

Approved AWD Date 3-23-90

MINUTES OF THE House COMMITTEE ON Labor & Industry

The meeting was called to order by Representative Arthur Douville at
Chairperson

9:08 a.m./p.m. on March 15, 1990 in room 526-S of the Capitol.

All members were present except:
Representative Hensley - Excused

Committee staff present:
Jerry Donaldson - Legislative Research Department
Jim Wilson - Revisor of Statutes' Office
Kay Johnson - Committee Secretary

Conferees appearing before the committee:
Larry McGill - Executive Vice President, Independent Insurance Agents of Kansas
Dr. Phillip Baker - Topeka physician
Julia Self - Manager, Work Fitness Center of Topeka
Kelly Waldo - Executive Director, Kansas Chiropractic Association
Robert Anderson - Director, Division of Workers Compensation

The meeting was called to order at 9:08 a.m. by Chairman Douville.

HB 3069 - Workers compensation act, administration thereof and benefits provided thereunder.

Larry McGill testified in support of HB 3069 citing concerns about the cost of workers compensation coverage in Kansas, attachment #1. If the fee schedule is fair, neither below market or above it, then doctor participation will be good.

Representative Patrick asked if the employer has the right to choose the health care provider, why regulate fees? Mr. Magill responded it would be better for the state to legislate the fees instead of all employers across the state contracting individually with health care providers.

Referring to the 22.6% increase requested by the National Council on Compensation Insurance, Representative Webb asked if insurance carriers are losing money now on workers compensation insurance? Mr. Magill agreed and stated his concern about the number of carriers who will voluntarily offer workers compensation insurance.

Dr. Phillip Baker, a Topeka physician with 20 years experience in workers compensation, testified as an opponent of HB 3069. Using the example of a person injured at home compared with the same injury at work, he stated the administrative work involved in the work injury is phenomenal. He said for just an office fee many physicians would rather not be involved.

Chairman Douville asked if he had lost money in handling workers compensation cases as compared to private cases. Dr. Baker responded yes.

Representative Lane asked if Dr. Baker handled Blue Cross/Blue Shield cases and don't they have a fixed schedule. Dr. Baker responded yes, he handles Blue Cross/Blue Shield cases, but as time goes by it will be a losing proposition as there is no reimbursement for the bureaucracy of the system.

Representative Schauf asked if Dr. Baker had any suggestions on how to address the bureaucracy. He responded that a system is needed to control the provider, control the tests, etc.

Representative Buehler asked if it was more difficult to get a workers compensation patient well than a person who was injured at home. Dr. Baker responded yes.

Representative O'Neal asked what Dr. Baker charges for a report. Dr. Baker said a 2-3 page report would cost from \$25-\$50. However, a lengthy patient report that takes 2 nights to read might cost between \$200-\$400. Asked what he would charge if deposed, Dr. Baker responded between \$150-\$250.

Unless specifically noted, the individual remarks recorded herein have not been transcribed verbatim. Individual remarks as reported herein have not been submitted to the individuals appearing before the committee for editing or corrections.

CONTINUATION SHEET

MINUTES OF THE House COMMITTEE ON Labor & Industry,
room 526-S, Statehouse, at 9:08 a.m./~~p.m.~~ on March 15, 1990.

Chairman Douville asked about bad debt experience. Dr. Baker responded that he does have experience with bad debts, but not with workers compensation cases.

Julia Self testified on HB 3069, attachment #2. She stated that she believes in a medical fee schedule but there should be a consultation fee for the extra work on long-term patient cases. She also stated that utilization review should run concurrent with therapy and a Vocational Rehabilitation Specialist should be involved.

Representative Whiteman asked if Ms. Self had any statistics on the average cost to the employer for providing vocational rehabilitation. Ms. Self responded no.

Kelly Waldo addressed the committee in support of HB 3069. She stated the Kansas Chiropractic Association is in favor of the bill, with the amendments as proposed by Director Robert Anderson.

Robert Anderson addressed the committee to explain the balloon amendment to HB 3069 that he is proposing, attachment #3. The first change is to insert the word "physician" for "health care provider". This is based on action the committee took on a previous bill. Also, on page 7 where it talks about maximum fees, insert the words "at existing PPO charge rates of Blue Cross/Blue Shield, Inc. of Kansas". 96%-97% of doctors are using the BC/BS rates now, so if we set the rates at that level there won't be a problem with doctors dropping out. Director Anderson clarified the purpose for the amendment: not to change anything that is already in existence, but to ensure that no matter who has the Director's position, there will be no improprieties.

Representative Whiteman asked if there are other places in the law stating the Director can impose penalties. Director Anderson responded yes.

Chairman Douville said the hearing on HB 3069 would continue tomorrow.

Lori Callahan, Legislative Counsel, American Insurance Association and Harold Riehm, Executive Director, Kansas Association of Osteopathic Medecin submitted written testimony but did not appear before the committee, attachments #4 and #5.

The meeting adjourned at 9:55 a.m. The next meeting of the committee is scheduled for Friday, March 16, 1990 at 9:00 a.m. in room 526-S.

GUEST LIST

COMMITTEE: HOUSE LABOR & INDUSTRY

DATE: 03-15-90

NAME	ADDRESS	COMPANY/ORGANIZATION
Lori Callahan	Topeka	AM. IND. ASSOC.
John M. Ostrowski	Topeka	AFL-CIO
Harold Lieman	Topeka	Ks. Assoc. of Estheticians
Harry D. ...	"	KS AFL-CIO
Wayne Mueckel	"	" " "
Terry Leatherman	"	KCCI
S. B. Sifers	M. H. Ks.	
Steve Dickson	Topeka, KS	KCA
LARRY MAGILL	"	IIAK
Gary Counselmer, DC	Topeka, IS	KCA
Kelly Waldo	Topeka	KCA
Bob Anderson	"	KCA
Robert A. Anderson	Topeka	Director, Division of Work Comp
Phillip L. Baker	Topeka	Ortho Assoc. PA.
David A. Hawley	Wichita	Ks. Comm. for Small Business
Art Brown	K.C. mo	Ks. Union Dealers
Minatban	Topeka, KS	Int'l - Algon
Ulan	Topeka	KCA
Bill Curtis	Topeka	Ks. Assoc. of School Bks.
Charles ...	Topeka	Ks. Foundation for Medical Care
Chris Wheeler	Topeka	Ks. Medical Society
Coland Smith	Wichita	WIBA
Jan ...	Topeka	Ks. Ins. Dept
A. M. ...	Topeka	KAMFT

Testimony on HB 3069
Before the House Labor and Industry Committee
March 15, 1990
By: Larry W. Magill, Jr., Executive Vice President
Independent Insurance Agents of Kansas

Thank you, Mr. Chairman, and members of the committee for this opportunity to appear in support of HB 3069. We are very concerned about the cost of workers' compensation coverage in Kansas, particularly in light of the pending 22.6% rate increase requested by the National Council on Compensation Insurance.

We had an independent agent representative on the Director's task force to evaluate medical cost containment and fee schedules in workers' compensation.

Further, our members are convinced that there is cost shifting going on where the same injuries cost more under the workers' compensation system than they do under other third-party payer systems.

We would like to offer the following comments about the workers' compensation system that are relevant to the committee's consideration of a fee schedule:

*The workers' compensation system is a blank check for medical expenses waiting to be cashed. There is no deductible, no coinsurance, no utilization review and no direct employer involvement. It is a statutorily established entitlement program for the employee and an absolute obligation of the employer.

*The workers' compensation system builds in incentives to increase costs. The more medical expenses an injured worker incurs, the more indemnity will be paid. That is not true in the group health insurance area.

*The workers' compensation market is highly fragmented. There is no Blue Cross/Blue Shield in workers' compensation that controls 30-40% of the market. The largest voluntary writer of workers' compensation in Kansas in 1987 was the Travelers, who had 9.5% of the market and it falls off rapidly from there. This fragmentation makes cost control extremely difficult and expensive.

House Labor & Industry
Attachment #1
03-15-90

*The workers' compensation system is a more attractive payment vehicle to the employee. As more cost control measures are placed on group insurance, it becomes significantly more beneficial to make an injury work-related.

*Workers' compensation medical costs in Kansas according to the director, are running 45-50% of total claims payments. NCCI has indicated they should be in the range of 30-40%.

