WORKERS COMPENSATION RESEARCH INSTITUTE

A Catalyst for Improving Workers' Compensation Systems



annual report 2023

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WHY WCRI?

OBJECTIVE DATA AND ANALYSIS

Founded in 1983, the Workers Compensation Research Institute (WCRI) is an independent, not-forprofit 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:



Policymakers and other system stakeholders — employers, government, healthcare providers, insurers, labor unions, and service

providers — use 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.

Aission

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.

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LETTER FROM THE PRESIDENT & CEO



Although the threat from COVID-19 has diminished, the pandemic continues to affect the economy, from inflation and shortages of goods and labor to the way we work, be it hybrid or remote. Through it all, state workers' compensation systems have endured and continued to support workers who are injured, as has WCRI.

Last year was a return to a new normal for WCRI staff post-COVID. We returned to a live conference in 2022. Although many organizations continue to refrain from nonessential travel, we enjoyed a great turnout. We also returned to hosting live advisory committee and governance meetings, as well as having WCRI staff participate in conferences.

In 2022, we published studies that were timely, such as our analysis of the patterns and use of telemedicine, and our primer on behavioral health care in workers' compensation. Our benchmarking studies also helped us keep a watchful eye on the changes that state workers' compensation systems were experiencing, including a decrease in medical utilization and longer duration of temporary disability.

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 an impact and be cited in hearings and reports. We continued to share our research findings at online and in-person conferences, webinars, and briefings to policymakers across the country.

We are well positioned to continue studying the lingering effects of the pandemic, as well as other factors influencing workers' compensation systems. In 2023, we look to publish new studies on long-COVID-19 claims, changes in how medical care is delivered and claims are affected by labor market disruptions, the impact of drug formularies, social determinants of health, consolidation of care, and prescription drug regulations.

More than ever, we are excited to continue our work and our mission to provide 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. We thank our members for their generous support of our research through their data, funding, and expertise.

Sincerely,

Jacluse

John Ruser, Ph.D. President & CEO

WHERE OUR WORK WAS USED



National: Findings from the 22nd edition of
CompScope™ Benchmarks were used in an article, Lost
time: COVID-19 indemnity claim reporting and results in
the Wisconsin workers' compensation system from MarchCalifornia: Findings from the 22nd edition of CompScope™
Benchmarks for California were used in a report, Drivers
of California Claim Duration, published by the Workers'
Compensation Insurance Rating Bureau of California.12 to December 31, 2020, published in American Journal
of Industrial Medicine.Illinois: Findings from WCRI studies (CompScope™
the Wiscons in workers)

National: Several WCRI studies (Will the Affordable Care Act Shift Claims to Workers' Compensation Payors?; Permanent Partial Disability Benefits: Interstate Differences;, Do Higher Fee Schedules Increase the Number of Workers' Compensation Cases?; Evaluation of the 2015, 2016, and 2017 Fee Schedule Changes in Delaware) were used in a report published by the National Academy of Social Insurance (NASI) titled <u>Workers' Compensation: Benefits,</u> <u>Coverage, and Costs</u>.

National: WCRI's study Correlates of Opioid Dispensing was cited in an article, <u>Pain and Prescription Opioid</u> <u>Use Among US Construction Workers: Findings From</u> <u>the 2011–2018 Medical Expenditure Panel Survey</u>, in American Journal of Public Health.

National: WCRI's study Correlates of Opioid Dispensing was cited in an article, <u>Waging a Counterattack on</u> <u>Opioids: First-dose Prevention Strategies for the</u> <u>Workplace & at Home</u>, in CFMA Building Profits.

National: WCRI's study The Early Impact of COVID-19 on Workers' Compensation Claim Composition was cited in a paper, <u>COVID-19 and Workers' Compensation:</u> <u>Considerations for Policy Makers</u>, published by RAND.

