Composite of Illinois Workers' Compensation Claims 2022

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, 2021 through December 31, 2021.

- ◆ A total of 101,885 workers' compensation claims were opened during 2021. Companies were notified that the employee had attorney representation in 16.7 percent of these opened claims.
- ◆ Of the opened claims, a total of 61,289 (60.2 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 11,116 (10.9 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 32,209 claims that included lost work by the insured claimant. Companies report 38.5 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:
 - ♦ 9,433 (29.3 percent) involved a loss of less than 3 working days
 - ♦ 6,570 (20.4 percent) involved a loss of between 3 and 14 working days
 - ♦ 16,206 (50.3 percent) involved a loss of greater than 14 working days
- ♦ An average of 14.3 hours per claim was spent adjusting workers' compensation claims.
- ♦ A total of 284 companies reported paying medical bills 60 days or later from the date of service with an average of 452 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 \$1,680, and the average cost per claim for claims in which outside defense counsel participated was \$2,915.
- ♦ The amount billed to employers totaled:
 - ♦ \$21,256,259 for bill review
 - ♦ \$30,205,930 for fee schedule savings
 - \$20,026,211 for any and all managed care fees
- ♦ A total of \$2,702,768 was spent on 3,504 claims involving in-house medical nurse case management which is an average of \$771 per claim. A total of \$21,940,694 was spent on 11,080 claims involving outside medical nurse case management which is an average of \$1,980 per claim.
- ♦ The amount paid for all Independent Medical exams totaled \$23,175,621.
- ♦ A total of 60 companies spent \$2,216,890 on in-house Utilization Review compared to 176 companies that paid \$6,971,345 for outside Utilization Review.