*The current reasonable test in the statute does not work. State law mandates 100% payment. Neither the employee, the employer or their insurance agent are happy, in our experience, when the employee is dunned by the health care provider for excess medical costs that an insurance company refuses to pay under the "reasonable" test.

To our knowledge, the Aetna is the only carrier that has attempted to use a reasonable and customary standard in Kansas, primarily because they are one of the largest writers of workers' compensation nationwide and also a large writer of health insurance coverages, which gives them a good reasonable and customary database. By its very nature, a reasonable approach is an "after the fact" solution that causes more problems than knowing in advance what will be paid. In group insurance, the employee simply pays the difference between reasonable and customary and what his or her health care provider charges and possibly finds a less expensive provider.

We do not believe a fee schedule should be below "market". We just do not think it should be above it either. We would be happy using Blue Cross/Blue Shield's reasonable and customary database or any other approach that satisfies health care providers that it will not become like Medicare or Medicaid.

We believe under these circumstances that doctor participation with workers' compensation claims will be good. Doctors are a part of their community. We don't think they will turn away injured workers any more than they turn away Medicare patients - especially if the fee schedule is fair.

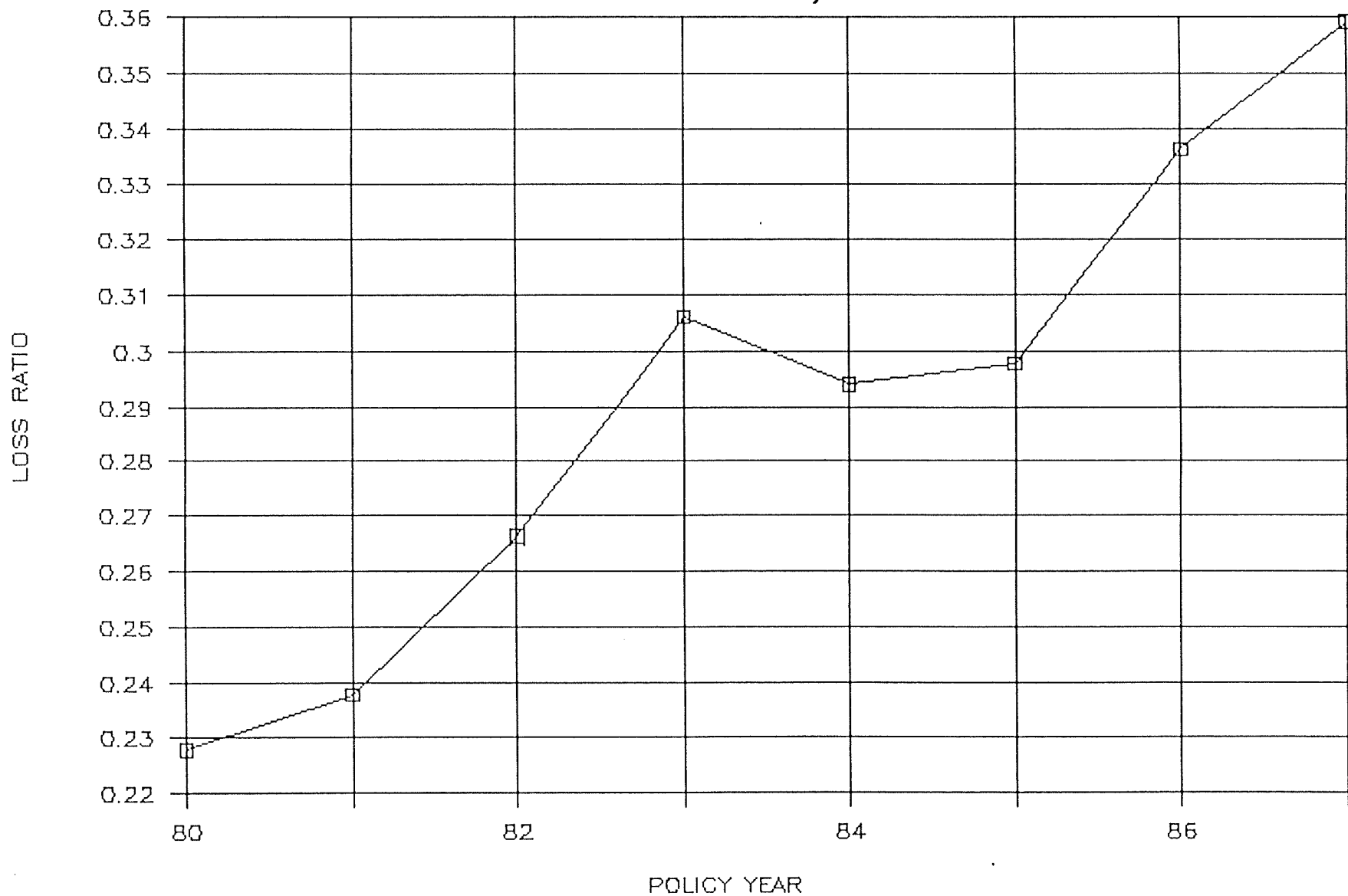
Twenty states already have fee schedules. A study by the Alliance of American Insurers showed that automated fee schedule reviews produced 14% overall savings and utilization review produced 10% savings on hospital

charges.

Kansas needs to enact HB 3069 to remain competitive in the economic development arena. We urge this committee to act favorably on the bill.

HISTORICAL LOSS RATIOS—KANSAS

Medical Paid—Policy Year

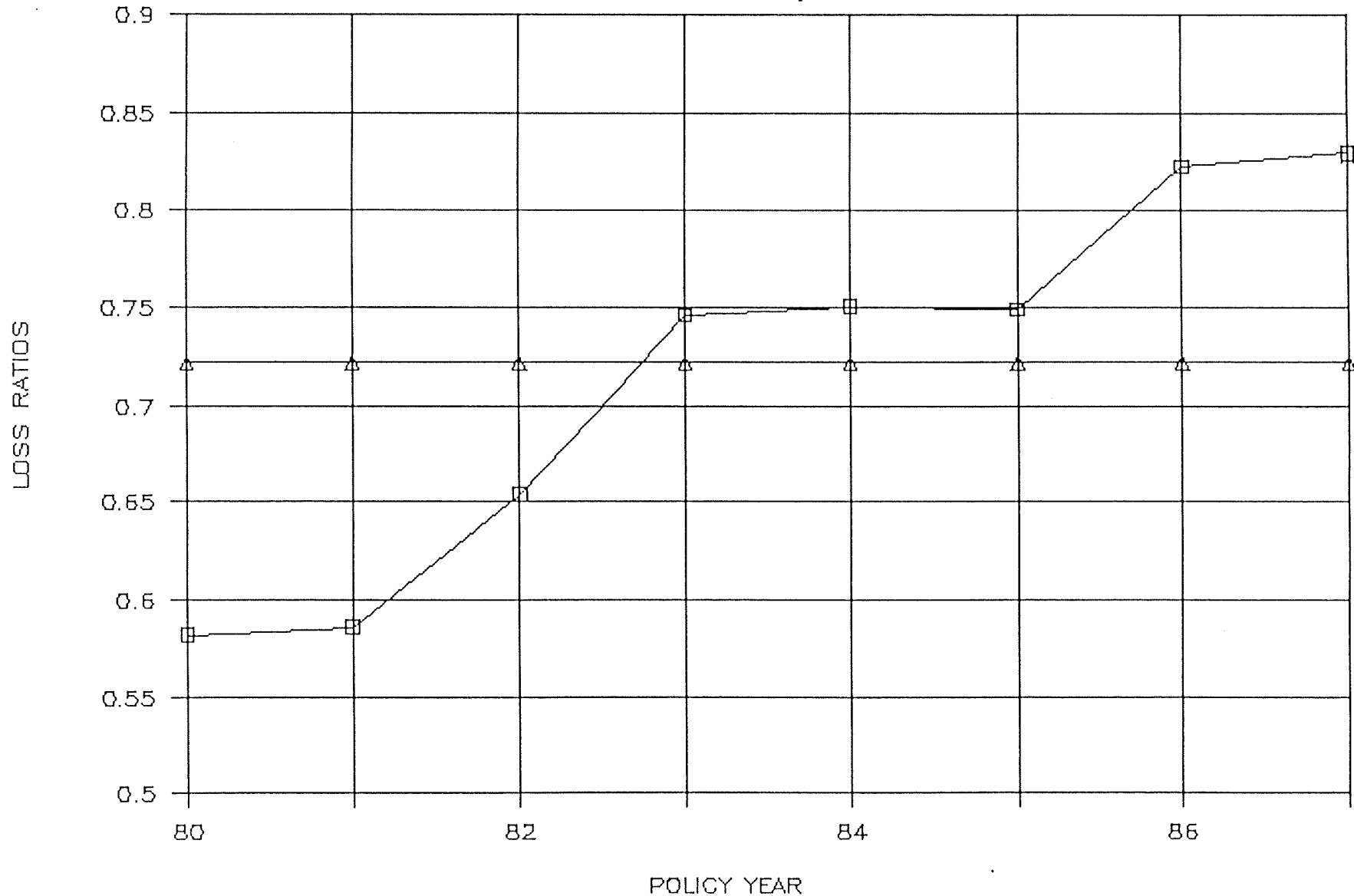


NOTES:

1. Premiums in loss ratio are what would have been earned under current rates.
2. Indicated losses are under current law.

