

Missouri Division of Workers' Compensation

Annual Report 2013

MISSION STATEMENT:

"To Promote and Protect Industry and Labor"

Table of Contents

Table of Contents2
Introduction3
Organizational Chart5
Biographies6
Administration7
Assessments & Expenditures9
WC Administration Fund9
Second Injury Fund10
Workers' Compensation11
First Reports of Injury11
Claims for Compensation15
Occupational Disease Claims18
Fatalities20
Second Injury Fund21
Claims22
Benefit Payments24
Recovery Payments27
Fraud and Noncompliance28
Insurance33
Legal35
Line of Duty Compensation Fund36
Customer Service37
Toll-Free Line37
Dispute Management38
Voluntary Mediation38
Workers' Safety Program40
Adjudication41
Docket Settings & Hearings43
Case Resolutions45
Tort Victims' Compensation Fund46
Crime Victim's Compensation Fund46
Accomplishments and Initiatives47
Interstate Comparison49
MO DWC Contacts 50

WC Premium Rate Ranking......49

Tables & Figures

Introduction

The Missouri Workers' Compensation Law is the exclusive remedy for the employers and employees to adjudicate and resolve disputes relating to injuries, illnesses or occupational diseases that arise out of and in the course of employment. Senate Bill 1, 97th Gen. Assembly, 1st Reg. Sess. (2013), made several changes to the law, effective January 1, 2014 (SB 1)¹. Occupational diseases were added to the exclusive remedy provision under the law as set out in §§287.120.1 and 287.120.2, RSMo (Supp. 2013). In addition, §287.067.2 RSMo (Supp. 2013) was amended to state than an injury or death by occupational disease is compensable only if the occupational exposure was the prevailing factor in causing both the resulting medical condition and disability.

Any reference to employers includes the workers' compensation insurance carrier, Division of Workers' Compensation (Division) approved individual self-insured employer or group trusts, as the case may be. The workers' compensation law applies to all employers that have five or more employees. Construction industry employers who erect, demolish, alter or repair improvements are subject to the law if they employ one or more employees. Partners and sole proprietors may individually elect to obtain coverage. The law does exempt a very small and very specific group of employees, which includes farm laborers, domestic servants, certain real estate agents and direct sellers and commercial motor-carrier owner-operators. Please refer to §287.090, RSMo for additional information.

All employers subject to the law must insure their entire workers' compensation obligations or liabilities under the law with an insurance carrier that is authorized to provide such services in the state of Missouri by the Missouri Department of Insurance, Financial Institutions and Professional Registration, or meet the requirements of the Division to be granted self-insurance authority. SB 1 amended §287.280.1 RSMo (Supp. 2013) to permit an employer to insure in whole or in part its employer liability, under a policy of insurance or a self insurance plan. SB 1 also grants an employer the option to reject mesothelioma liability and if the employer rejects this liability, the exclusive remedy provision of the Workers' Compensation Law does not apply. SB 1 grants the employer the option to accept mesothelioma liability by either insuring their liability by purchasing insurance coverage with an insurance carrier; qualifying as a self-insurer; or by becoming a member of a group insurance pool that complies with the requirements of §287.223, RSMo (Supp. 2013). This section creates the Missouri Mesothelioma Risk Management Fund.

¹Throughout the Annual Report, changes made to the Law by SB 1 are referenced, where applicable. Sometimes the changes are noted by a reference to a statutory provision that was amended, for example §287.280, RSMo (Supp. 2013).

Missouri Division of Workers' Compensation

The Division administers the Workers' Compensation Law. The Division has eight adjudication offices equipped to render services to employees and employers. The Division carriers out its responsibilities through several programs and units located primarily in Jefferson City that provide services to all stakeholders. An administrative tax, not to exceed two percent, is imposed on employers to fund the administrative expenses of the Division associated with the administration of the Missouri Workers' Compensation Law.

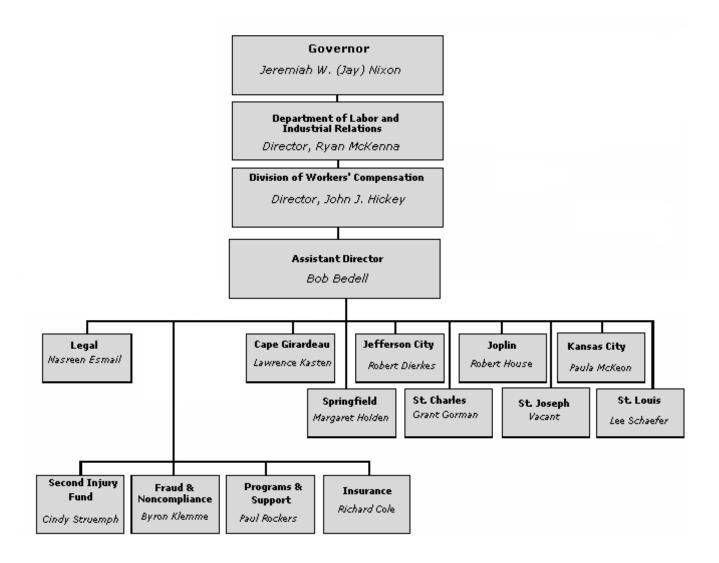
Under the Missouri Workers' Compensation Law, an injured employee is entitled to receive medical benefits, temporary total disability benefits (TTD), and permanent partial disability (PPD) or permanent total disability benefits (PTD), respectively. The TTD benefits generally equal two-thirds of the injured employee's average weekly wage not to exceed a maximum rate set by the legislature. The average weekly wage is determined by examining various pay periods immediately preceding the date of injury. SB 1 established a new definitional provision relating to "occupational diseases due to toxic exposure" to include the following: mesothelioma, asbestosis, berylliosis, coal worker's pneumoconiosis, bronchiolitis obliterans, silicosis, silicotuberculosis, manganism, acute myelogenous leukemia, and myelodysplastic syndrome.

For all claims filed on or after January 1, 2014, for occupational diseases due to toxic exposure that result in PTD or death, an employee is entitled to such amount due to employee during his life based upon an award of PTD and death; except that the PTD and death shall only be paid when the enhanced benefits have been exhausted. The enhanced benefit for occupational disease due to toxic exposure *not including mesothelioma* is an amount equal to 200% of the state average weekly wage (SAWW) as of the date of diagnosis for 100 weeks. The enhanced benefit for occupational disease due to toxic exposure that *is diagnosed to be mesothelioma*, is an amount equal to 300% of the SAWW for 212 weeks.

This report, as required by §287.680 RSMo, briefly describes each of the programs and units and summarizes the transactions and proceedings undertaken for the year 2013. This report includes the statistical information collected by the Division where applicable².

² All tables, figures and data in this report were derived from documents filed and information reported to the Division of Workers' Compensation as required by law, unless otherwise noted. The techniques and analysis used are appropriate and reasonable based upon information currently available and as reported to the Division.

Organizational Chart





Biographies



Ryan McKenna

Director, Department of Labor

Ryan McKenna was named the Director of the Missouri Department of Labor and Industrial Relations in December 2013 by Governor Jay Nixon. Prior to his appointment, McKenna represented the constituents of Jefferson County in the Missouri Senate since 2006 and he was a member of the Missouri House of Representatives from 1998 to 2004. During his time as Senator, he served on several senate committees, including the Jobs, Economic Development and Local Government Committee. A Jefferson County native, McKenna is a graduate of Missouri State University and worked as a union laborer on highway and bridge construction before being elected to the General Assembly.



John J. Hickey

Director, Division of Workers' Compensation

John J. Hickey was appointed to serve as the Division of Workers' Compensation Director of the Missouri Department of Labor in 2011. Prior to this appointment, Hickey served as the employee representative commissioner on the Labor and Industrial Relations Commission for nine years. Hickey also represented the 80th District in the Missouri House of Representatives from 1993 to 2002. Hickey served on both the Workers' Compensation Committee and Labor Committee for 10 years and was Chairman for seven years.

Page 6

Administration

DIVISION OF WORKERS' COMPENSATION

Bob Bedell, Assistant Director

The Assistant Director reports to the Division Director and is responsible for the day-to-day operations of most units within the Division. This position works closely with management staff to optimize daily operations and ensure the Division's mission and goals are achieved.

PROGRAMS & SUPPORT

Paul Rockers, Manager

The Programs and Support Unit receives all filings made by the parties with the Division. This unit's functions include claims processing, database management, case review, imaging, electronic data interchange (EDI) monitoring, fulfilling copy work requests, and responding to inquiries by the Social Security Administration. This unit also oversees the Customer Service Unit, which handles all calls to the Division on the toll-free line.

INSURANCE

Richard Cole, Manager

The Insurance Unit oversees roughly 32 percent of the workers' compensation insurance market as many employers take advantage of the option to self-insure their obligations. Missouri has stringent requirements that need to be met prior to granting self-insurance authority to an employer, including requirements that relate to financial stability, loss history, safety, and claims handling process. The unit's functions consist of reviewing applications, overseeing the existing self-insured entities, and conducting claims audits.

LEGAL

Nasreen Esmail, Chief Legal Counsel

The Legal Unit provides legal advice and assistance to the Division Director and various units and programs within the Division. The Legal Unit oversees the Religious Exception Program, Medical Fee Dispute Program, Line of Duty Compensation Fund, Proof of Coverage, and the Dispute Management Unit. The unit responds to subpoenas and requests for records, complaints referred by other agencies, constituent requests, and all email inquiries sent to the Division's website. In addition to various other duties, the unit also drafts proposed rules and amendments to the existing regulations to be filed with the Joint Committee on Administrative Rules and Secretary of State's office upon approval by the Department and the Labor and Industrial Relations Commission.

WORKERS' SAFETY PROGRAM

Nicole Thompson, Manager

The Missouri Workers' Safety Program helps employers improve workplace safety, reduce workers' compensation costs, and regulate safety services provided by insurance carriers. The Program workers to ensure that Missouri businesses have access to individualized safety and health services.

DISPUTE MANAGEMENT

Glenn Easley, Mediator

This unit is responsible for providing information and attempting to resolve disputes between employers/insurers/Third-Party Administrators and injured employees prior to a Claim for Compensation being filed with the Division. The Division's information specialists receive calls from various stakeholders with questions about workers' compensation law, procedural requirements or status of a particular case. These calls are made on a special 800 number maintained by the Division. Referrals are made to this unit when it appears that the issues can be resolved at the early stages of a case by providing early intervention assistance. Written requests for mediation from injured workers are also received by the Mediator to determine if any disputes can be resolved by telephone conferences, rather than a personal appearance at one of the adjudication offices.

SECOND INJURY FUND

Cindy Struemph, Manager

The Second Injury Fund Unit is responsible for the billing and collection of the Second Injury Fund (SIF) surcharge as well as processing SIF benefits. When an employee is eligible for benefits and a compromise settlement has been approved or an award has been issued by the Administrative Law Judge, the Division processes payments to the injured worker. The SIF Unit also pursues recoveries of overpayments made on permanent total disability cases and certifies the rehabilitation facilities and vocational rehabilitation providers. The SIF Unit also oversees the records in the Division's file room which are transferred to the Secretary of State's Office.

