely that there would be lower than average initial medical treatment and lower than average indemnity and medical costs.

## Type of Carrier

We examined the level of costs based on the type of carrier providing the benefits. The following carrier types were compared:

- Pinnacol Assurance Claim
- Self-Insurer Claim
- Commercial Carrier Claim

The table below shows the results for self-insureds - the only entity where the cost differences were significant. Pinnacol Assurance claims no longer show a significant difference in costs.

5. Type of Carrier	Percentage Impact on		
	Indemnity	Medical	Total
Self-Insured Claim	11%	21%	15%

The relationship shown above is relative to the level of costs of commercial carrier claims. The self-insurer claims are 15% more expensive than commercial claims. Self insurers pay more per day open than commercial insurers, but also have fewer days open offsetting the cost. This can occur if liberal permanent impairment benefits are offered to encourage early return to work and swift resolution. Extreme care must be used in evaluating these results, however. We found that because the length-to-close variable has such large explanatory power, the type-of-carrier variable is picking up only residual unexplained variation. We reran the model deleting the length to close variable. The self-insureds did show significantly higher costs with this revised mode.

## Claim Characteristics

We examined the following claim characteristics, all indicated by a yes or no response.

- Claimant attorney involvement
- Chiropractor involvement
- Claim is post-Senate Bill 218
- Physical Therapy used
- Hospital used
- Surgery used
- Vocational rehabilitation used

The next table shows the percentage change in costs associated to a yes response to any of these variables compared to a no response for the claim characteristics where the cost differences were significant.

6. Claim Characteristics	Percentage Impact on		
	Indemnity	Medical	Total
Claimant Attorney	20%	11%	16%
Chiropractor Used	10%	11%	8%
Physical Therapy Used	18%	35%	22%
Hospital Used	27%	82%	40%
Vocational Rehabilitation Used	49%	20%	44%
Surgery Used	6%	15%	8%

The presence of a claimant attorney is associated with higher claim costs. Overall, we found that costs were 20%, 11%, and 16% more expensive for the indemnity, medical, and total cost categories, respectively, when claimant attorneys were involved. There are different possible explanations for the significance of this variable. It could be that claimant attorneys are successful in obtaining higher benefits for their clients. It may also be that more serious injuries tend to be more complicated and therefore, are more likely to have an attorney. The greater impact on

indemnity cost than medical could result if the presence of an attorney increases the likelihood of a settlement. We found that some carriers code all settlement dollars to the indemnity category of benefits (with a settlement, it is often not clear what the components are). If an attorney implies a greater probability of a settlement, then we would expect a somewhat larger proportion of indemnity benefits on attorney represented claims due to this coding procedure. The data call did not collect information on claimant attorney fees (often these are not known by the carriers). Therefore, we are unable to assert whether the claimant received a net benefit considering the cost of the attorney against the award.

Chiropractors were also associated with higher claim costs. We found that indemnity costs were 10% higher, medical costs were 11% higher and total costs were 8% higher when a chiropractor was involved with the claim.

We also found that the use of physical therapy is an indicator of higher cost. Indemnity, medical, and total benefit costs are 18%, 35%, and 22% higher when a claimant utilizes physical therapy. This result is not surprising since generally the more serious the medical injury, the more likely there will be physical therapy required.

The use of a hospital and the use of surgery were both found to be significantly associated with higher indemnity, medical and total costs. When an injury requires treatment in a hospital,

or requires surgery, it is usually serious enough to require more medical attention and longer recovery periods. In addition, hospital stays in and of themselves entail substantial expense as indicated by the 82% increase in medical cost associated with claims involving a hospital stay.

The use of vocational rehabilitation is associated with higher costs. Specifically, indemnity, medical, and total costs were each 49%, 20%, and 44% higher than claims with no vocational rehabilitation benefits. Vocational rehabilitation is generally only necessary when someone has a serious enough disability to require a change in employment or job function. Therefore, the higher indemnity, medical, and total costs could result, not because of the use of vocational rehabilitation, but because of all the medical attention and recovery time involved in treating a serious injury or disability.

### Method of Closure

We looked to the cost impact associated with the following different methods of closure:

- Negotiated settlement (yes, no)
- Admission (yes, no)
- Order (yes, no)
- Other (no for each of the above)

There was one claim closed by “other” so this category was combined with “order” to form the reference group. The table below shows the percentage change in costs associated with

claims closed by settlement or admissions as compared to the reference group.

7. Method of Closure	Percentage Impact on		
	Indemnity	Medical	Total
Settlement	39%	17%	30%
Admission	-25%		-17%

It was found that costs do differ by method of closure. For total costs, the ranking from most expensive to least is: negotiated settlement, order/other and admission. Negotiated settlements are 30% more expensive than claims closed by order/other, and admissions are 17% less expensive.

This result is expected since claims with settlements are likely to be complicated and disputed. Negotiated settlements, in particular, also include amounts intended to compensate the claimant for costs beyond the date of closure, and may also include compensation for facts that are disputed. Closure by admission generally results from claims achieving their natural end at the time of final admission. These claims are likely to be less complicated, have fewer areas of dispute, and be shorter duration. Small claims tend to resolve themselves with little intervention required.

### Benefit Types

We looked at claims cost for the following benefit types:

- Permanent Total claim (yes, no)
- Fatal claim (yes, no)

- Permanent Partial Scheduled (yes, no)
- Other (yes, no)
- Permanent Partial Unscheduled  
(a default classification resulting from “no” on all other types)

The results are shown below, where the base group to which the others are compared is permanent partial unscheduled:

8. Benefit Type	Percentage Impact on		
	Indemnity	Medical	Total
Permanent Total	122%		90%
Permanent Partial Schedule	-23%		-17%
Fatal	108%	-56%	80%
Other	-50%	-55%	-41%

The ranking of claim cost from most expensive to least is permanent total, fatal, permanent partial unscheduled, permanent partial scheduled and other. There was a significant difference in all the categories of total loss. This is the expected ranking of claim costs in the Colorado system.

An explanation for the lower costs associated with permanent partial scheduled claims is that these claims are paid at a lower weekly rate, and that injuries to the scheduled body part members may be less disabling than injuries to unscheduled body part members.

Note that while the indemnity and the total costs were significantly higher for fatal claims, the medical costs were significantly lower than the base group. It is not unexpected that medical portion of costs for fatal claims would be lower than the medical costs for permanent

partial unscheduled while in total the costs were higher.

### Medical Management Techniques

We reviewed the potential impact of various medical management techniques in common use, all indicated by a yes or no response:

- Employer designated medical provider
- Early reporting
- Case manager
- Utilization review

The table below shows the percentage change in costs significantly associated with a yes response as compared to a no response.

9. Medical Management Techniques	Percentage Impact on		
	Indemnity	Medical	Total
Early Report	-5%		
Case Manager	14%	16%	15%
Utilization Review		33%	15%

The difference in costs associated with the employer designation of medical provider turned out not to be significant for any of the indemnity, medical, or total categories of loss, and consequently, this variable was dropped from the model. The lack of significance associated with this variable is consistent with the last five studies. We note that a substantial majority of the claims in this study did show that the employer designated the provider. The use of a PPO network is classified as an employer designated provider.

The use of a case manager was found to be significantly associated with higher indemnity, medical, and total costs. One explanation is that the more serious cases, those with potentially higher overall costs, are assigned to a case manager.

Early reporting was based on whether telephone reporting of the claim was used at the time the claim was reported. The use of a toll-free early reporting hotline was significantly associated with 5% lower indemnity cost. If a carrier can accelerate the reporting of all claims (serious and non-serious alike), claims can be better managed leading to lower costs.

The use of utilization review was found to be significantly associated with higher medical costs and total costs. In general, one would expect that utilization review would be employed on the higher cost claims. If the result of the utilization review was effective, this could reduce the cost of that claim toward the average.

## COMPARISONS

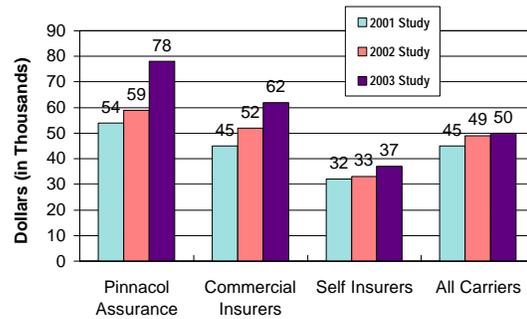
The analysis in this section is a comparison of the results of the 2003 study with the results of the 2002 study and the 2001 study (the Milliman Workers' Compensation Closed Claim Studies dated January 31, 2002 and January 31, 2001). Note that for comparison purposes, the definition of cost in this section has been adapted to that used in the 1996 study. Therefore, combined cost in this section refers only to indemnity (including lump sum payments) and medical. Lump sum payments are defined to include stipulated settlements. Combined cost does not include vocational rehabilitation and expense amounts. This means that there will be slight differences between the combined results in this section and the total results in the cross-tabulation section with the difference being due to the vocational rehabilitation and expense amounts.

Note that for easy reference, the chart numbers in this section correspond to the table numbers in Appendix C.

### Average Costs

Chart 1a compares the average combined (indemnity and medical) claims cost of the latest three studies. Pinnacol Assurance generally shows the highest average costs, followed by the commercial insurers and then the self insurers.

Chart 1a - Average Combined Claim Cost



Pinnacol Assurance has the highest percentage of claims over \$100,000 with 24% of their claims being in that category. Commercial insurers have 22% and self insurers have 6% of their claims in the over \$100,000 category.

The average costs for the indemnity and medical components are shown in Charts 1b and 1c. The comparisons of average claim costs by component for the separate entities follows the pattern of the comparison for the combined averages.

Chart 1b - Average Indemnity Claim Cost

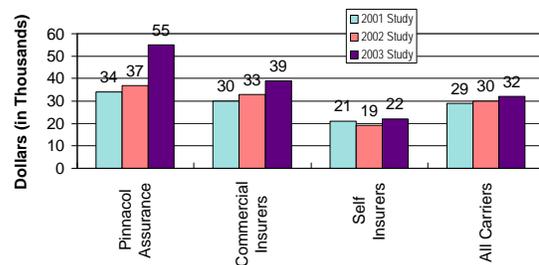
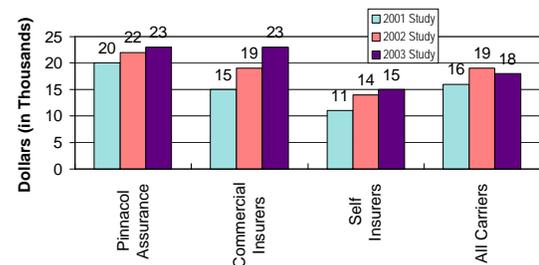


Chart 1c - Average Medical Claim Cost



## Claim Size

Chart 2 displays the distributions by size of claim as both percent of claims and percent of dollars for each of the studies. In both charts, the percentages are shown relative to claims less than \$100,000 in cost. We have eliminated claims over this amount from the comparison because their variability would obscure the results for claims less than \$100,000. Both the percentage of claims and the percentage of dollars in the \$50,000-\$100,000 range has continued to increase with the 2003 study.

**Chart 2a - Distribution by Claim Size**

Incremental Count Distribution (Percent) Excluding Claims Over \$100,000			
Size of Claim	2001 Study	2002 Study	2003 Study
Under 10,000	16.3	12.4	12.6
10,001 - 20,000	22.4	19.6	17.7
20,001 - 30,000	17.3	16.5	13.5
30,001 - 40,000	9.2	10.3	11.4
40,001 - 50,000	9.2	9.3	11.1
50,001 - 60,000	4.1	7.2	7.5
60,001 - 70,000	4.1	5.2	6.6
70,001 - 80,000	3.1	4.1	3.6
80,001 - 90,000	2.0	3.1	4.2
90,001 - 100,000	2.0	2.1	2.7
100,001 - 125,000	3.1	5.2	5.4
Over 125,000	8.2	6.2	8.1

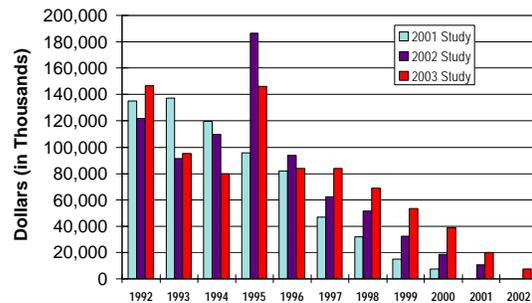
**Chart 2b - Distribution by Claim Size**

Incremental Dollar Distribution (Percent) Excluding Claims Over \$100,000			
Size of Claim	2001 Study	2002 Study	2003 Study
Under 10,000	1.1	1.1	1.5
10,001 - 20,000	7.4	6.3	5.1
20,001 - 30,000	9.6	8.4	6.5
30,001 - 40,000	6.4	7.4	7.9
40,001 - 50,000	9.6	8.4	10.1
50,001 - 60,000	5.3	7.4	8.1
60,001 - 70,000	5.3	7.4	8.5
70,001 - 80,000	5.3	6.3	5.4
80,001 - 90,000	6.4	5.3	7.0
90,001 - 100,000	4.3	4.2	5.0
100,001 - 125,000	6.4	11.6	11.8
Over 125,000	38.3	31.6	30.0

## Distribution by Accident Year and Carrier

Chart 3 shows the average cost per claim by accident year since 1992 for each of the last three studies. It is obvious that the more recent accident years have lower costs. The reader should be cautioned, however, that this is not evidence of a decreasing trend, but rather is a manifestation of the expected pattern with closed claim studies.

**Chart 3  
Average Cost by Accident Year**

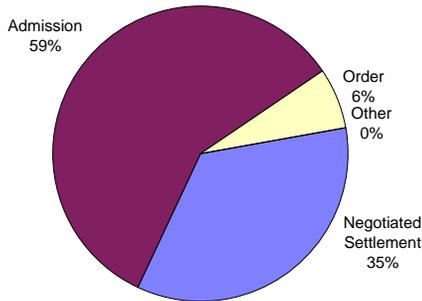


Since a closed claim study looks to accidents closed during a period for its base, it is expected that those claims taking longer to close would have arisen from an earlier accident year. In workers' compensation, longer duration claims are generally more expensive.

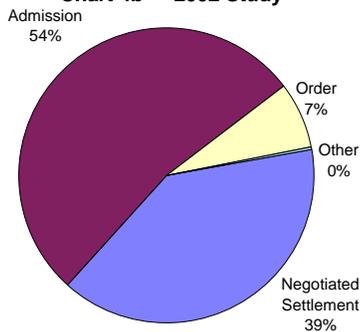
## Method of Closure

Method of closure is categorized as negotiated settlement, admission, order, or closed other methods. Charts 4a through 4c are the percent of claims for each category of closure for the 2001, 2002 and 2003 studies, respectively. The distribution of the 2003 study continues the higher level of claims closed by admission followed by the percentage of claims closed by negotiated settlement seen in the prior two studies.

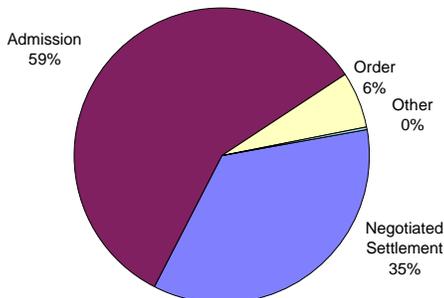
**Chart 4a - 2001 Study**



**Chart 4b - 2002 Study**



**Chart 4c - 2003 Study**



The high level of settlements is driven by Pinnacol Assurance, where negotiated settlements were 38% of their claims in the 2001 study, 47% in the 2002 study, and 51% in this year's study.

Chart 4d shows the average cost of negotiated settlements compared with prior studies. The costs are shown for indemnity (including lump sums), medical, and the combined cost of indemnity and medical. The leveling off in the combined average cost that was seen in last year's study appears to be continuing this year.

**Chart 4d  
Average Cost of Negotiated Settlements**

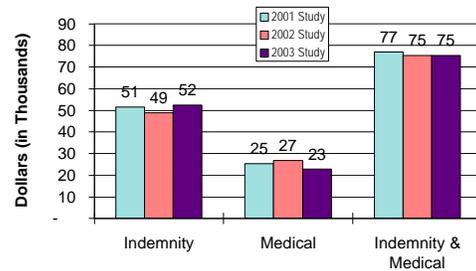
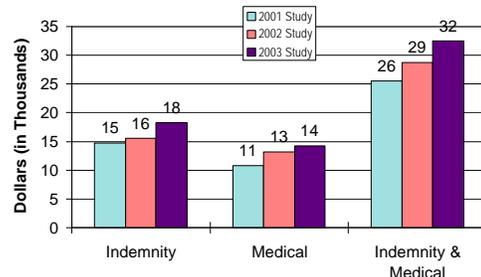


Chart 4e shows the average cost of admissions compared with prior studies. The costs are shown for indemnity (including lump sums), medical, and the combined cost of indemnity and medical. The average cost of admissions has again shown an increase this year from \$29,000 to \$32,000.

**Chart 4e  
Average Cost of Admissions**



## Claimant Attorney Involvement

Attorney involvement in the studies since 1996 is defined as the use of a claimant attorney. The percent of claims closing with claimant attorney involvement has stayed at about 40% for the last three studies. It is important to recognize, however, that the studies do not include accidents prior to 1991 for Pinnacol Assurance and commercial carriers. We have found that claimant attorney involvement is generally much higher with the older claims (those taking longer to close) and each successive study loses a smaller proportion of potential claims due to the 1991 claim cutoff. Claimant attorney involvement is also likely to be related to the level of closure by negotiated settlement and order since typically, claimant attorneys are involved in these types of claims.

Chart 5c - 2003 Study

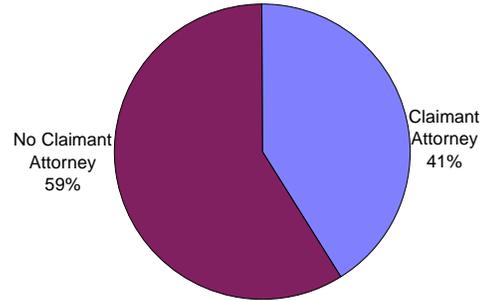


Chart 5d shows the comparison of average claim costs by attorney involvement. The pattern shown in prior studies is continued this year. That is, claims involving an attorney are more expensive.

Chart 5a - 2001 Study

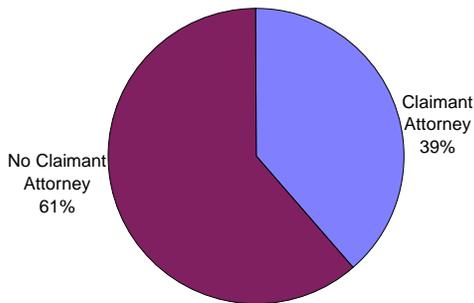


Chart 5b - 2002 Study

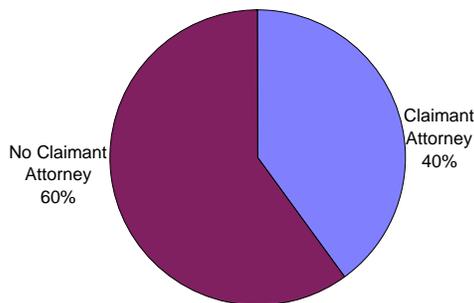


Chart 5d - Comparison of Average Claim Costs by Attorney Involvement

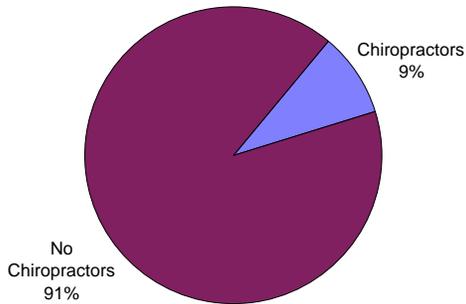
	2001 Study	2002 Study	2003 Study
<b>Pinnacol Assurance</b>			
Claimant Attorney	\$81,205	\$82,692	\$89,088
No Claimant Attorney	27,291	31,576	59,664
<b>Commercial Insurers</b>			
Claimant Attorney	\$48,875	\$60,328	\$68,404
No Claimant Attorney	46,033	53,079	64,976
<b>Self Insurers</b>			
Claimant Attorney	\$59,624	\$58,851	\$59,831
No Claimant Attorney	21,264	21,811	27,037
<b>All Carriers</b>			
Claimant Attorney	\$72,829	\$72,597	\$71,319
No Claimant Attorney	31,228	35,830	38,178

## Chiropractor Involvement

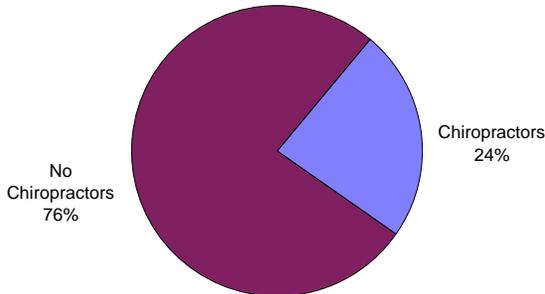
As shown in Charts 6a to 6c, the percent of claims with chiropractors has more than doubled in this year's study.

The costs of chiropractor claims are addressed in the regression section where total medical costs are taken into account. This allows the incorporation of all the medical services that a chiropractor might provide. A comparison of the average cost of a chiropractor to the average cost of another medical provider might not consider all these services.

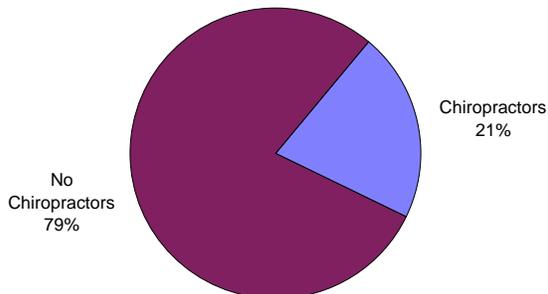
**Chart 6a - 2001 Study**



**Chart 6b - 2002 Study**



**Chart 6c - 2003 Study**



## CROSS-TABULATION RESULTS

Averages are shown in this report for descriptive purposes only; they demonstrate neither a correlation nor a cause and effect relationship between variables. The averages help the reader obtain a general view of the data.

Total cost in this section refers to indemnity, medical, vocational rehabilitation, and loss adjustment expenses. Since the definition of total cost in the Comparisons section above did not include the vocational rehabilitation or expense values, there will be slight differences between the results in this section and the results in the Comparisons section. Lump sum payment amounts are included in cost types listed above and are shown separately for information only.

