

# WORKERS COMPENSATION RESEARCH INSTITUTE

*A Catalyst for Improving Workers' Compensation Systems*

ANNUAL REPORT

2022



# WHY WCRI?

## OBJECTIVE DATA AND ANALYSIS


Founded in 1983, the Workers Compensation Research Institute (WCRI) is an independent, not-for-profit research organization that strives to help those interested in making improvements to the workers' compensation system by providing highly regarded, objective data and analysis.

The Institute does not take positions on the issues it researches; rather, it provides information obtained through studies and data collection efforts that conform to recognized scientific methods. Objectivity is further ensured through rigorous, unbiased peer review procedures.


# BALANCED, CREDIBLE RESEARCH USED BY:




EMPLOYERS



GOVERNMENT




HEALTHCARE PROVIDERS



INSURERS



LABOR UNIONS



SERVICE PROVIDERS

Policymakers and other system stakeholders — employers, government, healthcare providers, insurers, labor unions, and service providers — utilize WCRI's credible research to monitor state systems on a regular basis and identify incremental changes to improve system performance. This results in a more enduring, efficient, and equitable system that better serves the needs of workers and employers.

# Mission

TO BE A CATALYST FOR SIGNIFICANT IMPROVEMENTS IN WORKERS' COMPENSATION SYSTEMS, PROVIDING THE PUBLIC WITH OBJECTIVE, CREDIBLE, HIGH-QUALITY RESEARCH ON IMPORTANT PUBLIC POLICY ISSUES.

## CONTENTS

Letter from the President and CEO	2 – 3
Where Our Work Was Used	4 – 5
Research Spotlight	6 – 9
Studies Published in 2021	10
Presentations & Education	11 – 13
The Impact of Social Media	14
Media Coverage	15
At a Glance	16
Giving Back	17
Member Spotlight	18
Governance	19
Members & Supporters	20 – 21



## LETTER FROM THE PRESIDENT AND CEO



At the time of this writing, we are two years into the COVID-19 pandemic. In early March 2020, we could not imagine the disruption the pandemic would cause in all aspects of our lives, nor the changes that will endure in the way we work and on workers' compensation. WCRI has begun and will continue to track these impacts on the delivery of benefits to those injured at work.

In 2021, we published studies that provided an early look at the impact of COVID-19 on workers' compensation claims composition and the delivery of medical care in workers' compensation. We also published a popular and timely study on telemedicine. Our benchmarking studies began to capture the impact of the virus on state workers' compensation systems and future editions will show us the full impact.

Even though the pandemic was the focus for most state workers' compensation systems and our members, our work on other aspects of the systems continued to have impact, being cited in hearings and reports. We continued to share our research findings at online and in-person conferences, webinars, and in briefings to policymakers across the country.

We are well-positioned and prepared to continue studying the impact of the pandemic, as well as other factors influencing workers' compensation systems. In future work, we will track long-COVID-19 claims, changes in how medical care is delivered and claims are affected by labor market disruptions, and changes in the way we work.

We look forward to providing policymakers and all system stakeholders with the sound research, credible data, and objective analysis that contribute to an informed debate — while avoiding taking positions or making policy recommendations.

The last two years have been an extremely challenging time for our members. We cannot thank them enough for their generous support of our research through their data, funding, and expertise during this difficult, but vital time for research.

Respectfully yours,

A handwritten signature in black ink that reads "John Ruser". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

John Ruser, Ph.D.  
President and CEO



## WHERE OUR WORK WAS USED

**National:** Findings from WCRI's study *The Early Impact of COVID-19 on Workers' Compensation Claim Composition* were cited in an article in *Workers' First Watch*, which is a magazine published by the Workers' Injury Law & Advocacy Group.

**National:** Findings from two WCRI flash reports (*Indemnity Benefits, Use of Medical Care, and Economic Conditions* and *How Do Claim Costs, Components of Costs, and Worker Outcomes Differ by Age?*) were used by the keynote speaker in their presentation at the National Workers' Compensation Defense Network's 2021 Virtual Annual Conference.

**National:** Findings from WCRI's study *The Early Impact of COVID-19 on Workers' Compensation Claim Composition* were used by the National Institute for Occupational Safety and Health (NIOSH) to brief the Occupational Safety and Health Administration New England Roundtable on using workers' compensation data and systems to evaluate the impact of COVID-19.

**National:** Findings from WCRI's study *Evaluation of the 2015, 2016, and 2017 Fee Schedule Changes in Delaware* were cited in a National Academy of Social Insurance report entitled *Workers' Compensation Benefits, Costs, and Coverage – 2019 Data*.

**National:** WCRI's *Correlates of Opioid Dispensing* study was cited in an article, "Introduction to the Special Issue: Opioids and the Workplace — Urgent Action Needed," published in the SAGE Journals.

**California:** Findings from WCRI's CompScope™ Benchmarks for California were cited in a report *Friction in the California Compensation System* by the Workers' Compensation Insurance Rating Bureau of California.

**Florida:** Findings from WCRI's workers' compensation laws and COVID-19 state presumption studies were cited in the submission of two bills. The first, House Bill (HB) 30, relates to the payment of workers' compensation benefits in the case of permanent partial impairment. The second, HB 45, establishes a presumption of compensability for "frontline workers" during public health emergencies created by contagious diseases.