National: WCRI's study, *The Impact of Opioid Prescriptions* on Duration of Temporary Disability, was cited in an academic article, <u>Employment Outcomes for Social Security Disability</u> <u>Insurance Applicants Who Use Opioids</u>, published by the Center for Retirement Research at Boston College. Illinois: Findings from WCRI studies (*CompScope*[™] *Medical Benchmarks for Illinois, 21st Edition,* and *Designing Workers' Compensation Medical Fee Schedules, 2019*) were used in a motion to raise evaluation and management code reimbursement by 15 percent for all physicians who treat injured workers in Illinois. The motion was approved on in April 2022 by the members of the Illinois Workers' Compensation Commission's Medical Fee Advisory Committee.

Indiana: Several WCRI studies (CompScope[™] Medical Benchmarks for Indiana, 19th Edition; WCRI FlashReport: Comparing Payments to Ambulatory Surgery Centers and Hospital Outpatient Departments; Hospital Outpatient Payment Index: Interstate Variations and Policy Analysis, 8th Edition) were cited in a <u>fiscal impact statement</u> for House Bill 1153.

Louisiana: The Louisiana Senate Labor and Industrial Relations Committee considered Senate Bill 310, which would provide a cost-of-living adjustment for any injury producing the temporary total or permanent total disability of an employee. In response to the legislation, we received information requests from two members of our WCRI Louisiana Advisory Committee for any research we had on indemnity benefits in the Louisiana workers' compensation system. We provided the two members, along with all the other members of the advisory committee, with an eightpage document addressing their request, using findings from WCRI's CompScope™ Benchmarks for Louisiana, 22nd Edition, and Workers' Compensation Laws as of January 1, 2022.

RESEARCH SPOTLIGHT



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A PRIMER ON BEHAVIORAL HEALTH CARE IN WORKERS' COMPENSATION

The COVID-19 pandemic put a spotlight on the importance of behavioral health. In particular, workers' compensation stakeholders recognized that unaddressed behavioral health issues might delay a worker's recovery and return to work, and increase medical costs. This study helps to identify behavioral health issues in workers' compensation and create a common language and understanding.

For the report, the authors interviewed workers' compensation system stakeholders, including employers, insurers, labor advocates, and medical care providers. They also performed a review of occupational medical treatment guideline recommendations related to the provision of behavioral health services, as well as a literature review of studies focused on behavioral health services provided in workers' compensation systems. By combining the stakeholder perspectives with information from guidelines and literature, this report could be used to form a common understanding about behavioral health in workers' compensation.

INITIAL MEDICAL TREATMENT AT EMERGENCY DEPARTMENT OR PHYSICIAN OFFICE: INTERSTATE COMPARISONS AND EARLY COVID-19 IMPACT — A WCRI FLASHREPORT

Workers often resort to emergency departments (EDs) to receive their initial medical services after a work-related injury. For some injuries, workers may be more likely to use ED services rather than going to physician offices or urgent care clinics, which are less-costly alternatives to ED services.

This FlashReport provides fresh insights into how the use of EDs versus physician offices for initial medical services varied across states in workers' compensation in recent years. It also explores some of the factors explaining the observed interstate variation in the use of EDs by workers with various injury types and how COVID-19 affected the use of EDs as the source of initial medical services.

The study tracked evaluation and management and ED utilization patterns for workers injured in 28 states, which represent 79 percent of the workers' compensation benefits paid in the United States.

TELEMEDICINE: PATTERNS OF USE AND REIMBURSEMENT, 2020Q1–2021Q2 — A WCRI FLASHREPORT

During the height of COVID-19, multiple legislative actions at the federal and state level were being debated to streamline the process of delivering medical services via telemedicine and regulate reimbursement for telemedicine services. For these reasons, the utilization and prices of medical services delivered via telemedicine remain important measures to monitor in workers' compensation.

The FlashReport focuses on 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 first five quarters of the pandemic (primarily March 2020–June 2021) 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.

CHIROPRACTIC CARE FOR WORKERS WITH LOW BACK PAIN

As an increasing number of workers with injuries receive physical medicine treatment, of which chiropractic care may be a large part, this study describes the prevalence of chiropractic care and provider patterns of physical medicine treatment for workers with low back pain.