Loss adjustment expenses include insurer legal expenses, insurer expert witness fees, other insurer legal costs, penalties, and other allocated loss adjustment expenses. Insurers and regulators typically define these expenses as defense and cost containment. They exclude the expenses of most insurer personnel.

Workers' compensation claims are driven by many variables which have complex interactions. Differences observed between variables are neither conclusive nor are they statistically significant per se. Any differences observed could be caused by random

variations as well as by differences in other variables. The Regression Analysis section of this report discusses the relationships between the variables.

The results in this section are divided into the following categories: distribution of total dollars; injury analysis; indemnity; medical; vocational rehabilitation; attorney involvement; and time lines.

The supporting data for each of the charts below is shown in the tables of Appendix C. For easy reference, each chart number in this report corresponds to the table number in Appendix C.

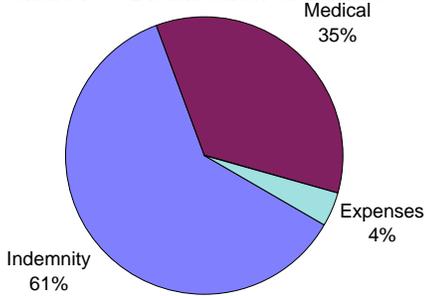
### A. Distribution of Total Dollars

This section shows the distribution of total dollars by type of cost, type of carrier, claim size, and method of closure.

#### **Type of Cost**

The total costs in the sample of 348 claims closed from July, 2001 to June, 2002 were approximately \$18 million with 61% of these costs from indemnity payments, 35% from medical payments, 4% from expenses, and less than 1% from vocational rehabilitation.

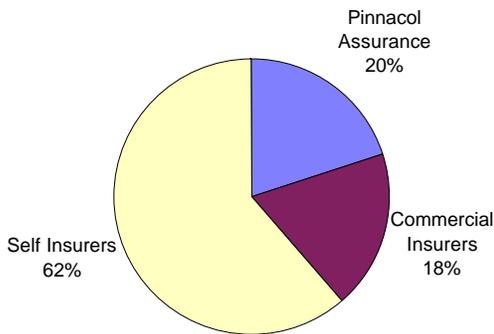
**Chart 7 - Distribution of Dollars**



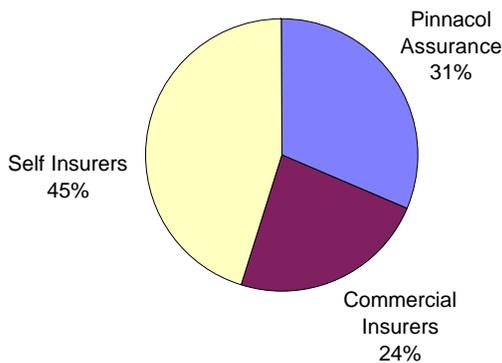
**Type of Carrier**

Of the new claims sampled, 20% were from Pinnacol Assurance and represented 31% of the total cost. Commercial insurers had 18% of the claims which represented 24% of the total cost. Self insurers were 62% of the new claims sampled and 45% of the costs.

**Chart 8a - % of Claims**

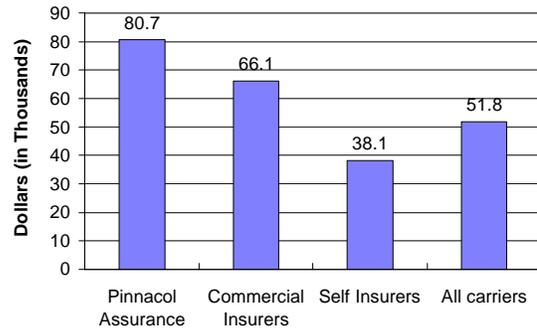


**Chart 8b - % of Dollars**



The average total cost of a claim was approximately \$81,000 for Pinnacol Assurance, \$66,000 for commercial insurers, and \$38,000 for self insurers.

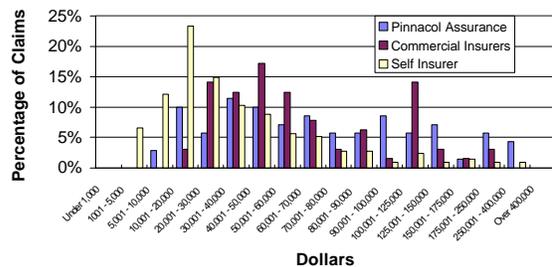
**Chart 8c - Average Total Claim Cost**



**Claim Size**

Chart 9 shows that for self insurers, the largest percentage of claims in this year's study (23%) continues to be in the \$10,000 to \$20,000 range. Pinnacol Assurance has 11% of claims in the \$30,000 to \$40,000 range followed by 10% in both the \$10,000 to \$20,000 range and the \$40,000 to \$50,000 range. Commercial insurers have 17% of claims in the \$40,000 to \$50,000 range and 14% in both the \$20,000 to \$30,000 range and the \$100,000 to \$125,000 range. For all entities, claims have shifted to larger ranges.

**Chart 9 Distribution of Cost of Claim by Carrier**



**Method of Closure**

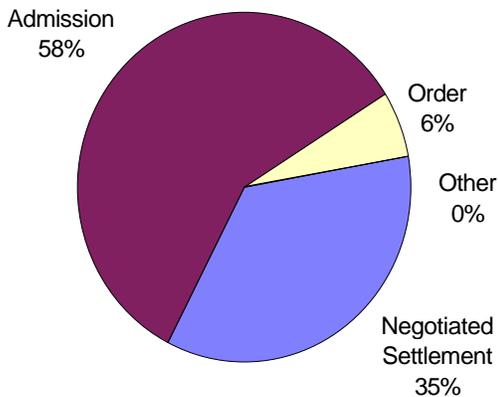
Method of closure is categorized as negotiated settlement, admission, order, or other. Chart 10a shows that of the claims where method of closure was coded, 58% closed with an admission, 35% closed with a negotiated settlement, and 6% closed by an order. Chart 10b shows that claims closed by admission represented 37% of total cost, claims closed by negotiated settlement represented 53% of total cost, and claims closed by an order represented 8% of total cost.

The average total cost of claims closed by negotiated settlement continues to be approximately two and one half times the cost of claims closed by admission.

**Chart 10c - Method of Closure**

Method of Closure	Number of Claims	Dollar Cost of Claims	Average Cost of Claims
Negotiated Settlement	122	\$9,600,698	\$78,694
Admission	201	\$6,695,914	\$33,313
Order	21	\$1,404,840	\$66,897
Other	1	\$129,932	\$129,932
Not Reported	3	\$193,789	\$64,596
Totals/Average	348	\$18,025,173	\$51,796

**Chart 10a - % of Claims**

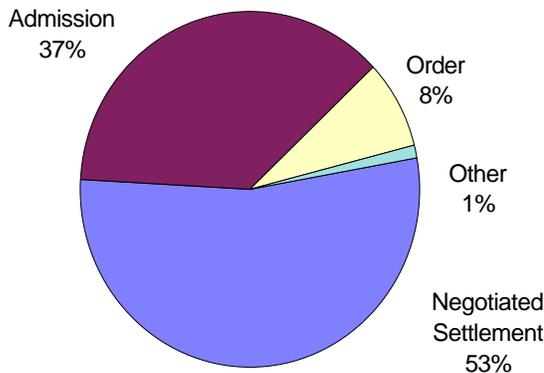


Charts 10d through 10f contain method of closure information for each of the entities.

**Chart 10d  
Method of Closure as % of Claims**

Method of Closure	Pinnacol Assurance	Commercial Insurers	Self Insurers
Negotiated Settlement	51%	50%	26%
Admission	43%	22%	74%
Order	6%	27%	0%
Other	0%	2%	0%

**Chart 10b - % of Dollars**



**Chart 10e  
Method of Closure as % of Dollars**

Method of Closure	Pinnacol Assurance	Commercial Insurers	Self Insurers
Negotiated Settlement	67%	54%	45%
Admission	26%	19%	55%
Order	7%	24%	0%
Other	0%	3%	0%

**Chart 10f - Average Total Dollars by Method of Closure**

Method of Closure	Pinnacol Assurance	Commercial Insurers	Self Insurers
Negotiated Settlement	103,151	71,609	67,253
Admission	49,866	57,762	28,108
Order	101,115	58,846	
Other		129,932	

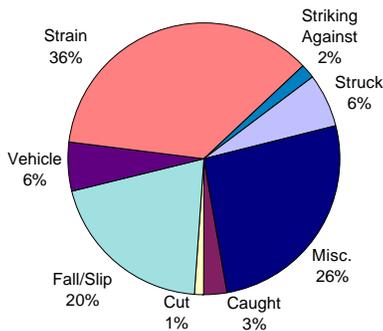
## B. INJURY ANALYSIS

This section provides an analysis by the cause of injury, the nature of injury, and the part of body injured.

### Cause of Injury

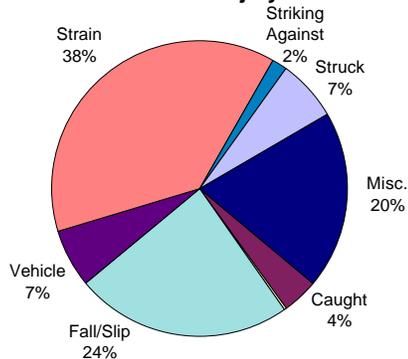
Similar to prior years, the two most common causes of injury observed were strain and fall/slip. Chart 11a shows that 36% of the injuries in the sample were caused by a strain and 20% were caused by a fall or slip.

Chart 11a - Cause of Injury - % of Claims



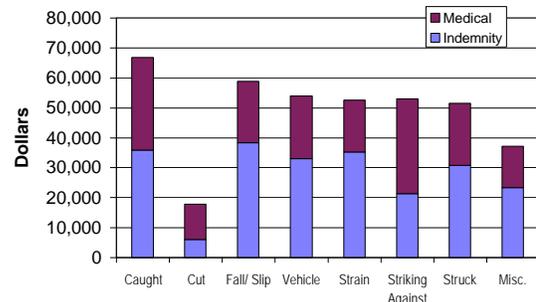
Correspondingly, the causes of injury representing the largest proportion of total costs were also strain and fall/slip. Chart 11b shows that 38% of the total dollars included in the sample were from injuries caused by strain and 24% were from injuries caused by a fall or slip.

Chart 11b - Cause of Injury - % of Dollars



The average indemnity plus medical costs were highest for injuries in the “caught in or between” category, followed closely by most other categories.

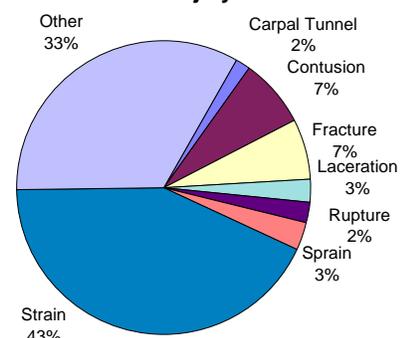
Chart 11c - Cause of Injury  
Average Cost for Indemnity & Medical



### Nature of Injury

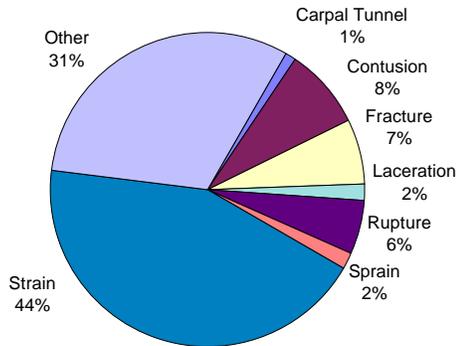
The category of “other” shown on the charts below not only includes the “all other” that was coded, but also contains the classes that each had less than 2% of the claims sampled. These included such injuries as amputation, concussion, and puncture. Similar to prior years, the most common natures of injury, based on percent of claims, were strain (43%), fracture (7%) and contusion (7%). Carpal Tunnel Syndrome represented approximately 2% of the claims in the study.

Chart 12a - Nature of Injury - % of Claims



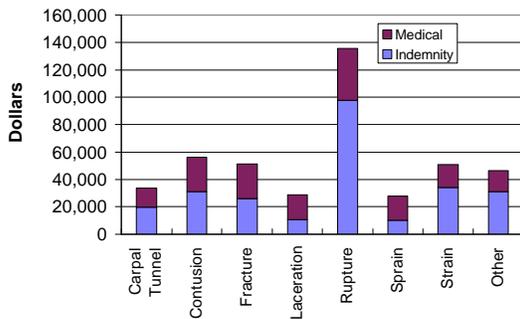
Similarly, the natures of injury representing the largest proportion of total cost were strain (44%), contusion (8%) and fracture (7%). Carpal Tunnel Syndrome represented less than 2% of the dollars in the study.

**Chart 12b - Nature of Injury - % of Dollars**



Among the natures of injury with greater than 2% of claims, the combined average medical and indemnity costs were higher by far for ruptures and sprains.

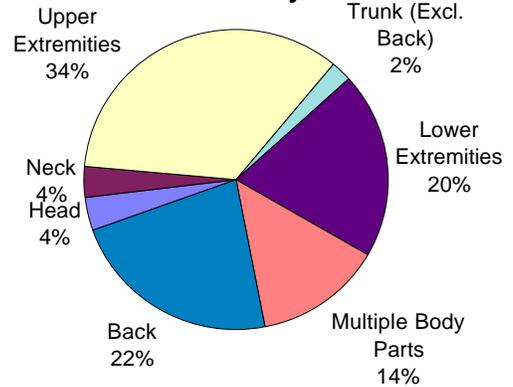
**Chart 12c - Nature of Injury Average Cost for Indemnity & Medical**



**Part of Body**

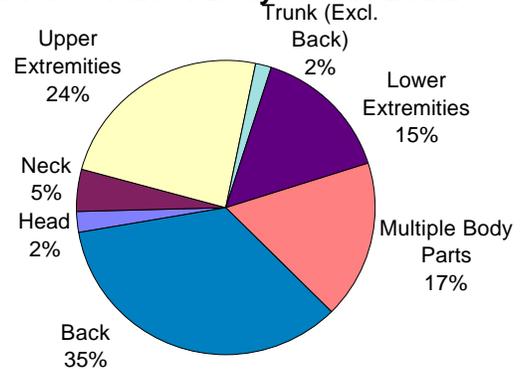
Similar to prior years, the most common parts of the body involved in injuries, based on percent of claims, were the upper extremities (34%), the lower extremities (20%), and the back (22%).

**Chart 13a - Part of Body - % of Claims**



The injuries to the trunk and back accounted for 37% of the total costs, including 35% from back injuries and 2% from other trunk injuries. Of the total costs, 24% were for injuries to the upper extremities and 15% were for injuries to the lower extremities.

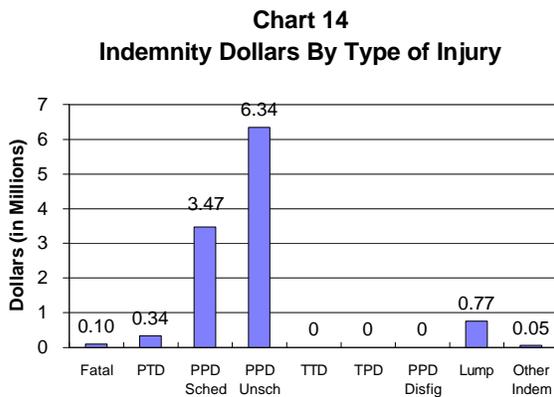
**Chart 13b - Part of Body - % of Dollars**



## C. INDEMNITY

### Type of Injury

Approximately 57% of the indemnity dollars (\$6.3 million) were spent on claims involving unscheduled permanent partial disability (PPD). Scheduled permanent partial disability claims accounted for another \$3.5 million, or 31% of the total dollars.

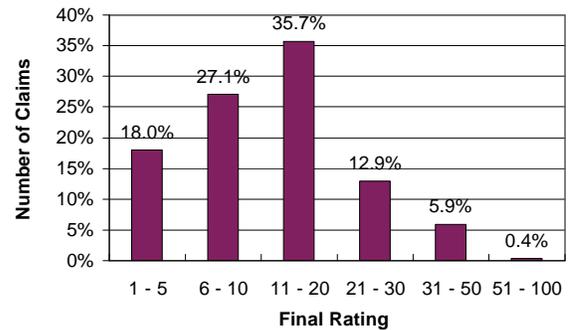


### Impairment Rating

In the 2003 study, 27% of claims are coded with an unknown impairment rating. This is similar to last year's study and is evidence of improved record keeping over years prior to 2000 when the unknowns were as high as 70%.

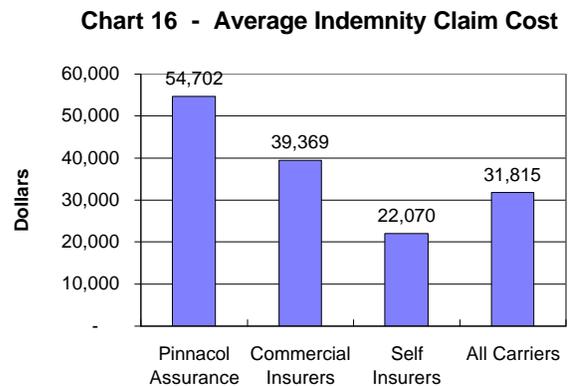
Of the claims with an impairment rating, 45% have a rating of 10% or less, and 81% have a rating of 20% or less. The percentage of claims with an impairment rating over 20% has increased from 13% last year to 19% this year.

**Chart 15**  
**Impairment Rating Claim Count by Range**



### Average Indemnity Costs by Type of Carrier

The Pinnacle Assurance average indemnity cost at \$54,702 is approximately 40% higher than the commercial carrier average of \$39,369 and more than double the self insurer average of \$22,070. The average for all the carriers combined is \$31,815.



## D. MEDICAL

### Distribution of Medical Costs

Doctors (including physical therapists) account for 41% of the total medical costs and hospital charges account for 34% of the costs. The category of “other” shown in Chart 17a includes medical costs coded as “other” as well as the classes that each had less than 2% of the medical costs in the sample. These included pain rehab/work reconditioning, prosthetics, and independent medical examinations. The distribution of charges by type of doctor is broken down in Chart 17b.

Payments to physical therapists appeared in 87% of the claims and accounted for 11% of the total medical costs. Payments to chiropractors appeared in 21% of the claims and accounted for 1% of the total medical costs (see Table 17 in Appendix C).

### Designator of Medical Provider

Charts 18a and 18b show that in 92% of the claims as well as 92% of the dollars, the employer designated the medical provider for the claim. For the remaining claims, the employer did not designate or the designation was unknown.

Chart 17a - Distribution of Medical Costs

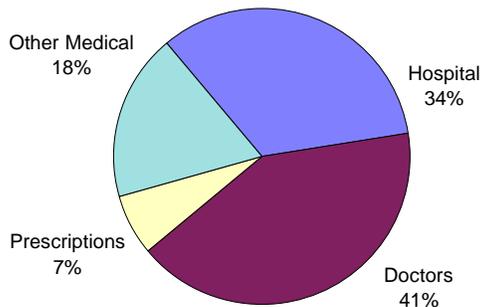


Chart 18a - Designator of Medical Provider  
% of Medical Claims

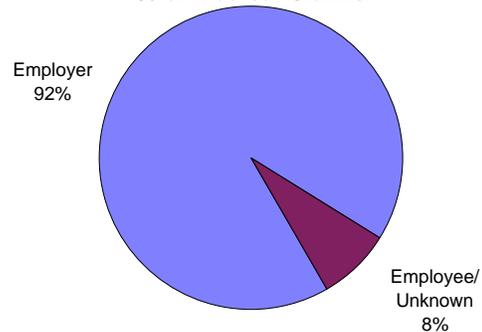


Chart 17b - Distribution of Charges by Type of Doctor

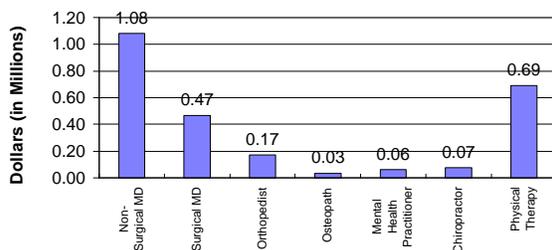
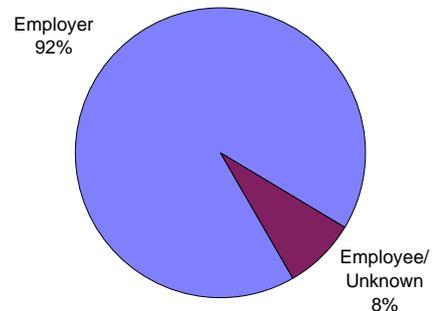


Chart 18b - Designator of Medical Provider  
% of Medical Dollars



As shown in Chart 18c, a simple comparison of average claim size indicates that the average medical cost of claims where the employer designated the medical provider is higher for commercial carriers and less than half for self insurers. Pinnacol Assurance employers designated the medical provider in 100% of their claims. The regression section found no significant association between who makes the choice of provider and higher or lower costs. The average medical costs shown in this section have not been controlled for the impact of other variables affecting costs as was done in the regression analysis.

**Chart 18c**  
**Designator of Medical Provider by Carrier Type**

Designator	Pinnacol Assurance		Commercial Insurers		Self Insurers	
	Percent of Claims	Average Medical Cost	Percent of Claims	Average Medical Cost	Percent of Claims	Average Medical Cost
Employer	100.0%	\$ 22,921	59.4%	\$ 26,707	99.5%	\$ 14,837
Employee / Not Reported	0.0%		40.6%	\$ 17,613	0.5%	\$ 37,276

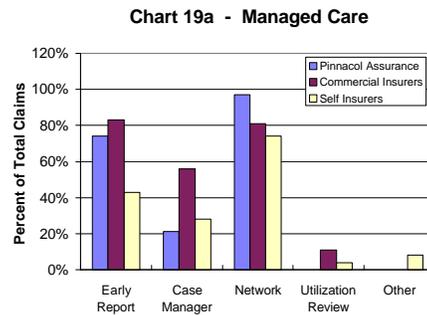
### Managed Care

In this study, a claim is considered a managed care claim if one or more of the following parameters is present:

- An 800 telephone number for early reporting
- A Case Manager
- A network of doctors as in a PPO or an HMO
- Utilization Review, either prospective or retrospective

Managed care claims represent 91% of the total number of claims (see Table 19, Sheet 1

in Appendix C). Managed care was used for all of the Pinnacol Assurance claims.