FRAUD & NONCOMPLIANCE

Byron Klemme, Investigation Manager

The Fraud and Noncompliance Unit is responsible for investigating alleged fraud and noncompliance in workers' compensation. This unit investigates allegations of fraud by employees, employers, attorneys, insurers or physicians. Noncompliance includes the failure by employers to carry workers' compensation insurance, or to post notice of workers' compensation at the workplace. Appropriate cases of fraud and noncompliance are referred to the Missouri Attorney General's Office for prosecution.

ADJUDICATION

The Division's statutory responsibility to adjudicate and resolve disputes under the law is fulfilled by the eight adjudication offices throughout the state of Missouri. The Administrative Law Judges, court reporters, docket clerks, and assistants provide the services to the parties of the case who appear at the scheduled docket settings in each respective office. The Division offers various docket settings to assist with the timely resolution of workers' compensation claims. The Division also schedules evidentiary hearings on medical fee disputes, crime victims' compensation cases, and tort victims' compensation cases.

Assessments & Expenditures

Workers' Compensation Administrative Fund Tax and Surcharge

As required by §287.690 and §287.716, RSMo, the State of Missouri imposes a workers' compensation administrative tax on all workers' compensation insurance carriers and self-insured employers and an administrative surcharge on every workers' compensation deductible plan policyholder insured in Missouri. Section 287.690, RSMo authorizes the imposition of an administrative tax not to exceed two percent and §287.716, RSMo authorizes the imposition of an administrative surcharge at the same rate as the administrative tax. The revenue from the administrative tax and administrative surcharge is used to fund expenses associated with the administration of Missouri's Workers' Compensation Law. The Director of the Division determines the rates for the subsequent calendar year by October 31, using the formula set forth in §287.690, RSMo.

Year	Premium Base	WC Assessment Rate	Revenue Collected*
2004	\$2,025,220,834	1.0%	\$58,420,436
2005	\$2,038,285,101	0.0%	\$4,910,336
2006	\$2,011,936,403	0.0%	\$1,637,961
2007	\$1,935,620,269	1.0%	\$11,836,057
2008	\$1,694,928,423	1.0%	\$15,066,584
2009	\$1,514,085,982	0.5%	\$8,694,109
2010	\$1,323,493,497	1.0%	\$12,296,302
2011	\$1,351,278,216	1.0%	\$12,064,890
2012	\$1,431,904,829	1.0%	\$13,516,121
2013	Not yet available	1.0%	\$14,826,739

Source: Missouri Department of Insurance, Financial Institutions and Professional Registration and Missouri SAM II Financial System.

^{*} Note: Although the Premium Tax Rate for some calendar years was set at 0.0 percent, insurance companies still remitted workers' compensation taxes, which may have represented delinquent taxes or adjustment amounts.

\$ 11,139,314
14,826,739
67,649
803,663
\$ 15,698,051
15,685,722
\$ 15,685,722
\$ 11,151,643
\$

Source: Missouri SAM II Financial System

Page 9

Second Injury Fund Surcharge

Section 287.715, RSMo provides for the collection of an annual surcharge not to exceed 3 percent from every authorized self-insurer and every workers' compensation policyholder insured in Missouri. To address the solvency issues facing the SIF, §287.715.6, RSMo (Supp. 2013) authorizes the Division Director to collect a supplemental SIF surcharge not to exceed 3 percent for calendar years 2014 to 2021, of policyholder's or self-insured's workers' compensation net deposits, net premiums or net assessments of the previous policy year. The surcharge collected is deposited to the credit of the SIF and used to pay benefit and expense liabilities of the SIF per the prioritization schedule contained in §287.220(15), RSMo (Supp. 2013). Like the workers' compensation administrative tax and surcharge, the surcharge rate is calculated by October 31 for the subsequent year by the Director of the Division using the formula set forth in §287.715.2, RSMo. The Division notifies the policyholders and self-insurers of the surcharge and supplemental surcharge percents that have been imposed.

Year	Premium Base	SIF Assessment Rate	Revenue Collected
2004	\$2,025,220,834	4.0%	\$78,514,648
2005	\$2,038,285,101	3.5%	\$72,990,094
2006	\$2,011,936,403	3.0%	\$62,150,267
2007	\$1,935,620,269	3.0%	\$68,264,360
2008	\$1,694,928,423	3.0%	\$54,769,650
2009	\$1,514,085,982	3.0%	\$53,324,593
2010	\$1,323,493,497	3.0%	\$40,862,081
2011	\$1,351,278,216	3.0%	\$40,938,834
2012	\$1,431,904,829	3.0%	\$42,574,366
2013	Not yet available	3.0%	\$44,111,298

Source: Missouri Department of Insurance, Financial Institutions and Professional Registration and Missouri SAM II Financial System.

BALANCE of fund on January 1, 2013	\$3,241,327
Revenue:	
Surcharge Collections	44,111,298
Interest	43,837
Miscellaneous Receipts	241,384
Total Revenue	\$44,396,519
Expenditures: Benefit Disbursements Administrative Costs Total Expenditures	41,049,177 3,884,036 \$44,933,213
BALANCE of fund on December 31, 2013	\$2,704,633*
*does not include approximately \$39,853,186 in awards that have been issued that are currently being held for payment due to the financial condition of the fund.	

Page 10

Source: Missouri SAM II Financial System

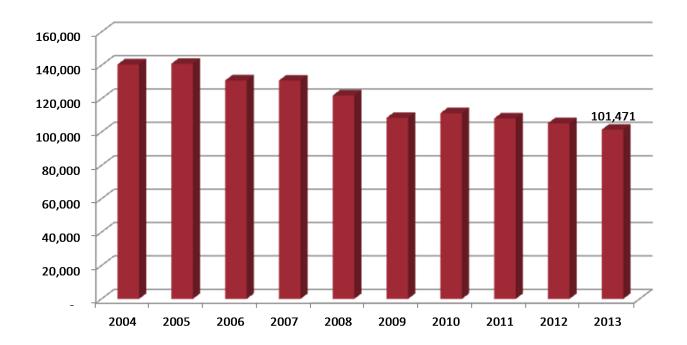
Workers' Compensation

First Reports of Injury (FROIs)

Every injury and occupational disease occurring in Missouri, except "first aid" cases not requiring medical treatment or lost time from work must be reported to the Division. The injury must be reported by the employer or his insurer within 30 days after having knowledge of the injury. The employer must report all injuries to its insurance carrier or third party administrator within five days of the date of the injury or within five days of the date on which the injury was reported to the employer by the employee, whichever is later. Since July 1995, the Division has received FROIs by electronic data interchange (EDI). This process minimizes errors, ensures timeliness in reporting, and reduces costs for the reporting entities and the Division. In 2013, 98 percent of FROIs were filed electronically (through EDI or the web). The increase in EDI filings has also significantly reduced the average time to process FROIs. In 2000, the average time to process FROIs was 14.5 days and by 2013, the average time to process decreased to 1.3 days.

Total FROI filings have generally decreased an average of just under four percent a year from 2005 to 2013, though there was a slight increase in 2010.

First Reports of Injury Filed 2004 - 2013





FROIs by County - 2013

County	FROI	County	FROIs	County	FROIs
<u></u>	<u></u>	<u></u>	1.025	<u> </u>	1.11010
Adair	357	Grundy	141	Perry	471
Andrew	68	Harrison	110	Pettis	951
Atchison	81	Henry	343	Phelps	629
Audrain	589	Hickory	26	Pike	291
Barry	836	Holt	42	Platte	1,804
Barton	134	Howard	85	Polk	275
Bates	100	Howell	645	Pulaski	578
Benton	142	Iron	103	Putnam	40
Bollinger	51	Jackson	13,708	Ralls	53
Boone	3,694	Jasper	3,062	Randolph	480
Buchanan	2,117	Jefferson	1,648	Ray	182
Butler	745	Johnson	544	Reynolds	79
Caldwell	29	Knox	44	Ripley	74
Callaway	1,067	Laclede	632	Saline	501
Camden	606	Lafayette	387	Schuyler	18
Cape Girardeau	1,327	Lawrence	379	Scotland	43
Carroll	62	Lewis	237	Scott	851
Carter	36	Lincoln	434	Shannon	50
Cass	1,122	Linn	195	Shelby	89
Cedar	156	Livingston	287	St. Charles	4,757
Chariton	69	McDonald	340	St. Clair	60
Christian	601	Macon	254	St. Francois	1,038
Clark	69	Madison	98	St. Louis City	5,799
Clay	4,853	Maries	43	St. Louis	20,016
Clinton	265	Marion	693	Ste. Genevieve	245
Cole	1,479	Mercer	87	Stoddard	316
Cooper	210	Miller	363	Stone	186
Crawford	250	Mississippi	202	Sullivan	120
Dade	50	Moniteau	179	Taney	1,325
Dallas	82	Monroe	112	Texas	287
Daviess	48	Montgomery	115	Vernon	302
DeKalb	29	Morgan	186	Warren	260
Dent	187	New Madrid	264	Washington	302
Douglas	88	Newton	378	Wayne	86
Dunklin	297	Nodaway	352	Webster	263
Franklin	1,677	Oregon	79	Worth	13
Gasconade	165	Osage	154	Wright	166
Gentry	55	Ozark	70	OUT OF STATE	769
Greene	6,677	Pemiscot	196	Missing	15

FROIs by Industry - 2013

Industry	<u>FROIs</u>	<u>Percent</u>
Healthcare and Social Assistance	19,037	18.8
Manufacturing	13,597	13.4
Retail Trade	11,420	11.2
Public Administration	8,989	8.9
Educational Services	8,897	8.8
Accommodation and Food Services	6,518	6.4
Construction	5,648	5.6
Transportation and Warehousing	5,146	5.1
Wholesale Trade	4,260	4.2
Administrative and Waste Services	4,027	4.0
Professional, Scientific, and Technical Service	2,764	2.7
Other Services (Except Public Administration)	2,284	2.2
Finance and Insurance	1,674	1.6
Arts, Entertainment, and Recreation	1,787	1.8
Utilities	1,653	1.6
Real Estate and Rental and Leasing	1,125	1.1
Information	1,354	1.3
Agriculture, Forestry, Fishing and Hunting	915	.9
Mining	161	.2
Management of Companies and Enterprises	93	.1
Missing	122	.1
Total	101,471	100.0

FROIs by Body Part

Body Part	<u>FROIs</u>	<u>Percent</u>
HEAD	10,395	10.3
Eyes	3,550	34.1
Soft Tissue	2,336	22.5
Mouth/Nose/Teeth	1,056	10.2
Face/Skull	925	8.9
Ears	309	2.9
Facial Bones	247	2.4
Brain	260	2.5
Multiple Head Injury	1,712	16.5
NECK	1,645	1.6
Soft Tissue	819	49.8
Vertebrae/Disc	167	10.2
Spinal Cord	112	6.8
Larynx/Trachea	20	1.2
Multiple Neck Injury	527	32.0
UPPER EXTREMITIES	37,847	37.3
Fingers/Thumbs	12,906	34.1
Wrists/Hands	11,048	29.2
Upper Arms/Shoulders	7,170	18.9
Elbows/Lower Arms	5,682	15.0
Multiple Upper Extremities	1,041	2.8
TRUNK	15,823	15.6
Back	10,425	65.9
Abdomen/Groin/Buttocks	1,678	10.6
Chest	1,462	9.2
Lungs/Internal Organs	1,357	8.6
Pelvis/Sacrum & Coccyx	221	1.4
Spinal Cord/Disc	123	0.8
Heart	88	0.6
Multiple Trunk	469	2.9
LOWER EXTREMITIES	18,891	18.6
Knees/Lower Legs	9,286	49.1
Ankles/Foot/Feet	6,472	34.3
Hips/Upper Legs	1,599	8.5
Toes/Great Toes	858	4.5
Multiple Lower Extremities	676	3.6
BODY SYSTEMS	1,166	1.1
MULTIPLE BODY PARTS	13,701	13.5
WHOLE BODY	79	0.1
NO PHYSICAL INJURY	1,123	1.1
OTHER OR UNSPECIFIED	801	0.8
Total	101,471	100.0

FROIs by Age and Gender

As in previous years, approximately 55 percent of injuries reported to the Division in 2013 were for males. The age group with the most reported injuries was previously males between the ages of 20-29 year olds, however, in 2013, males between the ages of 30-39 had the most injuries reported.