**Illinois:** Findings from WCRI's CompScope™ Benchmarks and Medical Benchmarks for Illinois studies were used by the Illinois Workers' Compensation Commission in hearings with state legislators.

**Illinois:** Findings from WCRI's *CompScope™ Medical Benchmarks for Illinois, 21st Edition*, and *Designing Workers' Compensation Medical Fee Schedules, 2019* were used in a motion before the Illinois Workers' Compensation Commission's Medical Fee Advisory Board to increase evaluation and management code reimbursement.

**Louisiana:** Findings from WCRI's *CompScope™ Medical Benchmarks for Louisiana, 22nd Edition*, were referenced by policymakers at a hearing convened by the Louisiana House Committee on Labor & Industrial Relations about the status of efforts to update the Louisiana workers' compensation fee schedule.

**Minnesota:** Findings from WCRI's *CompScope™ Medical Benchmarks for Minnesota, 22nd Edition*, were featured in the December edition of *COMPACT*, a quarterly publication published by the Minnesota Department of Labor and Industry's Workers' Compensation Division.

**Minnesota:** WCRI's report *COVID-19 Workers' Compensation Presumption Coverage* was cited in a Minnesota Department of Labor and Industry report analyzing COVID-19 workers' compensation claims.

**Montana:** WCRI's medical price index for workers' compensation and worker outcomes studies were used in a presentation by the Montana Department of Labor and Industry to Montana policymakers and other system stakeholders.

**Wisconsin:** WCRI's CompScope™ Benchmarks studies and advisory committee were mentioned in the Wisconsin Office of the Insurance Commissioner's annual insurance report.

**Wisconsin:** WCRI's research was cited in a proposal to introduce a hospital fee schedule by 2023 at a meeting of the Wisconsin Worker's Compensation Advisory Council.







**THE EARLY IMPACT OF COVID-19 ON WORKERS’ COMPENSATION CLAIM COMPOSITION**

This study addresses how the massive slowdown of economic activity early in the pandemic affected workers’ compensation, and to what extent COVID-19 claims have risen in the workers’ compensation system.

The report sheds some light on the early impact of the COVID-19 pandemic on workers’ compensation and helps policymakers and stakeholders track changes in key dimensions of the effect of COVID-19 on workers’ compensation.

The study analyzes claims for private sector workers and local public employees covered by workers’ compensation with paid medical and/or indemnity benefits in 27 states by comparing the first two quarters of 2020 and 2019 to understand the early effects of the pandemic on workers’ compensation.



**THE EARLY IMPACT OF COVID-19 ON MEDICAL TREATMENT FOR WORKERS’ COMPENSATION NON-COVID-19 CLAIMS**

This report examines the early impact of the pandemic on the timing and patterns of medical care delivered to workers injured on the job during the first two quarters of 2020.

The focus of the study is on non-COVID-19 lost-time claims with injury dates in the first two quarters of 2019 (pre-pandemic) and 2020 (pandemic period). The study also examines the effect of the pandemic on timing of care for existing claims — claims with injury dates in the third and fourth quarters of 2019 as compared with experiences for claims with injury dates in the third and fourth quarters of 2018. This analysis includes non-COVID-19 claims with paid medical services for private sector workers and local government employees.

The study tracks changes in key measures describing medical service utilization patterns for workers injured in 27 states, which represent 68 percent of the workers’ compensation benefits paid in the United States.



**OFF-LABEL USE OF GABAPENTINOIDS FOR WORK-RELATED INJURIES**

With a growing number of workers receiving gabapentinoids (e.g., Lyrica®, Neurontin®) for managing pain arising from work-related injuries and increasing safety and abuse concerns, this study examines their use for work-related injuries and illnesses in 28 states.

The study can help state officials understand how often workers injured in their state are prescribed gabapentinoids, whether the prescribing adheres to medical treatment guidelines, and if a higher proportion of workers in their state are at risk of adverse events from concomitant use of gabapentinoids and opioids.

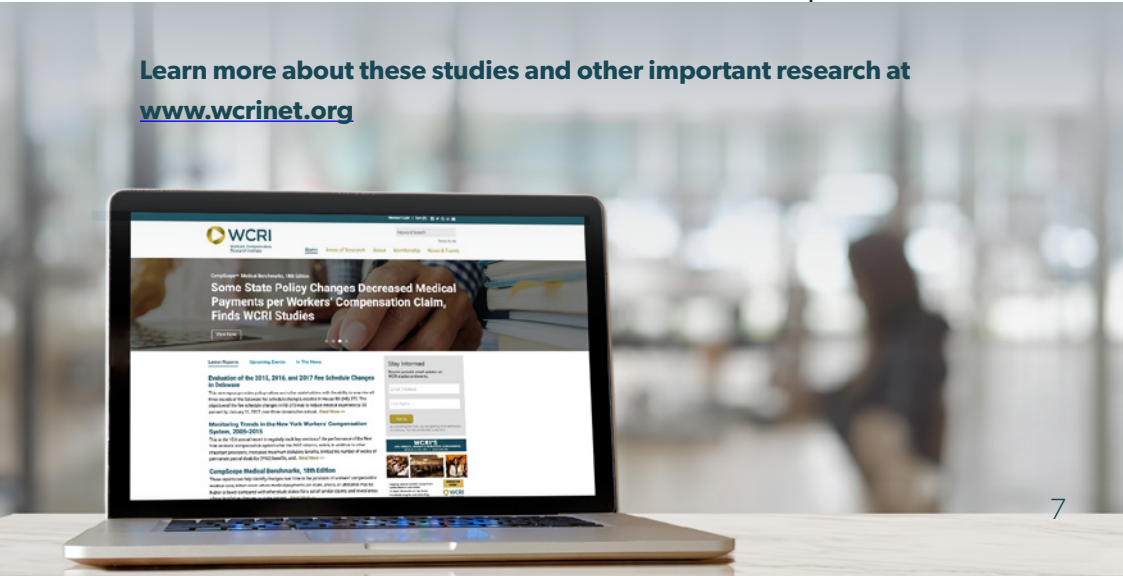
The analysis for the study includes information for roughly 480,000 workers with prescriptions in 28 states who sustained injuries between January 1, 2018, and March 31, 2019. The study examines prescription utilization of these workers in the first year following the injury through March 31, 2020.