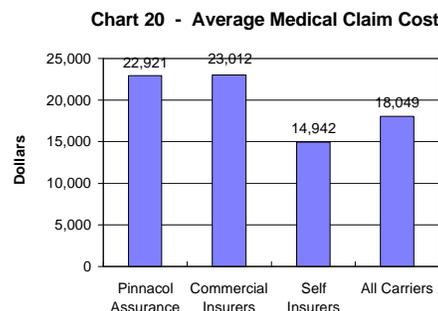
Average medical costs are higher for all entities where there is managed care. Again, it should be pointed out that it is not likely that managed care increases costs - it is more likely that the cases with managed care are likely to be the more complicated cases and thus the more expensive claims.

**Chart 19b - Average Medical Cost With and Without Managed Care by Carrier Type**

Carrier	Average Medical Cost With Managed Care	Average Medical Cost Without Managed Care
Pinnacol Assurance	\$ 22,921	N/A
Commercial Insurers	\$ 23,194	\$ 11,544
Self Insurers	\$ 15,122	\$ 13,809
TOTAL	\$ 18,459	\$ 13,733

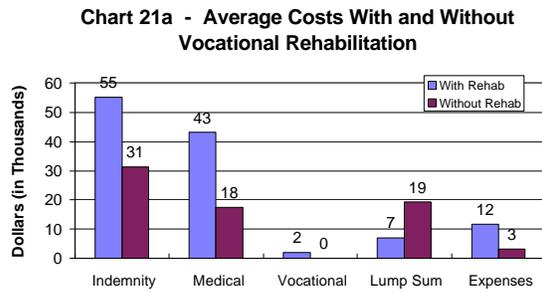
### Average Medical Cost by Type of Carrier

The average medical claim cost was approximately \$22,900 for Pinnacol Assurance, \$23,000 commercial insurers, and \$14,900 for self insurers.

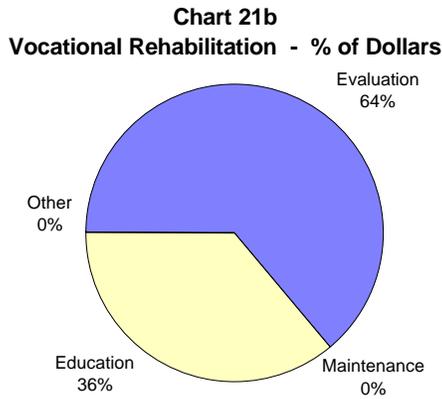


## E. VOCATIONAL REHABILITATION

Vocational rehabilitation was categorized as evaluation, maintenance, education, and other. Of the new claims in the sample, only 7 claims involved vocational rehabilitation. Pinnacol Assurance had 1 claim involving vocational rehabilitation, commercial carriers had 2 claims and self insurers had 4 claims. Chart 21a compares the average costs of the claims in the study that involved vocational rehabilitation with the average costs of those claims that did not involve rehabilitation.

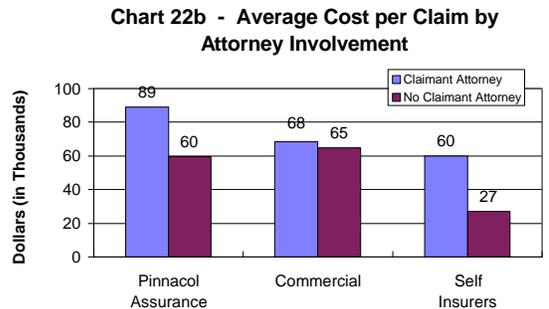
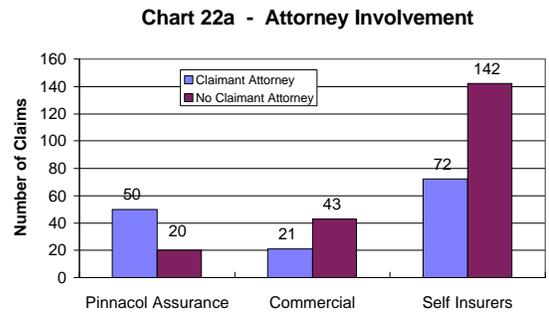


Of the vocational rehabilitation dollars in the sample, 64% was spent on evaluation. This breakdown is shown in Chart 21b.



## F. ATTORNEY INVOLVEMENT

Attorney involvement means that the claimant had an attorney. Chart 22a shows the percent of claims with attorney involvement for each type of carrier. Chart 22b shows the average costs by attorney involvement. For commercial carriers and self insurers the majority of claims involved no claimant attorney. The average cost of a claim involving an attorney is 50% more than those not involving an attorney for Pinnacol Assurance, twice as much for self insurers but only slightly higher for commercial insurers.



## G. TIME LINES

In order to present a picture of lag time, the statistical measures of the mean (average) and the median are used. The median is the middle value of a set of ordered data values observed for a particular characteristic. That is, there are as many claims with values above the median as there are below. In a long-term line of insurance like workers' compensation, the median is often more useful as an indicator because of the effect of extreme data observations on the mean. This is illustrated by the increase to 25 days of the mean lag in the date reported to employer from 2001 to 2002. This increase was caused by a 1971 claim involving a prosthetic. Without this claim, the mean lag would have been 7 days.

**Chart 23a**  
**Comparison of Mean Lags from Date of Injury**

Lag Time From Date of Injury to:	2001 Mean Number of Days	2002 Mean Number of Days	2003 Mean Number of Days
Date Reported to Employer	5	25	10
Date Reported to Insurer	15	39	17
Date of First Indemnity Payment	147	217	253
Date of Return to Work	84	159	144
Date of Max Medical Improvement	450	454	463
Date of Claim Closed	778	833	823

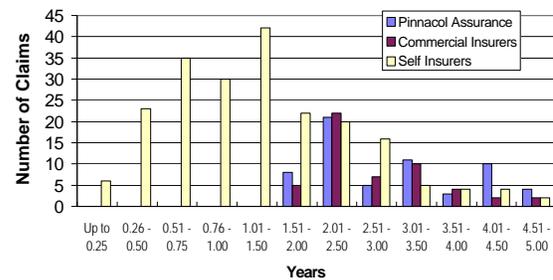
The median lag for the date of first indemnity payment increased from the 2002 study from 83 days to 86 days. The median lag for the date of maximum medical improvement and the date of claim closed continued to increase from the 2000 study.

**Chart 23b**  
**Comparison of Median Lags from Date of Injury**

Lag Time From Date of Injury to:	2001 Median Number of Days	2002 Median Number of Days	2003 Median Number of Days
Date Reported to Employer	0	0	0
Date Reported to Insurer	4	3	1
Date of First Indemnity Payment	56	83	86
Date of Return to Work	14	77	39
Date of Max Medical Improvement	316	316	343
Date of Claim Closed	561	650	742

The duration is the number of years from the date of injury to the closing of the claim. As shown in the following chart, the most frequent duration for self insureds was 1 - 1.5 years again this year. For commercial insureds and for Pinnacol the most frequent duration increased this year to 2 - 2.5 years.

**Chart 24**  
**Distribution by Duration of Claim**



## **CHARTS**

### **COMPARISONS**

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Chart 1b	-	Average Indemnity Claim Cost
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Chart 2b	-	Distribution by Claim Size, Incremental Dollar Distribution
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Chart 4c	-	Method of Closure - 2003 Study
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## **CROSS-TABULATION RESULTS**

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Chart 8c	-	Average Total Claim Cost
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Chart 12a	-	Nature of Injury - % of Claims
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Chart 13a	-	Part of Body - % of Claims
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Chart 14	-	Indemnity Dollars by Type of Injury
Chart 15	-	Impairment Rating
Chart 16	-	Average Indemnity Claim Cost

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- Chart 17a - Distribution of Medical Costs
  - Chart 17b - Distribution of Charges by Type of Doctor
  - Chart 18a - Designator of Provider - % of Medical Claims
  - Chart 18b - Designator of Provider - % of Medical Dollars
  - Chart 18c - Designator of Medical Provider by Carrier Type
  - Chart 19a - Managed Care
  - Chart 19b - Average Medical Cost With and Without Managed Care
  - Chart 20 - Average Medical Claim Cost
  
  - Chart 21a - Average Costs With and Without Vocational Rehabilitation
  - Chart 21b - Vocational Rehabilitation - % of Dollars
  
  - Chart 22a - Attorney Involvement
  - Chart 22b - Average Cost per Claim by Attorney Involvement
  
  - Chart 23a - Comparison of Mean Lags from Date of Injury
  - Chart 23b - Comparison of Median Lags from Date of Injury
  - Chart 24 - Distribution by Duration of Claim
-

## CLAIMS FOR THE 2003 STUDY

### SAMPLE

The 2003 Study reviewed a sample of 348 new claims involving permanency that were closed between July 1, 2001, and June 30, 2002. The carriers represented in this year's sample are Pinnacol Assurance, 17 commercial insurers, and 21 self insurers.

The number and source of these claims are listed below:

Type of Carrier	Primary Source of Data	Dates Accidents Closed	Number of Claims
Pinnacol Assurance	DCI Database	July 1, 2001 to June 30, 2002	70
Commercial Carriers	DCI Database	July 1, 2001 to June 30, 2002	64
Self Insurers	DWC Database	July 1, 2001 to June 30, 2002	214
<b>Total</b>			<b>348</b>

This compares to the last two years as follows:

Comparisons	2001	2002	2003
Pinnacol Assurance	362	247	70
Commercial Carriers	164	174	64
Self Insurers	203	209	214
<b>Total</b>	<b>729</b>	<b>630</b>	<b>348</b>
<b>Regressions</b>	<b>5,263</b>	<b>6,251</b>	<b>7,129</b>

There are fewer claims this year for two reasons - there are fewer new claims that have closed, and there are fewer claims that have been resubmitted due to corrections in the values previously submitted.

For all groups of carriers, we supplemented the primary source of data with a supplementary call for information on the same claims.

The Detailed Claim Information (DCI) database is collected by the National Council on Compensation Insurance (NCCI) on a sample basis. The claims are selected randomly based on each insurer's market share. Once selected for inclusion, information must be reported on claims 6 months after accident, and annually thereafter until claims close. The database includes both open and closed claims. We obtained an electronic copy of this NCCI DCI database as of August 2002 for use in this study.

Self insurer data was obtained from the Division of Workers' Compensation, together with the supplemental data request. This sample was generated as follows:

1. The manual premium equivalent for the year July 1, 2001 to June 30, 2002 was determined by the DWC for each entity. Self insured employers whose permits had been cancelled or revoked in this time period, as well as those who had been self-insured during part of the year were eliminated. The remaining self insurers were ranked by premium and subdivided into quartiles.
2. Cases involving fatality, permanent partial disability, or permanent total disability closing during this year were initially selected. Self-insurers having three or fewer claims were eliminated.
3. The Division of Workers Compensation randomly selected two self-insurers from the top quartile, three from the second, five from the third, and twelve from the fourth.

4. Milliman USA, Inc. randomly selected 60 claims from each quartile uniformly from each self-insurer within each quartile.

The claims from Pinnacol Assurance, commercial carriers, and self insurers were combined, cross tabulations were computed and comparisons were made with the results of earlier studies.

For the regression analysis, the data collected from self-insurers for the 1996, and 1998- 2002 studies were included. In addition, all closed claims from Pinnacol Assurance and the DCI Database were included. A total of 7,129 claims were used in the regression analysis. Since the DCI Database is cumulative, it is possible that some claims changed in value from the values contained in last year's study. This can occur primarily due to the correction of data, to late payments recorded after a claim has closed, and to a claim reported as closed not previously included due to data reporting lags. We compared the current DCI database to the DCI database included in last year's study. The supplementary data request was collected on all claims in the database that closed prior to July 1, 2002 that were either new or had a change in their values.

## **EDITING THE RESPONSES**

Responses to the request for additional information were received electronically, via floppy disk, or through hard copy. These responses were reviewed for consistency.

The sums of the medical payments of various types (Surgery, PT, prescriptions, etc.) were verified to match the "Total Medical" fields. Where they did not match, the carrier was contacted to clarify the information. Also, where hospital costs were reported but the number of days hospitalized was either coded as zero or was left blank, the carrier was contacted to determine if the hospital cost was due to an outpatient surgery or if a correction to the data was needed.

Several of the other fields were also checked to verify a valid response. "Age of Claimant at Time of Injury," "Date of Birth," "Date of Injury," "Date Claim Closed," "Method of Closure," "Cause of Injury," "Nature of Injury," "Part of Body," "Designator of Medical Provider," "Impairment Rating" and "Benefit Type" are some of the fields that were checked for validity. Again, if a response for any one of these fields was invalid or omitted, we contacted the corresponding carrier to obtain the correct information.

Individual claims were classified as either usable or unusable. Unusable claims were deleted from the database. Many of the unusable claims were deleted because the supplemental medical information received from carriers could not be reconciled with the DCI medical information. Also, several claims were deleted because their current status was open.

## SUMMARY OF REGRESSION RESULTS

Regression analysis is concerned with modeling the relationships between variables. Through the use of regression, we seek to evaluate the relationship between the cost of a claim (indemnity, medical and total) and other potential explanatory variables. Regression can be used to determine whether a particular variable is significant in explaining the cost and the nature of the relationship. In most statistical analysis, including the regressions contained herein, it is common practice to adopt what is called the “Null Hypothesis.” The Null Hypothesis is that the variable in question does not affect the outcome (in our case, the cost of a claim). A result is generally called significant if we are able to reject the null hypothesis with 95% certainty. That is, that the statistical model indicated a 5% chance or less that the association could have been caused by randomness alone. In this case, we would say the result was significant at the .05 (5%) level.

In the regression analysis we are attempting to understand as many of the impacts of the explanatory variables as possible. We represent the costs (indemnity, medical, and total) as a multiplicative function of the variables listed. We first transform the multiplicative function to linear by using the natural logarithm of indemnity, medical, and total cost as the dependent variable. This is a common procedure and is preferred for workers compensation losses that often exhibit significant skewness.

To test whether or not a certain variable is significant in explaining the cost of a claim, the regression analysis calculates the t-statistic for the null hypothesis. The t-statistic is

calculated as the ratio of the parameter estimate to the standard error and measures whether or not the parameter estimate is significantly different from 0. We then compare the t-statistic to a critical value which is based on the number of parameters estimated (1 for each variable), and the significance level.

The standard error measures the amount of variation around the value of the parameter.

The sign of the parameter (positive or negative) indicates the direction of the association. If positive, the cost is expected to increase by the value of the parameter estimate for each unit increase in the variable. If the variable is of the yes/no variety, a positive parameter estimate indicates that the cost is expected to be higher by the amount of the parameter estimate in the presence of a yes. Since the dependent variable is a natural logarithm, the parameter estimate represents an increase in the log of the dependent variable of interest. This can be transformed to a percentage change by exponentiation (the inverse of the natural log function). This transformation is as follows:

$$\text{Percentage Change} = e^{(\text{Parameter estimate})} - 1 \times 100\%$$

We also take the natural logarithm of two of the independent (right hand side or explanatory) variables prior to their use in the regression. We use the logs of wage and length to close. When transformed in this fashion, the resulting parameter estimate is an elasticity. An elasticity is a comparison of percentage changes:

$$\text{Elasticity} = \frac{\text{Percentage change in dependent variable}}{\text{Percentage change in independent variable}}$$

Many of the characteristics above are represented with “dummy” variables. The use of dummy variables is a standard technique to describe variables that entail a true/false or one-of-a-list of choices. An example of the true/false choice is the variable “Claimant is Male.” If true, the variable is represented by a 1, and if false, by a 0. Whether or not this variable is significant refers to the change in cost with respect to the alternative. In this case, a “significant” result implies that the alternative, “Claimant is Female,” is significant also, with the opposite sign.

The method of closure is an example of the one-of-a-list type of dummy variable. Again, a 1 is used to represent the variable when the condition is true, and a 0 is used when the condition is false. In this situation, we need one less variable than the number of combinations. The variable that does not appear is represented by 0’s for all the rest. For example, method of closure was modeled using the following list:

- negotiated settlement,
- admission,
- order,
- and other.

The variable “other” does not explicitly appear. Rather, it is modeled with 0’s (false) for the other three, forming the comparison or reference group. In this case, we found that closure types “other” and “order” did not differ significantly in costs. We changed the list so that only settlement and admission were represented by 1’s when true. The comparison group then changed to the combination of “order” and “other.”

The statistical output from the regression can also be used to consider other combinations without re-running the regressions and changing the base. This technique was used, for example, to determine that permanent partial schedule and “other” benefit type differed significantly in cost.

For each of the regression models that follows we show the variable name, the parameter estimate, the standard error, the t-statistic for the null hypothesis, and the significance level. We have shaded the parameter estimates that are not statistically significant at the .05 level.

We also show the F value and the R<sup>2</sup> value for each of the models. The F value shows that for each of the models the regression is highly significant. The R<sup>2</sup> value the proportion of the variation in cost that has been explained by the regression model.

**SUMMARY OF REGRESSION RESULTS**

Model - Natural Logarithm of Indemnity costs as Linear Function

F Statistic= 238.54 Prob >F= 0.0001

R<sup>2</sup>= 0.6217

Independent Variable	Degrees of Freedom	Parameter Estimate	Standard Error	T Statistic	Significance Prob> T
<b>Type of Injury</b>					
Back Sprains and Strains	1	0.5001	0.0322	15.5400	0.0001
All Other Back Injuries	1	0.5678	0.0644	8.8200	0.0001
Intermediate Fractures/Dislocations	1	-0.0315	0.0437	-0.7200	0.4709
Fractures/Dislocations Hands and Digits	1	-0.4008	0.0468	-8.5700	0.0001
Cut/Laceration/Contusion Hand and Finger	1	-0.9746	0.0473	-20.6200	0.0001
Sprains/Strains to Lower Body	1	0.1301	0.0644	2.0200	0.0433
Knee Disorders	1	0.0041	0.0331	0.1200	0.9010
Neck & Head	1	0.2564	0.0630	4.0700	0.0001
Major Trauma	1	0.2352	0.0391	6.0200	0.0001
Burns	1	-0.2182	0.1282	-1.7000	0.0888
<b>Type of Industry</b>					
Mining	1	0.1550	0.0849	1.8300	0.0679
Construction	1	0.2168	0.0280	7.7500	0.0001
Transportation	1	0.2292	0.0364	6.2900	0.0001
<b>Claimant Characteristics</b>					
Male	1	0.1342	0.0242	5.5400	0.0001
Wage (Elasticity)	1	0.3863	0.0210	18.3600	0.0001
Married	1	-0.0368	0.0250	-1.4700	0.1412
<b>Time Sensitive Components</b>					
Accident Year	1	0.0260	0.0060	4.2900	0.0001
Length to Close (Elasticity)	1	0.7723	0.0193	40.1100	0.0001
Lag to Report	1	0.0003	0.0001	3.0300	0.0024
Lag to First Indemnity Payment	1	-0.0008	0.0001	-12.8800	0.0001
<b>Type of Carrier</b>					
Pinnacol Assurance Claim	1	0.0192	0.0270	0.7100	0.4783
Self-Insured Claim	1	0.1033	0.0395	2.6200	0.0089
<b>Claim Characteristics (Impact if Yes)</b>					
Claimant Attorney	1	0.1854	0.0271	6.8500	0.0001
Chiropractor Used	1	0.0908	0.0351	2.5900	0.0097
Physical Therapy Used	1	0.1620	0.0220	7.3700	0.0001
Hospital Used	1	0.2386	0.0258	9.2300	0.0001
Vocational Rehabilitation Used	1	0.3956	0.0505	7.8400	0.0001
Surgery Used	1	0.0568	0.0230	2.4700	0.0135
<b>Method to Close (Base is Closed by Order)</b>					
Settlement	1	0.3315	0.0439	7.5500	0.0001
Admission	1	-0.2918	0.0411	-7.1000	0.0001
<b>Injury Type (Base is Perm. Partial Unscheduled)</b>					
Permanent Total	1	0.7984	0.1220	6.5500	0.0001
Permanent Partial Schedule	1	-0.2626	0.0256	-10.2600	0.0001
Fatal	1	0.7322	0.1453	5.0400	0.0001
Other	1	-0.6922	0.0758	-9.1300	0.0001
<b>Managed Care Techniques</b>					
Early Report	1	-0.0553	0.0240	-2.3000	0.0213
Case Manager	1	0.1304	0.0230	5.6800	0.0001
Utilization Review	1	0.0661	0.0482	1.3700	0.1701
<b>Intercept</b>	1	-0.6021	0.6182	-0.9700	0.3301