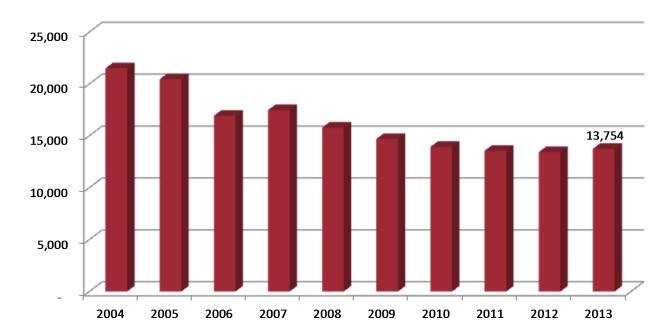
<u>Gender</u>	Age Group	FROIs	<u>Percent</u>
	<u> </u>		
Male	Unknown	590	0.6
Male	10-15	19	0.0
Male	16-19	1,353	1.3
Male	20-29	12,090	11.9
Male	30-39	12,345	12.2
Male	40-49	12,120	11.9
Male	50-59	11,659	11.5
Male	60-69	4,526	4.5
Male	70-79	543	0.5
Male	80-89	65	0.1
Female	Unknown	489	0.5
Female	10-15	15	0.0
Female	16-19	1,172	1.1
Female	20-29	9,568	9.4
Female	30-39	8,986	8.9
Female	40-49	9,647	9.5
Female	50-59	10,932	10.8
Female	60-69	4,478	4.4
Female	70-79	538	0.5
Female	80-89	82	0.1
Unknown	Unknown	1	0.0
Unknown	10-15	0	0.0
Unknown	16-19	17	0.0
Unknown	20-29	69	0.1
Unknown	30-39	50	0.1
Unknown	40-49	52	0.1
Unknown	50-59	35	0.0
Unknown	60-69	28	0.0
Unknown	70-79	2	0.0
Unknown	80-89	0	0.0
Total		101,471	100.0

Claims for Compensation

Employees may file Claims for Compensation with the Division if they believe they are not receiving benefits they are entitled to under the Missouri Workers' Compensation Law. The employee or employee's attorney may file a Claim for Compensation to request the Division's assistance in the collection of benefits.

In 2013, the Division received 13,754 claims for compensation filed against employers and insurers. This is a 2.5 percent increase from the number of claims filed in 2012. Despite slight increases in claim filings in 2007 and 2013; the Division has seen an overall decrease in claim filings since 2004 of 36 percent.

Claims for Compensation Filed 2004 - 2013



Claims by Industry

Industry Claims Percent Manufacturing 2,284 16.6 Health Care and Social 11.4 1,575 Assistance **Public Administration** 1,480 10.8 1,125 8.2 Retail Trade Transportation and 1,071 7.8 Warehousing 7.5 Construction 1,038 **Educational Services** 627 4.6 Wholesale Trade 629 4.6 Administrative and Waste 734 5.3 Services Accommodation and Food 602 4.4 Services Professional, Scientific, 292 2.1 and Technical Services Other Services (Except 284 2.1 Public Administration) 185 Finance and Insurance 1.3 190 Utilities 1.4 Real Estate and Rental and 161 1.2 Leasing 174 1.3 Information Arts, Entertainment, and 204 1.5 Recreation Agriculture, Forestry, 97 0.7 Fishing and Hunting 28 0.2 Mining Management of Compa-12 0.1 nies and Enterprises Missing 962 6.9 13,754 100.0 **Total**

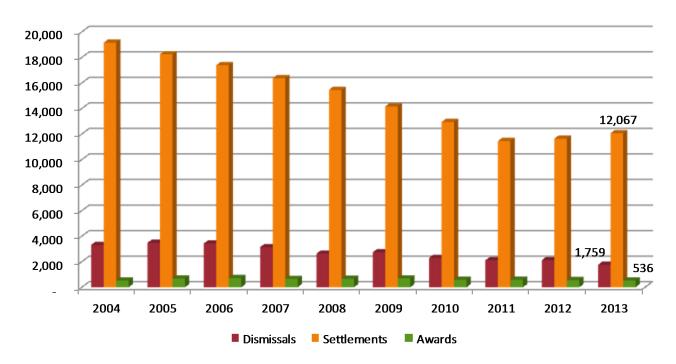
Claims by Body Part

Body Part	<u>Claims</u>	<u>Percent</u>
HEAD	36	0.3
Eyes	7	0.1
Ears	11	0.1
Soft Tissue	5	0.0
Brain	3	0.0
Multiple Head Injury	10	0.1
NECK	9	0.1
Soft Tissue	8	0.1
Spinal Cord	1	0.0
UPPER EXTREMITIES	256	1.9
Upper Arms/Shoulders	100	0.7
Wrists/Hands	66	0.5
Elbows/Lower Arms	22	0.2
Fingers/Thumbs	18	0.1
Multiple Upper Extremities	50	0.4
TRUNK	125	0.9
Back	95	0.7
Abdomen/Groin/ Buttocks	19	0.1
Lungs/Internal Organs	3	0.0
Chest	7	0.1
Heart	1	0.0
LOWER EXTREMITIES	134	0.9
Knees/Lower Legs	71	0.5
Ankles/Foot/Feet	39	0.3
Hips/Upper Legs	6	0.0
Toes/Great Toes	1	0.0
Multiple Lower Extremities	17	0.1
BODY SYSTEMS	4	0.0
MULTIPLE BODY PARTS	13,133	95.5
WHOLE BODY	51	0.4
OTHER OR UNSPECIFIED	6	0.0
Total	13,754	100.0

In 2013, 14,325 Claims for Compensation filed against employers and insurers were resolved by the Division's administrative law judges (ALJ). Claims may be resolved through the issuance of an award, a compromise settlement, or a dismissal. As of December 31, 2013, nearly 40,000 Claims for Compensation were pending before the Division.

Case resolution time frames vary considerably for each resolution type, with cases proceeding to an evidentiary hearing before an ALJ and the issuance of an award taking longer to resolve than settlements and dismissals. For cases resolved with the issuance of an award in 2013, it took an average of 41 months from the date the claim was filed to reach a resolution. For settlements, the average time was 21 months and for dismissals, 28 months.

Claims for Compensation Resolutions 2004 - 2013



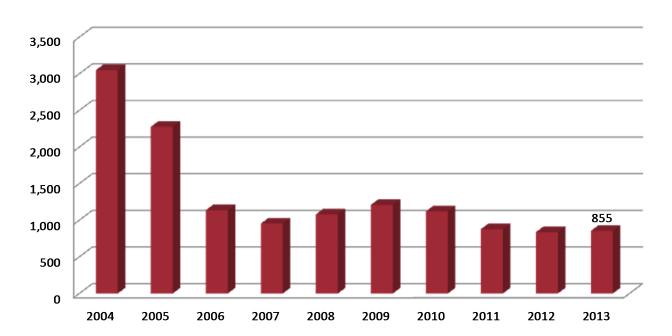
Note: Numbers on graph may not total number in text as there can be multiple resolutions on a single case if multiple employers or insurers are involved. The number in text is an unduplicated count of cases resolved.

Occupational Diseases

Missouri Workers' Compensation Law defines an occupational disease as an identifiable disease arising with or without human fault out of an in the course of employment. To be compensable under Chapter 287, the occupational exposure must be the prevailing factor in causing both the resulting medical condition and disability. SB 1, effective January 1, 2014, added occupational disease to the exclusive remedy provisions set forth in §§ 287.120.1 and 287.120.2, RSMo (Supp. 2013). Please refer to the Introduction, pages 3 and 4, for an explanation of the changes made by SB 1 to occupational diseases.

In 2013, 855 claims were filed for occupational diseases. Occupational disease claims, in general, have decreased significantly since the law changes in 2005.

Occupational Disease Claims 2004 - 2013



Occupational Disease Claims by Injury

Occupational Disease	<u>Claims</u>	<u>Percent</u>
All Other Occupational Disease NOC	461	53.9
Carpal Tunnel Syndrome	240	28.1
Mental Stress	56	6.5
Respiratory Disorders	34	4.0
Poisoning—Chemical	13	1.5
Loss of Hearing	15	1.8
Mental Disorder	2	0.2
Dermatitis	14	1.6
Contagious Disease	6	0.7
Cancer	3	0.4
Asbestosis	4	0.5
Dust Disease NOC	7	0.8
Total	855	100.0

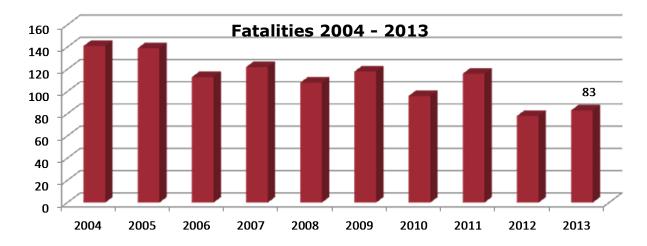
Occupational Disease Claims by Industry

Industry	<u>Claims</u>	<u>Percent</u>
Manufacturing	249	29.2
Public Administration	70	8.2
Health Care and Social Assistance	54	6.3
Retail Trade	51	6.0
Construction	60	7.0
Transportation and Warehousing	29	3.4
Educational Services	31	3.6
Accommodation and Food Services	30	3.5
Professional, Scientific and Technical Services	20	2.3
Wholesale Trade	17	2.0
Other Services (Except Public Administration)	20	2.3
Administrative and Waste Services	27	3.2
Finance and Insurance	25	2.9
Information	13	1.5
Utilities	13	1.5
Arts, Entertainment, and Recreation	10	1.2
Agriculture, Forestry, Fishing, and Hunting	4	0.5
Real Estate and Rental and Leasing	13	1.5
Management of Companies and Enterprises	3	.4
Mining	3	0.4
Missing	113	13.1
Total	855	100.0

As in previous years, significantly more occupational disease claims were reported from employees working in the manufacturing industry. In 2013, over a quarter of all occupational disease claims were from manufacturing.

Fatalities

In 2013, 83 work related injuries resulted in fatalities. These may have been reported to the Division through either a FROI or through the filing of a Claim for Compensation. The injury may or may not be determined to be a compensable injury that caused the death of the injured worker.