HISTORICAL LOSS RATIOS—KANSAS

Ind & Med — Policy Year

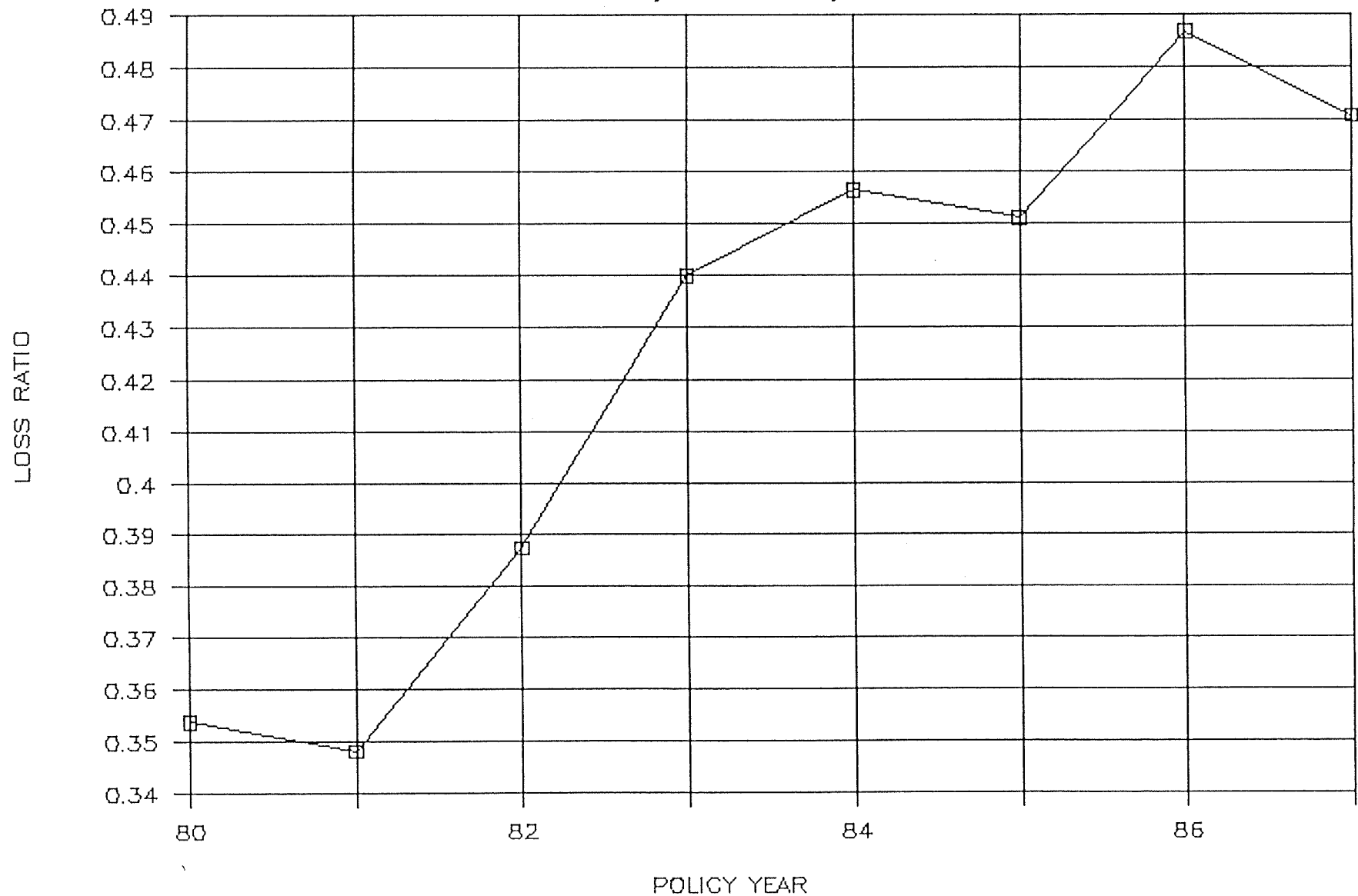


NOTES:

1. Premiums in loss ratio are what would have been earned under current rates.
2. Indicated losses are under current law.
3. Target loss ratio is .722.

HISTORICAL LOSS RATIOS—KANSAS

Indemnity Paid—Policy Year



NOTES:

1. Premiums in loss ratio are what would have been earned under current rates.
2. Indicated losses are under current law.

WORK FITNESS CENTER OF TOPEKA
Suite 406 - 634 Mulvane
Topeka, Kansas 66606

Speaker: Julia K. Self, R.N., Manager

MEDICAL FEE SCHEDULE AND UTILIZATION REVIEW

I feel we are missing the boat/the focus.

Medical fee schedules for most vendors provides consistency in our regulated system. Most vendors provide similiar services, such as seen with physical therapy, work reconditioning programs, vocational rehabilitation. I do feel that physicians may be the exception, in that they are the center of the wheel. All vendors may need consultation with the physician, so consultation visits, phone calls, or written communications should at least be considered in setting fee schedules for all vendors and expect this to be used frequently by centralized vendors.

However, medical fee scheduling is not as important as cost containment as use of utilization review. Utilization review should run concurrent with therapy. Utilization review after treatment leads to adversarial differences between vendors and insurance companies. We have given a lot of time and thought to this and hope we have come up with a solution. We are initiating weekly planning meetings to plan the progression of the client. Persons invited to attend these 15 minute sessions include the client, the employer, the insurance claims representative, the

Rehabilitation Specialist, the physician, Vocational Rehabilitation Specialist and others involved, i.e. parties approved by the client, etc. Our own team consists of an Occupational therapist, Physical Therapist, Certified Physical Therapy Assistants to assist us with focus from diverse disciplines. We are in the final stages of contracting with a local Vocational Rehabilitation Specialist to be present and provide assistance in cases showing early signs of difficult case resolution. We have provided a speaker phone to use with persons unable to attend except by conference phone. Minutes will be taken regarding attendance and decisions made. Part of the check list includes prognosis relating to expected date of return to work, as well as cost efficiency and effectiveness/cost containment questions.

Some ideas we use as part of cost containment are consideration of home treatment after 2-3 weeks in work reconditioning with periodic supervision by a therapist for objective test reporting; as well as early return to restricted duty after the worker advances and plateaus at 4 hours. We spend much time doing "marketing" with education of employers on the benefits of retaining the worker, of providing restricted duty - even on a temporary basis during the worker's recovery and case resolution. This prevents the worker from deconditioning. It also allows the worker to feel a more normal separation from the company and his/her peers as he/she transfers to a job that parallels his/her work capabilities.

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Here, in Topeka, we encourage employers to help recovered workers not able to return to restricted duty for whatever reason to retain their conditioning by 3 month memberships in the YWCA during the vocational rehabilitation assessment period. An alternative offer we make to the employer is to monitor the home therapy sessions every 2-4 weeks, depending on client needs and company approval.