The study provides some evidence for how different provider patterns of physical medicine treatment are associated with variations in overall medical and indemnity costs, and the duration of temporary disability. The study also looks at the utilization of medical services, including magnetic imaging studies, opioid prescriptions, and pain management injections.

The data used for this study are from the WCRI Detailed Benchmark/Evaluation database, which includes more than 2 million open and closed claims from 28 states, with injuries from October 1, 2015, through September 30, 2017, and detailed medical transactions through March 31, 2019. The 28 states are Arkansas, California, Connecticut, Delaware, Florida, Georgia, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Nevada, New Jersey, New Mexico, New York, North Carolina, Pennsylvania, South Carolina, Tennessee, Texas, Virginia, and Wisconsin.



RESEARCH SPOTLIGHT (continued)



INTERSTATE VARIATION AND TRENDS IN WORKERS' COMPENSATION DRUG PAYMENTS: 2018Q1 TO 2021Q1 — A WCRI FLASHREPORT

This FlashReport presents data on payments for prescription drugs paid in workers' compensation for key therapeutic groups of drugs by quarter.

The study provides a high-level view of changing costs of prescription drugs in workers' compensation across 28 states. It breaks prescription drugs into groups (dermatological agents, nonsteroidal anti-inflammatory drugs, opioids, compounds, etc.) to show where workers' compensation prescribing dollars are being spent and whether spending for those groups of drugs is going up or down.

The 28 states in the study are Arkansas, California, Connecticut, Delaware, Florida, Georgia, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Nevada, New Jersey, New Mexico, New York, North Carolina, Pennsylvania, South Carolina, Tennessee, Texas, Virginia, and Wisconsin.

WORKERS' COMPENSATION LAWS AS OF JANUARY 1, 2022

This report is an essential tool to identify the similarities and distinctions between workers' compensation regulations and benefit levels in effect as of January 1, 2022, in U.S. states and Canadian provinces.

New in this edition is information about regulations addressing "presumption of causation," availability of hearings and legal proceedings virtually, and a retrospective review of the maximum weekly benefit amount for temporary total disability.

In Canada and the United States, workers' compensation is entirely under the control of sub-national legislative bodies and administrative agencies. The differences between jurisdictional laws and regulations can be subtle. This survey provides the ability to understand those differences.

The study builds on many years of valuable work by the U.S. Department of Labor that pioneered the use of a standard set of tables to promote uniformity in responses across states and consistency in reports from year to year.

COMPSCOPE™ MEDICAL BENCHMARKS, 23RD 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 23rd 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 2015 through 2020, with claims experience through March 2021.

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, Georgia, Iowa, and Tennessee.

The results reflect experience with claims through March 2021, including non-COVID-19 claims only from the early pandemic period (March–September 2020). The study, therefore, provides a look at how the pandemic affected non-COVID-19 workers' compensation claims in its early months.

DESIGNING WORKERS' COMPENSATION MEDICAL FEE SCHEDULES, 2022

The construction of a medical fee schedule in workers' compensation involves a delicate balance. Setting rates too low may make treating workers uneconomical for providers and jeopardizes workers' access to quality care. Conversely, if rates are set too high, savings will be negligible and the fee schedule will not achieve its cost containment goal.

The study shows how the 44 states with fee schedules and the District of Columbia have resolved these design choices as of March 31, 2022. The study also includes a discussion of the substantial fee schedule changes for professional medical services since February 2019.



Learn more about these studies and other important research at <u>www.wcrinet.org</u>.



STUDIES PUBLISHED IN 2022

- A Primer on Behavioral Health Care in Workers' Compensation
- Chiropractic Care for Workers with Low Back Pain
- CompScope[™] Benchmarks, 22nd Edition (14 individual studies)
- CompScope[™] Medical Benchmarks, 23rd Edition (14 individual state reports)
- Designing Workers' Compensation Medical Fee Schedules, 2022
- Hospital Outpatient Payment Index: Interstate Variations and Policy Analysis, 11th Edition
- Initial Medical Treatment at Emergency Department or Physician Office: Interstate Comparisons and Early COVID-19 Impact — A WCRI FlashReport
- Interstate Variation and Trends in Workers' Compensation Drug Payments: 2018Q1 to 2021Q1 – A WCRI FlashReport
- Monitoring Trends in the New York Workers' Compensation System, 2022 Edition
- Telemedicine: Patterns of Use and Reimbursement, 2020Q1-2021Q2 – A WCRI FlashReport
- Trends in the Delaware Workers' Compensation System, 2015–2020
- WCRI Medical Price Index for Workers' Compensation, 14th Edition (MPI-WC)
- Workers' Compensation Laws as of January 1, 2022