Fatalities by Age & Gender

Age Group	<u>Male</u>	<u>Female</u>	<u>Total</u>
20-29	3	2	5
30-39	13	2	15
40-49	17	5	22
50-59	23	2	25
60-69	10	2	12
70-79	4	0	4
Total	70	13	83

Fatalities by Industry

Industry	Cases	<u>Percent</u>
Manufacturing	10	12.1
Construction	12	14.5
Transportation and Warehousing	7	8.4
Wholesale Trade	7	8.4
Other Services	1	1.2
Retail Trade	6	7.3
Administrative and Waste Services	8	9.6
Agriculture	3	3.6
Accommodation and Food Services	1	1.2
Finance and Insurance	2	2.4
Public Administration	7	8.4
Utilities	1	1.2
Educational Services	1	1.2
Health Care and Social Assistance	4	4.8
Information	3	3.6
Professional	5	6.1
Mining	2	2.4
Missing	3	3.6
Total	83	100.0

Second Injury Fund

Second Injury Fund Claims

In 1943, the Missouri Workers' Compensation Law was amended to benefit the physically handicapped and individuals with a previous disability. The amendment helped employers by limiting liability to only the current injury that results in permanent total disability. The SIF encourages employment by permitting persons to be employed without exposing employers to any liability for previous disabilities.

When an employee sustains a compensable work injury and the combined effect of the work-related injury and prior disability results in permanent total disability, or increased permanent partial disability, the employer at the time of the last injury, is liable only for compensation due from the most recent injury. The remaining compensation owed to the employee is paid from the SIF.

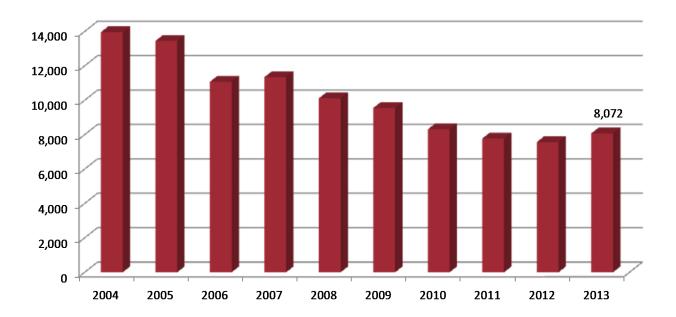
The following benefit types are available from the SIF for injuries occurring prior to January 1, 2014, PPD, PTD, Rehabilitation benefits, Second Job Wage Loss benefits, Medical and Death Benefit expenses for injured employees of uninsured employers.

- SB 1 made several changes to the SIF. The changes are:
- (a) authorizes the Division to have an annual actuarial study done with the first study to be completed by July 1, 2014;
- (b) eliminates PPD claims against the SIF on or after January 1, 2014 and provides for the PTD claims to be covered as long as the prior disability meets certain established conditions;
- (c) provides for PTD benefits against the SIF to employees employed in a sheltered workshop;
- (d) eliminates the uninsured medical and death benefits to be paid from the SIF and also the second job wage loss benefits on or after January 1, 2014;
- (e) establishes a prioritization schedule for payment of SIF liabilities;
- (f) states that no compensation is payable from the SIF when an employee files a Claim for Compensation under the Workers' Compensation Law of another state for the injury or accident or occupational disease;
- (g) provides for the suspension of life payments to be made from the SIF when the employee is able to obtain suitable gainful employment or be self-employed.



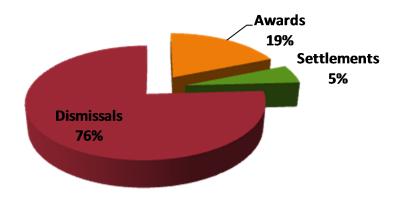
The Missouri State Treasurer's Office is the custodian of the SIF. The Missouri Attorney General's Office defends the claims made against the SIF. The Division is responsible for the billing and collection of the SIF surcharge. The Division requisitions warrants from the State Treasurer's Office for payment to be made to the employee or dependents who have been awarded SIF benefits pursuant to an award issued by or settlement approved by an ALJ. In 2013, there were 8,072 claims filed against the SIF. This is a 6.65 percent increase in claim filings from 2012. Despite the increase in 2013; the Division has seen an overall decrease of 42.2 percent in SIF claim filings since 2004.

Second Injury Fund Claims 2004 - 2013



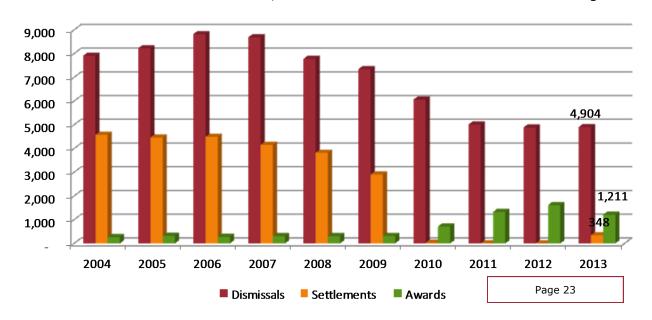
Second Injury Fund Claim Resolutions - 2013

In 2013, 6,463 Claims for Compensation filed against the SIF were resolved by dismissal, settlement, or issuance of an award. Approximately 19 percent of the resolutions were the result of hearings before ALJs, resulting in the issuance of awards. All awards issued by ALJs after a hearing may not necessarily result in SIF benefits being awarded to claimants. An ALJ may also determine the SIF owes no compensation benefits. As of January 1, 2014, there were 31,465 open SIF claims pending before the Division.



Second Injury Fund Claim Resolutions 2004 - 2013

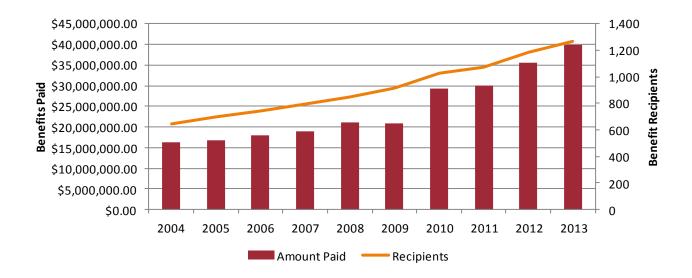
Prior to September 2009, approximately 65.2 percent of all Second Injury Fund claims resolved each calendar year were dismissed, 32.5 percent were settled by the parties and the remaining 2.3 percent proceeded to an evidentiary hearing before an ALJ resulting in the issuance of an award. Since 2009, the number of awards issued is five times greater.



Second Injury Fund Benefit Payments*

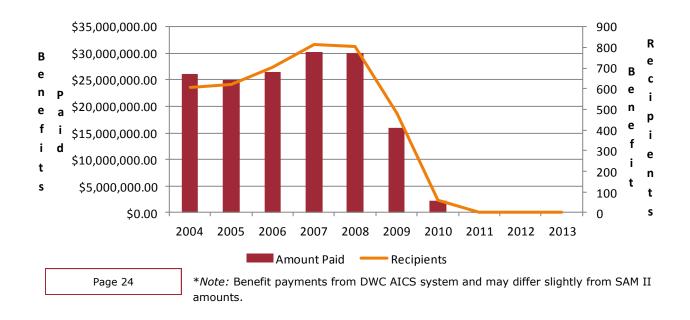
Permanent Total Disability Benefits (Lifetime Payments)

In 2013, \$39,806,736.51 in permanent total (PTD) benefits (lifetime benefits) was paid to 1,270 recipients. This is an 12.2 percent increase from the PTD benefits paid in 2012 (\$35.5 million).



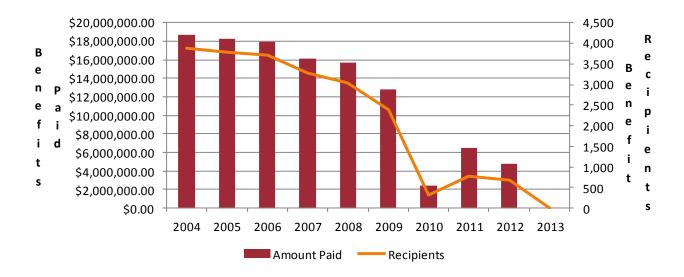
Permanent Total Disability Benefits (Lump Sum Payments)

In 2013; there were no PTD claims resolved as a result of lump sum settlements resulting in no lump sum payments being made by the SIF for PTD benefits.



Permanent Partial Disability Benefits

In 2013, the SIF did not payout any permanent partial disability (PPD) benefits to any injured workers due to funding issues



Death Benefits

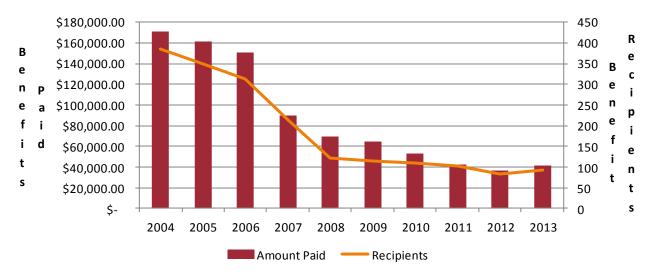
The survivors of 14 injured employees received death benefits totaling \$304,090.10 from the SIF in 2013. All recipients received lifetime benefit payments due to a work-related death while being employed by an uninsured employer and all but one recipient received the benefits prior to the start of calendar year 2013. Since 2002, 24 lump sum death payments have been paid from the Second Injury Fund, the remainder of the payments have been in the form of lifetime benefit payments.





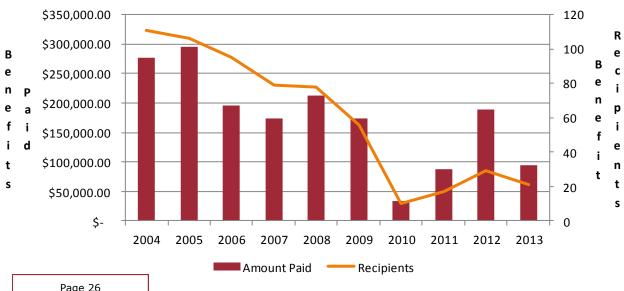
Rehabilitation Benefits

The SIF paid approximately \$40,977.15 to injured employees for rehabilitation benefits in 2013. This amount covered weekly benefits for 92 injured workers. Rehabilitation benefits were up 12.2 percent from 2012.



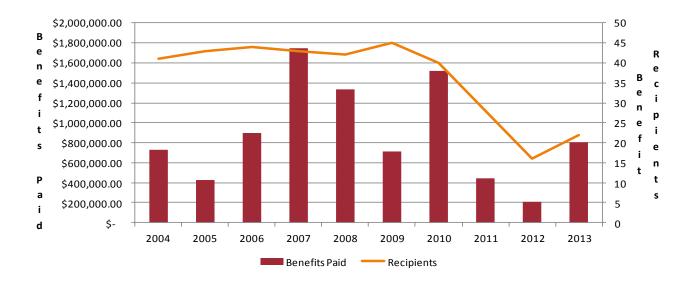
Second Job Wage Loss Benefits

Twenty-one injured employees received second job wage loss benefits from the SIF in 2013. The amount paid in 2013, \$94,346.31, was less than half of what was paid in 2012. The average lump sum payment in 2013 was \$3,983.57, a 34.6 percent decrease from the \$6,095.19 average lump sum payment in 2012.



Medical Benefits

Medical benefits paid from the SIF in 2013 totaled \$803,027.04. Twenty-two recipients received benefits, up from 16 in 2012. There were eight lump sum benefits paid in 2013.