One area in which I feel we, the Workers Compensation System, is weak - the vocational rehabilitation needs to be involved at the start of the work reconditioning program. Clients come to us in anger regarding their injury and loss of income, and with fear regarding possible loss of their job. In many instances, they become isolated from peers at work or their managers/immediate supervisors who promote feelings of self-work/company "family" relationships. The majority of our clients are suspicious of us as being company representatives. Our in-take process is crucial to enhancing the recovery, especially early recovery, of the worker. They need to know the company does not plan to abandon them if their injuries keep them from returning to their job. That does not mean they can always retain the employee. Employees realize this is at times unrealistic. But, they do want to trust their employer to be fair in providing therapy and helping locate new jobs.

Page 4 - HB 3069

We normally begin with 2-4 days of two hour sessions based on the client's endurance. In most cases, we have the client begin in the morning. However, the client could return home to rest, then meet with the vocational rehabilitation specialist to begin that process. This need only to be with the more serious cases if the insurance company chooses, but I honestly believe early intervention by vocational rehabilitation is one of the missing keys. Vocational Rehabilitation Specialists assisting with intake convey "we are a team, provided by your employer to help see you through this crisis," can enhance the worker's healing and early return to job or maximized improvement and minimize dollars spent from a frustrated worker choosing avenues in which his/her needs are at least recognized.- Listening to the client, providing crisis intervention, i.e., providing resources to help in financial budgeting such as Shawnee County Mental Health Association who would pro-rate down to \$2.00 per hour to assist with budget planning, etc., asking churches/school districts for volunteer babysitting. Vocational rehabilitation need only charge for time in assisting with client care/team meetings.

Within 2-4 weeks, therapists can provide a fair estimate of the client's course of recovery/ability to return to job. If client appears to be able to do so, the vocational rehab can back off and await developments.

If client appears not able to return to job and the insurance claims department/rehabilitation specialist has not found a modified or new position within the company, the vocational rehabilitation specialist can begin testing concurrently with therapy so that time is saved for the vocational assessment. By having established an initial rapport with the client at in-take, the vocational rehabilitation specialist is accomplishing:

1. Trust in the employer, that the client has not been abandoned.
2. Education/assistance to the employee that relieves stress which enhances early maximum recovery.
3. Early assessment for those needing vocational rehabilitation training, so dollars are saved.

Thank you sincerely for providing me with an avenue to propose ideas that can enhance the care of our injured workers. I want to end with my understanding of what our mission in the Workers Compensation should be - that of extending the employer's caring arm beyond what he/she is physically capable of doing when one of his/her professional "family" has a crisis.

Thank you,
Julia (Sey)

HOUSE BILL No. 3069

By Committee on Labor and Industry

2-21

9 AN ACT concerning the workers compensation act; relating to the
10 administration thereof and benefits provided thereunder; amend-
11 ing K.S.A. 44-515, 44-516, 44-518, 44-519, 44-551, 44-5a04 and
12 44-5a18 and K.S.A. 1989 Supp. 44-501, 44-508, 44-510, 44-510c,
13 44-510e, 44-510g, 44-512a, 44-528 and 44-556 and repealing the
14 existing sections.
15

16 *Be it enacted by the Legislature of the State of Kansas:*

17 Section 1. K.S.A. 1989 Supp. 44-501 is hereby amended to read
18 as follows: 44-501. (a) If in any employment to which the workers
19 compensation act applies, personal injury by accident arising out of
20 and in the course of employment is caused to an employee, the
21 employer shall be liable to pay compensation to the employee in
22 accordance with the provisions of the workers compensation act. In
23 proceedings under the workers compensation act, the burden of proof
24 shall be on the claimant to establish the claimant's right to an award
25 of compensation and to prove the various conditions on which the
26 claimant's right depends. In determining whether the claimant has
27 satisfied this burden of proof, the trier of fact shall consider the
2 whole record.

29 (b) Except as provided in the workers compensation act, no em-
30 ployer, or other employee of such employer, shall be liable for any
31 injury for which compensation is recoverable under the workers
32 compensation act nor shall an employer be liable to any third party
33 for any injury or death of an employee which was caused under
34 circumstances creating a legal liability against a third party and for
35 which workers compensation is payable by such employer.

36 (c) Except for liability for medical compensation, as provided for
37 in K.S.A. 44-510 and amendments thereto, the employer shall not
38 be liable under the workers compensation act in respect of any injury
39 which does not disable the employee for a period of at least one
40 week from earning full wages at the work at which the employee is
41 employed.

42 (d) If it is proved that the injury to the employee results from
43 the employee's deliberate intention to cause such injury, or from

1 the employee's willful failure to use a guard or protection against
 2 accident required pursuant to any statute and provided for the em-
 3 ployee, or a reasonable and proper guard and protection voluntarily
 4 furnished the employee by the employer, or substantially from the
 5 employee's intoxication, any compensation in respect to that injury
 6 shall be disallowed. The employer shall not be liable under the
 7 workers compensation act where the injury, disability or death was
 8 substantially caused by the employee's use of any drugs, chemicals
 9 or any other compounds or substances, including but not limited to,
 10 any form or type of narcotic drugs, marijuana, stimulants, depressants
 11 or hallucinogens, except such drugs or medications which are avail-
 12 able to the public without a prescription from a ~~physician health~~
 13 ~~care provider~~ and which are used for the treatment of an illness,
 14 or which were obtained and used by the employee pursuant to and
 15 in accordance with such a prescription.

—————physician

16 (e) Compensation shall not be paid in case of coronary or coronary
 17 artery disease or cerebrovascular injury unless it is shown that the
 18 exertion of the work necessary to precipitate the disability was more
 19 than the employee's usual work in the course of the employee's
 20 regular employment.

21 (f) Except as provided in the workers compensation act, no con-
 22 struction design professional who is retained to perform professional
 23 services on a construction project or any employee of a construction
 24 design professional who is assisting or representing the construction
 25 design professional in the performance of professional services on
 26 the site of the construction project, shall be liable for any injury
 27 resulting from the employer's failure to comply with safety standards
 28 on the construction project for which compensation is recoverable
 29 under the workers compensation act, unless responsibility for safety
 30 practices is specifically assumed by contract. The immunity provided
 31 by this subsection to any construction design professional shall not
 32 apply to the negligent preparation of design plans or specifications.

33 (g) It is the intent of the legislature that the workers compen-
 34 sation act shall be liberally construed for the purpose of bringing
 35 employers and employees within the provisions of the act to provide
 36 the protections of the workers compensation act to both. The pro-
 37 visions of the workers compensation act shall be applied impartially
 38 to both employers and employees in cases arising thereunder.

39 Sec. 2. K.S.A. 1989 Supp. 44-508 is hereby amended to read as
 follows: 44-508. As used in the workers compensation act:

40 (a) "Employer" includes (1) any person or body of persons, cor-
 41 porate or unincorporate, and the legal representative of a deceased
 42 employer or the receiver or trustee of a person, corporation, asso-
 43

1 ciation or partnership; (2) the state or any department, agency or
2 authority of the state, any city, county, school district or other po-
3 litical subdivision or municipality or public corporation and any in-
4 strumentality thereof; and (3) for the purposes of community service
5 work, the entity for which the community service work is being
6 performed and the governmental agency which assigned the com-
7 munity service work, if any, if either such entity or such govern-
8 mental agency has filed a written statement of election with the
9 director to accept the provisions under the workers compensation
10 act for persons performing community service work and in such case
11 such entity and such governmental agency shall be deemed to be
12 the joint employer of the person performing the community service
13 work and both shall have the rights, liabilities and immunities pro-
14 vided under the workers compensation act for an employer with
15 regard to the community service work, except that the liability for
16 providing benefits shall be imposed only on the party which filed
17 such election with the director, or on both if both parties have filed
18 such election with the director; for purposes of community service
19 work, "governmental agency" shall not include any court or any
20 officer or employee thereof and any case where there is deemed to
21 be a "joint employer" shall not be construed to be a case of dual
22 or multiple employment.