**SUMMARY OF REGRESSION RESULTS**

Model - Natural Logarithm of Medical costs as Linear Function

F Statistic= 127.74 Prob >F= 0.0001

R<sup>2</sup>= 0.4681

Independent Variable	Degrees of Freedom	Parameter Estimate	Standard Error	T Statistic	Significance Prob> T
<b>Type of Injury</b>					
Back Sprains and Strains	1	-0.0134	0.0298	-0.4500	0.6536
All Other Back Injuries	1	0.0186	0.0596	0.3100	0.7547
Intermediate Fractures/Dislocations	1	0.1893	0.0405	4.6800	0.0001
Fractures/Dislocations Hands and Digits	1	-0.1097	0.0433	-2.5300	0.0114
Cut/Laceration/Contusion Hand and Finger	1	-0.2850	0.0438	-6.5100	0.0001
Sprains/Strains to Lower Body	1	-0.0869	0.0596	-1.4600	0.1448
Knee Disorders	1	0.2336	0.0307	7.6100	0.0001
Neck & Head	1	0.0407	0.0583	0.7000	0.4850
Major Trauma	1	0.1046	0.0362	2.8900	0.0039
Burns	1	0.2863	0.1187	2.4100	0.0159
<b>Type of Industry</b>					
Mining	1	0.1009	0.0786	1.2800	0.1993
Construction	1	0.0159	0.0259	0.6100	0.5396
Transportation	1	0.0551	0.0337	1.6300	0.1026
<b>Claimant Characteristics</b>					
Male	1	0.0565	0.0224	2.5200	0.0118
Wage (Elasticity)	1	0.0833	0.0195	4.2800	0.0001
Married	1	-0.0846	0.0232	-3.6500	0.0003
<b>Time Sensitive Components</b>					
Accident Year	1	0.0330	0.0056	5.8900	0.0001
Length to Close (Elasticity)	1	0.6878	0.0178	38.5800	0.0001
Lag to Report	1	0.0004	0.0001	4.8100	0.0001
Lag to First Indemnity Payment	1	-0.0007	0.0001	-11.9800	0.0001
<b>Type of Carrier</b>					
Pinnacol Assurance Claim	1	-0.0402	0.0250	-1.6100	0.1081
Self-Insured Claim	1	0.1916	0.0366	5.2400	0.0001
<b>Claim Characteristics (Impact if Yes)</b>					
Claimant Attorney	1	0.1045	0.0251	4.1700	0.0001
Chiropractor Used	1	0.1021	0.0325	3.1400	0.0017
Physical Therapy Used	1	0.3025	0.0204	14.8600	0.0001
Hospital Used	1	0.5978	0.0239	24.9900	0.0001
Vocational Rehabilitation Used	1	0.1786	0.0467	3.8200	0.0001
Surgery Used	1	0.1410	0.0213	6.6300	0.0001
<b>Method to Close (Base is Closed by Order)</b>					
Settlement	1	0.1597	0.0406	3.9300	0.0001
Admission	1	-0.0018	0.0381	-0.0500	0.9622
<b>Injury Type (Base is Perm. Partial Unscheduled)</b>					
Permanent Total	1	0.0910	0.1129	0.8100	0.4204
Permanent Partial Schedule	1	-0.0427	0.0237	-1.8000	0.0718
Fatal	1	-0.8267	0.1345	-6.1500	0.0001
Other	1	-0.7902	0.0702	-11.2500	0.0001
<b>Managed Care Techniques</b>					
Early Report	1	0.0007	0.0222	0.0300	0.9735
Case Manager	1	0.1473	0.0213	6.9300	0.0001
Utilization Review	1	0.2879	0.0446	6.4500	0.0001
<b>Intercept</b>	1	0.2339	0.5724	0.4100	0.6829

**SUMMARY OF REGRESSION RESULTS**

Model - Natural Logarithm of Total costs as Linear Function

F Statistic= 272.09 Prob >F= 0.0001

R<sup>2</sup>= 0.6521

Independent Variable	Degrees of Freedom	Parameter Estimate	Standard Error	T Statistic	Significance Prob> T
<b>Type of Injury</b>					
Back Sprains and Strains	1	0.2642	0.0242	10.9200	0.0001
All Other Back Injuries	1	0.3041	0.0484	6.2800	0.0001
Intermediate Fractures/Dislocations	1	0.0606	0.0329	1.8400	0.0652
Fractures/Dislocations Hands and Digits	1	-0.2602	0.0352	-7.4000	0.0001
Cut/Laceration/Contusion Hand and Finger	1	-0.5730	0.0355	-16.1200	0.0001
Sprains/Strains to Lower Body	1	-0.0082	0.0484	-0.1700	0.8656
Knee Disorders	1	0.0669	0.0249	2.6800	0.0073
Neck & Head	1	0.1713	0.0474	3.6200	0.0003
Major Trauma	1	0.1740	0.0294	5.9200	0.0001
Burns	1	-0.0249	0.0964	-0.2600	0.7958
<b>Type of Industry</b>					
Mining	1	0.1552	0.0638	2.4300	0.0151
Construction	1	0.1155	0.0210	5.4900	0.0001
Transportation	1	0.1445	0.0274	5.2700	0.0001
<b>Claimant Characteristics</b>					
Male	1	0.0961	0.0182	5.2800	0.0001
Wage (Elasticity)	1	0.2544	0.0158	16.0800	0.0001
Married	1	-0.0562	0.0188	-2.9800	0.0029
<b>Time Sensitive Components</b>					
Accident Year	1	0.0337	0.0045	7.4300	0.0001
Length to Close (Elasticity)	1	0.7347	0.0145	50.7500	0.0001
Lag to Report	1	0.0003	0.0001	4.1400	0.0001
Lag to First Indemnity Payment	1	-0.0006	0.0000	-13.0100	0.0001
<b>Type of Carrier</b>					
Pinnacle Assurance Claim	1	-0.0309	0.0203	-1.5200	0.1282
Self-Insured Claim	1	0.1419	0.0297	4.7800	0.0001
<b>Claim Characteristics (Impact if Yes)</b>					
Claimant Attorney	1	0.1445	0.0204	7.1000	0.0001
Chiropractor Used	1	0.0799	0.0264	3.0200	0.0025
Physical Therapy Used	1	0.2012	0.0165	12.1700	0.0001
Hospital Used	1	0.3349	0.0194	17.2400	0.0001
Vocational Rehabilitation Used	1	0.3632	0.0379	9.5700	0.0001
Surgery Used	1	0.0780	0.0173	4.5100	0.0001
<b>Method to Close (Base is Closed by Order)</b>					
Settlement	1	0.2609	0.0330	7.9100	0.0001
Admission	1	-0.1814	0.0309	-5.8700	0.0001
<b>Injury Type (Base is Perm. Partial Unscheduled)</b>					
Permanent Total	1	0.6423	0.0917	7.0000	0.0001
Permanent Partial Schedule	1	-0.1806	0.0192	-9.3800	0.0001
Fatal	1	0.5899	0.1092	5.4000	0.0001
Other	1	-0.5310	0.0570	-9.3100	0.0001
<b>Managed Care Techniques</b>					
Early Report	1	-0.0246	0.0180	-1.3700	0.1723
Case Manager	1	0.1429	0.0173	8.2800	0.0001
Utilization Review	1	0.1382	0.0362	3.8100	0.0001
<b>Intercept</b>	1	0.2544	0.4649	0.5500	0.5842

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

**TABLE 1**

**AVERAGE COSTS**

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See Table 8 for 2003 data used in Charts 1a, 1b, and 1c.

Prior Data from 2001 and 2002 Studies.

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

**TABLE 2**

**CLAIM SIZE**

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See Table 9 for 2003 data used in Chart 2.

Prior Data from 2001 and 2002 Studies.

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 3

**DISTRIBUTION BY ACCIDENT YEAR AND CARRIER**

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
<i>Accident Year</i>	<i>Claim Count</i>			<i>Indemnity &amp; Medical Cost</i>			<i>Average Cost per Claim</i>			<i>Total</i>
	<i>Pinnacol Assurance</i>	<i>Comm. Carrier</i>	<i>Self Insured</i>	<i>Pinnacol Assurance</i>	<i>Comm. Carrier</i>	<i>Self Insured</i>	<i>Pinnacol Assurance</i>	<i>Comm. Carrier</i>	<i>Self Insured</i>	
							<i>(5)/(2)</i>	<i>(6)/(3)</i>	<i>(7)/(4)</i>	
1992	0	0	1	0	0	146,745	0	0	146,745	146,745
1993	0	1	1	0	52,987	137,759	0	52,987	137,759	95,373
1994	2	4	0	183,275	295,975	0	91,638	73,994	0	79,875
1995	4	4	0	680,007	490,775	0	170,002	122,694	0	146,348
1996	1	5	3	182,037	417,297	152,775	182,037	83,459	50,925	83,568
1997	14	5	5	1,137,824	267,507	611,412	81,273	53,501	122,282	84,031
1998	16	16	15	1,146,393	1,216,084	870,839	71,650	76,005	58,056	68,794
1999	33	29	26	2,104,068	1,251,792	1,360,634	63,760	43,165	52,332	53,597
2000	0	0	72	0	0	2,801,683	0	0	38,912	38,912
2001	0	0	83	0	0	1,644,326	0	0	19,811	19,811
2002	0	0	7	0	0	51,473	0	0	7,353	7,353
<i>Totals Pre SB 218</i>	0	0	2	0	0	226,106	0	0	113,053	113,053
<i>Totals Post SB 218</i>	70	64	213	5,433,604	3,992,417	7,777,646	77,623	62,382	36,515	49,578
<i>Totals/Average</i>	70	64	215	5,433,604	3,992,417	8,003,752	77,623	62,382	37,227	49,942

**NOTE:** (11) Equals the sum of Cols (5) through (7) divided by the sum of Cols (2) through (4).

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 4

**METHOD OF CLOSURE**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Method of Closure</i>	<i>Count</i>	<i>%</i>	<i>Average Indemnity</i>	<i>Average Medical</i>	<i>Average Indemnity &amp; Medical (4)+(5)</i>
Negotiated Settlement	122	35.1%	52,379	22,855	75,234
Admission	201	57.8%	18,298	14,182	32,480
Order	21	6.0%	37,517	26,015	63,531
Other	1	0.3%	55,949	72,630	128,579
Not Reported	3	0.9%	53,204	11,002	64,206
<b>Total / Average</b>	<b>348</b>	<b>100.0%</b>	<b>31,815</b>	<b>18,049</b>	<b>49,864</b>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 5

**ATTORNEY INVOLVEMENT**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Claimant Attorney Involvement</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Indemnity &amp; Medical Cost</i>	<i>Percent of Cost</i>	<i>Average Cost of Claims</i> <i>(4) / (2)</i>
<b>Pinnacol Assurance</b>					
Claimant Attorney	50	14%	4,260,622	25%	85,212
No Claimant Attorney	20	6%	1,172,982	7%	58,649
Unknown	0	0%	0	0%	
Total	70	20%	5,433,604	31%	77,623
<b>Commercial</b>					
Claimant Attorney	21	6%	1,337,763	8%	63,703
No Claimant Attorney	43	12%	2,654,654	15%	61,736
Unknown	0	0%	0	0%	
Total	64	18%	3,992,417	23%	62,382
<b>Self Insurer</b>					
Claimant Attorney	72	21%	4,095,493	24%	56,882
No Claimant Attorney	142	41%	3,795,206	22%	26,727
Unknown	0	0%	0	0%	
Total	214	61%	7,890,699	46%	36,872
<b>All Carriers</b>					
Claimant Attorney	143	41%	9,693,878	56%	67,789
No Claimant Attorney	205	59%	7,622,842	44%	37,185
Unknown	0	0%	0	0%	
Total	348	100%	17,316,720	100%	49,761

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

**TABLE 6**

**CHIROPRACTOR INVOLVEMENT**

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See Table 17 for 2003 data used in Charts 6c.

Prior Data from 2001 and 2002 Studies.

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 7

**DISTRIBUTION BY TYPE OF COST**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4)/(2)</i>
Total Indemnity	348	100%	11,071,695	61%	31,815
Total Medical	346	99%	6,245,025	35%	18,049
Total Vocational Rehab	7	2%	13,552	0%	1,936
Total Lump Sum Payments	135	39%	2,575,388		19,077
Total Expenses	206	59%	694,901	4%	3,373
<i>Totals/Average</i>	348		18,025,173		51,796

Note: Lump Sum Payments not included in Total

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 8, SHEET 1

**DISTRIBUTION BY TYPE OF CARRIER  
TOTAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Type of Carrier</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4)/(2)</i>
Pinnacol Assurance	70	20%	5,647,667	31%	80,681
Commercial Insurers	64	18%	4,230,471	24%	66,101
Self Insurers	214	62%	8,147,035	45%	38,070
<i>Totals/Average</i>	348		18,025,173		51,796

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 8, SHEET 2

**DISTRIBUTION BY TYPE OF CARRIER  
INDEMNITY DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Carrier</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
Pinnacol Assurance	70	3,829,155	54,702
Commercial Insurers	64	2,519,622	39,369
Self Insurers	214	4,722,918	22,070
<i>Totals/Average</i>	348	11,071,695	31,815

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 8, SHEET 3

**DISTRIBUTION BY TYPE OF CARRIER  
LUMP SUM DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Carrier</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
Pinnacol Assurance	52	703,153	13,522
Commercial Insurers	29	469,409	16,187
Self Insurers	54	1,402,826	25,978
<i>Totals/Average</i>	<i>135</i>	<i>2,575,388</i>	<i>19,077</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 8, SHEET 4

**DISTRIBUTION BY TYPE OF CARRIER  
MEDICAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Carrier</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
Pinnacol Assurance	70	1,604,449	22,921
Commercial Insurers	64	1,472,795	23,012
Self Insurers	212	3,167,781	14,942
<i>Totals/Average</i>	346	6,245,025	18,049

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 8, SHEET 5

**DISTRIBUTION BY TYPE OF CARRIER  
VOCATIONAL REHAB DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Carrier</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
Pinnacol Assurance	1	489	489
Commercial Insurers	2	6,236	3,118
Self Insurers	4	6,827	1,707
<i>Totals/Average</i>	7	13,552	1,936

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 8, SHEET 6

**DISTRIBUTION BY TYPE OF CARRIER  
EXPENSE DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Carrier</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
Pinnacol Assurance	67	213,574	3,188
Commercial Insurers	62	231,818	3,739
Self Insurers	77	249,509	3,240
<i>Totals/Average</i>	206	694,901	3,373

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 9, SHEET 1

**DISTRIBUTION BY SIZE OF CLAIM**

(1)	(2)	(3)	(4)	(5)	(6)
<i>Size of Claim</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4)/(2)</i>
Up to 1,000	0	0%	0	0%	
1,001 - 5,000	14	4%	36,491	0%	2,607
5,001 - 10,000	28	8%	211,896	1%	7,568
10,001 - 20,000	59	17%	863,617	5%	14,638
20,001 - 30,000	45	13%	1,101,564	6%	24,479
30,001 - 40,000	38	11%	1,330,542	7%	35,014
40,001 - 50,000	37	11%	1,703,601	9%	46,043
50,001 - 60,000	25	7%	1,367,427	8%	54,697
60,001 - 70,000	22	6%	1,437,176	8%	65,326
70,001 - 80,000	12	3%	911,748	5%	75,979
80,001 - 90,000	14	4%	1,177,965	7%	84,140
90,001 - 100,000	9	3%	848,874	5%	94,319
100,001 - 125,000	18	5%	1,986,517	11%	110,362
125,001 - 150,000	9	3%	1,279,065	7%	142,118
150,001 - 175,000	5	1%	780,890	4%	156,178
175,001 - 250,000	8	2%	1,666,882	9%	208,360
250,001 - 400,000	5	1%	1,320,918	7%	264,184
Over 400,000	0	0%	0	0%	0
<i>Totals\Average</i>	348		18,025,173		51,796

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 9, SHEET 2

**DISTRIBUTION BY SIZE OF CLAIM - PINNACOL ASSURANCE**

(1)	(2)	(3)	(4)	(5)	(6)
<i>Size of Claim</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Up to 1,000	0	0%	0	0%	
1,001 - 5,000	0	0%	0	0%	0
5,001 - 10,000	2	3%	15,205	0%	7,603
10,001 - 20,000	7	10%	95,863	2%	13,695
20,001 - 30,000	4	6%	102,566	2%	25,642
30,001 - 40,000	8	11%	294,150	5%	36,769
40,001 - 50,000	7	10%	308,038	5%	44,005
50,001 - 60,000	5	7%	269,960	5%	53,992
60,001 - 70,000	6	9%	393,350	7%	65,558
70,001 - 80,000	4	6%	313,827	6%	78,457
80,001 - 90,000	4	6%	345,002	6%	86,251
90,001 - 100,000	6	9%	570,091	10%	95,015
100,001 - 125,000	4	6%	435,016	8%	108,754
125,001 - 150,000	5	7%	706,849	13%	141,370
150,001 - 175,000	1	1%	151,928	3%	151,928
175,001 - 250,000	4	6%	875,851	16%	218,963
250,001 - 400,000	3	4%	769,971	14%	256,657
Over 400,000	0	0%	0	0%	0
<i>Totals\Average</i>	70		5,647,667		80,681

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 9, SHEET 3

**DISTRIBUTION BY SIZE OF CLAIM - COMMERCIAL INSURERS**

(1)	(2)	(3)	(4)	(5)	(6)
<i>Size of Claim</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Up to 1,000	0	0%	0	0%	
1,001 - 5,000	0	0%	0	0%	0
5,001 - 10,000	0	0%	0	0%	0
10,001 - 20,000	2	3%	24,737	1%	12,369
20,001 - 30,000	9	14%	234,009	6%	26,001
30,001 - 40,000	8	13%	277,230	7%	34,654
40,001 - 50,000	11	17%	501,145	12%	45,559
50,001 - 60,000	8	13%	427,979	10%	53,497
60,001 - 70,000	5	8%	331,678	8%	66,336
70,001 - 80,000	2	3%	157,515	4%	78,758
80,001 - 90,000	4	6%	339,831	8%	84,958
90,001 - 100,000	1	2%	90,997	2%	90,997
100,001 - 125,000	9	14%	1,013,357	24%	112,595
125,001 - 150,000	2	3%	275,680	7%	137,840
150,001 - 175,000	1	2%	161,205	4%	161,205
175,001 - 250,000	2	3%	395,108	9%	197,554
250,001 - 400,000	0	0%	0	0%	0
Over 400,000	0	0%	0	0%	0
<i>Totals\Average</i>	64		4,230,471		66,101

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 9, SHEET 4

**DISTRIBUTION BY SIZE OF CLAIM - SELF INSURERS**

(1)	(2)	(3)	(4)	(5)	(6)
<i>Size of Claim</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Up to 1,000	0	0%	0	0%	
1,001 - 5,000	14	7%	36,491	0%	2,607
5,001 - 10,000	26	12%	196,691	2%	7,565
10,001 - 20,000	50	23%	743,017	9%	14,860
20,001 - 30,000	32	15%	764,989	9%	23,906
30,001 - 40,000	22	10%	759,162	9%	34,507
40,001 - 50,000	19	9%	894,418	11%	47,075
50,001 - 60,000	12	6%	669,488	8%	55,791
60,001 - 70,000	11	5%	712,148	9%	64,741
70,001 - 80,000	6	3%	440,406	5%	73,401
80,001 - 90,000	6	3%	493,132	6%	82,189
90,001 - 100,000	2	1%	187,786	2%	93,893
100,001 - 125,000	5	2%	538,144	7%	107,629
125,001 - 150,000	2	1%	296,536	4%	148,268
150,001 - 175,000	3	1%	467,757	6%	155,919
175,001 - 250,000	2	1%	395,923	5%	197,962
250,001 - 400,000	2	1%	550,947	7%	275,474
Over 400,000	0	0%	0	0%	0
<i>Totals\Average</i>	214		8,147,035		38,070

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 10, SHEET 1

**DISTRIBUTION BY METHOD OF CLOSURE  
TOTAL DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)	(7)
<i>Carrier</i>	<i>Method of Closure</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5) / (3)</i>
<b>Pinnacol Assurance</b>	Negotiated Settlement	35	51%	3,610,292	66%	103,151
	Admission	29	43%	1,446,116	26%	49,866
	Order	4	6%	404,461	7%	101,115
	Other	0	0%	0	0%	
	Not Reported	0	0%	0	0%	
<b>Commercial Insurers</b>	Negotiated Settlement	32	50%	2,291,499	54%	71,609
	Admission	14	22%	808,661	19%	57,762
	Order	17	27%	1,000,379	24%	58,846
	Other	1	2%	129,932	3%	129,932
	Not Reported	0	0%	0	0%	
<b>Self Insurers</b>	Negotiated Settlement	55	26%	3,698,907	45%	67,253
	Admission	158	74%	4,441,137	55%	28,108
	Order	0	0%	0	0%	
	Other	0	0%	0	0%	
	Not Reported	1	0%	6,991	0%	6,991
<b>All Carriers</b>	Negotiated Settlement	122	35%	9,600,698	53%	78,694
	Admission	201	58%	6,695,914	37%	33,313
	Order	21	6%	1,404,840	8%	66,897
	Other	1	0%	129,932	1%	129,932
	Not Reported	3	1%	193,789	1%	64,596
<i>Totals/Average</i>		348		18,025,173		51,796

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 10, SHEET 2

**DISTRIBUTION BY METHOD OF CLOSURE  
INDEMNITY DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)	(7)
<i>Carrier</i>	<i>Method of Closure</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5) / (3)</i>
<b>Pinnacol Assurance</b>	Negotiated Settlement	35	51%	2,574,842	70%	73,567
	Admission	29	43%	909,515	25%	31,363
	Order	4	6%	189,185	5%	47,296
	Other	0	0%	0	0%	
	Not Reported	0	0%	0	0%	
<b>Commercial Insurers</b>	Negotiated Settlement	32	50%	1,443,146	57%	45,098
	Admission	14	22%	421,862	17%	30,133
	Order	17	27%	598,665	24%	35,216
	Other	1	2%	55,949	2%	55,949
	Not Reported	0	0%	0	0%	
<b>Self Insurers</b>	Negotiated Settlement	55	26%	2,372,298	50%	43,133
	Admission	158	74%	2,346,620	50%	14,852
	Order	0	0%	0	0%	
	Other	0	0%	0	0%	
	Not Reported	1	0%	4,000	0%	4,000
<b>All Carriers</b>	Negotiated Settlement	122	35%	6,390,286	58%	52,379
	Admission	201	58%	3,677,997	33%	18,298
	Order	21	6%	787,850	7%	37,517
	Other	1	0%	55,949	1%	55,949
	Not Reported	3	1%	159,613	1%	53,204
<i>Totals/Average</i>		348		11,071,695		31,815

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 10, SHEET 3

**DISTRIBUTION BY METHOD OF CLOSURE  
LUMP SUM DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)	(7)
<i>Carrier</i>	<i>Method of Closure</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5) / (3)</i>
<b>Pinnacol Assurance</b>	Negotiated Settlement	22	43%	322,191	47%	14,645
	Admission	26	51%	281,503	41%	10,827
	Order	3	6%	76,253	11%	25,418
	Other	0	0%	0	0%	
	Not Reported	0	0%	0	0%	
<b>Commercial Insurers</b>	Negotiated Settlement	17	59%	331,100	71%	19,476
	Admission	5	17%	51,840	11%	10,368
	Order	7	24%	86,469	18%	12,353
	Other	0	0%	0	0%	
	Not Reported	0	0%	0	0%	
<b>Self Insurers</b>	Negotiated Settlement	51	94%	1,364,290	97%	26,751
	Admission	2	4%	34,536	2%	17,268
	Order	0	0%	0	0%	
	Other	0	0%	0	0%	
	Not Reported	1	2%	4,000	0%	4,000
<b>All Carriers</b>	Negotiated Settlement	90	67%	2,017,581	78%	22,418
	Admission	33	24%	367,879	14%	11,148
	Order	10	7%	162,722	6%	16,272
	Other	0	0%	0	0%	
	Not Reported	2	1%	27,206	1%	13,603
<i>Totals/Average</i>		<i>135</i>		<i>2,575,388</i>		<i>19,077</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 10, SHEET 4