Second Injury Fund Recovery Payments

Pursuant to §287.150, RSMo, the Second Injury Fund shall be subrogated to the rights of any recoveries received by an employee from a third party in any case in which the Second Injury Fund has paid benefits to the injured employee. In 2013, there were two cases in which the Fund recovered a total amount of \$15,037.07 as subrogation reimbursement.

Section 287.220, RSMo, provides for the recovery of monies paid from the Second Injury Fund for medical or death expenses when the employer fails to carry the required workers' compensation insurance coverage. In 2013, \$4,875.20 was collected from 10 employers.

In addition, an amount of \$99,143.70 was collected from employees and/or dependents and their attorneys respectively, who were paid Permanent Total Disability benefits pursuant to an award. This amount represents overpayments that were recovered either by the Division or by the Missouri Attorney General's Office after an employee's death.

Fraud & Noncompliance

The Fraud and Noncompliance Unit investigates allegations of workers' compensation fraud and noncompliance perpetrated by a person or entity. Section 287.128, RSMo, prohibits certain conduct in connection with the workers' compensation process. Such prohibited conduct includes (but is not limited to):

- •failure of an employer to insure its workers' compensation liability
- •knowingly filing multiple claims for the same occurrence with intent to defraud
- •knowingly making a false claim for the payment of health care benefits
- •knowingly making a false or fraudulent material statement for obtaining or denying a benefit.

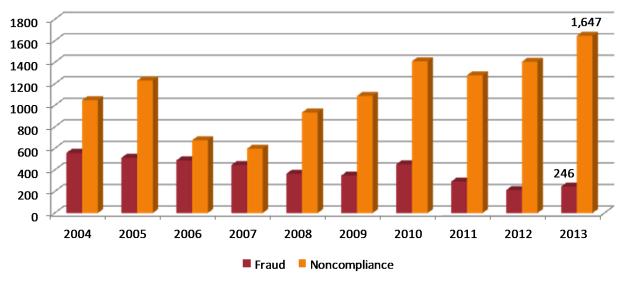
At the conclusion of the investigation by the Fraud and Noncompliance Unit, the findings are presented to the Division Director who may refer the file to the Missouri Attorney General's Office for possible prosecution.

The records, reports, recordings, photographs, and documentation submitted by any person to the unit are confidential and not subject to Missouri's open records laws, although an exception exists to allow the release of records to a local, state, or federal law enforcement authority.

Any person who knowingly files a false or fraudulent workers' compensation claim for payment of benefits; any insurance company or self-insurer who knowingly and intentionally refuses to comply with known and legally indisputable obligations with intent to defraud; or any person who prepares or provides a false/forged certificate of insurance as proof of coverage, is guilty of a class D felony and may be fined up to \$10,000 or double the value of the fraud, whichever is greater. A person who commits any other violation included in §287.128, RSMo, is guilty of a class A misdemeanor and may be fined up to \$10,000 or double the value of the fraud, whichever is greater. Any employer failing to insure its liability is guilty of a class A misdemeanor and may be fined up to three times the annual premium the employer would have paid had such employer been insured or up to \$50,000, whichever is greater. A subsequent instance of noncompliance is a class D felony.

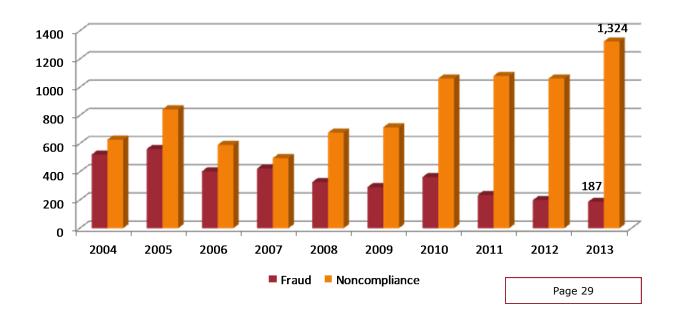
Fraud & Noncompliance Cases Received 2004 - 2013

In 2013, the Fraud and Noncompliance Unit received a total of 1,893 new cases of alleged workers' compensation fraud or noncompliance. This is a 16.9 percent increase over the number of case received in 2012. In general, cases received for investigation had been increasing annually since 2007.



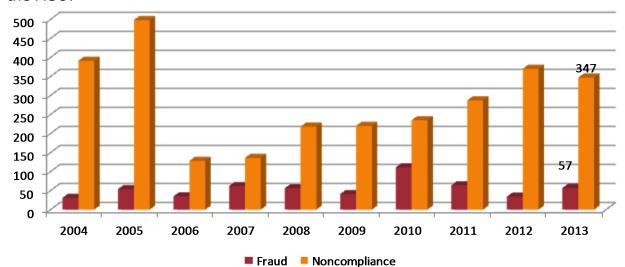
Fraud & Noncompliance Cases Administratively Closed 2004 - 2013

After an investigation, a case can be administratively closed due to inaccurate complaints or lack of evidence. In 2013, 1,511 cases were administratively closed. This is a 19.8 percent increase from the number of cases administratively closed in 2012.



Fraud & Noncompliance Cases Referred to the Attorney General's Office 2004 - 2013

Since 2000, approximately 21 percent of cases closed annually are referred to the Missouri Attorney General's Office (AGO) for prosecution. In 2013, 404 cases were referred to the AGO.



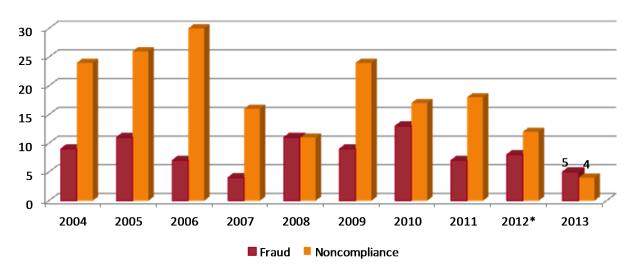
Fraud & Noncompliance Referrals to AGO by Party or Industry

	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	Total
Fraud											
Attorney	0	0	1	2	0	0	0	0	0	1	4
Employee	21	31	22	24	18	16	13	12	10	22	189
Employer	8	21	12	37	36	24	48	50	23	34	293
Insurance Carrier/ Agent	2	2	0	0	2	1	50	2	1	0	60
Other	0	0	0	1	0	0	0	0	0	0	1
Noncompliance											
Construction	106	162	48	45	74	38	56	37	59	51	676
Government	0	3	0	0	1	1	0	1	1	3	10
Healthcare	43	39	1	7	4	17	6	25	31	37	210
Manufacturing	17	12	5	1	3	6	17	14	9	7	91
Retail	184	228	57	63	116	133	141	183	251	237	1,593
Trucking/ Transportation	27	31	10	7	6	7	14	22	13	11	148
Other	14	23	7	13	14	18	1	5	6	1	102
Total	422	552	163	200	274	261	346	351	404	404	3,377

Page 30

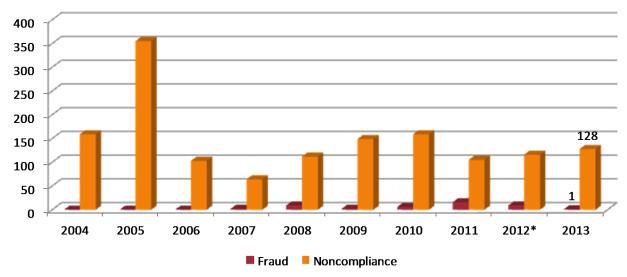
Successful Fraud & Noncompliance Prosecutions 2004 - 2013

In 2013, the Attorney General's Office successfully prosecuted five fraud and four non-compliance cases.



Deferred Prosecution & Hold Harmless Agreements 2004 - 2013

In lieu of prosecution, the Attorney General's Office will enter into deferred prosecution agreements and/or hold harmless agreements with businesses or individuals accused of workers' compensation fraud or noncompliance. In 2013, there were 129 resolutions, resulting in a 3.2 percent increase in these types of resolutions compared to 2012.



*Note: Numbers for 2013 have not been finalized with AGO's office as of the writing of this report. Actual counts may be higher.

Penalties Received*

Since 2000, the Division has collected more than \$6.8 million in penalties from prosecuted employees, employers, and insurance companies.

	<u>Fraud</u>	Noncompliance	<u>Total</u>
2000	\$3,500.00	\$115,960.12	\$119,460.12
2001	\$0.00	\$263,821.56	\$263,821.56
2002	\$102,500.00	\$335,646.07	\$438,146.07
2003	\$0.00	\$418,521.10	\$418,521.10
2004	\$4,100.00	\$578,159.47	\$578,159.47
2005	\$2,200.00	\$821,419.77	\$823,619.77
2006	\$1,827.98	\$632,740.39	\$634,568.37
2007	\$4,237.58	\$299,948.45	\$304,186.03
2008	\$4,483.50	\$412,823.85	\$417,307.35
2009	\$3,392.00	\$605,712.28	\$609,104.28
2010	\$7,004.38	\$573,455.76	\$580,460.14
2011	\$123,397.78	\$470,256.83	\$593,654.61
2012	\$13,822.16	\$451,869.36	\$465,591.52
2013**	\$11,718.00	\$550,003.32	\$561,721.32

^{*} Penalties received include those imposed in previous years. Many penalties are paid in monthly installments over several years.

^{**} Amounts for 2013 have not been finalized with the MO AGO's office as of the writing of this report. Totals are likely to increase as penalties collected late in the year are reported to DWC.

Insurance

Section 287.280, RSMo (Supp. 2013) requires an employer, who is subject to chapter 287, RSMo to insure their entire liability under the workers' compensation law, on either an individual or group basis, by either purchasing insurance coverage through a carrier authorized by the Department of Insurance, Financial Institutions and Professional Registration or by meeting the Division's requirements to self-insure. An employer may insure in whole or in part their employer liability under a policy of insurance or a self-insurance plan. Upon receiving approval from the Division to self-insure, an employer becomes financially responsible for all workers' compensation liabilities incurred. Under the statute, employers can self-insure individually or as a group. The Division granted individual employers authority to self-insure their workers' compensation liabilities in 1936. The Division approved self-insurance authority to groups in 1982.

The Division's Insurance Unit is responsible for authorizing and regulating all self-insured employers in Missouri. The unit must ensure that all self-insured employers comply with chapter 287, RSMo, and follow the regulation 8 CSR 50-3.010. The unit's primary functions consist of approving applications to self-insure submitted by employers, providing oversight and assistance to current self-insured entities, ensuring that annual reports are timely submitted to the Division, evaluating security posted, conducting audits to examine case management practices for compliance with statutory requirements and the Division's established guidelines and safety audits.

	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
Individual Self-Insurers	299	295	293	288
Group Trusts	25	24	22	21
Individual Member Employers in Group Trusts	2,900	2,863	2,742	2,555
Covered SI Employees	780,416	773,143	663,607	651,771
Covered SI Payroll	\$26,032,693,392	\$26,218,147,749	\$25,785,265,617	\$25,301,065,506
SI Payroll as Percent of All Covered Payroll	26.98%	26.56%	Data available August 2014	Data not yet available

Source: Missouri Division of Workers' Compensation. National Academy of Social Insurance, Workers' Compensation: Benefits, Coverage, and Costs, 2010. Note: Numbers provided are based on counts as of January 1 of the indicated year.