23 (b) "Workman" or "employee" or "worker" means any person
24 who has entered into the employment of or works under any contract
25 of service or apprenticeship with an employer. Such terms shall
26 include but not be limited to: Executive officers of corporations;
27 professional athletes; persons serving on a volunteer basis as duly
28 authorized law enforcement officers, ambulance attendants, mobile
29 intensive care technicians, firemen or firefighters, but only to the
30 extent and during such periods as they are so serving in such ca-
31 pacities; persons employed by educational, religious and charitable
32 organizations, but only to the extent and during the periods that
33 they are paid wages by such organizations; persons in the service
34 of the state, or any department, agency or authority of the state,
35 any city, school district, or other political subdivision or municipality
36 or public corporation and any instrumentality thereof, under any
37 contract of service, express or implied, and every official or officer
38 thereof, whether elected or appointed, while performing official du-
39 ties; persons in the service of the state as volunteer members of the
40 Kansas department of civil air patrol, but only to the extent and
41 during such periods as they are officially engaged in the performance
42 of functions specified in K.S.A. 1988 1989 Supp. 48-3302 and amend-
43 ments thereto; volunteers in any employment, if the employer has

1 filed an election to extend coverage to such volunteers; minors,
2 whether such minors are legally or illegally employed; and persons
3 performing community service work, but only to the extent and
4 during such periods as they are performing community service work
5 and if an election has been filed an election to extend coverage to
6 such persons. Any reference to an employee who has been injured
7 shall, where the employee is dead, include a reference to the em-
8 ployee's dependents, to the employee's legal representatives, or, if
9 the employee is a minor or an incapacitated person, to the employee's
10 guardian or conservator. Unless there is a valid election in effect
11 which has been filed as provided in K.S.A. 44-542a and amendments
12 thereto, such terms shall not include individual employers, limited
13 or general partners or self-employed persons.

14 (c) (1) "Dependents" means such members of the employee's
15 family as were wholly or in part dependent upon the employee at
16 the time of the accident.

17 (2) "Members of a family" means only surviving legal spouse and
18 children; or if no surviving legal spouse or children, then parents
19 or grandparents; or if no parents or grandparents, then grandchildren;
20 or if no grandchildren, then brothers and sisters. In the meaning of
21 this section, parents include stepparents, children include stepchil-
22 dren, grandchildren include stepgrandchildren, brothers and sisters
23 include stepbrothers and stepsisters, and children and parents in-
24 clude that relation by legal adoption. In the meaning of this section,
25 a surviving spouse shall not be regarded as a dependent of a deceased
26 employee or as a member of the family, if the surviving spouse shall
27 have for more than six months willfully or voluntarily deserted or
28 abandoned the employee prior to the date of the employee's death.

29 (3) "Wholly dependent child or children" means:

30 (A) A natural or adopted child of the employee except such a
31 child whose relationship to the employee has been severed by
32 adoption;

33 (B) a stepchild of the employee who lives in the employee's
34 household;

35 (C) any other child who is actually dependent in whole or in
36 part on the employee and who is related to the employee by marriage
37 or consanguinity; or

38 (D) any child as defined in subsections (3)(A), (3)(B) or (3)(C) who
39 is less than 23 years of age and who is not physically or mentally
40 capable of earning wages in any type of substantial and gainful em-
41 ployment or who is a full-time student attending an accredited in-
42 stitution of higher education or vocational education.

43 (d) "Accident" means an undesigned, sudden and unexpected

1 event or events, usually of an afflictive or unfortunate nature and
 2 often, but not necessarily, accompanied by a manifestation of force.
 3 The elements of an accident, as stated herein, are not to be construed
 4 in a strict and literal sense, but in a manner designed to effectuate
 5 the purpose of the workers compensation act that the employer bear
 6 the expense of accidental injury to a worker caused by the
 7 employment.

8 (e) "Personal injury" and "injury" mean any lesion or change in
 9 the physical structure of the body, causing damage or harm thereto,
 10 so that it gives way under the stress of the worker's usual labor. It
 11 is not essential that such lesion or change be of such character as
 12 to present external or visible signs of its existence.

13 (f) The words "arising out of and in the course of employment"
 14 as used in the workers compensation act shall not be construed to
 15 include injuries to the employee occurring while the employee is
 16 on the way to assume the duties of employment or after leaving
 17 such duties, the proximate cause of which injury is not the employer's
 18 negligence. An employee shall not be construed as being on the
 19 way to assume the duties of employment or having left such duties
 20 at a time when the worker is on the premises of the employer or
 21 on the only available route to or from work which is a route involving
 22 a special risk or hazard and which is a route not used by the public
 23 except in dealings with the employer.

24 (g) "Burden of proof" means the burden of a party to persuade
 25 the trier of facts by a preponderance of the credible evidence that
 26 such party's position on an issue is more probably true than not true
 27 on the basis of the whole record.

28 (h) "Director" means the director of workers' compensation as
 29 provided for in K.S.A. 75-5708 and amendments thereto.

30 (i) The words "physician," "surgeon" or "doctor" shall mean
 31 and include ~~"health care provider" means~~ any person licensed, by
 32 the proper licensing authority of this state, another state or the
 33 District of Columbia, to practice medicine and surgery, osteopathy,
 34 chiropractic, dentistry, optometry or podiatry.

35 (j) "Secretary" means the secretary of human resources.

36 (k) "Construction design professional" means any person who is
 37 an architect, professional engineer, landscape architect or land sur-
 38 veyor who has been issued a license by the state board of technical
 39 professions to practice such technical profession in Kansas or any
 40 corporation organized to render professional services through the
 41 practice of one or more of such technical professions in Kansas under
 42 the professional corporation law of Kansas or any corporation issued
 43 a certificate of authorization under K.S.A. 74-7036 and amendments

_____ The words "physician," "surgeon" or "doctor" shall mean and include

1 thereto to practice one or more of such technical professions in
2 Kansas.

3 (l) "Community service work" means (1) public or community
4 service performed as a result of a contract of diversion or of assign-
5 ment to a community corrections program or suspension of sentence
6 or as a condition of probation or in lieu of a fine imposed by court
7 order; or (2) public or community service or other work performed
8 as a requirement for receipt of any kind of public assistance in
9 accordance with any program administered by the secretary of social
10 and rehabilitation services.

11 (m) "Utilization review" means the initial evaluation of appro-
12 priateness in terms of both the level and the quality of health care
13 and health services provided a patient, based on accepted standards
14 of the health care profession involved. Such evaluation is accom-
15 plished by means of a system which identifies the utilization of health
16 care services above the usual range of utilization for such services,
17 which is based on accepted standards of the health care profession
18 involved, and which refers instances of possible inappropriate uti-
19 lization to the director for referral to a peer review committee.

20 (n) "Peer review" means an evaluation by a peer review com-
21 mittee of the appropriateness, quality and cost of health care and
22 health services provided a patient, which is based on accepted stand-
23 ards of the health care profession involved and which is conducted
24 after utilization review.

for the purposes of this section

in conjunction with

25 (o) "Peer review committee" means a committee composed of
26 ~~health care providers~~ licensed to practice the same health care
27 profession as the ~~health care provider~~ who rendered the health care
28 services being reviewed.

physicians

physician or other health care provider

29 Sec. 3. K.S.A. 1989 Supp. 44-510 is hereby amended to read as
30 follows: 44-510. Except as otherwise provided therein, medical com-
31 pensation under the workers compensation act shall be as follows:

32
33 (a) It shall be the duty of the employer to provide the services
34 of a ~~physician health care provider~~, and such medical, surgical and
35 hospital treatment, including nursing, medicines, medical and sur-
36 gical supplies, ambulance, crutches, and apparatus, and transpor-
37 tation to and from the home of the injured employee to a place
38 outside the community in which such employee resides, and within
39 such community if the director in the director's discretion so orders,
as may be reasonably necessary to cure and relieve the employee
from the effects of the injury.

physician

42 (1) The director shall prepare and adopt rules and regulations
43 which establish a schedule for the state, or schedules limited to

defined localities, fixing the maximum fees for medical, surgical, hospital, dental, nursing, vocational rehabilitation or any other treatment or services provided or ordered by health care providers and rendered to employees under this section, which shall include costs and charges for medical records and testimony.

at the existing PPO charge rates of Blue Cross & Blue Shield, Inc. of Kansas.

physicians

(2) The schedules of maximum fees shall be reasonable, shall promote health care cost containment and efficiency with respect to the workers compensation health care delivery system, and shall be sufficient to ensure availability of such reasonably necessary treatment, care and attendance to each injured employee to cure and relieve the employee from the effects of the injury.

(3) (A) In every case, all fees, transportation costs and charges under this section and all costs and charges for medical records and testimony shall be subject to approval by the director and shall be limited to such as are fair, reasonable and necessary.