**DISTRIBUTION BY METHOD OF CLOSURE  
MEDICAL DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)	(7)
<i>Carrier</i>	<i>Method of Closure</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5) / (3)</i>
<b>Pinnacol Assurance</b>	Negotiated Settlement	35	51%	903,842	57%	25,824
	Admission	29	43%	479,233	30%	16,525
	Order	4	6%	191,081	12%	47,770
	Other	0	0%	0	0%	
	Not Reported	0	0%	0	0%	
<b>Commercial Insurers</b>	Negotiated Settlement	32	50%	689,267	47%	21,540
	Admission	14	22%	355,669	24%	25,405
	Order	17	27%	355,229	24%	20,896
	Other	1	2%	72,630	5%	72,630
	Not Reported	0	0%	0	0%	
<b>Self Insurers</b>	Negotiated Settlement	53	25%	1,149,435	36%	21,687
	Admission	158	75%	2,015,633	64%	12,757
	Order	0	0%	0	0%	
	Other	0	0%	0	0%	
	Not Reported	1	0%	2,713	0%	2,713
<b>All Carriers</b>	Negotiated Settlement	120	35%	2,742,544	44%	22,855
	Admission	201	58%	2,850,535	46%	14,182
	Order	21	6%	546,310	9%	26,015
	Other	1	0%	72,630	1%	72,630
	Not Reported	3	1%	33,006	1%	11,002
<i>Totals/Average</i>		346		6,245,025		18,049

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 10, SHEET 5

**DISTRIBUTION BY METHOD OF CLOSURE  
VOCATIONAL REHAB DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)	(7)
<i>Carrier</i>	<i>Method of Closure</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5) / (3)</i>
<b>Pinnacol Assurance</b>	Negotiated Settlement	1	100%	489	100%	489
	Admission	0	0%	0	0%	
	Order	0	0%	0	0%	
	Other	0	0%	0	0%	
	Not Reported	0	0%	0	0%	
<b>Commercial Insurers</b>	Negotiated Settlement	1	50%	4,883	78%	4,883
	Admission	0	0%	0	0%	
	Order	0	0%	0	0%	
	Other	1	50%	1,353	22%	1,353
	Not Reported	0	0%	0	0%	
<b>Self Insurers</b>	Negotiated Settlement	2	50%	1,646	24%	823
	Admission	2	50%	5,181	76%	2,591
	Order	0	0%	0	0%	
	Other	0	0%	0	0%	
	Not Reported	0	0%	0	0%	
<b>All Carriers</b>	Negotiated Settlement	4	57%	7,018	52%	1,755
	Admission	2	29%	5,181	38%	2,591
	Order	0	0%	0	0%	
	Other	1	14%	1,353	10%	1,353
	Not Reported	0	0%	0	0%	
<i>Totals/Average</i>		7		13,552		1,936

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 10, SHEET 6

**DISTRIBUTION BY METHOD OF CLOSURE  
EXPENSE DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)	(7)
<i>Carrier</i>	<i>Method of Closure</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5) / (3)</i>
<b>Pinnacol Assurance</b>	Negotiated Settlement	35	53%	131,119	62%	3,746
	Admission	27	41%	57,368	27%	2,125
	Order	4	6%	24,195	11%	6,049
	Other	0	0%	0	0%	
	Not Reported	0	0%	0	0%	
<b>Commercial Insurers</b>	Negotiated Settlement	32	52%	154,203	67%	4,819
	Admission	13	21%	31,130	13%	2,395
	Order	17	27%	46,485	20%	2,734
	Other	0	0%	0	0%	
	Not Reported	0	0%	0	0%	
<b>Self Insurers</b>	Negotiated Settlement	35	45%	175,528	70%	5,015
	Admission	41	53%	73,703	30%	1,798
	Order	0	0%	0	0%	
	Other	0	0%	0	0%	
	Not Reported	1	1%	278	0%	278
<b>All Carriers</b>	Negotiated Settlement	102	50%	460,850	66%	4,518
	Admission	81	39%	162,201	23%	2,002
	Order	21	10%	70,680	10%	3,366
	Other	0	0%	0	0%	
	Not Reported	2	1%	1,170	0%	585
<i>Totals/Average</i>		206		694,901		3,373

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 1

**DISTRIBUTION BY CAUSE OF INJURY  
TOTAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
<b>BURN OR SCALD - HEAT OR COLD EXPOSURE</b>					
Acid Chemicals	0	0.0%	0	0.0%	
Contact with Hot Objects	0	0.0%	0	0.0%	
Temperature Extremes	0	0.0%	0	0.0%	
Fire or Flame	0	0.0%	0	0.0%	
Steam or Hot Fluids	0	0.0%	0	0.0%	
Dust, Fumes, Gas, or Vapors	0	0.0%	0	0.0%	
Welding Operations	0	0.0%	0	0.0%	
Radiation	0	0.0%	0	0.0%	
Misc - Burn	0	0.0%	0	0.0%	
<b>SUBTOTAL - BURN</b>	<b>0</b>	<b>0.0%</b>	<b>0</b>	<b>0.0%</b>	
<b>CAUGHT IN OR BETWEEN</b>					
Machine or Machinery	6	1.7%	525,609	2.9%	87,602
Object Handled	0	0.0%	0	0.0%	
Misc - Caught	4	1.1%	170,033	0.9%	42,508
<b>SUBTOTAL - CAUGHT</b>	<b>10</b>	<b>2.9%</b>	<b>695,642</b>	<b>3.9%</b>	<b>69,564</b>
<b>CUT, PUNCTURE, SCRAPE INJURED BY</b>					
Broken Glass	0	0.0%	0	0.0%	
Hand Tool, Utensil; Not Powered	1	0.3%	7,977	0.0%	7,977
Powered Hand Tool	1	0.3%	13,693	0.1%	13,693
Misc - Cut	2	0.6%	49,798	0.3%	24,899
<b>SUBTOTAL - CUT</b>	<b>4</b>	<b>1.1%</b>	<b>71,468</b>	<b>0.4%</b>	<b>17,867</b>
<b>FALL OR SLIP INJURY</b>					
From a Different Level	14	4.0%	1,133,514	6.3%	80,965
From a Ladder or Scaffolding	10	2.9%	732,187	4.1%	73,219
From Liquid or Grease Spills	7	2.0%	390,097	2.2%	55,728
On Same Level	6	1.7%	282,189	1.6%	47,032
Slipped, Did Not Fall	4	1.1%	326,528	1.8%	81,632
Misc - Fall/Slip	28	8.0%	1,357,538	7.5%	48,484
<b>SUBTOTAL - FALL/SLIP</b>	<b>69</b>	<b>19.8%</b>	<b>4,222,053</b>	<b>23.4%</b>	<b>61,189</b>
<b>MOTOR VEHICLE</b>					
Collision with Another Vehicle	11	3.2%	635,158	3.5%	57,742
Collision with a Fixed Object	1	0.3%	30,391	0.2%	30,391
Crash of Airplane	0	0.0%	0	0.0%	
Vehicle Upset	2	0.6%	122,442	0.7%	61,221
Misc - Vehicle	7	2.0%	382,615	2.1%	54,659
<b>SUBTOTAL - VEHICLE</b>	<b>21</b>	<b>6.0%</b>	<b>1,170,606</b>	<b>6.5%</b>	<b>55,743</b>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 1 (CONT'D)

**DISTRIBUTION BY CAUSE OF INJURY  
TOTAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4)/(2)</i>
<b>STRAIN OR INJURY BY</b>					
Jumping	0	0.0%	0	0.0%	
Holding or Carrying	12	3.4%	665,419	3.7%	55,452
Lifting	52	14.9%	2,938,838	16.3%	56,516
Pushing or Pulling	14	4.0%	860,989	4.8%	61,499
Reaching	2	0.6%	48,855	0.3%	24,428
Using Tool or Machine	3	0.9%	141,794	0.8%	47,265
Misc - Strain	42	12.1%	2,185,418	12.1%	52,034
<b>SUBTOTAL - STRAIN</b>	<b>125</b>	<b>35.9%</b>	<b>6,841,313</b>	<b>38.0%</b>	
<b>STRIKING AGAINST OR STEPPING ON</b>					
Moving Parts of Machine	1	0.3%	114,130	0.6%	114,130
Objects Being Lifted or Handled	0	0.0%	0	0.0%	
Sanding, Scraping, Cleaning	0	0.0%	0	0.0%	
Stationary Object	2	0.6%	113,370	0.6%	56,685
Stepping on Sharp Object	0	0.0%	0	0.0%	
Misc - Striking Against	3	0.9%	108,171	0.6%	36,057
<b>SUBTOTAL - STRIKING AGAINST</b>	<b>6</b>	<b>1.7%</b>	<b>335,671</b>	<b>1.9%</b>	<b>55,945</b>
<b>STRUCK OR INJURED BY</b>					
Falling or Flying Object	7	2.0%	318,183	1.8%	45,455
Hand Tool or Machine in Use	0	0.0%	0	0.0%	
Motor Vehicle	3	0.9%	338,358	1.9%	112,786
Moving Parts of Machine	1	0.3%	19,711	0.1%	19,711
Objects Being Lifted or Handled	2	0.6%	84,248	0.5%	42,124
Objects Handled by Others	2	0.6%	87,673	0.5%	43,837
Misc - Struck	7	2.0%	326,877	1.8%	46,697
<b>SUBTOTAL - STRUCK</b>	<b>22</b>	<b>6.3%</b>	<b>1,175,050</b>	<b>6.5%</b>	<b>53,411</b>
<b>MISCELLANEOUS CAUSES</b>					
Contact with Electric Current	0	0.0%	0	0.0%	
Animal or Insect	1	0.3%	2,524	0.0%	2,524
Explosion or Flare Back	0	0.0%	0	0.0%	
Foreign Body in Eye	0	0.0%	0	0.0%	
Robbery or Criminal Assault	2	0.6%	59,113	0.3%	29,557
Repetitive Motion	20	5.7%	437,288	2.4%	21,864
Cumulative (NOC)	15	4.3%	462,997	2.6%	30,866
Other (NOC)	53	15.2%	2,551,448	14.2%	48,141
<b>SUBTOTAL - MISCELLANEOUS</b>	<b>91</b>	<b>26.1%</b>	<b>3,513,370</b>	<b>19.5%</b>	<b>38,608</b>
<i>Totals/Average</i>	348		18,025,173		51,796

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 2

**DISTRIBUTION BY CAUSE OF INJURY  
INDEMNITY DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
<b>BURN OR SCALD - HEAT OR COLD EXPOSURE</b>					
Acid Chemicals	0	0.0%	0	0.0%	
Contact with Hot Objects	0	0.0%	0	0.0%	
Temperature Extremes	0	0.0%	0	0.0%	
Fire or Flame	0	0.0%	0	0.0%	
Steam or Hot Fluids	0	0.0%	0	0.0%	
Dust, Fumes, Gas, or Vapors	0	0.0%	0	0.0%	
Welding Operations	0	0.0%	0	0.0%	
Radiation	0	0.0%	0	0.0%	
Misc - Burn	0	0.0%	0	0.0%	
<b>SUBTOTAL - BURN</b>	<b>0</b>	<b>0.0%</b>	<b>0</b>	<b>0.0%</b>	
<b>CAUGHT IN OR BETWEEN</b>					
Machine or Machinery	6	1.7%	282,850	2.6%	47,142
Object Handled	0	0.0%	0	0.0%	
Misc - Caught	4	1.1%	75,318	0.7%	18,830
<b>SUBTOTAL - CAUGHT</b>	<b>10</b>	<b>2.9%</b>	<b>358,168</b>	<b>3.2%</b>	<b>35,817</b>
<b>CUT, PUNCTURE, SCRAPE INJURED BY</b>					
Broken Glass	0	0.0%	0	0.0%	
Hand Tool, Utensil; Not Powered	1	0.3%	266	0.0%	266
Powered Hand Tool	1	0.3%	2,736	0.0%	2,736
Misc - Cut	2	0.6%	21,429	0.2%	10,715
<b>SUBTOTAL - CUT</b>	<b>4</b>	<b>1.1%</b>	<b>24,431</b>	<b>0.2%</b>	<b>6,108</b>
<b>FALL OR SLIP INJURY</b>					
From a Different Level	14	4.0%	669,123	6.0%	47,795
From a Ladder or Scaffolding	10	2.9%	498,987	4.5%	49,899
From Liquid or Grease Spills	7	2.0%	223,847	2.0%	31,978
On Same Level	6	1.7%	184,799	1.7%	30,800
Slipped, Did Not Fall	4	1.1%	295,737	2.7%	73,934
Misc - Fall/Slip	28	8.0%	772,742	7.0%	27,598
<b>SUBTOTAL - FALL/SLIP</b>	<b>69</b>	<b>19.8%</b>	<b>2,645,235</b>	<b>23.9%</b>	<b>38,337</b>
<b>MOTOR VEHICLE</b>					
Collision with Another Vehicle	11	3.2%	419,213	3.8%	38,110
Collision with a Fixed Object	1	0.3%	26,396	0.2%	26,396
Crash of Airplane	0	0.0%	0	0.0%	
Vehicle Upset	2	0.6%	81,598	0.7%	40,799
Misc - Vehicle	7	2.0%	165,484	1.5%	23,641
<b>SUBTOTAL - VEHICLE</b>	<b>21</b>	<b>6.0%</b>	<b>692,691</b>	<b>6.3%</b>	<b>32,985</b>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 2 (CONT'D)

**DISTRIBUTION BY CAUSE OF INJURY  
INDEMNITY DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
<b>STRAIN OR INJURY BY</b>					
Jumping	0	0.0%	0	0.0%	
Holding or Carrying	12	3.4%	345,168	3.1%	28,764
Lifting	52	14.9%	1,983,067	17.9%	38,136
Pushing or Pulling	14	4.0%	497,793	4.5%	35,557
Reaching	2	0.6%	37,025	0.3%	18,513
Using Tool or Machine	3	0.9%	96,498	0.9%	32,166
Misc - Strain	42	12.1%	1,455,459	13.1%	34,654
<b>SUBTOTAL - STRAIN</b>	<b>125</b>	<b>35.9%</b>	<b>4,415,010</b>	<b>39.9%</b>	<b>35,320</b>
<b>STRIKING AGAINST OR STEPPING ON</b>					
Moving Parts of Machine	1	0.3%	59,590	0.5%	59,590
Objects Being Lifted or Handled	0	0.0%	0	0.0%	
Sanding, Scraping, Cleaning	0	0.0%	0	0.0%	
Stationary Object	2	0.6%	18,844	0.2%	9,422
Stepping on Sharp Object	0	0.0%	0	0.0%	
Misc - Striking Against	3	0.9%	49,305	0.4%	16,435
<b>SUBTOTAL - STRIKING AGAINST</b>	<b>6</b>	<b>1.7%</b>	<b>127,739</b>	<b>1.2%</b>	<b>21,290</b>
<b>STRUCK OR INJURED BY</b>					
Falling or Flying Object	7	2.0%	175,181	1.6%	25,026
Hand Tool or Machine in Use	0	0.0%	0	0.0%	
Motor Vehicle	3	0.9%	241,461	2.2%	80,487
Moving Parts of Machine	1	0.3%	1,010	0.0%	1,010
Objects Being Lifted or Handled	2	0.6%	44,021	0.4%	22,011
Objects Handled by Others	2	0.6%	57,484	0.5%	28,742
Misc - Struck	7	2.0%	156,681	1.4%	22,383
<b>SUBTOTAL - STRUCK</b>	<b>22</b>	<b>6.3%</b>	<b>675,838</b>	<b>6.1%</b>	<b>30,720</b>
<b>MISCELLANEOUS CAUSES</b>					
Contact with Electric Current	0	0.0%	0	0.0%	
Animal or Insect	1	0.3%	1,841	0.0%	1,841
Explosion or Flare Back	0	0.0%	0	0.0%	
Foreign Body in Eye	0	0.0%	0	0.0%	
Robbery or Criminal Assault	2	0.6%	24,359	0.2%	12,180
Repetitive Motion	20	5.7%	245,557	2.2%	12,278
Cumulative (NOC)	15	4.3%	233,904	2.1%	15,594
Other (NOC)	53	15.2%	1,626,922	14.7%	30,697
<b>SUBTOTAL - MISCELLANEOUS</b>	<b>91</b>	<b>26.1%</b>	<b>2,132,583</b>	<b>19.3%</b>	<b>23,435</b>
<hr/>					
<i>Totals/Average</i>	348		11,071,695		31,815

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 3

**DISTRIBUTION BY CAUSE OF INJURY  
LUMP SUM DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
<b>BURN OR SCALD - HEAT OR COLD EXPOSURE</b>			
Acid Chemicals	0	0	
Contact with Hot Objects	0	0	
Temperature Extremes	0	0	
Fire or Flame	0	0	
Steam or Hot Fluids	0	0	
Dust, Fumes, Gas, or Vapors	0	0	
Welding Operations	0	0	
Radiation	0	0	
Misc - Burn	0	0	
<b>SUBTOTAL - BURN</b>	<b>0</b>	<b>0</b>	
<b>CAUGHT IN OR BETWEEN</b>			
Machine or Machinery	3	3,884	1,295
Object Handled	0	0	
Misc - Caught	1	11,482	11,482
<b>SUBTOTAL - CAUGHT</b>	<b>4</b>	<b>15,366</b>	<b>3,842</b>
<b>CUT, PUNCTURE, SCRAPE INJURED BY</b>			
Broken Glass	0	0	
Hand Tool, Utensil; Not Powered	0	0	
Powered Hand Tool	0	0	
Misc - Cut	1	8,754	8,754
<b>SUBTOTAL - CUT</b>	<b>1</b>	<b>8,754</b>	<b>8,754</b>
<b>FALL OR SLIP INJURY</b>			
From a Different Level	7	244,548	34,935
From a Ladder or Scaffolding	8	226,869	28,359
From Liquid or Grease Spills	3	16,504	5,501
On Same Level	3	45,323	15,108
Slipped, Did Not Fall	2	167,000	83,500
Misc - Fall/Slip	12	139,174	11,598
<b>SUBTOTAL - FALL/SLIP</b>	<b>35</b>	<b>839,418</b>	<b>23,983</b>
<b>MOTOR VEHICLE</b>			
Collision with Another Vehicle	5	137,545	27,509
Collision with a Fixed Object	0	0	
Crash of Airplane	0	0	
Vehicle Upset	1	10,000	10,000
Misc - Vehicle	1	14,365	14,365
<b>SUBTOTAL - VEHICLE</b>	<b>7</b>	<b>161,910</b>	<b>23,130</b>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 3 (CONT'D)

**DISTRIBUTION BY CAUSE OF INJURY  
LUMP SUM DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>STRAIN OR INJURY BY</b>			
Jumping	0	0	
Holding or Carrying	3	3,829	1,276
Lifting	26	419,085	16,119
Pushing or Pulling	5	57,918	11,584
Reaching	0	0	
Using Tool or Machine	3	53,076	17,692
Misc - Strain	18	423,569	23,532
<b>SUBTOTAL - STRAIN</b>	<b>55</b>	<b>957,477</b>	<b>17,409</b>
<b>STRIKING AGAINST OR STEPPING ON</b>			
Moving Parts of Machine	1	32,925	32,925
Objects Being Lifted or Handled	0	0	
Sanding, Scraping, Cleaning	0	0	
Stationary Object	0	0	
Stepping on Sharp Object	0	0	
Misc - Striking Against	0	0	
<b>SUBTOTAL - STRIKING AGAINST</b>	<b>1</b>	<b>32,925</b>	<b>32,925</b>
<b>STRUCK OR INJURED BY</b>			
Falling or Flying Object	1	1,000	1,000
Hand Tool or Machine in Use	0	0	
Motor Vehicle	2	170,000	85,000
Moving Parts of Machine	0	0	
Objects Being Lifted or Handled	0	0	
Objects Handled by Others	1	5,863	5,863
Misc - Struck	5	36,618	7,324
<b>SUBTOTAL - STRUCK</b>	<b>9</b>	<b>213,481</b>	<b>23,720</b>
<b>MISCELLANEOUS CAUSES</b>			
Contact with Electric Current	0	0	
Animal or Insect	0	0	
Explosion or Flare Back	0	0	
Foreign Body in Eye	0	0	
Robbery or Criminal Assault	0	0	
Repetitive Motion	3	50,530	16,843
Cumulative (NOC)	3	49,000	16,333
Other (NOC)	17	246,527	14,502
<b>SUBTOTAL - MISCELLANEOUS</b>	<b>23</b>	<b>346,057</b>	<b>15,046</b>
<hr/>			
<i>Totals/Average</i>	135	2,575,388	19,077

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 4

**DISTRIBUTION BY CAUSE OF INJURY  
MEDICAL DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
<b>BURN OR SCALD - HEAT OR COLD EXPOSURE</b>					
Acid Chemicals	0	0.0%	0	0.0%	
Contact with Hot Objects	0	0.0%	0	0.0%	
Temperature Extremes	0	0.0%	0	0.0%	
Fire or Flame	0	0.0%	0	0.0%	
Steam or Hot Fluids	0	0.0%	0	0.0%	
Dust, Fumes, Gas, or Vapors	0	0.0%	0	0.0%	
Welding Operations	0	0.0%	0	0.0%	
Radiation	0	0.0%	0	0.0%	
Misc - Burn	0	0.0%	0	0.0%	
<b>SUBTOTAL - BURN</b>	<b>0</b>	<b>0.0%</b>	<b>0</b>	<b>0.0%</b>	
<b>CAUGHT IN OR BETWEEN</b>					
Machine or Machinery	6	1.7%	221,734	3.6%	36,956
Object Handled	0	0.0%	0	0.0%	
Misc - Caught	4	1.2%	87,925	1.4%	21,981
<b>SUBTOTAL - CAUGHT</b>	<b>10</b>	<b>2.9%</b>	<b>309,659</b>	<b>5.0%</b>	<b>30,966</b>
<b>CUT, PUNCTURE, SCRAPE INJURED BY</b>					
Broken Glass	0	0.0%	0	0.0%	
Hand Tool, Utensil; Not Powered	1	0.3%	7,711	0.1%	7,711
Powered Hand Tool	1	0.3%	10,957	0.2%	10,957
Misc - Cut	2	0.6%	27,774	0.4%	13,887
<b>SUBTOTAL - CUT</b>	<b>4</b>	<b>1.2%</b>	<b>46,442</b>	<b>0.7%</b>	<b>11,611</b>
<b>FALL OR SLIP INJURY</b>					
From a Different Level	14	4.0%	418,373	6.7%	29,884
From a Ladder or Scaffolding	10	2.9%	214,067	3.4%	21,407
From Liquid or Grease Spills	7	2.0%	149,412	2.4%	21,345
On Same Level	6	1.7%	72,279	1.2%	12,047
Slipped, Did Not Fall	4	1.2%	27,399	0.4%	6,850
Misc - Fall/Slip	28	8.1%	538,232	8.6%	19,223
<b>SUBTOTAL - FALL/SLIP</b>	<b>69</b>	<b>19.9%</b>	<b>1,419,762</b>	<b>22.7%</b>	<b>20,576</b>
<b>MOTOR VEHICLE</b>					
Collision with Another Vehicle	11	3.2%	203,741	3.3%	18,522
Collision with a Fixed Object	1	0.3%	3,995	0.1%	3,995
Crash of Airplane	0	0.0%	0	0.0%	
Vehicle Upset	2	0.6%	35,925	0.6%	17,963
Misc - Vehicle	7	2.0%	196,168	3.1%	28,024
<b>SUBTOTAL - VEHICLE</b>	<b>21</b>	<b>6.1%</b>	<b>439,829</b>	<b>7.0%</b>	<b>20,944</b>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 4 (CONT'D)

