

Composite of Illinois Workers' Compensation Claims

2023

The Illinois Department of Insurance ("Department") collects claim-specific data from insurers licensed to sell workers' compensation coverage in the State on an aggregate basis as outlined in Section 29.2(b) of the Illinois Workers' Compensation Act. This is a composite of the responses the Department received for the period January 1, 2022 through December 31, 2022.

- ◆ A total of 114,379 workers' compensation claims were opened during 2022. Companies were notified that the employee had attorney representation in 14.3 percent of these opened claims.
- ◆ Of the opened claims, a total of 76,092 (66.5 percent of total claims) were medical-only claims. Medical-only claims are defined as any request for recovery that was limited to medical expenses only.
- ◆ Of the opened claims, a total of 14,222 (12.4 percent of total claims) were contested claims. Contested claims are defined as any claim in which resolution was delayed due to a dispute regarding policy language or in which litigation was involved.
- ◆ There were 33,295 claims that included lost work by the insured claimant. Companies report 34.5 percent of these claims were not paid within 14 days from the first full day off, regardless of reason. Below is a breakdown of the claims with lost time:
 - ◇ 9,897 (29.7 percent) involved a loss of less than 3 working days
 - ◇ 6,530 (19.6 percent) involved a loss of between 3 and 14 working days
 - ◇ 16,868 (50.7 percent) involved a loss of greater than 14 working days
- ◆ An average of 16.3 hours per claim was spent adjusting workers' compensation claims.
- ◆ A total of 305 companies reported paying medical bills 60 days or later from the date of service with an average of 992 days paid on those medical bills paid after 60 days.
- ◆ The average cost per claim for claims in which in-house defense counsel participated was \$1,572, and the average cost per claim for claims in which outside defense counsel participated was \$2,908.
- ◆ The amount billed to employers totaled:
 - ◇ \$20,079,440 for bill review
 - ◇ \$96,439,059 for fee schedule savings
 - ◇ \$17,617,645 for any and all managed care fees
- ◆ A total of \$2,889,993 was spent on 3,800 claims involving in-house medical nurse case management which is an average of \$761 per claim. A total of \$25,214,212 was spent on 12,321 claims involving outside medical nurse case management which is an average of \$2,046 per claim.
- ◆ The amount paid for all Independent Medical exams totaled \$27,070,720.
- ◆ A total of 66 companies spent \$2,069,369 on in-house Utilization Review compared to 186 companies that paid \$8,321,223 for outside Utilization Review.