(B) There is hereby created an advisory panel to assist the director in adopting schedules of maximum fees as required by this section. The panel shall consist of the commissioner of insurance, one representative each from the Kansas medical society, the Kansas hospital association and the Kansas chiropractic association, and two members appointed by the secretary. One member appointed by the secretary shall be classified as a representative of employers on the basis of previous vocation, employment or affiliation. The other member appointed by the secretary shall be classified as a representative of employees on the basis of previous vocation, employment or affiliation.

the Kansas Association of Osteopathic Medicine

and recommended to the secretary by the Kansas Chamber of Commerce and Industry.

and recommended to the secretary by the Kansas AFL-CIO.

(C) The panel shall annually review and approve the schedules of maximum fees for such reasonably necessary treatment, care and attendance to each injured employee to cure and relieve the employee from the effects of the injury. All fees and other charges paid for such treatment, care and attendance, including treatment, care and attendance provided by any health care provider, hospital or other entity providing health care services, shall not exceed the amounts provided by the schedules of maximum fees established under this section.

physician

A health care provider, hospital or other entity providing health care services shall be paid either such health care provider, hospital or other entity's usual charge for the treatment, care and attendance or the maximum fees as set forth in the applicable schedule, whichever is less. In reviewing and approving the schedules of maximum fees, the panel shall consider the following:

unless authorized by the director

physician

physician

(i) The levels of fees for similar treatment, care and attendance imposed by other health care programs or third-party payors in the locality in which such treatment or services are rendered;

1 (ii) The impact upon cost to employers for providing a level of
2 fees for treatment, care and attendance which will ensure the avail-
3 ability of treatment, care and attendance required for injured
4 employees;

5 (iii) The potential change in workers compensation insurance pre-
6 miums or costs attributable to the level of treatment, care and at-
7 tendance provided; and

8 (iv) ~~The financial impact of the schedule of maximum fees upon~~ physician
9 ~~health care providers and health care facilities and its effect upon~~
10 ~~their ability to make available to employees such reasonably nec-~~
11 ~~essary treatment, care and attendance to each injured employee to~~
12 ~~cure and relieve the employee from the effects of the injury.~~ physician

13 (4) Any contract with or any billing or charge by any ~~health~~
14 ~~care provider, hospital, person, or institution to any patient for~~
15 ~~services rendered in connection with injuries covered by the workers~~
16 ~~compensation act or a fee schedule adopted under this section, which~~
17 ~~are or may be in excess of or not in accordance with such fee schedule~~
18 ~~are unlawful, void and unenforceable as a debt.~~

19 (5) The director shall have jurisdiction to hear and determine all
20 disputes as to such charges and interest due thereon and shall pre-
21 scribe procedural rules to be followed by the parties to such disputes.

22 (6) ~~The director is hereby authorized to investigate health care~~
23 ~~providers and health care facilities to determine if any health care~~
24 ~~providers or health care facilities are in compliance with the pro-~~
25 ~~visions of the workers compensation act and rules and regulations~~
26 ~~adopted by the director thereunder or if any health care provider~~
27 ~~or health care facility is requiring unjustified treatment, hospitali-~~
28 ~~zation or office visits. If the director finds that a health care provider~~
29 ~~or health care facility has made excessive charges or required un-~~
30 ~~justified treatment, services, hospitalization or visits, the health care~~
31 ~~provider or health care facility shall not receive payment pursuant~~
32 ~~to this section from an insurance carrier, employer or employee for~~
33 ~~the excessive fees or unjustified treatment, hospitalization or visits~~
34 ~~and such health care provider or health care facility shall repay~~
35 ~~any such fees or charges collected therefor.~~

In the event of any controversy rising under this section, payments shall not be delayed for any sums not in dispute or controversy. Acceptance by any provider of services of less than the full amounts charged does not constitute waiver of the remaining amounts.

Delete

after utilization review and peer review,
physician

provided or ordered

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36 (7) The director shall develop and implement, or contract with
37 a qualified entity to develop and implement, utilization review pro-
38 cedures and standards of the services rendered by a health care
39 provider, which services are paid for in whole or in part pursuant
to this section. The director shall contract with a private foundation
or organization to provide peer review after utilization review, as
appropriate, of entities providing health care services pursuant to
this section. Under the terms of such contract, the foundation or

and peer review

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may

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~~organization shall establish and maintain a procedure by which a peer review committee shall review the services rendered by a health care provider or health care facility, which services are paid for in whole or in part pursuant to this section.~~

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(8) By accepting payment pursuant to this section for treatment or services rendered to an injured employee, a ~~health care provider~~ or health care facility shall be deemed to consent to submitting all necessary records and other information concerning such treatment to utilization review and peer review under this section. Such ~~health care provider~~ shall comply with any decision of the director pursuant to subsection (a)(9).

physician

to substantiate the nature and necessity or the service or charge

physician

(9) If it is determined by a peer review committee that a ~~health care provider~~ improperly overutilized or otherwise rendered or ordered unjustified medical treatment or services or that the fees for such treatment or services were excessive, the director may order the ~~health care provider~~ to show cause why the ~~health care provider~~ should not be required to repay the amount which was paid for rendering or ordering such treatment or services and shall provide the health care provider a hearing thereon if requested. If a hearing is not requested within 30 days of receipt of the order and the director decides to proceed with the matter, a hearing shall be conducted and if a prima facie case is established a final order shall be issued by the director. If the final order is adverse to the ~~health care provider~~, the director shall provide a report to the licensing board of the ~~health care provider~~ with full documentation of any such determination, except that no such report shall be provided until after judicial review if the order is appealed.

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Appeals from such director's Order shall be taken to Shawnee County.

~~(10) All reports, information and records submitted to the director for the purposes of this section shall be confidential and privileged and shall not be subject to discovery, subpoena, or other means of legal compulsion for their release to any person or entity and shall not be admissible in evidence in any judicial or administrative proceeding, except those authorized pursuant to this section.~~

Delete

Except as provided by K.S.A. 60-437 and amendments thereto all reports, information, statements, memoranda, proceedings, findings and records submitted to the director for purposes of this section, to include records of peer review committees shall be privileged and shall not be subject to discovery, subpoena, or other means of legal compulsion for their release to any person or entity or be admissible in evidence in any judicial or administrative proceeding, except those authorized pursuant to this section.

(11) A ~~health care provider~~ or health care facility may not improperly charge or overcharge a workers compensation insurer or charge for services which were not provided, for the purpose of obtaining additional payment.

physician

(12) Any violation of the provisions of this section which are willful or which demonstrate a pattern of improperly charging or vercharging workers compensation insurers constitute grounds for the director to impose a civil fine not to exceed \$5,000.

subject to judicial review in Shawnee County.

(b) Any ~~physician health care provider~~, nurse, medical supply establishment, surgical supply establishment, ambulance service or

Any fines collected hereunder shall be paid directly to the Kansas Workers Compensation Fund.

physician

1 hospital who accept the terms of the workers compensation act by
 2 providing services or material thereunder shall be bound by the fees
 3 approved by the director and no injured employee or dependent of
 4 a deceased employee shall be liable for any charges above the
 5 amount approved by the director. If the employer has knowledge
 6 of the injury and refuses or neglects to reasonably provide the ben-
 7 efits required by this section, the employee may provide the same
 8 for such employee, and the employer shall be liable for such expenses
 9 subject to the regulations adopted by the director. No judgment
 10 may be entered by any district court in any action for the payment
 11 of an amount for medical services or materials provided under the
 12 workers compensation act and such action shall be stayed until final
 13 adjudication of any claim for compensation for which an application
 14 for hearing is filed with the director under K.S.A. 44-534 and amend-
 15 ments thereto. In the case of an action stayed hereunder, any award
 16 of compensation shall require any amounts payable for medical serv-
 17 ices or materials to be paid directly to the provider thereof plus an
 18 amount of interest at the rate provided by statute for judgments.