2013 Individual Self-Insurers by Industry

<u>Industry</u>	<u>Companies</u>	<u>Percent</u>
Services	115	39.9
Manufacturing	67	23.3
Retail Trade	33	11.5
Transportation & Public Utilities	22	7.6
Public Administration	21	7.3
Wholesale Trade	10	3.5
Finance, Insurance and Real Estate	9	3.1
Agriculture, Forestry, Fishing & Hunting	4	1.4
Construction	4	1.4
Mining	3	1.0
Total	288	100

Legal Unit

The Legal Unit provides legal advice and assistance to the Division Director and the various units and programs within the Division. The legal unit also oversees the Religious Exception Program, Medical Fee Dispute Program, Dispute Management Unit, Line of Duty Compensation Fund, and Proof of Coverage. In additional to other general duties, the unit also drafts proposed rules and amendments to the existing regulations.

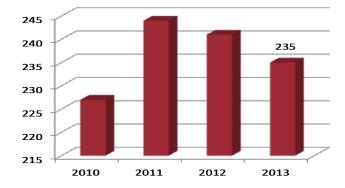
The Religious Exception Program receives, reviews, and responds to all questions related to granting workers' compensation exceptions to employers and employees who are members of a recognized religious sect or division (as defined by federal law) who are conscientiously apposed to acceptance of benefits of any public or private insurance in various contexts. In 2013, the unit received 112 applications for religious exception in which 112 employees working for 20 different employers qualified for a religious exception.

The Medical Fee Dispute Program allows health care providers to file an application for reimbursement of disputed and outstanding charges and fees relating to treatment and services provided to injured employees. In 2013, the unit processed 315 applications for direct payment and 1675 applications for payment of additional reimbursement. Since September 1, 2006, the Division has administratively reviewed "reasonableness" disputes where the amount in dispute was \$1,000 or less. The Medical Fee Dispute Program received 235 applications for "reasonableness" disputes under \$1,000. Administrative rulings were issued in 17 cases.

SB 1 inserted a statute of limitations period in § 287.140.4, RSMo (Supp. 2013) for filing an application for payment of additional reimbursement of medical fees pursuant to 8 CSR 50-2.030. It is: Two years from the date of the first notice of dispute of medical charge was received by the health care provider if the services were provided before July 1, 2013; and one year from the date the first notice of dispute of medical charge was received by the health care provider if the services were provided after July 1, 2013. Notice is presumed to occur no later than 5 business days after transmission by certified US mail. **Reasonableness Medical Fee Disputes**

Filed 2009-2013

(Less than \$1000)



Line of Duty Compensation Fund

The Line of Duty Compensation Fund provides benefits for firefighters, volunteer firefighters, law enforcement officers, air ambulance pilots, air ambulance registered professional nurses, and emergency medical technicians who are killed in the line of duty. The Act defines "killed in the line of duty" to mean the loss of one's life as a result of an injury received in the active performance of his or her duties within the ordinary scope of his or her respective profession while the individual is on duty and but for the individual's performance, death would not have occurred. It excludes death that results from willful misconduct or intoxication.

In order to receive benefits, the death must have occurred on or after June 19, 2009. The estate of the deceased must file a Claim for Compensation for Line of Duty Compensation Benefits with the Division within one year from the date of death. After a Claim is filed, the Division starts an investigation for substantiation of matters set forth in the Claim. The Division coordinates with the employer and reviews documents submitted by the employer and claimant. After completion of the investigation, the Division Director issues an Administrative Determination either granting or denying line of duty compensation benefits. Pursuant to §287.243.7 RSMo any person who is aggrieved by the decision issued by the Division on the Claim for Compensation for Line of Duty Compensation Benefits may apply for an evidentiary hearing before an Administrative Law Judge. If no request for an evidentiary hearing is made within 30-days of the date of the decision, the Administrative Determination becomes the final award in the case and no appeal may be made to the Division or Commission or to the courts.

If compensation is granted, a \$25,000 compensation benefit is paid to the claimant, subject to appropriation. The compensation is in addition to any other pension rights, death benefits, or other compensation that claimant may otherwise be entitled to by law. The employers and workers' compensation insurers do not have subrogation rights against any compensation that is awarded for claims filed against the Line of Duty Compensation Fund.

The State Treasurer is the custodian of the Line of Duty Compensation Fund and approves the disbursements from the fund.

To date, 29 Claims for Compensation for Line of Duty Compensation Benefits have been filed with the Division. The Division Director has issued an Administrative Determination Granting Line of Duty Compensation Benefits in 25 cases.

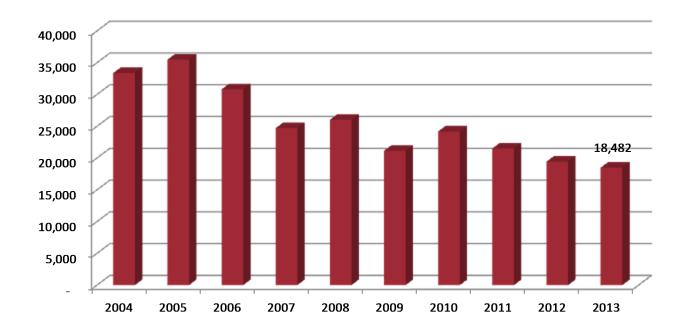
Customer Service

Division Toll-Free Line

The Division is required to maintain a public information program that provides assistance to all parties governed by the Missouri Workers' Compensation Law including injured employees, employers, insurers, and lawyers. The Division maintains a toll-free number for any person to call the Division with questions relating to the Workers' Compensation Law. The unit employs information specialists to respond to calls received on the toll-free line.

Calls on the toll-free line have generally been decreasing since 2003. The Division's 2 information specialists handled a total of 18,482 calls in 2013, a 4.9 percent decrease in the number of calls handled in 2012.

Toll-Free Line Calls 2004 - 2013



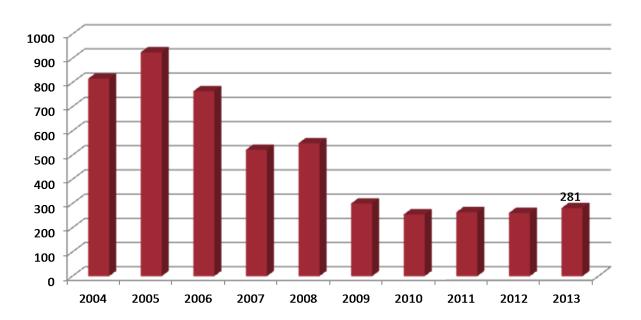
Dispute Management

The Dispute Management Program offers early intervention services and mediates disputes that arise between the parties soon after a workplace injury occurs. The Division has one Mediator who assists parties in resolving medical treatment and lost wage disputes. This is a voluntary process. When one of the parties does not agree to mediate, the party originally requesting mediation services is advised that he or she may take further steps if the problem persists, including requesting a docket setting with an administrative law judge (ALJ). The Dispute Management Unit does not provide voluntary mediation services if a Claim for Compensation has been filed with the Division as the filing of a claim initiates a contested case proceeding.

Voluntary Mediation

Referrals for voluntary dispute management have been decreasing since 2005, but have largely leveled off for the past three years. In 2013, there were 281 referrals for voluntary mediation, a 7.6 percent increase from 2012.

Referrals for Voluntary Dispute Management Assistance 2004 - 2013



Source of Referrals

The most common source of dispute management referral in 2013 was by phone calls to the Division either through the Division's information hotline or by directly calling the mediator, accounting for just over 78 percent of all referrals.

Source of Referral	<u>Count</u>	<u>Percent</u>
Phone Call	108	38.4
DWC Information Specialist (800 Line)	112	39.9
Dispute Management Conference Request	26	9.2
Other	21	7.5
Notification of Rights	13	4.6
Case Technician	1	0.4
Total	281*	100.0

^{*}This number does not include referrals from previous years that had not been closed as of January 1, 2013

Cause of Referrals

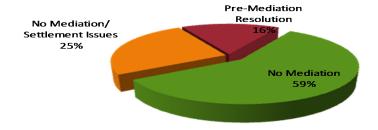
Cases will be referred to the dispute management unit when it appears a mediator may be able to resolve the issue without a formal proceeding. In 2013, the most common cause for a dispute referral was due to an employees request for medical treatment.

<u>Cause</u>	<u>Count</u>	<u>Percent</u>
PPD Issues	82	18.3
Other	82	18.3
Employee Request for	93	20.8
Eligibility for TTD	62	13.9
Denial of Benefits	28	6.3
Unpaid Medical Bills	34	7.6
Need for Medical Treatment	19	4.2
Employer Not Reporting Injury	21	4.7
Question Benefit Amounts	17	3.8
Permanent Disability	2	0.5
Wage at Injury	2	0.5
Mileage Reimbursement	5	1.1
Total	447	100.0

Note: A case may have more than one cause for referral.

Voluntary Dispute Referral Outcomes

In 2013, the dispute management unit closed a total of 285 referred cases, which includes cases that were still being worked on from prior years.



Workers' Safety Program

All insurance carriers writing workers' compensation insurance in Missouri must provide comprehensive safety engineering and management services to employers. The Workers' Safety Program certifies and audits these services, investigates complaints of inadequate loss control services, monitors the impact of those services on Missouri employers, and offers additional safety assistance when needed. The Workers' Safety Program maintains a registry of certified safety consultants and engineers who can offer independent safety services to Missouri employers. The Program also oversees the 10-hour Construction Safety Training Program that requires all employees on a public works project to have 10 hours of safety training prior to working on the project. In addition to other duties, the Program also provides site visits for employers that are seeking to be self-insured to ensure that they have acceptable safety programs that meet the requirements for self-insurance and performs safety visits to rehabilitation facilities who are looking to be certified by the SIF.

Since Mid-July 2013, the Program conducted 60 site visits, certified 121 insurance carrier groups with comprehensive safety engineering and management programs, and certified a total of 110 safety consultants or engineers including 36 new safety consultants.

Site Visits by Type

Туре	<u>Visits</u>	Percent
Fatality	1	1.6
Ergonomic	9	15
Rehabilitation Facilities (for SIF Unit)	37	61.7
Self-Insurance Audits (for Insurance Unit)	13	21.7
Total	60	100

Adjudication

The Division's statutory responsibility to adjudicate and resolve disputes under the law is fulfilled by the eight adjudication offices throughout the state of Missouri. The administrative law judges (ALJs), court reporters, docket clerks, and assistants provide the services to the parties to the case who appear at the scheduled docket settings in each respective office. The Division has streamlined the rendition of services by standardizing several forms that the parties utilize to request a docket setting. The Division offers various docket settings, such as voluntary settlement conference; prehearing; mediation; §287.203 hearing (to contest termination of compensation); hardship hearing; hearing upon final award; and notice to show cause or dismissal settings. The various docket settings are briefly summarized below. The Division also schedules evidentiary hearings on medical fee disputes, crime victims' compensation cases, and tort victims' compensation cases.

A case is set for a **voluntary settlement conference** with an ALJ after the employer/ insurer has filed a First Report of Injury (FROI) with the Division, or after the employee has initiated a case through the Dispute Management Unit. A voluntary settlement conference may be set by written request of a party by completing a Division-approved form, or it may be set at the discretion of the Division.