**DISTRIBUTION BY CAUSE OF INJURY  
MEDICAL DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
<b>STRAIN OR INJURY BY</b>					
Jumping	0	0.0%	0	0.0%	
Holding or Carrying	12	3.5%	289,152	4.6%	24,096
Lifting	51	14.7%	829,834	13.3%	16,271
Pushing or Pulling	14	4.0%	310,255	5.0%	22,161
Reaching	2	0.6%	11,830	0.2%	5,915
Using Tool or Machine	3	0.9%	44,766	0.7%	14,922
Misc - Strain	42	12.1%	654,446	10.5%	15,582
<b>SUBTOTAL - STRAIN</b>	<b>124</b>	<b>35.8%</b>	<b>2,140,283</b>	<b>34.3%</b>	<b>17,260</b>
<b>STRIKING AGAINST OR STEPPING ON</b>					
Moving Parts of Machine	1	0.3%	43,450	0.7%	43,450
Objects Being Lifted or Handled	0	0.0%	0	0.0%	
Sanding, Scraping, Cleaning	0	0.0%	0	0.0%	
Stationary Object	2	0.6%	94,526	1.5%	47,263
Stepping on Sharp Object	0	0.0%	0	0.0%	
Misc - Striking Against	3	0.9%	52,572	0.8%	17,524
<b>SUBTOTAL - STRIKING AGAINST</b>	<b>6</b>	<b>1.7%</b>	<b>190,548</b>	<b>3.1%</b>	<b>31,758</b>
<b>STRUCK OR INJURED BY</b>					
Falling or Flying Object	7	2.0%	137,579	2.2%	19,654
Hand Tool or Machine in Use	0	0.0%	0	0.0%	
Motor Vehicle	3	0.9%	91,217	1.5%	30,406
Moving Parts of Machine	1	0.3%	18,701	0.3%	18,701
Objects Being Lifted or Handled	2	0.6%	35,846	0.6%	17,923
Objects Handled by Others	2	0.6%	29,401	0.5%	14,701
Misc - Struck	7	2.0%	142,188	2.3%	20,313
<b>SUBTOTAL - STRUCK</b>	<b>22</b>	<b>6.4%</b>	<b>454,932</b>	<b>7.3%</b>	<b>20,679</b>
<b>MISCELLANEOUS CAUSES</b>					
Contact with Electric Current	0	0.0%	0	0.0%	
Animal or Insect	1	0.3%	683	0.0%	683
Explosion or Flare Back	0	0.0%	0	0.0%	
Foreign Body in Eye	0	0.0%	0	0.0%	
Robbery or Criminal Assault	2	0.6%	34,465	0.6%	17,233
Repetitive Motion	20	5.8%	172,515	2.8%	8,626
Cumulative (NOC)	14	4.0%	201,553	3.2%	14,397
Other (NOC)	53	15.3%	834,354	13.4%	15,743
<b>SUBTOTAL - MISCELLANEOUS</b>	<b>90</b>	<b>26.0%</b>	<b>1,243,570</b>	<b>19.9%</b>	<b>13,817</b>
<i>Totals/Average</i>	346		6,245,025		18,049

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 5

**DISTRIBUTION BY CAUSE OF INJURY  
VOCATIONAL REHAB DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>BURN OR SCALD - HEAT OR COLD EXPOSURE</b>			
Acid Chemicals	0	0	
Contact with Hot Objects	0	0	
Temperature Extremes	0	0	
Fire or Flame	0	0	
Steam or Hot Fluids	0	0	
Dust, Fumes, Gas, or Vapors	0	0	
Welding Operations	0	0	
Radiation	0	0	
Misc - Burn	0	0	
<b>SUBTOTAL - BURN</b>	<b>0</b>	<b>0</b>	
<b>CAUGHT IN OR BETWEEN</b>			
Machine or Machinery	0	0	
Object Handled	0	0	
Misc - Caught	0	0	
<b>SUBTOTAL - CAUGHT</b>	<b>0</b>	<b>0</b>	
<b>CUT, PUNCTURE, SCRAPE INJURED BY</b>			
Broken Glass	0	0	
Hand Tool, Utensil; Not Powered	0	0	
Powered Hand Tool	0	0	
Misc - Cut	0	0	
<b>SUBTOTAL - CUT</b>	<b>0</b>	<b>0</b>	
<b>FALL OR SLIP INJURY</b>			
From a Different Level	1	4,883	4,883
From a Ladder or Scaffolding	0	0	
From Liquid or Grease Spills	1	1,353	1,353
On Same Level	0	0	
Slipped, Did Not Fall	0	0	
Misc - Fall/Slip	0	0	
<b>SUBTOTAL - FALL/SLIP</b>	<b>2</b>	<b>6,236</b>	<b>3,118</b>
<b>MOTOR VEHICLE</b>			
Collision with Another Vehicle	0	0	
Collision with a Fixed Object	0	0	
Crash of Airplane	0	0	
Vehicle Upset	0	0	
Misc - Vehicle	0	0	
<b>SUBTOTAL - VEHICLE</b>	<b>0</b>	<b>0</b>	

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 5 (CONT'D)

**DISTRIBUTION BY CAUSE OF INJURY  
VOCATIONAL REHAB DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>STRAIN OR INJURY BY</b>			
Jumping	0	0	
Holding or Carrying	1	489	489
Lifting	1	221	221
Pushing or Pulling	0	0	
Reaching	0	0	
Using Tool or Machine	0	0	
Misc - Strain	0	0	
<b>SUBTOTAL - STRAIN</b>	<b>2</b>	<b>710</b>	<b>355</b>
<b>STRIKING AGAINST OR STEPPING ON</b>			
Moving Parts of Machine	0	0	
Objects Being Lifted or Handled	0	0	
Sanding, Scraping, Cleaning	0	0	
Stationary Object	0	0	
Stepping on Sharp Object	0	0	
Misc - Striking Against	0	0	
<b>SUBTOTAL - STRIKING AGAINST</b>	<b>0</b>	<b>0</b>	
<b>STRUCK OR INJURED BY</b>			
Falling or Flying Object	0	0	
Hand Tool or Machine in Use	0	0	
Motor Vehicle	0	0	
Moving Parts of Machine	0	0	
Objects Being Lifted or Handled	0	0	
Objects Handled by Others	0	0	
Misc - Struck	0	0	
<b>SUBTOTAL - STRUCK</b>	<b>0</b>	<b>0</b>	
<b>MISCELLANEOUS CAUSES</b>			
Contact with Electric Current	0	0	
Animal or Insect	0	0	
Explosion or Flare Back	0	0	
Foreign Body in Eye	0	0	
Robbery or Criminal Assault	0	0	
Repetitive Motion	0	0	
Cumulative (NOC)	1	1,387	1,387
Other (NOC)	2	5,219	2,610
<b>SUBTOTAL - MISCELLANEOUS</b>	<b>3</b>	<b>6,606</b>	<b>2,202</b>
<hr/>			
<i>Totals/Average</i>	7	13,552	1,936

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 6

**DISTRIBUTION BY CAUSE OF INJURY  
EXPENSE DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
<b>BURN OR SCALD - HEAT OR COLD EXPOSURE</b>			
Acid Chemicals	0	0	
Contact with Hot Objects	0	0	
Temperature Extremes	0	0	
Fire or Flame	0	0	
Steam or Hot Fluids	0	0	
Dust, Fumes, Gas, or Vapors	0	0	
Welding Operations	0	0	
Radiation	0	0	
Misc - Burn	0	0	
<b>SUBTOTAL - BURN</b>	<b>0</b>	<b>0</b>	
<b>CAUGHT IN OR BETWEEN</b>			
Machine or Machinery	5	21,025	4,205
Object Handled	0	0	
Misc - Caught	4	6,790	1,698
<b>SUBTOTAL - CAUGHT</b>	<b>9</b>	<b>27,815</b>	<b>3,091</b>
<b>CUT, PUNCTURE, SCRAPE INJURED BY</b>			
Broken Glass	0	0	
Hand Tool, Utensil; Not Powered	0	0	
Powered Hand Tool	0	0	
Misc - Cut	2	595	298
<b>SUBTOTAL - CUT</b>	<b>2</b>	<b>595</b>	<b>298</b>
<b>FALL OR SLIP INJURY</b>			
From a Different Level	7	41,135	5,876
From a Ladder or Scaffolding	8	19,133	2,392
From Liquid or Grease Spills	4	15,485	3,871
On Same Level	6	25,111	4,185
Slipped, Did Not Fall	2	3,392	1,696
Misc - Fall/Slip	17	46,564	2,739
<b>SUBTOTAL - FALL/SLIP</b>	<b>44</b>	<b>150,820</b>	<b>3,428</b>
<b>MOTOR VEHICLE</b>			
Collision with Another Vehicle	7	12,204	1,743
Collision with a Fixed Object	0	0	
Crash of Airplane	0	0	
Vehicle Upset	2	4,919	2,460
Misc - Vehicle	6	20,963	3,494
<b>SUBTOTAL - VEHICLE</b>	<b>15</b>	<b>38,086</b>	<b>2,539</b>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 11, SHEET 6 (CONT'D)

**DISTRIBUTION BY CAUSE OF INJURY  
EXPENSE DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Cause of Injury</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
<b>STRAIN OR INJURY BY</b>			
Jumping	0	0	
Holding or Carrying	7	30,610	4,373
Lifting	34	125,716	3,698
Pushing or Pulling	11	52,941	4,813
Reaching	0	0	
Using Tool or Machine	1	530	530
Misc - Strain	26	75,513	2,904
<b>SUBTOTAL - STRAIN</b>	<b>79</b>	<b>285,310</b>	<b>3,612</b>
<b>STRIKING AGAINST OR STEPPING ON</b>			
Moving Parts of Machine	1	11,090	11,090
Objects Being Lifted or Handled	0	0	
Sanding, Scraping, Cleaning	0	0	
Stationary Object	0	0	
Stepping on Sharp Object	0	0	
Misc - Striking Against	2	6,294	3,147
<b>SUBTOTAL - STRIKING AGAINST</b>	<b>3</b>	<b>17,384</b>	<b>5,795</b>
<b>STRUCK OR INJURED BY</b>			
Falling or Flying Object	5	5,423	1,085
Hand Tool or Machine in Use	0	0	
Motor Vehicle	1	5,680	5,680
Moving Parts of Machine	0	0	
Objects Being Lifted or Handled	1	4,381	4,381
Objects Handled by Others	2	788	394
Misc - Struck	4	28,008	7,002
<b>SUBTOTAL - STRUCK</b>	<b>13</b>	<b>44,280</b>	<b>3,406</b>
<b>MISCELLANEOUS CAUSES</b>			
Contact with Electric Current	0	0	
Animal or Insect	0	0	
Explosion or Flare Back	0	0	
Foreign Body in Eye	0	0	
Robbery or Criminal Assault	1	289	289
Repetitive Motion	10	19,216	1,922
Cumulative (NOC)	6	26,153	4,359
Other (NOC)	24	84,953	3,540
<b>SUBTOTAL - MISCELLANEOUS</b>	<b>41</b>	<b>130,611</b>	<b>3,186</b>
<hr/>			
<i>Totals/Average</i>	206	694,901	3,373

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 1

**DISTRIBUTION BY NATURE OF INJURY  
TOTAL DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
<b>SPECIFIC INJURY</b>					
Amputation	3	0.9%	162,371	0.9%	54,124
Angina Pectoris	0	0.0%	0	0.0%	
Burn	0	0.0%	0	0.0%	
Concussion	4	1.2%	256,136	1.5%	64,034
<b>Contusion</b>	<b>25</b>	<b>7.4%</b>	<b>1,463,540</b>	<b>8.3%</b>	<b>58,542</b>
Crushing	4	1.2%	237,600	1.4%	59,400
Dislocation	4	1.2%	93,137	0.5%	23,284
Electric Shock	0	0.0%	0	0.0%	
Enucleation	0	0.0%	0	0.0%	
Foreign body	0	0.0%	0	0.0%	
<b>Fracture</b>	<b>22</b>	<b>6.5%</b>	<b>1,178,703</b>	<b>6.7%</b>	<b>53,577</b>
Freezing	0	0.0%	0	0.0%	
Hearing Loss	1	0.3%	15,922	0.1%	15,922
Heat Prostration	0	0.0%	0	0.0%	
Hernia	3	0.9%	338,354	1.9%	112,785
Infection	0	0.0%	0	0.0%	
<b>Inflammation</b>	<b>9</b>	<b>2.7%</b>	<b>319,939</b>	<b>1.8%</b>	<b>35,549</b>
<b>Laceration</b>	<b>9</b>	<b>2.7%</b>	<b>270,580</b>	<b>1.5%</b>	<b>30,064</b>
Myocardial Infarction	0	0.0%	0	0.0%	
Poisoning -- General	0	0.0%	0	0.0%	
Puncture	1	0.3%	13,693	0.1%	13,693
<b>Rupture</b>	<b>7</b>	<b>2.1%</b>	<b>994,053</b>	<b>5.7%</b>	<b>142,008</b>
Severance	0	0.0%	0	0.0%	
<b>Sprain</b>	<b>10</b>	<b>3.0%</b>	<b>269,880</b>	<b>1.5%</b>	<b>26,988</b>
<b>Strain</b>	<b>145</b>	<b>42.9%</b>	<b>7,666,943</b>	<b>43.6%</b>	<b>52,875</b>
Syncope	0	0.0%	0	0.0%	
Asphyxiation	0	0.0%	0	0.0%	
Vascular Loss	2	0.6%	64,799	0.4%	32,400
Vision Loss	0	0.0%	0	0.0%	
All Other	71	21.0%	3,735,758	21.3%	52,616

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 1 (CONT'D)

**DISTRIBUTION BY NATURE OF INJURY  
TOTAL DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
<b>OCCUPATIONAL DISEASE OR CUMULATIVE INJURY</b>					
Dust Disease NOC	0	0.0%	0	0.0%	
Asbestosis	0	0.0%	0	0.0%	
Black Lung	0	0.0%	0	0.0%	
Byssinosis	0	0.0%	0	0.0%	
Silicosis	0	0.0%	0	0.0%	
Respiratory Disorders	0	0.0%	0	0.0%	
Poisoning - Chemical	0	0.0%	0	0.0%	
Poisoning - Metal	0	0.0%	0	0.0%	
Dermatitis	0	0.0%	0	0.0%	
Mental Disorder	0	0.0%	0	0.0%	
Radiation	0	0.0%	0	0.0%	
All Other Occupational Disease	1	0.3%	5,016	0.0%	5,016
Loss of Hearing	2	0.6%	14,431	0.1%	7,216
Contagious Disease	0	0.0%	0	0.0%	
Cancer	0	0.0%	0	0.0%	
AIDS	0	0.0%	0	0.0%	
VDT-Related Disease	0	0.0%	0	0.0%	
Mental Stress	1	0.3%	4,446	0.0%	4,446
<b>Carpal Tunnel Syndrome</b>	<b>6</b>	<b>1.8%</b>	<b>208,819</b>	<b>1.2%</b>	<b>34,803</b>
All Other Cumulative Injuries	8	2.4%	253,580	1.4%	31,698
<i>Totals/Average</i>	338		17,567,700		51,975

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 2

**DISTRIBUTION BY NATURE OF INJURY  
INDEMNITY DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>SPECIFIC INJURY</b>			
Amputation	3	86,429	28,810
Angina Pectoris	0	0	
Burn	0	0	
Concussion	4	150,730	37,683
<b>Contusion</b>	<b>25</b>	<b>773,733</b>	<b>30,949</b>
Crushing	4	142,706	35,677
Dislocation	4	24,907	6,227
Electric Shock	0	0	
Enucleation	0	0	
Foreign body	0	0	
<b>Fracture</b>	<b>22</b>	<b>564,397</b>	<b>25,654</b>
Freezing	0	0	
Hearing Loss	1	10,640	10,640
Heat Prostration	0	0	
Hernia	3	255,128	85,043
Infection	0	0	
<b>Inflammation</b>	<b>9</b>	<b>175,382</b>	<b>19,487</b>
<b>Laceration</b>	<b>9</b>	<b>93,409</b>	<b>10,379</b>
Myocardial Infarction	0	0	
Poisoning -- General	0	0	
Puncture	1	2,736	2,736
<b>Rupture</b>	<b>7</b>	<b>684,356</b>	<b>97,765</b>
Severance	0	0	
<b>Sprain</b>	<b>10</b>	<b>99,471</b>	<b>9,947</b>
<b>Strain</b>	<b>145</b>	<b>4,912,541</b>	<b>33,880</b>
Syncope	0	0	
Asphyxiation	0	0	
Vascular Loss	2	10,501	5,251
Vision Loss	0	0	
All Other	71	2,528,904	35,618

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 2 (CONT'D)

**DISTRIBUTION BY NATURE OF INJURY  
INDEMNITY DOLLARS**

(1)	(2)	(3)	(4)
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>OCCUPATIONAL DISEASE OR CUMULATIVE INJURY</b>			
Dust Disease NOC	0	0	
Asbestosis	0	0	
Black Lung	0	0	
Byssinosis	0	0	
Silicosis	0	0	
Respiratory Disorders	0	0	
Poisoning - Chemical	0	0	
Poisoning - Metal	0	0	
Dermatitis	0	0	
Mental Disorder	0	0	
Radiation	0	0	
All Other Occupational Disease	1	5,000	5,000
Loss of Hearing	2	7,770	3,885
Contagious Disease	0	0	
Cancer	0	0	
AIDS	0	0	
VDT-Related Disease	0	0	
Mental Stress	1	4,000	4,000
<b>Carpal Tunnel Syndrome</b>	<b>6</b>	<b>119,017</b>	<b>19,836</b>
All Other Cumulative Injuries	8	149,583	18,698
<i>Totals/Average</i>	338	10,801,340	31,957

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 3

**DISTRIBUTION BY NATURE OF INJURY  
LUMP SUM DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>SPECIFIC INJURY</b>			
Amputation	1	8,754	8,754
Angina Pectoris	0	0	
Burn	0	0	
Concussion	2	35,969	17,985
<b>Contusion</b>	<b>13</b>	<b>232,870</b>	<b>17,913</b>
Crushing	1	11,482	11,482
Dislocation	1	800	800
Electric Shock	0	0	
Enucleation	0	0	
Foreign body	0	0	
<b>Fracture</b>	<b>9</b>	<b>46,816</b>	<b>5,202</b>
Freezing	0	0	
Hearing Loss	0	0	
Heat Prostration	0	0	
Hernia	0	0	
Infection	0	0	
<b>Inflammation</b>	<b>2</b>	<b>39,075</b>	<b>19,538</b>
<b>Laceration</b>	<b>0</b>	<b>0</b>	
Myocardial Infarction	0	0	
Poisoning -- General			
Puncture	<b>0</b>	<b>0</b>	
<b>Rupture</b>	<b>7</b>	<b>139,840</b>	<b>19,977</b>
Severance	0	0	
<b>Sprain</b>	<b>3</b>	<b>15,888</b>	<b>5,296</b>
<b>Strain</b>	<b>63</b>	<b>1,106,262</b>	<b>17,560</b>
Syncope	0	0	
Asphyxiation	0	0	
Vascular Loss	0	0	
Vision Loss	0	0	
All Other	27	731,732	27,101

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 3 (CONT'D)

**DISTRIBUTION BY NATURE OF INJURY  
LUMP SUM DOLLARS**

(1)	(2)	(3)	(4)
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>OCCUPATIONAL DISEASE OR CUMULATIVE INJURY</b>			
Dust Disease NOC	0	0	
Asbestosis	0	0	
Black Lung	0	0	
Byssinosis	0	0	
Silicosis	0	0	
Respiratory Disorders	0	0	
Poisoning - Chemical	0	0	
Poisoning - Metal	0	0	
Dermatitis	0	0	
Mental Disorder	0	0	
Radiation	0	0	
All Other Occupational Disease	1	5,000	5,000
Loss of Hearing	0	0	
Contagious Disease	0	0	
Cancer	0	0	
AIDS	0	0	
VDT-Related Disease	0	0	
Mental Stress	1	4,000	4,000
<b>Carpal Tunnel Syndrome</b>	<b>1</b>	<b>2,900</b>	<b>2,900</b>
All Other Cumulative Injuries	2	69,000	34,500
<i>Totals/Average</i>	<i>134</i>	<i>2,450,388</i>	<i>18,286</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 4

**DISTRIBUTION BY NATURE OF INJURY  
MEDICAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>SPECIFIC INJURY</b>			
Amputation	3	72,902	24,301
Angina Pectoris	0	0	
Burn	0	0	
Concussion	4	95,634	23,909
<b>Contusion</b>	<b>25</b>	<b>628,188</b>	<b>25,128</b>
Crushing	4	90,838	22,710
Dislocation	4	57,953	14,488
Electric Shock	0	0	
Enucleation	0	0	
Foreign body	0	0	
<b>Fracture</b>	<b>22</b>	<b>565,995</b>	<b>25,727</b>
Freezing	0	0	
Hearing Loss	1	5,282	5,282
Heat Prostration	0	0	
Hernia	3	73,210	24,403
Infection	0	0	
<b>Inflammation</b>	<b>9</b>	<b>120,785</b>	<b>13,421</b>
<b>Laceration</b>	<b>9</b>	<b>165,069</b>	<b>18,341</b>
Myocardial Infarction	0	0	
Poisoning -- General	0	0	
Puncture	1	10,957	10,957
<b>Rupture</b>	<b>7</b>	<b>265,049</b>	<b>37,864</b>
Severance	0	0	
<b>Sprain</b>	<b>9</b>	<b>161,213</b>	<b>17,913</b>
<b>Strain</b>	<b>145</b>	<b>2,441,222</b>	<b>16,836</b>
Syncope	0	0	
Asphyxiation	0	0	
Vascular Loss	2	52,946	26,473
Vision Loss	0	0	
All Other	71	1,082,290	15,244