19 (c) If the services of the ~~physician health care provider~~ _____ physician
 20 as provided in subsection (a) are not satisfactory to the injured em-
 21 ployee, the director may authorize the appointment of some other _____ physician
 22 ~~physician health care provider~~ subject to the limitations set forth
 23 in this section and the rules and regulations adopted by the director.
 24 Without application or approval, an employee may consult a phy- _____ physician
 25 sician ~~health care provider~~ of the employee's choice for the purpose
 26 of examination, diagnosis or treatment, but the employer shall only _____ physician
 27 be liable for the fees and charges of such ~~physician health care~~
 28 ~~provider~~ up to a total amount of \$350.

29 (d) An injured employee whose injury or disability has been
 30 established under the workers compensation act may rely, if done
 31 in good faith, solely or partially on treatment by prayer or spiritual
 32 means in accordance with the tenets of practice of a church or
 33 religious denomination without suffering a loss of benefits subject to
 34 the following conditions:

35 (1) The employer or the employer's insurance carrier agrees
 36 thereto in writing either before or after the injury;

37 (2) the employee submits to all physical examinations required
 38 by the workers compensation act;

39 (3) the cost of such treatment shall be paid by the employee
 unless the employer or insurance carrier agrees to make such
 payment;

42 (4) the injured employee shall be entitled only to benefits that
 43 would reasonably have been expected had such employee undergone

1 medical or surgical treatment; and

2 (5) the employer or insurance carrier that made an agreement
3 under paragraph (1) or (3) of this subsection may withdraw from the
4 agreement on 10 days' written notice.

5 (c) In any employment to which the workers compensation act
6 applies, the employer shall be liable to each employee who is em-
7 ployed as a duly authorized law enforcement officer, ambulance at-
8 tendant, mobile intensive care technician, fireman or firefighter,
9 including any person who is serving on a volunteer basis in such
10 capacity, for all reasonable and necessary preventive medical care
11 and treatment for hepatitis to which such employee is exposed under
12 circumstances arising out of and in the course of employment.

13 Sec. 4. K.S.A. 1989 Supp. 44-510e is hereby amended to read
14 as follows: 44-510e. Where death does not result from the injury,
15 compensation shall be paid as provided in K.S.A. 44-510 and amend-
16 ments thereto and as follows:

17 (a) (1) Where permanent total disability results from the injury,
18 weekly payments shall be made during the period of permanent total
19 disability in a sum equal to 66 2/3% of the average gross weekly
20 wage of the injured employee, computed as provided in K.S.A. 44-
21 511 and amendments thereto, but in no case less than \$25 per week
22 nor more than the dollar amount nearest to 75% of the state's average
23 weekly wage, determined as provided in K.S.A. 44-511 and amend-
24 ments thereto, per week. The payment of compensation for per-
25 manent total disability shall continue for the duration of such
26 disability, subject to review and modification as provided in K.S.A.
27 44-528 and amendments thereto.

28 (2) Permanent total disability exists when the employee, on ac-
29 count of the injury, has been rendered completely and permanently
30 incapable of engaging in any type of substantial and gainful em-
31 ployment. Loss of both eyes, both hands, both arms, both feet, or
32 both legs, or any combination thereof, shall, in the absence of proof
33 to the contrary, constitute a permanent total disability. Substantially
34 total paralysis, or incurable imbecility or insanity, resulting from
35 injury independent of all other causes, shall constitute permanent
36 total disability. In all other cases permanent total disability shall be
37 determined in accordance with the facts.

38 (b) (1) Where temporary total disability results from the injury,
39 no compensation shall be paid during the first week of disability,
40 except that provided in K.S.A. 44-510 and amendments thereto,
41 unless the temporary total disability exists for three consecutive
42 weeks, in which case compensation shall be paid for the first week
43 of such disability. Thereafter weekly payments shall be made during

1 such temporary total disability, in a sum equal to $66\frac{2}{3}\%$ of the
 2 average gross weekly wage of the injured employee, computed as
 3 provided in K.S.A. 44-511 and amendments thereto, but in no case
 4 less than \$25 per week nor more than the dollar amount nearest to
 5 75% of the state's average weekly wage, determined as provided in
 6 K.S.A. 44-511 and amendments thereto, per week. The payment of
 7 compensation for temporary total disability shall continue for the
 8 duration of any such disability, subject to review and modification
 9 as provided in K.S.A. 44-528 and amendments thereto.

10 (2) Temporary total disability exists when the employee, on ac-
 11 count of the injury, has been rendered completely and temporarily
 12 incapable of engaging in any type of substantial and gainful
 13 employment.

14 (3) Where no award has been entered by the director, a return
 15 by the employee to any type of substantial and gainful employment
 16 or a release by a treating ~~physician health care provider~~ or ex- physician
 17 amining ~~physician health care provider~~, who is not regularly em- physician
 18 ployed or retained by the employer, to return to any such
 19 employment, shall suspend the employee's right to the payment of
 20 temporary total disability compensation, but shall not affect any right
 21 the employee may have to compensation for partial disability in
 22 accordance with K.S.A. 44-510d and 44-510e and amendments
 23 thereto.

24 (c) When any permanent total disability or temporary total dis-
 25 ability is followed by partial disability, compensation shall be paid
 26 as provided in K.S.A. 44-510d and 44-510e and amendments thereto.

27 Sec. 5. K.S.A. 1989 Supp. 44-510e is hereby amended to read
 28 as follows: 44-510e. (a) If the employer and the employee are unable
 29 to agree upon the amount of compensation to be paid in the case
 30 of injury not covered by the schedule in K.S.A. 44-510d and amend-
 31 ments thereto, the amount of compensation shall be settled according
 32 to the provisions of the workers compensation act as in other cases
 33 of disagreement, except that in case of temporary or permanent
 34 partial general disability not covered by such schedule, the employee
 35 shall receive weekly compensation as determined in this subsection
 36 during such period of temporary or permanent partial general dis-
 37 ability not exceeding a maximum of 415 weeks. Weekly compensation
 38 for temporary partial general disability shall be $66\frac{2}{3}\%$ of the dif-
 39 ference between the average gross weekly wage that the employee
 40 was earning prior to such injury as provided in the workers com-
 41 pensation act and the amount the employee is actually earning after
 42 such injury in any type of employment, except that in no case shall
 43 such weekly compensation exceed the maximum as provided for in

1 K.S.A. 44-510c and amendments thereto. Permanent partial general
 2 disability exists when the employee is disabled in a manner which
 3 is partial in character and permanent in quality and which is not
 4 covered by the schedule in K.S.A. 44-510d and amendments thereto.
 5 The extent of permanent partial general disability shall be the extent,
 6 expressed as a percentage, to which the ability of the employee to
 7 perform work in the open labor market and to earn comparable
 8 wages has been reduced, taking into consideration the employee's
 9 education, training, experience and capacity for rehabilitation, except
 10 that in any event the extent of permanent partial general disability
 11 shall not be less than percentage of functional impairment. Functional
 12 impairment means the extent, expressed as a percentage, of the loss
 13 of a portion of the total physiological capabilities of the human body
 14 as established by competent medical evidence. ~~In order to reduce
 15 litigation and establish more certainty and uniformity in the rating
 16 of permanent impairments, the director shall adopt and use a sched-
 17 18 ule for determining the existence and degree of permanent impair-
 19 ment based upon medically or scientifically demonstrable findings.
 20 The schedule shall be adopted in rules and regulations of the director
 21 and shall be based on generally accepted medical standards for
 22 determining impairments and may incorporate all or part of any one
 23 or more generally accepted schedules used for such purpose, such
 24 as the Guides to the Evaluation of Permanent Impairment of the
 25 American Medical Association. On and after July 1, 1990, and pend-
 26 ing the adoption of rules and regulations which adopt a permanent
 27 schedule, the Guides to the Evaluation of Permanent Impairment,
 28 copyright 1988 by the American Medical Association (Third Edition),
 29 shall be the temporary schedule and shall be used for the purposes
 30 of this section.~~ There shall be a presumption that the employee has
 31 no work disability if the employee engages in any work for wages
 32 comparable to the average gross weekly wage that the employee was
 33 earning at the time of the injury. The amount of weekly compensation
 34 for permanent partial general disability shall be determined: (1) By
 35 multiplying the average gross weekly wage of the worker prior to
 36 such injury by the percentage of permanent partial general disability
 37 as determined under this subsection; and (2) by then multiplying
 38 the result so obtained by 66 2/3%. The amount of weekly compensa-
 39 tion for permanent partial general disability so determined shall
 40 in no case exceed the maximum as provided for in K.S.A. 44-510c
 41 and amendments thereto. If there is an award of permanent disability
 42 as a result of the compensable injury, there shall be a presumption
 43 that disability existed immediately after such injury. In any case of
 permanent partial disability under this section, the employee shall