**WCRI FLASHREPORT — TELEMEDICINE: PATTERNS OF USE AND REIMBURSEMENT**

With telemedicine increasing as an important alternative for access to care during the pandemic, this WCRI FlashReport examines the utilization patterns of telemedicine services and the prices paid for these services in workers’ compensation systems across states during the early stage of the COVID-19 pandemic.

The report focuses on the two types of medical services with the most prevalent use of telemedicine: evaluation and management, and physical medicine services. It investigates the patterns of telemedicine utilization among these services in workers’ compensation during the early months of the pandemic (primarily March–June 2020) across 28 states. It also examines the actual prices paid for the most frequent services delivered via telemedicine versus in person across the study states.

This report is based on a sample of workers’ compensation claims for private sector workers and local public employees (e.g., police and firefighters) from 28 states, which represent 77 percent of the workers’ compensation benefits paid nationwide.



# RESEARCH SPOTLIGHT: BENCHMARK STUDIES



## AN OVERVIEW OF THE DELAWARE WORKERS’ COMPENSATION SYSTEM AND THE EFFECTS OF THE 2014 REFORMS

This is the first WCRI annual report on the Delaware workers’ compensation system. It contains metrics for evaluating the results of Delaware’s 2014 system reforms, mostly related to the medical payment system. Policymakers and stakeholders will be able to use these data and analyses to inform policy debates, track the progress of enacted changes, and evaluate the results of system changes.

The study examines total claim costs, medical payments, indemnity benefits, disability duration, benefit delivery expenses, timeliness of benefit payments to workers, and other metrics. It analyzes how these metrics of system performance have changed over time from 2014 to 2019 (at various claim maturities) with payments made through March 2020.

Findings from other WCRI reports are included to provide a more complete picture of the Delaware system and supply historical context for key metrics. The report includes experience with claims through March 2020, at the very beginning of the COVID-19 pandemic, so it provides a pre-COVID-19 baseline for evaluating the impact of the virus on workers’ compensation claims.

## WORKERS’ COMPENSATION MEDICAL COST CONTAINMENT: A NATIONAL INVENTORY, 2021

With medical benefits representing the single largest cost component for many state workers’ compensation systems, this study provides a basic understanding of the cost containment strategies used in all 50 states and 3 federal workers’ compensation programs as of January 1, 2021.

The study includes tables of statutory provisions, administrative rules, and processes used by states, which come from surveys completed by state and federal administrators. One of the most popular tables compares fee schedule allowances for eight of the most common medical procedures (e.g., knee arthroscopy, lumbar surgery) in states that regulate fees. New to the report are four medical cost issues that have received a great deal of attention since the last edition: telehealth, ambulance fees, “balance billing,” and fees for surgically implanted hardware.

Medical cost containment strategies fall into the categories of price management and utilization management — with a goal of either curbing the cost of a particular service or reducing the amount of services provided. Cost containment regulatory initiatives usually entail a balancing act of limiting the cost of services and inappropriate or unnecessary treatment without negatively affecting the quality of treatment or access to care for workers.

## MONITORING TRENDS IN THE NEW YORK WORKERS’ COMPENSATION SYSTEM, 2021 EDITION

Originally established to monitor changes in the New York workers’ compensation system following substantial legislative reforms in March of 2007, this report has evolved into a tool for tracking key metrics of system performance on an ongoing basis, as further legislative reforms and administrative changes continue to shape the system.

In recent years, New York has implemented several policy changes regarding medical treatment, including medical fee schedule changes, the implementation of a drug formulary for new prescriptions, and the Expanded Provider Law. The regular monitoring provided in this report helps focus attention on policy objectives that are being met, objectives that are not being met, and unintended consequences that have emerged.

The analysis in this edition focuses primarily on trends in indemnity benefits, medical payments, and benefit delivery expenses from 2014 to 2019 for claims at different maturities. Claims with experience through 2020 are analyzed, and in some cases, trends before 2007 are shown to establish a baseline prior to the 2007 reforms. In addition, various interstate comparisons from other WCRI studies are provided to help put the performance of the New York system into perspective, such as prices paid for medical services and the frequency and amount of opioids dispensed to workers.