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 4 (CONT'D)

**DISTRIBUTION BY NATURE OF INJURY  
MEDICAL DOLLARS**

(1)	(2)	(3)	(4)
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>OCCUPATIONAL DISEASE OR CUMULATIVE INJURY</b>			
Dust Disease NOC	0	0	
Asbestosis	0	0	
Black Lung	0	0	
Byssinosis	0	0	
Silicosis	0	0	
Respiratory Disorders	0	0	
Poisoning - Chemical	0	0	
Poisoning - Metal	0	0	
Dermatitis	0	0	
Mental Disorder	0	0	
Radiation	0	0	
All Other Occupational Disease	0	0	
Loss of Hearing	2	6,661	3,331
Contagious Disease	0	0	
Cancer	0	0	
AIDS	0	0	
VDT-Related Disease	0	0	
Mental Stress	1	446	446
<b>Carpal Tunnel Syndrome</b>	<b>6</b>	<b>83,426</b>	<b>13,904</b>
All Other Cumulative Injuries	8	77,841	9,730
<i>Totals/Average</i>	336	6,057,907	18,029

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 5

**DISTRIBUTION BY NATURE OF INJURY  
VOCATIONAL REHAB DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
<b>SPECIFIC INJURY</b>			
Amputation	0	0	
Angina Pectoris	0	0	
Burn	0	0	
Concussion	0	0	
<b>Contusion</b>	<b>0</b>	<b>0</b>	
Crushing	0	0	
Dislocation	0	0	
Electric Shock	0	0	
Enucleation	0	0	
Foreign body	0	0	
<b>Fracture</b>	<b>0</b>	<b>0</b>	
Freezing	0	0	
Hearing Loss	0	0	
Heat Prostration	0	0	
Hernia	0	0	
Infection	0	0	
<b>Inflammation</b>	<b>0</b>	<b>0</b>	
<b>Laceration</b>	<b>0</b>	<b>0</b>	
Myocardial Infarction	0	0	
Poisoning -- General	0	0	
Puncture	0	0	
<b>Rupture</b>	<b>1</b>	<b>489</b>	<b>489</b>
Severance	0	0	
<b>Sprain</b>	<b>0</b>	<b>0</b>	
<b>Strain</b>	<b>3</b>	<b>6,457</b>	<b>2,152</b>
Syncope	0	0	
Asphyxiation	0	0	
Vascular Loss	0	0	
Vision Loss	0	0	
All Other	3	6,606	2,202

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 5 (CONT'D)

**DISTRIBUTION BY NATURE OF INJURY  
VOCATIONAL REHAB DOLLARS**

(1)	(2)	(3)	(4)
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>OCCUPATIONAL DISEASE OR CUMULATIVE INJURY</b>			
Dust Disease NOC	0	0	
Asbestosis	0	0	
Black Lung	0	0	
Byssinosis	0	0	
Silicosis	0	0	
Respiratory Disorders	0	0	
Poisoning - Chemical	0	0	
Poisoning - Metal	0	0	
Dermatitis	0	0	
Mental Disorder	0	0	
Radiation	0	0	
All Other Occupational Disease	0	0	
Loss of Hearing	0	0	
Contagious Disease	0	0	
Cancer	0	0	
AIDS	0	0	
VDT-Related Disease	0	0	
Mental Stress	0	0	
<b>Carpal Tunnel Syndrome</b>	<b>0</b>	<b>0</b>	
All Other Cumulative Injuries	0	0	
<i>Totals/Average</i>	7	13,552	1,936

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 6

**DISTRIBUTION BY NATURE OF INJURY  
EXPENSE DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
<b>SPECIFIC INJURY</b>			
Amputation	3	3,040	1,013
Angina Pectoris	0	0	
Burn	0	0	
Concussion	3	9,772	3,257
<b>Contusion</b>	<b>18</b>	<b>61,619</b>	<b>3,423</b>
Crushing	4	4,056	1,014
Dislocation	3	10,277	3,426
Electric Shock	0	0	
Enucleation	0	0	
Foreign body	0	0	
<b>Fracture</b>	<b>18</b>	<b>48,311</b>	<b>2,684</b>
Freezing	0	0	
Hearing Loss	0	0	
Heat Prostration	0	0	
Hernia	3	10,016	3,339
Infection	0	0	
<b>Inflammation</b>	<b>7</b>	<b>23,772</b>	<b>3,396</b>
<b>Laceration</b>	<b>4</b>	<b>12,102</b>	<b>3,026</b>
Myocardial Infarction	0	0	
Poisoning -- General	0	0	
Puncture	0	0	
<b>Rupture</b>	<b>7</b>	<b>44,159</b>	<b>6,308</b>
Severance	0	0	
<b>Sprain</b>	<b>6</b>	<b>9,196</b>	<b>1,533</b>
<b>Strain</b>	<b>98</b>	<b>306,723</b>	<b>3,130</b>
Syncope	0	0	
Asphyxiation	0	0	
Vascular Loss	1	1,352	1,352
Vision Loss	0	0	
All Other	25	117,958	4,718

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 12, SHEET 6 (CONT'D)

**DISTRIBUTION BY NATURE OF INJURY  
EXPENSE DOLLARS**

(1)	(2)	(3)	(4)
<i>Type of Cost</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
<b>OCCUPATIONAL DISEASE OR CUMULATIVE INJURY</b>			
Dust Disease NOC	0	0	
Asbestosis	0	0	
Black Lung	0	0	
Byssinosis	0	0	
Silicosis	0	0	
Respiratory Disorders	0	0	
Poisoning - Chemical	0	0	
Poisoning - Metal	0	0	
Dermatitis	0	0	
Mental Disorder	0	0	
Radiation	0	0	
All Other Occupational Disease	1	16	16
Loss of Hearing	0	0	
Contagious Disease	0	0	
Cancer	0	0	
AIDS	0	0	
VDT-Related Disease	0	0	
Mental Stress	0	0	
<b>Carpal Tunnel Syndrome</b>	<b>1</b>	<b>6,376</b>	<b>6,376</b>
All Other Cumulative Injuries	4	26,156	6,539
<i>Totals/Average</i>	206	694,901	3,373

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 13, SHEET 1

**DISTRIBUTION BY PART OF BODY  
TOTAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Part of Body</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost (4)/(2)</i>
Head	12	3.5%	399,602	2.3%	33,300
Neck	12	3.5%	833,227	4.7%	69,436
<b>Upper Extremities</b>	<b>118</b>	<b>34.7%</b>	<b>4,262,004</b>	<b>24.1%</b>	<b>36,119</b>
Trunk (Excluding Back)	7	2.1%	288,167	1.6%	41,167
<b>Back</b>	<b>77</b>	<b>22.6%</b>	<b>6,151,951</b>	<b>34.8%</b>	<b>79,895</b>
<b>Lower Extremities</b>	<b>68</b>	<b>20.0%</b>	<b>2,694,553</b>	<b>15.3%</b>	<b>39,626</b>
Multiple Body Parts	46	13.5%	3,034,991	17.2%	65,978
<i>Totals/Average</i>	<i>340</i>		<i>17,664,495</i>		<i>51,954</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 13, SHEET 2

**DISTRIBUTION BY PART OF BODY  
INDEMNITY DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Part of Body</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
Head	12	211,618	17,635
Neck	12	564,710	47,059
<b>Upper Extremities</b>	<b>118</b>	<b>2,193,054</b>	<b>18,585</b>
Trunk (Excluding Back)	7	210,921	30,132
<b>Back</b>	<b>77</b>	<b>4,345,453</b>	<b>56,434</b>
<b>Lower Extremities</b>	<b>68</b>	<b>1,362,536</b>	<b>20,037</b>
Multiple Body Parts	46	1,908,561	41,490
<i>Totals/Average</i>	<i>340</i>	<i>10,796,853</i>	<i>31,755</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 13, SHEET 3

**DISTRIBUTION BY PART OF BODY  
LUMP SUM DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Part of Body</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Head	3	46,469	15,490
Neck	5	75,983	15,197
<b>Upper Extremities</b>	<b>37</b>	<b>466,278</b>	<b>12,602</b>
Trunk (Excluding Back)	3	27,900	9,300
<b>Back</b>	<b>50</b>	<b>1,199,314</b>	<b>23,986</b>
Lower Extremities	16	265,759	16,610
<b>Multiple Body Parts</b>	<b>18</b>	<b>483,685</b>	<b>26,871</b>
<i>Totals/Average</i>	<i>132</i>	<i>2,565,388</i>	<i>19,435</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 13, SHEET 4

**DISTRIBUTION BY PART OF BODY  
MEDICAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Part of Body</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Head	12	167,747	13,979
Neck	12	233,136	19,428
<b>Upper Extremities</b>	<b>116</b>	<b>1,884,917</b>	<b>16,249</b>
Trunk (Excluding Back)	7	60,787	8,684
<b>Back</b>	<b>77</b>	<b>1,562,103</b>	<b>20,287</b>
<b>Lower Extremities</b>	<b>68</b>	<b>1,267,399</b>	<b>18,638</b>
Multiple Body Parts	46	998,131	21,699
<i>Totals/Average</i>	338	6,174,220	18,267

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 13, SHEET 5

**DISTRIBUTION BY PART OF BODY  
VOCATIONAL REHAB DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Part of Body</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Head	0	0	
Neck	0	0	
<b>Upper Extremities</b>	<b>3</b>	<b>6,491</b>	<b>2,164</b>
Trunk (Excluding Back)	0	0	
<b>Back</b>	<b>1</b>	<b>489</b>	<b>489</b>
<b>Lower Extremities</b>	<b>1</b>	<b>1,353</b>	<b>1,353</b>
Multiple Body Parts	1	259	259
<i>Totals/Average</i>	6	8,592	1,432

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 13, SHEET 6

**DISTRIBUTION BY PART OF BODY  
EXPENSE DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Part of Body</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3)/(2)</i>
Head	4	20,237	5,059
Neck	10	35,381	3,538
<b>Upper Extremities</b>	<b>64</b>	<b>177,542</b>	<b>2,774</b>
Trunk (Excluding Back)	4	16,459	4,115
<b>Back</b>	<b>60</b>	<b>243,906</b>	<b>4,065</b>
Lower Extremities	32	63,265	1,977
<b>Multiple Body Parts</b>	<b>28</b>	<b>128,040</b>	<b>4,573</b>
<i>Totals/Average</i>	202	684,830	3,390

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 14

**DISTRIBUTION OF INDEMNITY BY INJURY TYPE**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Indemnity Injury Type</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5) / (2)</i>
Fatal	1	0%	101,855	1%	101,855
PTD	2	1%	343,701	3%	171,851
<b>PPD/Scheduled</b>	<b>187</b>	<b>54%</b>	<b>3,471,164</b>	<b>31%</b>	<b>18,562</b>
<b>PPD/Unscheduled</b>	<b>120</b>	<b>34%</b>	<b>6,336,138</b>	<b>57%</b>	<b>52,801</b>
TTD	0	0%	0	0%	
TPD	0	0%	0	0%	
PPD/Disfigured	0	0%	0	0%	
Lump	32	9%	767,717	7%	23,991
Other Indemnity	6	2%	51,120	0%	8,520
<i>Total / Average</i>	<i>348</i>	<i>100%</i>	<i>11,071,695</i>	<i>100%</i>	<i>31,815</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 15

**DISTRIBUTION BY IMPAIRMENT RATING**

<i>(1)</i> <i>Impairment</i> <i>Rating</i> <i>Range</i>	<i>(2)</i> <i>Total</i> <i>Claims</i>	<i>(3)</i> <i>% of</i> <i>Total</i>	<i>(4)</i> <i>% ex</i> <i>Unknown</i>	<i>(5)</i> <i>Total</i> <i>Cost</i>	<i>(6)</i> <i>Avg. Cost</i> <i>per Claim</i> <i>(5)/(2)</i>
1 - 5	46	13.2%	18.0%	422,517	9,185
6 - 10	69	19.8%	27.1%	1,063,516	15,413
11 - 20	91	26.1%	35.7%	3,118,952	34,274
21 - 30	33	9.5%	12.9%	1,351,446	40,953
31 - 50	15	4.3%	5.9%	774,517	51,634
51 - 100	1	0.3%	0.4%	198,274	198,274
Unknown	93	26.7%		4,142,473	44,543
<i>Totals / Averages</i>	348	100.0%	100.0%	11,071,695	31,815

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 16

**DISTRIBUTION BY TYPE OF CARRIER  
INDEMNITY DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Carrier</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Pinnacol Assurance	70	3,829,155	54,702
Commercial Insurers	64	2,519,622	39,369
Self Insurers	214	4,722,918	22,070
<i>Totals/Average</i>	348	11,071,695	31,815

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 17

**MEDICAL COSTS BY PROVIDER**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Type of Provider</i>	<i>Number of Claims</i>	<i>Percent of Total Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (3) / (2)</i>
<b>Non-Surgical MD</b>	<b>334</b>	<b>99.7%</b>	<b>1,081,783</b>	<b>17.3%</b>	<b>3,239</b>
<b>Surgical MD</b>	<b>174</b>	<b>51.9%</b>	<b>465,631</b>	<b>7.5%</b>	<b>2,676</b>
<b>Orthopedist</b>	<b>149</b>	<b>44.5%</b>	<b>168,691</b>	<b>2.7%</b>	<b>1,132</b>
<b>Osteopath</b>	<b>24</b>	<b>7.2%</b>	<b>31,322</b>	<b>0.5%</b>	<b>1,305</b>
<b>Mental Health Practitioner</b>	<b>42</b>	<b>12.5%</b>	<b>62,753</b>	<b>1.0%</b>	<b>1,494</b>
<b>Chiropractor</b>	<b>71</b>	<b>21.2%</b>	<b>74,662</b>	<b>1.2%</b>	<b>1,052</b>
Hospital	269	80.3%	2,100,631	33.6%	7,809
Housekeeping	6	1.8%	511	0.0%	85
Home Modification Equipment	26	7.8%	30,461	0.5%	1,172
Prosthetics	22	6.6%	17,189	0.3%	781
Prescriptions	271	80.9%	420,321	6.7%	1,551
Pain Rehab/Work Hardening	35	10.4%	106,380	1.7%	3,039
Independent Medical Examiner	42	12.5%	54,457	0.9%	1,297
Funeral Expenses	3	0.9%	7,239	0.1%	2,413
<b>Physical Therapy</b>	<b>291</b>	<b>86.9%</b>	<b>691,285</b>	<b>11.1%</b>	<b>2,376</b>
Other Medical	288	86.0%	936,177	15.0%	3,251
<i>Total / Average</i>	<i>335</i>		<i>6,249,493</i>		<i>18,655</i>

**NOTES:**

Providers shown in BOLD are used in Chart 17b - Distribution of Charges by Type of Doctor.

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 18 A, SHEET 1

**DESIGNATOR OF PROVIDER  
TOTAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Designator</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Employer	321	92%	16,347,379	91%	50,926
Employee / Not Reported	27	8%	1,677,794	9%	62,141
<i>Totals/Average</i>	<i>348</i>		<i>18,025,173</i>		<i>51,796</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 18 A, SHEET 2

**DESIGNATOR OF PROVIDER  
INDEMNITY DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Designator</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Employer	321	92%	9,981,313	90%	31,094
Employee / Not Reported	27	8%	1,090,382	10%	40,385
<i>Totals/Average</i>	348		11,071,695		31,815

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 18 A, SHEET 3

**DESIGNATOR OF PROVIDER  
LUMP SUM DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Designator</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Employer	122	90%	2,295,350	89%	18,814
Employee / Not Reported	13	10%	280,038	11%	21,541
<i>Totals/Average</i>	<i>135</i>		<i>2,575,388</i>		<i>19,077</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 18 A, SHEET 4

**DESIGNATOR OF PROVIDER  
MEDICAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Designator</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Employer	319	92%	5,749,822	92%	18,025
Employee / Not Reported	27	8%	495,203	8%	18,341
<i>Totals/Average</i>	346		6,245,025		18,049

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 18 A, SHEET 5

**DESIGNATOR OF PROVIDER  
VOCATIONAL REHAB DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Designator</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Employer	7	100%	13,552	100%	1,936
Employee / Not Reported	0	0%	0	0%	
<i>Totals/Average</i>	7		13,552		1,936

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 18 A, SHEET 6

**DESIGNATOR OF PROVIDER  
EXPENSE DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Designator</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4)/(2)</i>
Employer	179	87%	602,692	87%	3,367
Employee / Not Reported	27	13%	92,209	13%	3,415
<i>Totals/Average</i>	206		694,901		3,373

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 18 B, SHEET 1

**DESIGNATOR OF PROVIDER BY CARRIER  
MEDICAL DOLLARS - PINNACOL ASSURANCE**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Designator</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Employer	70	100.0%	1,604,449	100.0%	22,921
Employee / Not Reported	0	0.0%	0	0.0%	
<i>Totals/Average</i>	<i>70</i>		<i>1,604,449</i>		<i>22,921</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 18 B, SHEET 2

**DESIGNATOR OF PROVIDER BY CARRIER  
MEDICAL DOLLARS - COMMERCIAL INSURERS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Designator</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Employer	38	59.4%	1,014,868	68.9%	26,707
Employee / Not Reported	26	40.6%	457,927	31.1%	17,613
<i>Totals/Average</i>	64		1,472,795		23,012

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 18 B, SHEET 3

**DESIGNATOR OF PROVIDER BY CARRIER  
MEDICAL DOLLARS - SELF INSURERS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Designator</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Employer	211	99.5%	3,130,505	98.8%	14,837
Employee / Not Reported	1	0.5%	37,276	1.2%	37,276
<i>Totals/Average</i>	<i>212</i>		<i>3,167,781</i>		<i>14,942</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 19, SHEET 1

**MANAGED CARE MEDICAL COSTS**

(1)	(2)	(3)	(4)	(5)	(6)	(7)
	<i>Claim Count</i>	<i>Claim Count</i>	<i>Medical Cost</i>	<i>Medical Cost</i>	<i>Average</i>	<i>Average</i>
	<i>With</i>	<i>Without</i>	<i>With</i>	<i>Without</i>	<i>Medical Cost per</i>	<i>Medical Cost per</i>
<i>Carrier</i>	<i>Managed Care</i>	<i>Managed Care</i>	<i>Managed Care</i>	<i>Managed Care</i>	<i>Claim With</i>	<i>Claim Without</i>
					<i>Managed Care</i>	<i>Managed Care</i>
					<i>(4) / (2)</i>	<i>(5) / (3)</i>
Pinnacol Assurance	70	0	1,604,449	0	22,921	N/A
Commercial Insurer	63	1	1,461,251	11,544	23,194	11,544
Self Insurer	183	29	2,767,330	400,451	15,122	13,809
<i>Totals/Average</i>	316	30	5,833,030	411,995	18,459	13,733

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 19, SHEET 2

**MANAGED CARE MEDICAL COSTS**

	(1)	(2)	(3)	(4)	(5)
<i>Carrier</i>	<i>Early Report</i>	<i>Case Manager</i>	<i>Network</i>	<i>Utilization Review</i>	<i>Other</i>
<b>Number of Claims with Given Indicator of Managed Care</b>					
Pinnacol Assurance	52	15	68	0	0
Commercial Insurer	53	36	52	7	0
Self Insurer	92	59	157	8	17
<i>Total</i>	197	110	277	15	17
<b>Amount of Medical Cost for the Claims with Given Indicator</b>					
	(6)	(7)	(8)	(9)	(10)
Pinnacol Assurance	1,065,628	572,244	1,575,583	0	0
Commercial Insurer	1,157,413	833,013	1,053,888	191,377	0
Self Insurer	1,537,129	1,162,689	2,352,354	251,169	172,665
<i>Total</i>	3,760,170	2,567,946	4,981,825	442,546	172,665
<b>Average Medical Cost Per Claim</b>					
	(11)	(12)	(13)	(14)	(15)
	(6)/(1)	(7)/(2)	(8)/(3)	(9)/(4)	(10)/(5)
Pinnacol Assurance	20,493	38,150	23,170		
Commercial Insurer	21,838	23,139	20,267	27,340	
Self Insurer	16,708	19,707	14,983	31,396	10,157
<i>Total</i>	19,087	23,345	17,985	29,503	10,157

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 20

**DISTRIBUTION BY TYPE OF CARRIER  
MEDICAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Type of Carrier</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Pinnacol Assurance	70	1,604,449	22,921
Commercial Insurers	64	1,472,795	23,012
Self Insurers	212	3,167,781	14,942
<i>Totals/Average</i>	346	6,245,025	18,049

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 21

**SUMMARY OF VOCATIONAL REHAB COSTS BY TYPE OF CARRIER**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Vocational Rehabilitation</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
<b>Pinnacol Assurance</b>			
Total Indemnity	1	116,220	116,220
Total Medical	1	109,750	109,750
Total Vocational Rehab	1	489	489
Total Lump Sum Payments	1	1,219	1,219
Total Expenses	1	20,560	20,560
<b>Commercial</b>			
Total Indemnity	2	106,910	53,455
Total Medical	2	125,171	62,586
Total Vocational Rehab	2	6,236	3,118
Total Lump Sum Payments	0	0	
Total Expenses	1	2,860	2,860
<b>Self Insurers</b>			
Total Indemnity	4	163,741	40,935
Total Medical	4	67,697	16,924
Total Vocational Rehab	4	6,827	1,707
Total Lump Sum Payments	1	13,000	13,000
Total Expenses	0	0	
<b>All Carriers</b>			
Total Indemnity	7	386,871	55,267
Total Medical	7	302,618	43,231
Total Vocational Rehab	7	13,552	1,936
Total Lump Sum Payments	2	14,219	7,110
Total Expenses	2	23,420	11,710
<i>Total / Average</i>		<i>726,461</i>	<i>103,780</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 22 A, SHEET 1

