

Composite of Illinois Workers' Compensation Claims 2024

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, 2023 through December 31, 2023.

- ◆ A total of 106,196 workers’ compensation claims were opened during 2023. Companies were notified that the employee had attorney representation in 16.1 percent of these opened claims.
- ◆ Of the opened claims, a total of 64,696 (60.9 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 11,926 (11.2 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 34,933 claims that included lost work by the insured claimant. Companies report 33.5 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:
 - ◇ 12,224 (35.0 percent) involved a loss of less than 3 working days
 - ◇ 5,523 (15.8 percent) involved a loss of between 3 and 14 working days
 - ◇ 17,186 (49.2 percent) involved a loss of greater than 14 working days
- ◆ An average of 12.6 hours per claim was spent adjusting workers' compensation claims.
- ◆ A total of 303 companies reported paying medical bills 60 days or later from the date of service with an average of 430 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 \$1,599, and the average cost per claim for claims in which outside defense counsel participated was \$2,980.
- ◆ The amount billed to employers totaled:
 - ◇ \$27,816,261 for bill review
 - ◇ \$25,743,142 for fee schedule savings
 - ◇ \$18,477,340 for any and all managed care fees
- ◆ A total of \$3,393,560 was spent on 3,160 claims involving in-house medical nurse case management which is an average of \$1,074 per claim. A total of \$27,227,410 was spent on 25,894 claims involving outside medical nurse case management which is an average of \$1,051 per claim.
- ◆ The amount paid for all Independent Medical exams totaled \$30,561,585.
- ◆ A total of 61 companies spent \$2,070,613 on in-house Utilization Review compared to 173 companies that paid \$3,831,942 for outside Utilization Review.