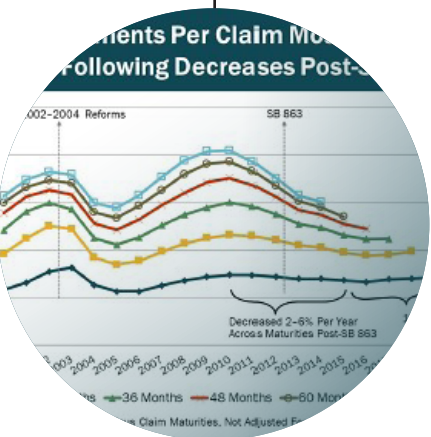
## COMPSCOPE™ MEDICAL BENCHMARKS, 22ND EDITION

The factors behind trends in medical payments per claim in 18 state workers’ compensation systems and the impact of legislative and regulatory changes on those costs are examined in this 22nd edition of CompScope™ Medical Benchmarks.

The studies examine trends in payments, prices, and utilization of medical care for workers with injuries. They provide analyses of recent costs and trends for policymakers and other system stakeholders, reporting how medical payments per claim and cost components vary over time and from state to state. The studies cover the period from 2014 through 2019, with claims experience through March 2020.

The 18 states in the study — Arkansas, California, Florida, Georgia, Illinois, Indiana, Iowa, Louisiana, Massachusetts, Michigan, Minnesota, New Jersey, North Carolina, Pennsylvania, Tennessee, Texas, Virginia, and Wisconsin — represent about 60 percent of the nation’s workers’ compensation benefit payments. Individual reports are available for every state except Arkansas, Iowa, and Tennessee.

The results we report include experience on claims through March 2020, at the very beginning of the COVID-19 pandemic. Therefore, the study provides a pre-COVID-19 baseline for evaluating the impact of the virus on workers’ compensation claims.





# STUDIES PUBLISHED IN 2021

## SOME OF THE STUDIES WE PUBLISHED LAST YEAR:

- *An Overview of the Delaware Workers' Compensation System and the Effects of the 2014 Reforms*
- *CompScope™ Benchmarks, 21st Edition* (15 individual reports)
- *CompScope™ Medical Benchmarks, 22nd Edition* (15 individual reports)
- *Effects of Opioid-Related Policies on Opioid Utilization, Nature of Medical Care, and Duration of Disability*
- *Hospital Outpatient Payment Index: Interstate Variations and Policy Analysis, 10th Edition*
- *Monitoring Trends in the New York Workers' Compensation System, 2021 Edition*
- *Off-Label Use of Gabapentinoids for Work-Related Injuries*
- *Outcomes Associated with Manual Therapy for Workers with Non-Chronic Low Back Pain*
- *The Early Impact of COVID-19 on Medical Treatment for Workers' Compensation Non-COVID-19 Claims*
- *The Early Impact of COVID-19 on Workers' Compensation Claim Composition*
- *Topical Analgesic Use in Workers' Compensation*
- *WCRI FlashReport — Indemnity Benefits, Use of Medical Care, and Economic Conditions*
- *WCRI FlashReport — Interstate Variation and Trends in Workers' Compensation Drug Payments: 2017Q1 to 2020Q1*
- *WCRI FlashReport — Payments to Ambulatory Surgery Centers in Georgia: Role of Recent Fee Schedule Changes*
- *WCRI FlashReport — Telemedicine: Patterns of Use and Reimbursement*
- *WCRI Medical Price Index for Workers' Compensation, 13th Edition (MPI-WC)*
- *Workers' Compensation Medical Cost Containment: A National Inventory, 2021*



## WCRI's studies fall into two categories: topical and core benchmark.

The Institute's topical studies focus on the major current public policy issues and long-term challenges confronting workers' compensation systems. The studies evaluate the impact of recent reforms and identify emerging trends and issues; actions and policies that improve disability and medical management; and key leverage points to improve system performance.

The core benchmark studies are the central research program at the Institute, with our CompScope™ Benchmarks reports as the flagship. From medical costs to worker outcomes, the studies in this program examine the changes in performance of individual state systems and provide meaningful interstate comparisons.

With these studies, stakeholders, public officials, and policymakers can monitor their systems on a regular basis and make important interstate comparisons. Identifying incremental changes in system performance — trends that may signal either improvement or deterioration — also helps them set goals, make improvements, and avoid crises.

Like all of WCRI's research, studies are free for members and can be downloaded from our website: [www.wcrintet.org](http://www.wcrintet.org).

# PRESENTATIONS & EDUCATION

## EDUCATING DIVERSE GROUPS

This is a sample of the diverse groups with which we shared our research over the past year.

- California Department of Industrial Relations
- California Professional Firefighters
- California Staffing Agency Reform Association
- Georgia State Board of Workers' Compensation
- Illinois Department of Insurance
- Indiana Manufacturers Association
- Louisiana Department of Insurance
- Louisiana Office of Workers' Compensation Administration
- Michigan Workers' Disability Compensation Agency
- National Institute for Occupational Safety and Health
- New Hampshire Insurance Department
- New York Compensation Insurance Rating Board
- New York State Workers' Compensation Board
- North Dakota Workforce Safety & Insurance
- Ohio State University College of Public Health
- Oregon State Accident Insurance Fund
- Pennsylvania Bureau of Workers' Compensation
- Pennsylvania Compensation Rating Bureau
- Pennsylvania House of Representatives Committee on Labor & Industry
- The Workers' Compensation Rating and Inspection Bureau of Massachusetts
- Wisconsin AFL-CIO
- Wisconsin Worker's Compensation Advisory Council

## RESEARCH PRESENTED

Every year, WCRI staff are invited to present our research at events across the country. This is a sample of the events and venues where we were invited to present during the past year.