A **pre-hearing** is a proceeding before an ALJ to discuss issues in a case in which a claim for compensation has been filed. A pre-hearing may be requested when:

- •The parties want to present a settlement agreement for approval;
- •Disputes or other issues arise that must be resolved in order for the case to proceed;
- •The parties have a good-faith belief that a brief meeting with an ALJ will help in moving the case more expeditiously to settlement or final hearing.

A **mediation** is a setting in which the parties and their attorneys, if they are represented, meet with an ALJ to discuss issues in a confidential manner, identify areas of agreement and facilitate a compromise settlement of a claim to avoid proceeding to a hearing. A mediation may be set upon the written request of a party, provided that an ALJ finds that the issues have been sufficiently developed to make the mediation meaningful. It is the intent of the Division to conduct a mediation before the parties incur the expense of any expert medical depositions.

A **hardship hearing** is an evidentiary hearing held before an ALJ when the employee alleges that he or she is not at maximum medical improvement, is in need of medical treatment, or entitled to temporary total disability (TTD) benefits, and the employer is not providing such treatment or benefits. The hearing may alternatively be based on the termination of benefits under §287.203, RSMo. A hardship hearing is a hearing in which the employee is requesting the issuance of a temporary or partial award. A temporary or partial award addresses issues of medical treatment and payment of temporary disability benefits. If a party requests the issuance of a final award and makes it an issue at the hearing, and the evidence presented so merits, a final award may be issued.



A **hearing requesting issuance of a final award** is an evidentiary hearing held before an ALJ. Evidence is offered, testimony is presented, and a verbatim record is made for the reviewing tribunal. A final hearing may be requested when the employee has reached maximum medical improvement or the case is otherwise ready for final resolution.

All parties must appear at the hearing and be ready to proceed with the presentation of evidence on all issues. An ALJ may grant a continuance of the final hearing only upon a showing of good cause or by consent of the parties. A continuance will generally not be granted for conflicts after the attorney has cleared the hearing date in advance.

In cases where §287.203, RSMo, applies, the ALJ shall issue an award, including findings of facts and rulings of law, within 90 days of the last day of the hearing. For all other hearings (except hearings on the medical fee disputes reasonableness cases) an ALJ shall issue the award within 90 days of the last day of the hearing. The hearing shall be concluded within 30 days of the commencement of the hearing, except in extraordinary circumstances.

If the ALJ determines that any proceedings have been brought, prosecuted, or defended without reasonable grounds, the ALJ may assess the whole cost of the proceedings upon the party who brought, prosecuted, or defended them. The ALJ shall not issue a written award if the case is settled or dismissed after a hearing and before the award is issued.

Compromise settlements between the parties must be approved by an ALJ in order to be valid. An ALJ will approve a settlement agreement pursuant to §287.390, RSMo, as valid and enforceable as long as:

- •The settlement is not the result of undue influence or fraud;
- •The employee fully understands his or her rights and benefits;
- •The employee voluntarily agrees to accept the terms of the agreement; and
- •The settlement is in accordance with the rights of the parties.

All stipulations for compromise settlement submitted for approval must be accompanied by copies of all available medical rating reports, surgical notes, and radiological reports, or progress notes showing a diagnosis, or statement from the employer/insurer's attorney indicating that the injury is of such a minor nature that no medical report is necessary. Stipulations for compromise settlement in an acceptable format may be presented for approval by mail or in person.

An order of **default judgment or dismissal** may be issued in the following circumstances:

- •Default Hearings and Awards A case may be set for default judgment upon the request of the employee if the employer/insurer has failed to appear and/or defend the claim.
- •Voluntary Dismissals A claim for compensation may be voluntarily dismissed by the employee as to any party, or the case as a whole.
- •Dismissal for Failure to Prosecute Cases in which no party has requested a setting in one year will automatically be set on a dismissal docket. The claim for compensation may be dismissed for failure to prosecute if, after notice to the parties, the claimant or the claimant's attorney fails to show good cause as to why the claim should not be dismissed.

Docket Settings & Hearings

		Setting Types			Hearing Types		
Office/Docket Location	Counties Covered	Conference	Pre- Hearing	Mediation	Dismissal	Hardship	Final
ape Girardeau Office							
Bloomfield	Stoddard	33	35	68	19	1	2
Cape Girardeau	Bollinger, Cape Girardeau, Perry	245	201	358	66	14	85
Caruthersville	Dunklin, Pemiscot	62	31	187	33	0	13
Farmington	St. Francois, St. Genevieve	152	100	266	88	11	53
Festus	Jefferson	161	82	334	196	7	49
Ironton	Iron, Madison, Reynolds, Washington	66	53	98	35	1	23
New Madrid	New Madrid	66	67	88	29	0	1
Popular Bluff	Butler, Carter, Ripley, Wayne	106	64	266	38	1	17
Sikeston	Mississippi, Scott	116	121	184	53	3	32
efferson City Office							
Boonville	Cooper, Howard	41	85	0	0	1	0
Camdenton JC	Camden, Hickory, Morgan	142	231	0	14	3	8
Columbia	Boone	357	731	0	33	6	24
Eldon (Held in J.C.)	Miller	43	116	0	3	3	4
Fulton (Held in J.C.)	Callaway	115	465	0	8	13	26
Hannibal	Clark, Lewis, Marion, Pike, Ralls	214	487	0	6	5	17
Hermann	Gasconade	32	58	0	4	0	0
Jefferson City	Cole, Maries, Moniteau, Osage	234	508	730	19	9	34
Kirksville	Adair, Knox, Putnam, Schuyler, Scotland, Sullivan	91	208	0	2	0	3
Macon	Linn, Macon, Shelby	93	95	0	1	0	4
Marshall	Saline	107	138	0	5	6	11
Mexico	Audrain, Montgomery	132	284	0	8	6	9
Moberly	Chariton, Monroe, Randolph	113	220	0	6	3	7
Rolla	Crawford, Dent, Phelps	163	453	0	10	6	9
Sedalia	Benton, Pettis	202	204	1	1	4	12



Missouri Division of Workers' Compensation

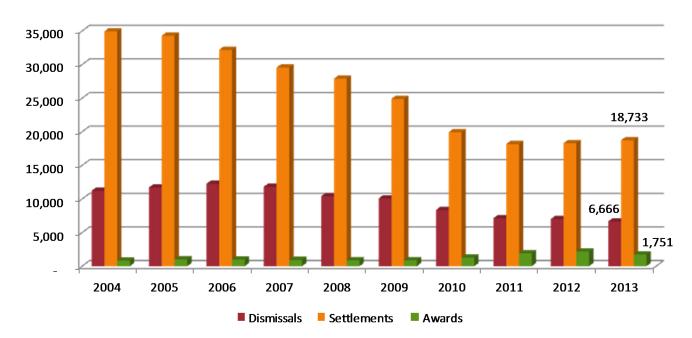
Office/Docket Location Joplin Office Joplin Lamar Monett Neosho Kansas City Office Clinton Kansas City	Jasper Barton, Cedar, Dade, Vernon	Conference	Pre- Hearing	Mediation	Dismissal	Hardship	Final
Joplin Lamar Monett Neosho Kansas City Office Clinton	·						
Lamar Monett Neosho Kansas City Office Clinton	·						
Monett Neosho Kansas City Office Clinton	Barton, Cedar, Dade, Vernon	453	1935	356	50	7	71
Neosho Kansas City Office Clinton	za. co, coddi, zddc, veilion	102	510	0	10	0	0
Kansas City Office	Barry, Lawrence	131	896	0	17	0	0
Clinton	McDonald, Newton	109	428	0	11	0	0
Clinton							
Kansas City	Bates, Henry, Johnson, St. Clair	126	40	0	88	9	19
,	Cass, Jackson, Southern Platte	1,029	252	1,900	1,382	158	640
Lexington	Lafayette, Ray	54	15	0	27	0	1
Liberty	Clay	162	28	0	145	16	99
Springfield Office							
Branson	Stone, Taney	116	117	40	18	0	5
Lebanon	Laclede, Pulaski, Wright	182	149	47	12	0	4
Springfield	Christian, Dallas, Greene, Polk, Webster	816	1,212	497	55	19	95
West Plains	Douglas, Howell, Oregon, Ozark, Shannon, Texas	105	70	30	11	0	10
St. Charles Office							
St. Charles	St. Charles	223	5,142	670	109	7	137
Union/Washington	Franklin	159	1,745	236	44	3	36
Warrenton	Lincoln, Warren	52	912	122	17	0	14
St. Joseph Office							
Bethany	Daviess, Harrison	10	12	4	2	0	0
Chillicothe	Caldwell, Carroll, Livingston	61	57	5	4	0	0
Maryville	Atchison, Gentry, Holt, Nodaway, Worth	94	71	10	7	0	2
St. Joseph	Andrew, Buchanan, Clinton, DeKalb	425	785	142	84	4	27
Trenton	Grundy, Mercer	34	24	2	0	0	0
St. Louis Office							
St. Louis	City of St. Louis, St. Louis County	1,624	14,853	4,710	632	67	913
TOTALS		9,153	34,290	11,351	3,402	393	2,510

^{*} Note: Last minute cancellations of scheduled hearings, due to settlement or requests for continuance, are not recorded in the DWC database. Therefore, the number of hearings actually conducted is less than shown here.

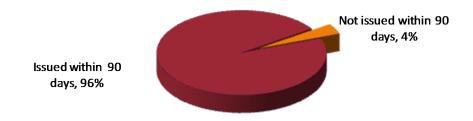
Case Resolutions

In 2013, 27,150 workers' compensation cases were resolved by an ALJ. . The number of settlements reached increased by two percent, while the number of awards issued decreased by 19 percent and the number of dismissals decreased by 5% from 2012.

Workers' Compensation Case Resolutions 2004 - 2013



Section 287.460, RSMo, requires all awards to be issued by the administrative law judge within 90 days of the last day of the hearing on the case. The hearing is generally concluded within 30 days of the commencement of the hearing, unless there are "extraordinary circumstances where a lengthy trial or complex issues necessitate a longer time than 90 days." In 2013, 96 percent of all awards were issued within the statutory time frame.



Tort Victims' Compensation Fund

The Missouri Tort Victims' Compensation Fund (the Fund) was established by legislation passed in 1987. Revenue into the Fund is generated by a portion of money paid as punitive damages in civil lawsuits in Missouri. In 2001, the Missouri General Assembly enacted legislation authorizing claims to be made against the Fund, giving the Division the duty to evaluate those claims, and set up criteria for the evaluation of those claims.

The purpose of the Fund is to help compensate people who have been injured due to the negligence or recklessness of another (such as in a motor vehicle collision or a hunting accident), and who have been unable to obtain full compensation because the party at fault had no insurance, or inadequate insurance, or has filed for bankruptcy, or for other reasons specified in the law.

In 2009, there were 36 claims filed during the Annual Claims Period. Thirty-two claims were successful. There was \$2,450,000.00 available to pay claims, thus each claimant received more than 34.2 cents for each dollar awarded.

One-hundred-one claims were filed during the 2010 Annual Claims Period. There were 85 successful claims. The value of individual successful claims ranged from \$20,000.00 to \$300,000.00, and the aggregated total was \$16,935,060.39. On June 30, 2011, there was \$345,275.00 available to pay claims. Therefore, each claimant received more than 2.04 cents for each dollar awarded.