The Research Program

The Institute's research program helps those interested in improving workers' compensation systems by providing much-needed data and analyses that help answer these questions:

- How are workers' compensation systems performing?
- How do various state systems compare?
- How can systems better meet workers' needs?
- What factors are driving costs?
- What is the impact of legislative change on system outcomes?
- What are the possible consequences of proposed system changes?
- Are there alternative solutions that merit consideration? What are their consequences?

Too often, public policies are shaped by anecdote and emotion, not by objective evidence about current system performance or the consequences of proposed changes. As a result of WCRI research, policymakers and stakeholders can make information-based decisions that prove to be more enduring because they are more efficient, more equitable, and better designed to meet the needs of workers and employers. Specifically, WCRI research meets these important stakeholder needs:

- Measuring system results to encourage continuous improvement and move the system away from the historic cycle of crisis-reform-crisis that has frequently characterized workers' compensation in the past.
- Examining disability and medical management by evaluating and measuring the outcomes of medical care. These studies provide regulators with information about managing workplace injuries, what regulatory barriers are unnecessary or counterproductive, and what regulatory protections are needed for injured workers to ensure quality outcomes. These studies also help guide business decisions.
 - Identifying system features that improve performance or drive costs and quantifying their impact on system performance. These studies focus attention on system strengths and opportunities for improvement. They also provide lessons from successful states that other states may follow.

PRESENTATIONS & EDUCATION

EDUCATING DIVERSE GROUPS

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

- California Division of Workers' Compensation
- Illinois Workers' Compensation Commission
- Indiana Compensation Rating Bureau
- International Association of Industrial Accident Boards and Commissions
- Louisiana Department of Insurance •
- Louisiana Office of Workers Compensation
- Louisiana State Legislature
- Louisiana Workers' Compensation Corporation
- Massachusetts Department of Public Health
- Massachusetts Nurses Association
- Michigan State University
- Midwest Employers Casualty Co.
- National Association of Mutual Insurance Companies
- National Institute for Occupational Safety and Health (NIOSH)
- New Jersey Compensation Rating & Inspection Bureau
- New Mexico Workers' Compensation Administration
- New York State Workers' Compensation Board
- North Carolina Rate Bureau
- United States Virgin Islands Department of Labor
- University of Chicago Booth School of Business
- Wisconsin Department of Health Services
- Workers' Compensation Insurance Rating Bureau of California®

Like all of WCRI's research, studies are free for members and can be downloaded from our website: www.wcrinet.org. salth Insurance and Outcomes of Injured Workers

WCRI

RESEARCH PRESENTED

This is a sample of the events and venues we were invited to present at during the past year.

- 2022 American Society of Workers' **Compensation Professionals Annual** Meeting
- 2022 Express Scripts Outcomes Conference
- 2022 International Association of Industrial Accident Boards and Commissions Forum
- 2022 North Carolina Association of Self-Insurers' Annual Conference

- 2022 Ohio Safety Congress & Expo
- 2022 Workers' Injury Law & Advocacy Group Annual Convention
- NIOSH webinar about "Evaluating the Impact of COVID-19 Using Workers' **Compensation Systems**"
- Occupational Risk Prevention Conference 2022
- Pennsylvania Self Insurers' Association 2022 Annual Meeting

PRESENTATIONS & EDUCATION (continued)



<u>CLICK HERE</u> to view photos from and articles written about the conference.

2022 ANNUAL CONFERENCE

It was great to be back in person. You could tell from the more than 350 people in attendance that the feeling was definitely mutual.