- Delaware Compensation Rating Bureau, Inc. and Pennsylvania Compensation Rating Bureau Annual Meeting
- International Association of Industrial Accident Boards and Commissions Research and Standards Committee Meeting
- Louisiana Association of Self Insured Employers 30th Annual Conference
- Michigan State University's National Workers' Compensation Conference
- National Council of Insurance Legislators 2021 Spring Meeting
- National Occupational Research Agenda Respiratory Health Cross-Sector Council Meeting
- NIOSH COVID-19 Workers' Compensation Workgroup
- Southern Association of Workers' Compensation Administrators 2021 All Committee Conference
- Virtual workshop on "The Economics of Workers' Compensation Insurance," organized by Montana State University
- Webinar hosted by the NIOSH Total Worker Health® Program and Center for Workers' Compensation Studies
- Workers' Compensation Institute 2021 Annual Conference

PRESENTATIONS & EDUCATION (continued)



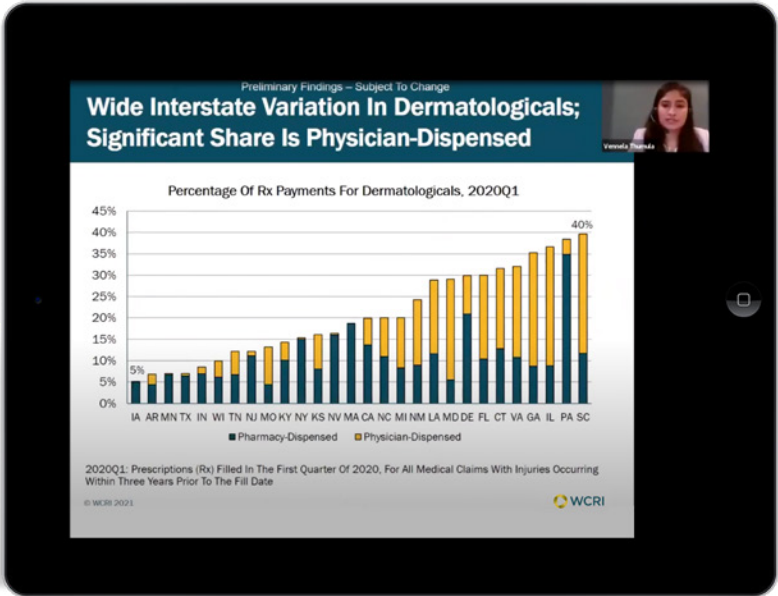
37TH ANNUAL WCRI ISSUES & RESEARCH CONFERENCE

Close to 1,000 people registered for our annual conference in 2021, which was held virtually. We had several exciting and informational sessions with well-known experts. Dr. John Howard, director of NIOSH, spoke about COVID-19 and worker safety. Katharine Abraham, former commissioner of the Bureau of Labor Statistics, discussed the economic impact of COVID-19. Dr. Jewel Mullen, former principal deputy assistant secretary for health in the U.S. Department of Health and Human Services, addressed health equity and COVID-19 vaccinations.

All of the 2021 conference sessions are available on our [YouTube channel](#).

WEBINARS

- Interstate Variation and Trends in Workers’ Compensation Drug Payments: 2017Q1 to 2020Q1 (482 registrants)
- Effects of Opioid-Related Policies on Opioid Utilization, Nature of Medical Care, and Duration of Disability (407 registrants)
- Early Predictors of Longer-Term Opioid Dispensing (231 registrants)
- Prescribing of Topical Analgesics and Gabapentinoids for Work-Related Injuries (192 registrants)
- Reoperation & Readmission Rates for Workers’ Compensation Patients Undergoing Lumbar Surgery (148 registrants)



VIDEOS

With video increasingly becoming the preferred way to convey information, WCRI produces video clips for each study we publish. In these videos, we walk viewers through the studies so they can better understand the purpose of the studies, see what lies inside, and find out how to access the full information. In 2021, videos on our YouTube channel received more than 5,000 individual views. In addition to video clips for each of our studies, our YouTube channel includes videos on the benefits of becoming a member of WCRI, as well as attending our annual conference. Our page can be found on [YouTube](#), as well as accessed through our website at [www.wcrinet.org](http://www.wcrinet.org).




# THE IMPACT OF SOCIAL MEDIA

Since 2011, WCRI has maintained a strong presence across the most popular social media channels. On platforms such as Twitter, LinkedIn, Facebook, Instagram, and YouTube, the Institute disseminates accurate news and information to a broad audience interested in workers' compensation issues.