During the 2011 Annual Claims Period, 88 claims were filed, 70 of which were successful. The value of individual successful claims ranged from \$10,000.00 to \$300,000.00, and the aggregated total was \$11,993,995.90. On June 30, 2013 there was \$495,000.00 available to pay claims. Therefore, each claimant received more than 4.12 cents for each dollar awarded, with the checks being mailed out on June 30, 2013.

In 2012, 56 claims were filed during the Annual Claims Period, 49 of which were successful. The value of individual successful claims ranged from \$16,273.62 to \$300,000.00, and the aggregated total was \$9,282,368.78. No payments have been made on the 2012 Annual Claims Period cases.

There were 53 claims filed ruing the 2013 Annual Claims Period. The balance of the fund as of December 31, 2013 was \$62,670.78.

Crime Victims' Compensation Fund

Effective Aug. 28, 2007, the Missouri Crime Victims' Compensation Fund was transferred from the Division to the Missouri Department of Public Safety. However, the Division's ALJs have the statutory authority to hold hearings de novo upon a petition filed by a party aggrieved by the decision of the Department of Public Safety. The ALJ may affirm, reverse or set aside the decision of the Department. The ALJ's decision may be appealed to the Labor and Industrial Relations Commission. In 2013, there were 42 hearings and prehearings held, which is an increase from the 35 hearings held in 2012.

Accomplishments & Initiatives

ELECTRONIC REPORTING OF SECOND INJURY FUND SURCHARGE QUARTERLY REPORTS AND DELIVERY OF SIF BENEFITS VIA DIRECT DEPOSIT

The Division successfully implemented the electronic reporting for the SIF surcharge beginning with the fourth quarter of 2008 and continue the delivery of SIF benefits via direct deposit to the recipients' bank account upon election to receive them via direct deposit.

REMOTE ELECTRONIC CLAIMS AUDIT

The Division's Insurance Unit established procedures in 2010 for its auditors to conduct remote electronic claims audits if a third-party administrator (TPA) maintains its case files electronically. This eliminates travel time and related expenses and maintains the integrity of the claims audit and audit reports. Since 2010, the Unit has conducted 18 remote audits, six of those were done in 2013 accounting for just over five percent of their total audits for the year.

REMOTE FILING OF CLAIMS FOR COMPENSATION AND ANSWERS

The Division has implemented a process whereby a party may submit a Claim for Compensation and Answer to the Claim for Compensation in any of its adjudication offices throughout the state versus mailing these forms directly to the Division's Jefferson City office. This process has realized savings to the Division of approximately \$300 a week. It has also reduced processing time for the Division's staff.

TRANSCRIPTS

The Division has saved a significant amount by sending out transcripts on awards appealed to the Labor and Industrial Relations Commission from the Administrative Law Judges in all eight adjudication offices, by CD versus a paper copy.

ELECTRONIC DATA DISTRIBUTION

The Division continues to achieve success based upon the implementation of the electronic transmission of docket notices to parties who voluntarily sign up to receive notices electronically. In 2013, more than 186,000 docket notices were sent out resulting in a savings of over \$740,000 for the Division since the projects implementation. The Division reached out to Trading Partners such as insurance companies and TPAs and offered them the ability to submit supplemental reports in the case electronically.

SENATE BILL 1

SB 1 encompasses changes to several programs administered and functions performed by the Division. The Division and Office of Administration—Information Technology Services Division (ITSD) worked together to ensure that the Division's computer system was upgraded to capture the changes made by SB 1, effective January 1, 2014. Approximated 21 letters generated by the Division were wither revised or developed. The letters enable the Division to educate the various stakeholders and capture statistical information that assists the Division in fulfilling its overall statutory responsibility.

DWC Modernization/Gap Analysis

In early Fall 2013, DWC and ITSD created a Project Assessment Quotation (PAQ) to refresh analysis created in 2009 in preparation for a modernization project. The objectives of the PAQ were to obtain recommendations and a roadmap for how to modernized DWC's current computer systems and to provide a feasibility study to include a cost benefit analysis. The contractor was directed to analyze the DWC business and technical needs, complete the research needed, present options, make recommendations, and provide a high-level plan to implement the recommendation.

As part of the Gap Analysis, all current functions were reviewed to make sure that all business processes were captured. These functions include current computer system processes as well as a large number of manual processes. Additionally, data stored outside of the current computer system was identified with recommendations to integrate this outlying data to one all inclusive database. In the process of analysis, recommendations for combining several similar business processed to eliminate redundancies of work were made. The streamlined business functions will lead to efficiencies for both the State of Missouri and external stakeholders. The resulting computer system will be built on the latest technology platforms that allow Workers' Compensation the ability to retire and outdated legacy system.

Interstate Comparison

Workers' Compensation Premium Rate Rankings

Missouri employers pay, on average, the 16th lowest workers' compensation premium rates in the nation. Missouri's premium rate index is \$1.62 per \$100 of payroll or 86 percent of the national median, which was \$1.88 in 2012. This is an eight percent decrease

from the national median in 2010.

2012	2010	04-4-	Index	Percent of study	F#
Ranking	Ranking	State	Rate	median	Effective Date
1	2	Alaska	3.01	160%	January 1, 2012
2	6	Connecticut	2.99	159%	January 1, 2012
3	5	California	2.92	155%	January 1, 2012
4	3	Illinois	2.83	151%	January 1, 2012
5	13	New York	2.82	150%	October 1, 2011
6	4	Oklahoma	2.77	147%	11/1/11 State Fund, 1/1/12 Private
7	7	New Jersey	2.74	146%	January 1, 2012
8	1	Montana	2.50	133%	July 1, 2011
9	10	New Hampshire	2.40	128%	January 1, 2012
10	8	Maine	2.24	119%	January 1, 2012
12	14	Pennsylvania	2.15	114%	April 1, 2011
12	19	Wisconsin	2.15	114%	October 1, 2011
13	26	Washington	2.11	112%	January 1, 2012
14	18	Vermont	2.07	110%	April 1, 2011
15	25	Louisiana	2.06	110%	October 1, 2011
16	12	South Carolina	2.04	109%	July 1, 2011
17	16	Minnesota	2.03	108%	January 1, 2012
19	20	Tennessee	2.02	107%	November 1, 2011
19	29	Idaho	2.02	107%	January 1, 2012
20	28	Rhode Island	1.99	106%	June 1, 2011
21	10	Alabama	1.97	105%	March 1, 2011
22	15	Kentucky	1.96	104%	October 1, 2011
23	28	South Dakota	1.91	102%	July 1, 2011
25	36	Iowa	1.90	101%	January 1, 2012
25	23	North Carolina	1.90	101%	April 1, 2011
27	24	Georgia	1.88	100%	March 1, 2011
27	32	New Mexico	1.88	100%	January 1, 2012
28	17	Ohio	1.84	98%	July 1, 2011
29	40	Florida	1.82	97%	January 1, 2012
30	34	Delaware	1.77	94%	December 1, 2011
31	37	Wyoming	1.74	92%	January 1, 2012
32	23	Michigan	1.73	92%	January 1, 2012
33	30	Nebraska	1.71	91%	February 1, 2011
34	42	Maryland	1.68	89%	January 1, 2012
35	40	Hawaii	1.66	88%	January 1, 2012
36	33	Missouri	1.62	86%	January 1, 2012
37	38	Arizona	1.61	86%	January 1, 2012
38	12	Texas	1.60	85%	June 1, 2011
39	41	Oregon	1.58	84%	January 1, 2012
40	35	West Virginia	1.55	82%	November 1, 2011
41	43	Kansas	1.54	82%	January 1, 2012
42	31	Mississippi	1.49	79%	March 1, 2012
43	47	Colorado	1.42	76%	January 1, 2012
44	44	Massachusetts	1.37	73%	September 1, 2011
45	45	Utah	1.35	72%	December 1, 2011
46	21	Nevada	1.33	71%	March 2, 2011
47	48	District of Columbia	1.28	68%	November 1, 2011
48	47	Virginia	1.20	64%	April 1, 2011
49	49	Arkansas	1.19	63%	July 1, 2011
50	50	Indiana	1.16	62%	January 1, 2012
51	51	North Dakota	1.01	53%	July 1, 2011

Source: Oregon Department of Consumer & Business Services, 2012.

MO DWC Contacts

Missouri Division of Workers' Compensation Central Office P.O. Box 58 Jefferson City, MO 65102-0058 (573) 751-4231 Internet Home Page: www.labor.mo.gov/DWC/

Toll Free Information Line: (800) 775-2667

Missouri Workers' Safety Program P.O. Box 58 Jefferson City, MO 65102-0058 (573) 526-5757

Dispute Management Unit P.O. Box 58 Jefferson City, MO 65102-0058 (573) 526-4951

Insurance Unit P.O. Box 58 Jefferson City, MO 65102-0058 (573) 526-3692

Rehabilitation and Second Injury Fund P.O. Box 58 Jefferson City, MO 65102-0058 (573) 526-3505

Fraud and Noncompliance Unit P.O. Box 1009 Jefferson City, MO 65102-1009 (800) 592-6003

Medical Fee Dispute P.O. Box 58 Jefferson City, MO 65102-0058 (573) 526-5610 or (573) 522-2546

Religious Exception and Proof of Coverage P.O. Box 58 Jefferson City, MO 65102-0058 (573) 522-2546 or (573) 526-4941

Local Office Directory

Cape Girardeau

Phone: (573) 290-5757 Fax: (573) 290-5760 3102 Blattner, Suite 101 Cape Girardeau, MO 63701

Jefferson City

Phone: (573) 751-4231 Fax: (573) 751-2012 3315 West Truman Blvd., P.O. Box 58 Jefferson City, MO 65102

Joplin

Phone: (417) 629-3032 Fax: (417) 629-3035 3311 Texas Ave.
Joplin, MO 64801

Kansas City

Phone: (816) 889-2481 Fax: (816) 889-2489 1410 Genessee St., Suite 210 Kansas City, MO 64102-1047

Springfield

Phone: (417) 888-4100 Fax: (417) 888-4105 1736 E. Sunshine, Suite 610 Springfield, MO 65804

St. Charles

Phone: (636) 940-3326 Fax: (636) 940-3331 3737 Harry S. Truman Blvd. St. Charles, MO 63301

St. Joseph

Phone: (816) 387-2275 Fax: (816) 387-2279 525 Jules St. St. Joseph, MO 64501

St. Louis

Phone: (314) 340-6865 Fax: (314) 340-6915 111 North 7th St., Room 250 St. Louis, MO 63101

Additional Contacts

Missouri Department of Insurance Property and Casualty Section P.O. Box 690 Jefferson City, MO 65102-0690 (573) 751-3365 or (800) 726-7390 Internet Home Page: www.insurance.mo.gov

Page 50

National Council on Compensation Insurance 11430 Gravois Road St. Louis, MO 63126 (314) 843-4001 Customer Service (800) 622-4123 Internet Home Page: www.ncci.com



Missouri Department of Labor and Industrial Relations Division of Workers' Compensation P.O. Box 58 3315 West Truman Blvd Jefferson City, MO 65102-0058

Phone: 800-775-2667

E-mail: workerscomp@labor.mo.gov Website: www.dolir.mo.gov/wc