**ATTORNEY INVOLVEMENT  
TOTAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Attorney Involvement</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Yes	143	10,198,671	71,319
No	205	7,826,502	38,178
Unknown	0	0	
<i>Totals/Average</i>	348	18,025,173	51,796

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 22 A, SHEET 2

**ATTORNEY INVOLVEMENT  
INDEMNITY DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Attorney Involvement</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Yes	143	6,669,179	46,638
No	205	4,402,516	21,476
Unknown	0	0	
<i>Totals/Average</i>	348	11,071,695	31,815

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 22 A, SHEET 3

**ATTORNEY INVOLVEMENT  
LUMP SUM DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Attorney Involvement</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Yes	91	1,907,774	20,965
No	44	667,614	15,173
Unknown	0	0	
<i>Totals/Average</i>	135	2,575,388	19,077

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 22 A, SHEET 4

**ATTORNEY INVOLVEMENT  
MEDICAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Attorney Involvement</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Yes	142	3,024,699	21,301
No	204	3,220,326	15,786
Unknown	0	0	
<i>Totals/Average</i>	346	6,245,025	18,049

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 22 A, SHEET 5

**ATTORNEY INVOLVEMENT  
VOCATIONAL REHAB DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Attorney Involvement</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Yes	3	5,708	1,903
No	4	7,844	1,961
Unknown	0	0	
<i>Totals/Average</i>	7	13,552	1,936

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 22 A, SHEET 6

**ATTORNEY INVOLVEMENT  
EXPENSE DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Attorney Involvement</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Yes	108	499,085	4,621
No	98	195,816	1,998
Unknown	0	0	
<i>Totals/Average</i>	206	694,901	3,373

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 22 B, SHEET 1

**DISTRIBUTION BY ATTORNEY INVOLVEMENT**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Claimant Attorney	143	41.1%	10,198,671	56.6%	71,319
No Claimant Attorney	205	58.9%	7,826,502	43.4%	38,178
Unknown	0	0.0%	0	0.0%	
<i>Totals/Average</i>	<i>348</i>		<i>18,025,173</i>		<i>51,796</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 22 B, SHEET 2

**DISTRIBUTION BY ATTORNEY INVOLVEMENT - PINNACOL ASSURANCE**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Claimant Attorney	50	71.4%	4,454,382	78.9%	89,088
No Claimant Attorney	20	28.6%	1,193,285	21.1%	59,664
Unknown	0	0.0%	0	0.0%	
<i>Totals/Average</i>	<i>70</i>		<i>5,647,667</i>		<i>80,681</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 22 B, SHEET 3

**DISTRIBUTION BY ATTORNEY INVOLVEMENT - COMMERCIAL INSURER**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims  (4) / (2)</i>
Claimant Attorney	21	32.8%	1,436,483	34.0%	68,404
No Claimant Attorney	43	67.2%	2,793,988	66.0%	64,976
Unknown	0	0.0%	0	0.0%	
<i>Totals/Average</i>	<i>64</i>		<i>4,230,471</i>		<i>66,101</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 22 B, SHEET 4

**DISTRIBUTION BY ATTORNEY INVOLVEMENT - SELF INSURER**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4) / (2)</i>
Claimant Attorney	72	33.6%	4,307,806	52.9%	59,831
No Claimant Attorney	142	66.4%	3,839,229	47.1%	27,037
Unknown	0	0.0%	0	0.0%	
<i>Totals/Average</i>	214		8,147,035		38,070

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 23 A

**TIME LINES  
REPORTED TO EMPLOYER**

	(1)	(2)	(3)	(4)	(5)	(6)
	<i>Number of Days</i>					
<i>Date Reported to Employer</i>	<i>from Date of Injury to</i>	<i>Number</i>	<i>Percent</i>	<i>Dollar Cost</i>	<i>Percent</i>	<i>Average Cost</i>
		<i>of Claims</i>	<i>of Claims</i>	<i>of Claims</i>	<i>of Dollars</i>	<i>of Claims</i>
						<i>(4) / (2)</i>
Up to	10	303	87%	16,106,615	89%	53,157
11 -	20	9	3%	615,105	3%	68,345
21 -	30	3	1%	136,578	1%	45,526
31 -	60	3	1%	152,334	1%	50,778
61 -	90	3	1%	58,070	0%	19,357
91 -	180	6	2%	215,565	1%	35,928
181 -	270	1	0%	30,854	0%	30,854
271 -	360	1	0%	12,155	0%	12,155
361 -	540	2	1%	31,805	0%	15,903
541 -	720	1	0%	7,056	0%	7,056
721 -	900	0	0%	0	0%	
901 -	1,260	0	0%	0	0%	
Over	1,260	0	0%	0	0%	
Unknown		16	5%	659,036	4%	41,190
<i>Totals</i>		<i>348</i>		<i>18,025,173</i>		<i>51,796</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 23 B

**TIME LINES  
REPORTED TO INSURER**

<i>(1)</i> <i>Number of Days</i> <i>from Date of Injury to</i> <i>Date Reported to Insurer</i>		<i>(2)</i> <i>Number</i> <i>of Claims</i>	<i>(3)</i> <i>Percent</i> <i>of Claims</i>	<i>(4)</i> <i>Dollar Cost</i> <i>of Claims</i>	<i>(5)</i> <i>Percent</i> <i>of Dollars</i>	<i>(6)</i> <i>Average Cost</i> <i>of Claims</i> <i>(4) / (2)</i>
Up to	10	263	76%	13,015,160	72%	49,487
11 -	20	26	7%	2,298,496	13%	88,404
21 -	30	9	3%	421,684	2%	46,854
31 -	60	11	3%	650,014	4%	59,092
61 -	90	5	1%	258,282	1%	51,656
91 -	180	10	3%	450,910	3%	45,091
181 -	270	2	1%	130,217	1%	65,109
271 -	360	2	1%	25,002	0%	12,501
361 -	540	3	1%	109,316	1%	36,439
541 -	720	1	0%	7,056	0%	7,056
721 -	900	0	0%	0	0%	
901 -	1,260	0	0%	0	0%	
Over	1,260	0	0%	0	0%	
Unknown		16	5%	659,036	4%	41,190
<i>Totals</i>		348		18,025,173		51,796

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 23 C

**TIME LINES  
FIRST INDEMNITY PAYMENT**

<i>(1)</i>		<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Number of Days</i>		<i>Number</i>	<i>Percent</i>	<i>Dollar Cost</i>	<i>Percent</i>	<i>Average Cost</i>
<i>from Date of Injury to</i>		<i>of Claims</i>	<i>of Claims</i>	<i>of Claims</i>	<i>of Dollars</i>	<i>of Claims</i>
<i>First Indemnity Payment</i>						<i>(4) / (2)</i>
Up to	10	21	6%	1,822,229	10%	86,773
11 -	20	38	11%	2,453,561	14%	64,567
21 -	30	19	5%	1,225,736	7%	64,512
31 -	60	37	11%	2,815,930	16%	76,106
61 -	90	21	6%	1,039,959	6%	49,522
91 -	180	30	9%	1,119,145	6%	37,305
181 -	270	20	6%	998,478	6%	49,924
271 -	360	17	5%	613,295	3%	36,076
361 -	540	23	7%	1,299,845	7%	56,515
541 -	720	15	4%	618,965	3%	41,264
721 -	900	13	4%	551,191	3%	42,399
901 -	1,260	7	2%	501,631	3%	71,662
Over	1,260	6	2%	538,973	3%	89,829
Unknown		81	23%	2,426,235	13%	29,954
<i>Totals</i>		<i>348</i>		<i>18,025,173</i>		<i>51,796</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 23 D

**TIME LINES  
RETURNED TO WORK**

<i>(1)</i>		<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Number of Days</i>		<i>Number</i>	<i>Percent</i>	<i>Dollar Cost</i>	<i>Percent</i>	<i>Average Cost</i>
<i>from Date of Injury to</i>		<i>of Claims</i>	<i>of Claims</i>	<i>of Claims</i>	<i>of Dollars</i>	<i>of Claims</i>
<i>Date of Return to Work</i>						<i>(4) / (2)</i>
Up to	10	85	24%	2,944,698	16%	34,644
11 -	20	10	3%	574,823	3%	57,482
21 -	30	9	3%	349,422	2%	38,825
31 -	60	13	4%	591,639	3%	45,511
61 -	90	10	3%	196,918	1%	19,692
91 -	180	31	9%	1,523,609	8%	49,149
181 -	270	14	4%	530,438	3%	37,888
271 -	360	12	3%	376,551	2%	31,379
361 -	540	14	4%	841,471	5%	60,105
541 -	720	9	3%	490,300	3%	54,478
721 -	900	3	1%	105,324	1%	35,108
901 -	1,260	2	1%	87,088	0%	43,544
Over	1,260	1	0%	149,758	1%	149,758
Unknown		135	39%	9,263,134	51%	68,616
<i>Totals</i>		<i>348</i>		<i>18,025,173</i>		<i>51,796</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 23 E

**TIME LINES  
MAX MEDICAL IMPROVEMENT**

<i>(1)</i>		<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>
<i>Number of Days</i>		<i>Number</i>	<i>Percent</i>	<i>Dollar Cost</i>	<i>Percent</i>	<i>Average Cost</i>
<i>from Date of Injury to</i>		<i>of Claims</i>	<i>of Claims</i>	<i>of Claims</i>	<i>of Dollars</i>	<i>of Claims</i>
<i>Max Medical Improvement</i>						<i>(4) / (2)</i>
Up to	10	2	1%	127,784	1%	63,892
11 -	20	1	0%	13,338	0%	13,338
21 -	30	1	0%	23,470	0%	23,470
31 -	60	5	1%	41,359	0%	8,272
61 -	90	7	2%	70,772	0%	10,110
91 -	180	45	13%	826,461	5%	18,366
181 -	270	42	12%	1,200,602	7%	28,586
271 -	360	42	12%	2,106,405	12%	50,153
361 -	540	48	14%	2,310,484	13%	48,135
541 -	720	39	11%	2,572,545	14%	65,963
721 -	900	19	5%	1,265,714	7%	66,617
901 -	1,260	21	6%	1,674,080	9%	79,718
Over	1,260	13	4%	1,513,756	8%	116,443
Unknown or N/A		63	18%	4,278,403	24%	67,911
<i>Totals</i>		<i>348</i>		<i>18,025,173</i>		<i>51,796</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 24, SHEET 1

**DURATION OF BENEFITS**

(1) <i>Number of Years from Date of Injury to Date Claim Closed</i>	(2) <i>Number of Claims</i>	(3) <i>Percent of Claims</i>	(4) <i>Dollar Cost of Claims</i>	(5) <i>Percent of Dollars</i>	(6) <i>Average Cost of Claims (4) / (2)</i>
Up to 0.25	6	2%	53,990	0%	8,998
0.26 - 0.50	23	7%	242,663	1%	10,551
0.51 - 0.75	35	10%	645,619	4%	18,446
0.76 - 1.00	30	9%	838,350	5%	27,945
1.01 - 1.50	42	12%	1,825,552	10%	43,466
1.51 - 2.00	35	10%	1,582,092	9%	45,203
2.01 - 2.50	63	18%	3,363,050	19%	53,382
2.51 - 3.00	28	8%	1,850,527	10%	66,090
3.01 - 3.50	26	7%	2,103,818	12%	80,916
3.51 - 4.00	11	3%	627,348	3%	57,032
4.01 - 4.50	16	5%	1,400,101	8%	87,506
4.51 - 5.00	8	2%	644,915	4%	80,614
Over 5.00	25	7%	2,847,148	16%	113,886
<i>Totals/Average</i>	<i>348</i>		<i>18,025,173</i>		<i>51,796</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 24, SHEET 2

**DURATION OF BENEFITS - PINNACOL ASSURANCE**

<i>(1)</i> <i>Number of Years</i> <i>from Date of Injury to</i> <i>Date Claim Closed</i>	<i>(2)</i> <i>Number</i> <i>of Claims</i>	<i>(3)</i> <i>Percent</i> <i>of Claims</i>	<i>(4)</i> <i>Dollar Cost</i> <i>of Claims</i>	<i>(5)</i> <i>Percent</i> <i>of Dollars</i>	<i>(6)</i> <i>Average Cost</i> <i>of Claims</i> <i>(4) / (2)</i>
Up to 0.25	0	0%	0	0%	
0.26 - 0.50	0	0%	0	0%	
0.51 - 0.75	0	0%	0	0%	
0.76 - 1.00	0	0%	0	0%	
1.01 - 1.50	0	0%	0	0%	
1.51 - 2.00	8	11%	479,451	8%	59,931
2.01 - 2.50	21	30%	1,331,091	24%	63,385
2.51 - 3.00	5	7%	544,194	10%	108,839
3.01 - 3.50	11	16%	848,096	15%	77,100
3.51 - 4.00	3	4%	128,359	2%	42,786
4.01 - 4.50	10	14%	826,843	15%	82,684
4.51 - 5.00	4	6%	370,643	7%	92,661
Over 5.00	8	11%	1,118,990	20%	139,874
<i>Totals/Average</i>	70		5,647,667		80,681

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 24, SHEET 3

**DURATION OF BENEFITS - COMMERCIAL INSURERS**

(1) <i>Number of Years from Date of Injury to Date Claim Closed</i>	(2) <i>Number of Claims</i>	(3) <i>Percent of Claims</i>	(4) <i>Dollar Cost of Claims</i>	(5) <i>Percent of Dollars</i>	(6) <i>Average Cost of Claims (4) / (2)</i>
Up to 0.25	0	0%	0	0%	
0.26 - 0.50	0	0%	0	0%	
0.51 - 0.75	0	0%	0	0%	
0.76 - 1.00	0	0%	0	0%	
1.01 - 1.50	0	0%	0	0%	
1.51 - 2.00	5	8%	265,182	6%	53,036
2.01 - 2.50	22	34%	953,872	23%	43,358
2.51 - 3.00	7	11%	383,521	9%	54,789
3.01 - 3.50	10	16%	969,184	23%	96,918
3.51 - 4.00	4	6%	251,378	6%	62,845
4.01 - 4.50	2	3%	86,104	2%	43,052
4.51 - 5.00	2	3%	179,297	4%	89,649
Over 5.00	12	19%	1,141,933	27%	95,161
<i>Totals/Average</i>	64		4,230,471		66,101

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 24, SHEET 4

**DURATION OF BENEFITS - SELF INSURERS**

(1)	(2)	(3)	(4)	(5)	(6)
<i>Number of Years from Date of Injury to Date Claim Closed</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (4)/(2)</i>
Up to 0.25	6	3%	53,990	1%	8,998
0.26 - 0.50	23	11%	242,663	3%	10,551
0.51 - 0.75	35	16%	645,619	8%	18,446
0.76 - 1.00	30	14%	838,350	10%	27,945
1.01 - 1.50	42	20%	1,825,552	22%	43,466
1.51 - 2.00	22	10%	837,459	10%	38,066
2.01 - 2.50	20	9%	1,078,087	13%	53,904
2.51 - 3.00	16	7%	922,812	11%	57,676
3.01 - 3.50	5	2%	286,538	4%	57,308
3.51 - 4.00	4	2%	247,611	3%	61,903
4.01 - 4.50	4	2%	487,154	6%	121,789
4.51 - 5.00	2	1%	94,975	1%	47,488
Over 5.00	5	2%	586,225	7%	117,245
<i>Totals/Average</i>	214		8,147,035		38,070

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 25, SHEET 1

**DISTRIBUTION BY CLAIMANT AGE  
TOTAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>	<i>(7)</i>
<i>Claimant Age</i>	<i>Average Age</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5)/(3)</i>
Up to 19	18.93	4	1%	131,639	1%	32,910
20 to 29	26.58	37	11%	1,894,234	11%	51,196
30 to 39	35.42	109	31%	6,279,012	35%	57,606
40 to 49	44.91	101	29%	5,136,389	28%	50,855
50 to 59	54.09	76	22%	3,669,754	20%	48,286
60 to 69	62.23	17	5%	740,846	4%	43,579
70 to 79	72.71	3	1%	167,626	1%	55,875
80 and Over	.	0	0%	0	0%	
Unknown		1	0%	5,673	0%	5,673
<i>Totals/Average</i>		348		18,025,173		51,796

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 25, SHEET 2

**DISTRIBUTION BY CLAIMANT AGE  
INDEMNITY DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>	<i>(7)</i>
<i>Claimant Age</i>	<i>Average Age</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5)/(3)</i>
Up to 19	18.93	4	1%	74,580	1%	18,645
20 to 29	26.58	37	11%	1,133,391	10%	30,632
30 to 39	35.42	109	31%	3,627,069	33%	33,276
40 to 49	44.91	101	29%	3,228,887	29%	31,969
50 to 59	54.09	76	22%	2,368,385	21%	31,163
60 to 69	62.23	17	5%	482,121	4%	28,360
70 to 79	72.71	3	1%	153,762	1%	51,254
80 and Over	.	0	0%	0	0%	
Unknown		1	0%	3,500	0%	3,500
<i>Totals/Average</i>		<i>348</i>		<i>11,071,695</i>		<i>31,815</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 25, SHEET 3

**DISTRIBUTION BY CLAIMANT AGE  
LUMP SUM DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>	<i>(7)</i>
<i>Claimant Age</i>	<i>Average Age</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5) / (3)</i>
Up to 19	18.93	0	0%	0	0%	
20 to 29	26.58	22	16%	363,483	14%	16,522
30 to 39	35.42	41	30%	722,716	28%	17,627
40 to 49	44.91	35	26%	631,641	25%	18,047
50 to 59	54.09	30	22%	729,706	28%	24,324
60 to 69	62.23	6	4%	124,342	5%	20,724
70 to 79	72.71	0	0%	0	0%	
80 and Over	.	0	0%	0	0%	
Unknown		1	1%	3,500	0%	3,500
<i>Totals/Average</i>		<i>135</i>		<i>2,575,388</i>		<i>19,077</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 25, SHEET 4

**DISTRIBUTION BY CLAIMANT AGE  
MEDICAL DOLLARS**

(1)	(2)	(3)	(4)	(5)	(6)	(7)
<i>Claimant Age</i>	<i>Average Age</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5) / (3)</i>
Up to 19	18.93	4	1%	55,399	1%	13,850
20 to 29	26.58	37	11%	673,960	11%	18,215
30 to 39	35.42	109	32%	2,368,959	38%	21,734
40 to 49	44.91	100	29%	1,738,115	28%	17,381
50 to 59	54.09	75	22%	1,175,386	19%	15,672
60 to 69	62.23	17	5%	218,442	3%	12,850
70 to 79	72.71	3	1%	12,591	0%	4,197
80 and Over	.	0	0%	0	0%	
Unknown		1	0%	2,173	0%	2,173
<i>Totals/Average</i>		346		6,245,025		18,049

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 25, SHEET 5

**DISTRIBUTION BY CLAIMANT AGE  
VOCATIONAL REHAB DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>	<i>(7)</i>
<i>Claimant Age</i>	<i>Average Age</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5)/(3)</i>
Up to 19	18.93	0	0%	0	0%	
20 to 29	26.58	0	0%	0	0%	
30 to 39	35.42	2	29%	748	6%	374
40 to 49	44.91	2	29%	5,104	38%	2,552
50 to 59	54.09	3	43%	7,700	57%	2,567
60 to 69	62.23	0	0%	0	0%	
70 to 79	72.71	0	0%	0	0%	
80 and Over	.	0	0%	0	0%	
Unknown		0	0%	0	0%	
<i>Totals/Average</i>		7		13,552		1,936

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 25, SHEET 6

**DISTRIBUTION BY CLAIMANT AGE  
EXPENSE DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>	<i>(6)</i>	<i>(7)</i>
<i>Claimant Age</i>	<i>Average Age</i>	<i>Number of Claims</i>	<i>Percent of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Percent of Dollars</i>	<i>Average Cost of Claims (5)/(3)</i>
Up to 19	18.93	2	1%	1,660	0%	830
20 to 29	26.58	28	14%	86,883	13%	3,103
30 to 39	35.42	67	33%	282,236	41%	4,212
40 to 49	44.91	63	31%	164,283	24%	2,608
50 to 59	54.09	33	16%	118,283	17%	3,584
60 to 69	62.23	11	5%	40,283	6%	3,662
70 to 79	72.71	2	1%	1,273	0%	637
80 and Over	.	0	0%	0	0%	
Unknown		0	0%	0	0%	
<i>Totals/Average</i>		206		694,901		3,373

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 26, SHEET 1

**DISTRIBUTION BY CLAIMANT GENDER  
TOTAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Gender</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Male	221	12,061,795	54,578
Female	127	5,963,378	46,956
Not Reported	0	0	
<i>Totals/Average</i>	348	18,025,173	51,796

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 26, SHEET 2

**DISTRIBUTION BY CLAIMANT GENDER  
INDEMNITY DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Gender</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Male	221	7,555,368	34,187
Female	127	3,516,327	27,688
Not Reported	0	0	
<i>Totals/Average</i>	348	11,071,695	31,815

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 26, SHEET 3

**DISTRIBUTION BY CLAIMANT GENDER  
LUMP SUM DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Gender</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Male	83	1,675,627	20,188
Female	52	899,761	17,303
Not Reported	0	0	
<i>Totals/Average</i>	<i>135</i>	<i>2,575,388</i>	<i>19,077</i>

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 26, SHEET 4

**DISTRIBUTION BY CLAIMANT GENDER  
MEDICAL DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Gender</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Male	219	4,119,113	18,809
Female	127	2,125,912	16,739
Not Reported	0	0	
<i>Totals/Average</i>	346	6,245,025	18,049

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 26, SHEET 5

**DISTRIBUTION BY CLAIMANT GENDER  
VOCATIONAL REHAB DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Gender</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Male	5	11,940	2,388
Female	2	1,612	806
Not Reported	0	0	
<i>Totals/Average</i>	7	13,552	1,936

**COLORADO WORKERS COMPENSATION CLOSED CLAIM STUDY**

TABLE 26, SHEET 6

**DISTRIBUTION BY CLAIMANT GENDER  
EXPENSE DOLLARS**

<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>
<i>Claimant Gender</i>	<i>Number of Claims</i>	<i>Dollar Cost of Claims</i>	<i>Average Cost of Claims (3) / (2)</i>
Male	132	375,374	2,844
Female	74	319,527	4,318
Not Reported	0	0	
<i>Totals/Average</i>	206	694,901	3,373