Current followers at the end of 2021:

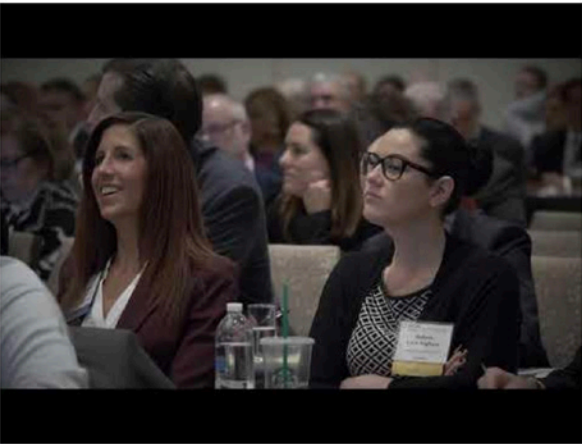
- Twitter: 3,437
- LinkedIn: 2,642
- Facebook: 523
- Instagram: 207
- YouTube: 72

## SAMPLE TWEETS ABOUT WCRI:




**Brandon Miller** • 3rd+  
President & CEO at Minnesota Workers' Compensation Insurers Association  
3mo •

Just registered for what will be my last WCRI Issues and Research Conference in March of 2022. It's always a great event with great presentations on public policy and medical research in the workers' compensation field. Hope to see you there!




WCRI's 38th Annual Issues & Research Conference Registration  
whova.com • 1 min read




**Mike Cirillo** • 2nd  
President at myMatrixx, an Express Scripts Company | WCRI Board Memb...  
6mo •

WCRI always uses data to provide insights, educate and identify ways to change the results.




**WCRI**  
2,736 followers  
6mo • Edited •

Join us for a free 45-minute webinar on Thursday, October 21, 2021, at 2 p.m. ET to discuss findings from a recent **WCRI** study - "Effects of Opioid-Related Policies on Opioid Utilization, Nature of Medical Care, and Duration of Disability." Attendance is limited to 500 so don't wait. Register now at <https://buff.ly/3mc6YC9>. #workerscomp #healthcare #risk #claimsmanagement #safety #insurance



Free WCRI Webinar Discusses Effects of Opioid-Related Policies on Opioid Utilization after Work-Related Injuries  
wcrinet.org • 2 min read











**Bill T.** • 3rd+  
PCRB/DCRB - President & CEO  
3mo •





Thanks for posting, a valuable report for the Delaware WC Marketplace.




# MEDIA COVERAGE





This past year, our research was mentioned more than 400 times in newspapers and blogs all across the United States. Here is a sample of the news organizations that covered our research.


























14

15



## AT A GLANCE



20,000

EMAIL LIST SUBSCRIBERS



6,500+

SOCIAL MEDIA FOLLOWERS



1,450+

WEBINAR REGISTRATIONS



5,000+

VIDEOS WATCHED ON OUR YOUTUBE CHANNEL



400+

NUMBER OF PRESS MENTIONS



**WCRI**

Workers Compensation Research Institute

2021



165+

ORGANIZATIONS THAT ARE MEMBERS



100+

BRIEFINGS AND PRESENTATIONS TO EXTERNAL AUDIENCES



45+

STUDIES PUBLISHED

## GIVING BACK

WCRI believes in corporate social responsibility, whether by giving back to our community or protecting the environment for future generations, with ongoing and new initiatives.

**SOCIAL INITIATIVES:** WCRI has contributed both time and money to causes such as **Cradles to Crayons**, **Kids' Chance**, **the Greater Boston Food Bank**, and **Tailored for Success, Inc.**

WCRI donates \$2 to **Kids' Chance** for every completed post-webinar and conference feedback survey — resulting in over \$15,000 in cash donations to date — to benefit children affected by a parent's work-related injury or death, so they can pursue their educational dreams without financial burden.



"Service to others  
is the rent you pay for your  
room here on Earth."  
— Muhammad Ali



## MEMBER SPOTLIGHT

WCRI conducts quarterly interviews with members to learn why they become members, the value they derive from our research, and other topics. Here are some examples of how members responded to one of the questions:

### ***“WHAT VALUE DO YOU DERIVE FROM BEING A MEMBER OF WCRI?”***



*“I learned from my first day in workers’ compensation that there is no ‘silver bullet’ to improving a program. For a company that has employees in just about every state in the United States, being able to compare the drivers of medical and indemnity costs and benefits across jurisdictions helps us tailor our approach by state. WCRI’s research also helps us work with our government affairs department to influence different states based on programs that are working well elsewhere.”*

Joan Vincenz, Managing Director for Operations Risk at United Airlines



*“We all know the value that workers’ compensation coverage can provide injured workers, their families, and their employers as well. Being engaged, timely, and accurate with the offerings and execution of workers’ compensation services matters to these individuals. As a member of WCRI, I have been able to use its data to monitor and assess industry trends related to matters such as frequency, severity, and timeliness across states. These points of data have served to validate the efficacy of our efforts in serving our injured workers.”*

Paul Kearney, Chief Claims Officer at AF Group



*“The biggest thing for me is being able to see how different states evaluate injuries and the benefits and cost for treating those injuries. As a union, we negotiate benefits. If we see a particular injury trending, it is an opportunity for us to work with the employer to find ways to reduce that injury. Many think our main job is to fight for the benefits that a worker gets after an injury, but we would prefer to prevent the injury in the first place since when someone is injured, they carry that injury with them for the rest of their life. Regardless of whether they fully recover from their injury, it can negatively impact their ability to get future employment and, thereby, provide for their families.”*

Corey Hill, President of United Auto Workers, Local 3520



*“There are a variety of benefits that are attached to the WCRI membership that I take advantage of on a regular basis. The WCRI events and committee meetings throughout the year offer the opportunity to meet with members and thought leaders throughout the industry, representing all aspects of the business, from carriers to risk managers and TPAs. The collaboration with the university professors, Ph.D. economists, and analytics teams on staff offers deep insights into workers’ compensation trends and national issues.”*

Jeffrey Austin White, formerly of Gallagher Bassett

Read the full versions of these interviews at: [www.wcricrnet.org/news/member-spotlight](http://www.wcricrnet.org/news/member-spotlight).