As usual, WCRI's two-day program highlighted the Institute's latest research while drawing upon the diverse perspectives of highly respected workers' compensation experts and policymakers from across the country. These are among the topics the conference addressed:

- Impact of COVID-19 on the workplace
- Medical marijuana: legalization, reimbursement, and impairment
- Vaccines, variants, and long-term medical effects of COVID-19
- Effect of consolidation and integration of medical care on medical prices
- Latest WCRI research on drug formularies, chiropractic care, and the delivery of medical care
- Selected findings and trends seen across WCRI's benchmarking studies

WEBINARS

- Brown University School of Public Health's Long COVID-19 Initiative (number registered: 646)
- Interstate Variation and Trends in Workers' Compensation Drug Payments: 2018Q1 to 2021Q1 — A WCRI FlashReport (number registered: 565)
- Behavioral Health in Workers' Compensation (number registered: 354)
- Delaware Workers' Compensation System (number registered: 194)
- Patterns and Outcomes of Chiropractic Care (number registered: 160)

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 2022, videos on our YouTube channel received more than 8,624 individual views. In addition to video clips for each of our studies, our YouTube channel includes videos about the benefits of becoming a member of WCRI and attending our annual conference.

All our videos can be viewed on our YouTube channel or website at www.wcrinet.org.

THE IMPACT OF SOCIALMEDIA

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

SAMPLE TWEETS ABOUT WCRI:

Ashley Smith, MBA • 3rd+ mo · 🕤

+ Follow Sales Director for Case Management Solutions. In

Had a great time last week at the 38th Annual WCRI Issues and Research Conference! They touched on some great topics and provide great networking opportunities for all in attendance. Already looking forward to next year's conference

#wcri #conference #boston #workerscompensation #riskmanagem #networking #insurance #claimsmanagement







Ever wonder what prevalence #chiropracticcare has on a claim? WCRI has conducted a long term study that notes chiropractic care can lead to lower workers compensation costs. This is especially relevant for states where employees

can choose their providers. Find out more about the study below: Business Insurance #workerscompensation #providers #chiropractic

#chiropracto



Chiropractic care can lead to lower comp costs: WCRI - Business Insurance urance.com • 1 min read

WCRI: Use of Telemedicine for E&M Services Still Higher in 2021 than Prior to the Pandemic, but Physical Medicine Closer to the Pre-Pandemic Level: https://buff.ly/3yfggEJ. #workerscomp #risk



WCRI: Use of Telemedicine for E&M Services Still Higher in 2021 than Prior to the Pandemic, but Physical Medicine Closer to the Pre-Pandemic Level



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.































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AT A GLANCE

17,615 EMAIL LIST SUBSCRIBERS

7,817 SOCIAL MEDIA FOLLOWERS



1,919

WEBINAR REGISTRATIONS

8,624 VIDEOS WATCHED ON OUR

YOUTUBE CHANNEL



473 NUMBER OF PRESS

MENTIONS









116 **BRIEFINGS AND PRESENTATIONS** TO EXTERNAL AUDIENCES



39 STUDIES PUBLISHED

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, Greater Boston Food Bank, and Tailored For Success, Inc.

In late September, WCRI staff volunteered at the Mass Audubon's Habitat Education Center & Wildlife Sanctuary, where they tackled various gardening tasks, including weeding and sweeping accessible paths.



GIVING BACK

WCRI donates \$2 to **Kids' Chance** for every completed post-webinar and conference feedback survey resulting in more than \$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.

MEMBER SPOTLIGHT

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

"WHAT VALUE DO YOU DERIVE FROM BEING A MEMBER OF WCRI?"

GOVERNMENT

NSURER

LABOR

"The research is fact-based and unbiased. Having access to the research studies and trend analyses that have been conducted over the years is extremely helpful. In addition, the opportunity to engage with WCRI staff during webinars is insightful. Participants are given the chance to ask specific questions about the research findings presented. The thoughtful exchange with colleagues in the workers' compensation industry is always a great learning experience. WCRI consistently provides information that is useful to those in the workers' compensation industry."