## GOVERNANCE

The responsibility for policymaking rests with the Institute’s board of directors — a representative group of members who are elected by the membership for staggered three-year terms and meet three times a year. Operating responsibility is vested by the board in the president and CEO, with direction from the board and advice from committees established by the board.

The Research Committee, composed of representatives of member companies, gives the president and CEO guidance on the Institute’s research program.

The Disability and Medical Management Advisory Board provides guidance to the president and CEO, as well as funding for issues related to disability and medical management.

Project advisory committees assist the research staff in the formulation and conduct of specific studies. These committees are made up of representatives of member companies, public officials, academic researchers, and others knowledgeable about the specific topics before them.

### **BOARD (as of 1/2022)**

Russell J. Pass, Gallagher Bassett – Chair

Keri Kittmann, AF Group – Treasurer

Michele Adams, Walmart

Vincent Armentano, Travelers

Steven A. Bennett, American Property Casualty Insurance Association

Cristina Dobleman, Stanford University

Vince Donnelly, PMA Companies

Mike Fenlon, United Parcel Service

Kimberly George, Sedgwick

Tom Glasson, AIG

Debra Kane, CNA Insurance

Matthew Massaro, The Hartford

Nina McIlree, M.D., Zurich North America

Steve Perroots, Marriott International, Inc.

Virna Alexander Rhodes, Liberty Mutual Insurance

Joan Vincenz, United Airlines



### **RESEARCH COMMITTEE**

Denise Zoe Algire, Albertsons Companies

Kevin Brady, PMA Companies

Michael Burnett, CNA Insurance

Linda Butler, The Walt Disney Company

Jennifer Dragoun, M.D., Cadence Rx

Suzanne M. Emmet, Eastern Alliance Insurance Group

David Gamble, The Hartford

Michael Gavin, Injured Workers Pharmacy

Dan Hunt, D.O., AF Group

Martin T. King, Kaiser Permanente

Greg Larson, Sentry Insurance

Susan Loyd, DBA, Zurich North America

Joe Powell, Gallagher Bassett

Craig Ross, D.O., Liberty Mutual Insurance

Paul H. Sighinolfi, Ametros

John Smolk, Southern California Edison

Jacob Wein, Travelers

### **DISABILITY AND MEDICAL MANAGEMENT ADVISORY BOARD**

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Joseph Berardo, Jr., Carisk Partners

Mike Cirillo, myMatrixx, an Express Scripts Company

Daryl Corr, Healthsystems

Brett Drexelius, Metadata

Larry Emory, The Hartford

Tron Emptage, Optum

Erica Fichter, Broadspire, a Crawford Company

Kimberly George, Sedgwick

Kim Haugaard, Texas Mutual Insurance Company

Tim Jacobi, AIG

Anne Levins, Coventry, an Enlyte Company

Susan Mellody, Liberty Mutual Insurance

Joanne Moynihan, Travelers

Joseph Semkiu, D.O., FAAFP, Zurich North America

Kent Spafford, One Call

Julia Stenberg, CNA Insurance

Kevin Turner, Paradigm



# MEMBERS & SUPPORTERS <sup>1/2022</sup>

### Employers

Ahold USA  
Albertsons Companies  
American Electric Power Company  
Best Buy  
Bimbo Bakeries USA  
Chevron Corporation  
Costco Wholesale  
Kaiser Permanente  
Marriott International, Inc.  
Mayo Clinic  
Partners Healthcare  
Publix Super Markets, Inc.  
Raytheon Company  
Southern California Edison  
Stanford University  
The Sherwin-Williams Company  
The Walt Disney Company  
United Airlines  
United Parcel Service  
Walmart  
Wegmans Food Markets Inc.

### Service Providers

Ametros  
Aon Risk Services, Inc.  
Ascellus  
Bardavon  
Cadence Rx  
CCMSI  
Comprehensive Outcomes Management Technologies  
CONCENTRA, Inc.  
Conduent  
CORA Health Services, Inc.  
CorVel Corporation  
Epic Insurance Brokers  
ExamWorks Clinical Solutions  
Express Scripts  
FAIR Health, Inc.  
First MCO  
Gallagher Bassett  
GENEX Services, Inc.  
Goodman McGuffey LLP  
HOMELINK  
Horizon Casualty Services  
Injured Workers Pharmacy

Lockton Companies  
Marsh  
Maximus Federal Services, Inc.  
McConaughay, Coonrod, Pope, Weaver, & Stern P.A.  
MedRisk  
Mitchell International  
MTI America  
Nexus Medical  
Nova Medical Centers  
Omaha National  
Planned Administrators, Inc.  
Rising Medical Solutions  
Sedgwick  
Trean Corporation  
Tristar Insurance Group  
Willis Towers Watson

### Insurers

AF Group  
AIG  
American Property Casualty Insurance Association  
Atlantic Charter  
CNA Insurance  
Eastern Alliance Insurance Group  
Employers Mutual Casualty Company  
Everest National Insurance Company  
Kentucky Employers' Mutual Insurance  
Liberty Mutual Insurance  
Mitsui Sumitomo Insurance Co. of America  
New Jersey Manufacturers Insurance Company  
New Mexico Mutual  
PMA Companies  
Safety National  
Selective Insurance Company of America, Inc.  
Sentry Insurance, a Mutual Company  
Society Insurance  
SUNZ Insurance  
The Hartford  
Travelers  
Zenith Insurance Company  
Zurich North America

### Associate Members – Labor Organizations

Alabama AFL-CIO  
Canadian Union of Public Employees  
Construction Industry Service Corporation  
Directly Affiliated Local Union 24111  
Indiana AFL-CIO  
Indiana, Illinois, Iowa Foundation for Fair Contracting  
Kentucky AFL-CIO  
Massachusetts AFL-CIO  
Minnesota AFL-CIO  
Professional Fire Fighters of New Hampshire  
Tennessee AFL-CIO Labor Council  
United Steel Workers Local 1155L  
Wisconsin State AFL-CIO

### Rating Bureaus

Compensation Advisory Organization of Michigan  
Delaware Compensation Rating Bureau, Inc.  
Indiana Compensation Rating Bureau  
Massachusetts Workers' Compensation Rating & Inspection Bureau  
Minnesota Workers' Compensation Insurers Association  
New Jersey Compensation Rating & Inspection Bureau Association  
New York Compensation Insurance Rating Board  
North Carolina Rate Bureau  
Pennsylvania Compensation Rating Bureau  
Wisconsin Compensation Rating Bureau

### Associate Members – Public Sector United States

Alabama Department of Labor, Workers' Compensation Division  
Alaska Division of Workers Compensation  
Arizona Industrial Commission  
Arkansas Insurance Department  
Arkansas Workers' Compensation Commission  
California Commission on Health and Safety and Workers' Compensation  
California Division of Workers' Compensation  
Colorado Department of Labor and Employment - Workers' Compensation Division  
Connecticut Workers' Compensation Commission  
Delaware Office of Workers' Compensation  
Florida Department of Financial Services, Division of Workers' Compensation  
Georgia State Board of Workers' Compensation

Idaho Industrial Commission  
Illinois Workers' Compensation Commission  
Iowa Division of Workers' Compensation  
Kansas Department of Human Resources/ Division of Workers' Compensation  
Kentucky Department of Workers' Claims  
Louisiana Department of Insurance  
Louisiana Office of Risk Management  
Louisiana Office of Workers' Compensation Administration  
Maryland Workers' Compensation Commission  
Massachusetts Center for Health Information and Analysis  
Massachusetts Department of Industrial Accidents  
Massachusetts Human Resources Division, Workers' Compensation Section  
Massachusetts State Rating Bureau, Division of Insurance  
Michigan Workers' Compensation Agency  
Minnesota Department of Labor and Industry  
Mississippi Workers' Compensation Commission  
Missoula County Workers  
Montana Department of Labor & Industry  
National Institute for Occupational Safety and Health  
Nebraska Workers' Compensation Court  
Nevada Department of Business and Industry, Division of Industrial Relations, Workers' Compensation Section  
New Hampshire Department of Labor  
New Jersey Compensation Rating and Inspection Bureau

New Mexico Workers' Compensation Administration  
New York State Workers' Compensation Board  
Oklahoma Workers' Compensation Commission  
Oregon Department of Consumer & Business Services  
Pennsylvania Department of Labor and Industry  
Rhode Island Department of Labor & Training  
South Carolina Workers' Compensation Commission  
South Dakota Department of Labor and Regulation  
Tennessee Department of Labor  
Texas Department of Insurance, Division of Workers' Compensation  
Texas State Office of Risk Management  
United States Department of Labor  
Utah Labor Commission - Industrial Accidents Division  
Vermont Department of Labor  
Virgin Islands Department of Labor Workers' Compensation Division  
Virginia Workers' Compensation Commission  
West Virginia Offices of the Insurance Commissioner  
Wisconsin Department of Workforce Development

### Associate Members – Public Sector International

ReturntoWorkSA  
Safe Work Australia  
State Insurance Regulatory Authority (SIRA)  
WorkCover Queensland  
Workers Compensation Board of Manitoba  
Workers Compensation Independent Review Office  
WorkSafe BC  
Worksafe Safety & Insurance Board Ontario

### CompScope™ Funders

Compensation Advisory Organization of Michigan  
Delaware Compensation Rating Bureau, Inc.  
Florida Department of Financial Services, Division of Workers' Compensation  
Illinois Workers' Compensation Commission  
Indiana Compensation Rating Bureau  
Louisiana Department of Insurance  
Massachusetts Workers' Compensation Rating and Inspection Bureau  
Minnesota Workers' Compensation Insurers Association  
New Jersey Compensation Rating and Inspection Bureau  
New York Compensation Insurance Rating Board  
North Carolina Rate Bureau  
Pennsylvania Compensation Rating Bureau  
Texas Department of Insurance  
Virginia Workers' Compensation Commission  
Wisconsin Compensation Rating Bureau

### Disability and Medical Management Research Funders

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CNA Insurance  
Coventry, an Enlyte Company  
Healthesystems  
Liberty Mutual Insurance  
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