Sheri Bowles of the Massachusetts Department of Industrial Accidents

EMPLOYER

"I have an engineering degree. When I first started at American Electric Power, it was as an engineer. It was later on that I moved into human resources. As an engineer, I am a data-oriented individual so I welcome the data that WCRI provides. Not only that, but it's hard to get national data together for workers' compensation, which is why I find WCRI's research so helpful."

Loyd Hudson of American Electric Power

"In my current role at AIG, I frequently interact with legislators and regulators at the state workers' compensation regulatory level, and various state departments of insurance. Those individuals and agencies probably talk and ask more questions about workers' compensation than most industry professionals realize. Many times, I am called upon to respond to or answer their questions. The WCRI reports help me bring a big-picture perspective to what is considered by state legislators and regulators to be a local problem." Tom Glasson of AIG

"The value WCRI has provided has been immeasurable to both the 8,000 union contractors who bear the cost of workers' compensation and the 140,000 union workers who receive benefits if injured. Sharing WCRI study data on costs, and comparison charts relating to other states, has helped to strengthen labor and management's commitment to preventing injuries and shortening recovery periods. Both sides embrace increased safety training, resulting in a more competitive business practice, and — most importantly — ensuring all workers return home safely to their loved ones."

Dan Allen of Construction Industry Service Corporation

Read the full versions of these interviews at wwwwcrinet.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

Russell J. Pass, Gallagher Bassett - Chair Joseph Wells, Everest Insurance - Vice Chair Michele Adams, Walmart - Vice Chair Paul Kearney, AF Group Tom Glasson, AIG Denise Zoe Algire, Albertsons Companies Steven A. Bennett, American Property Casualty Insurance Association Debra Kane, CNA Insurance Matthew Massaro, The Hartford Financial Services Group, Inc. Jon Stewart, Kentucky Employers Mutual Insurance Virna Alexander, Liberty Mutual Insurance Steve Perroots, Marriott International, Inc. Kevin Brady, The PMA Insurance Group Kimberly George, Sedgwick Diana Haven, Stanford University **Richard Ives, The Travelers Companies** Joan Vincenz, United Airlines Neil DeBlock, Zurich North America

Russell I. Pass Gallagher Bassett - Chair

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MEMBERS & SUPPORTERS

Employers

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

Service Providers

Ametros Aon Risk Services, Inc. Ascellus Bardavon Cadence Rx CCMSI CCONCENTRA Inc. Conduent CorVel Corporation Epic Insurance Brokers ExamWorks Clinical Solutions ExpressScripts/myMatrixx FAIR Health, Inc. First MCO FTI Consulting Gain Live Inc. Gallagher Bassett Services, Inc. Goodman McGuffey LLP HOMELINK Horizon Casualty Services Injured Workers Pharmacy, LLC Integrated Medical Case Solutions

Intercare Holdings lvv Rehab

Lockton Companies Marsh McConnaughhay, Coonrod, Pope, Weaver, & Stern, P.A. MedRisk Mitchell International MTI America Nexus Medical Nova Medical Centers Omaha National **Rising Medical Solutions** Sedgwick Shirley Ryan AbilityLab Tenent Healthcare Trean Corporation Tristar Insurance Group

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** Hanover Insurance The Hartford Insurance Group Kentucky Employers' Mutual Insurance Liberty Mutual Group 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 Travelers Companies 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 Indiana Compensation Rating Bureau Massachusetts Workers' Compensation Rating & Inspection Bureau Minnesota Workers' Compensation Insurers Association New Jersey Compensation Rating & Inspection Bureau 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 City and County of San Francisco 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 Montana Department of Labor & Industry Montana Self-Insurers 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 Oregon Department of Consumer & Business Services Pennsylvania Department of Labor and Industry Rhode Island Department of Labor and 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 United States Postal Service Office of the Inspector General 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

WorkSafe BC Worksafe Safety and Insurance Board Ontario Worksafe Victoria ReturntoWorkSA State Insurance Regulatory Authority WorkCover Queensland Workers Compensation Board of Manitoba Workers Compensation Independent Review Office

CompScope™ Funders

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