A physician's evaluation of the extent of permanent impairment shall be prepared in substantial compliance with the "Guides to the Evaluation of Permanent Impairment", published by the American Medical Association, the guidelines established by the American Academy of Orthopaedic Surgeons, or any other recognized medical books or guides which were in effect when the examination was made. The Third Edition of the AMA Guides when used, shall be used to rate permanent impairment as a result of injuries occurring after January 1, 1989. Revisions of the AMA Guides, or any other recognized medical books or guides to include the guidelines established by the American Academy of Orthopaedic Surgeons, published after January 1, 1989, shall be effective January 1 following the year of publication of the revision of the recognized medical books or guides. Injuries occurring prior to January 1, 1989 are to be evaluated by the following editions of the AMA Guides, when used by a physician. Between July 1, 1978 and October 31, 1984-First Edition. Between November 1, 1984 and December 31, 1988-Second Edition. Nothing in this section shall be construed to prevent the presentations of other medical opinion or guides for the purpose of establishing that the degree of permanent impairment to which the employee would be entitled to would be more or less than the entitlement indicated in the AMA Guides, the American Academy of Orthopaedic Surgeons Guides, or any other recognized medical books or guides.

1 be paid compensation for not to exceed 415 weeks following the date
2 of such injury, subject to review and modification as provided in
3 K.S.A. 44-528 and amendments thereto.

4 (b) If an employee has received an injury for which compensation
5 is being paid, and the employee's death is caused by other and
6 independent causes, any payment of compensation already due the
7 employee at the time of death and then unpaid shall be paid to the
8 employee's dependents directly or to the employee's legal repre-
9 sentatives if the employee left no dependent, but the liability of the
10 employer for the payments of compensation not yet due at the time
11 of the death of such employee shall cease and be abrogated by the
12 employee's death.

13 (c) The total amount of compensation that may be allowed or
14 awarded an injured employee for all injuries received in any one
15 accident shall in no event exceed the compensation which would be
16 payable under the workers compensation act for permanent total
17 disability resulting from such accident.

18 (d) Where a minor employee or a minor employee's dependents
19 are entitled to compensation under the workers compensation act,
20 such compensation shall be exclusive of all other remedies or causes
21 of action for such injury or death, and no claim or cause of action
22 against the employer shall inure or accrue to or exist in favor of the
23 parent or parents of such minor employee on account of any damage
24 resulting to such parent or parents on account of the loss of earnings
25 or loss of service of such minor employee.

26 (e) In any case of injury to or death of a female employee, where
27 the female employee or her dependents are entitled to compensation
28 under the workers compensation act, such compensation shall be
29 exclusive of all other remedies or causes of action for such injury
30 or death, and no claim or action shall inure, accrue to or exist in
31 favor of the surviving husband or any relative or next of kin of such
32 female employee against such employer on account of any damage
33 resulting to such surviving husband or any relative or next of kin
34 on account of the loss of earnings, services, or society of such female
35 employee or on any other account resulting from or growing out of
36 the injury or death of such female employee.

37 Sec. 6. K.S.A. 1989 Supp. 44-510g is hereby amended to read
38 as follows: 44-510g. (a) A primary purpose of the workers compen-
39 sation act shall be to restore to the injured employee the ability to
40 perform work in the open labor market and to earn comparable
41 wages, as determined pursuant to subsection (a) of K.S.A. 44-510e
42 and amendments thereto. To this end, the director shall appoint,
43 subject to the approval of the secretary, a specialist in medical,

1 physical and vocational rehabilitation, who shall be referred to as
 2 the rehabilitation administrator. The director shall appoint, subject
 3 to the approval of the secretary, four assistant rehabilitation admin-
 4 istrators. The rehabilitation administrator and the assistant rehabil-
 5 itation administrators shall be in the classified service under the
 6 Kansas civil service act. The rehabilitation administrator and the
 7 assistant rehabilitation administrators, subject to the direction of the
 8 rehabilitation administrator, shall: (1) Continuously study the prob-
 9 lems of physical and vocational rehabilitation; (2) investigate and
 10 maintain a directory of all rehabilitation facilities, public or private,
 11 in this state, and, where such rehabilitation administrator determines
 12 necessary, in any other state; and (3) be fully knowledgeable re-
 13 garding the eligibility requirements of all state, federal and other
 14 public medical, physical and vocational rehabilitation facilities and
 15 benefits. With respect to private facilities and agencies providing
 16 medical, physical and vocational rehabilitation services, including
 17 rehabilitation service programs provided directly by employers, the
 18 director shall approve as qualified such facilities, institutions, agen-
 19 cies, employer programs and ~~physicians health care providers~~ as
 20 are capable of rendering competent rehabilitation services. No such
 21 facility, institution, agency or employer program shall be considered
 22 qualified unless it is specifically equipped to provide rehabilitation
 23 services for persons suffering from either some specialized type of
 24 disability or some general type of disability within the field of oc-
 25 cupational injury or disease, and is staffed with trained and qualified
 26 personnel and, with respect to medical and physical rehabilitation,
 27 unless it is supervised by a ~~physician health care provider~~ qualified
 28 to render such service. No ~~physician health care provider~~ shall be
 29 considered qualified unless such ~~physician health care provider~~ has
 30 had such experience and training as the director may deem
 31 necessary.

physicians

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32 (b) Under the direction of the director, and subject to the di-
 33 rector's final approval, the rehabilitation administrator shall have the
 34 duties of directing and auditing medical, physical and vocational
 35 rehabilitation of employees in accordance with the provisions of this
 36 section.

37 (c) An employee who has suffered an injury shall be entitled to
 38 prompt medical and physical rehabilitation services as may be rea-
 39 sonably necessary to restore to such employee the ability to perform
 40 work in the open labor market and to earn comparable wages, as
 41 determined pursuant to subsection (a) of K.S.A. 44-510e and amend-
 42 ments thereto, and as provided in this section.

43 (d) When as a result of an injury or occupational disease which

1 is compensable under the workers compensation act, the employee
2 is unable (1) to perform work for the same employer at a comparable
3 wage with or without accommodation or (2) to enter the open labor
4 market to perform work for which such employee has previous training,
5 education, qualifications or experience and earn a comparable
6 wage, such employee shall be entitled to such vocational rehabilitation
7 services, including retraining and job placement, as may be
8 reasonably necessary to restore to such employee the ability to perform
9 work in the open labor market and to earn comparable wages,
10 as determined pursuant to subsection (a) of K.S.A. 44-510e and
11 amendments thereto, and as provided in this section.

12 (e) (1) If the employee has remained off work for 90 days or if
13 it is apparent to the director the employee requires vocational rehabilitation
14 services and, in either case, if approved rehabilitation
15 services are not voluntarily furnished to the employee by the employer,
16 the director, on such director's own motion or upon application
17 of any party, may refer the employee to a qualified public
18 agency, if the employee is eligible, or private agency or facility, or
19 the employer's rehabilitation service program, if qualified, for ~~evaluation~~
20 *assessment* and for a report of the practicability of, need for,
21 and kind of service, treatment, training or rehabilitation which is or
22 may be necessary and appropriate to render such employee able to
23 perform work in the open labor market and to earn comparable
24 wages, as determined pursuant to subsection (a) of K.S.A. 44-510e
25 and amendments thereto. The costs of such ~~evaluation~~ *assessment*
26 and report shall be at the expense of the employer. Each report
27 shall contain a rehabilitation plan which shall adhere to the following
28 priority listing of rehabilitation goals:

29 (A) The first priority is to return the employee to the same work
30 for the same employer;

31 (B) the second priority is to return the employee to the same
32 work, with accommodation, for the same employer;

33 (C) the third priority is to return the employee to other work,
34 with or without accommodation, for the same employer;

35 (D) the fourth priority is to return the employee to the same
36 work for another employer;

37 (E) the fifth priority is to return the employee to other work for
38 another employer; and

39 (F) the sixth priority is to provide vocational rehabilitation, reeducation
40 and training.

41 (2) Within 50 days after such referral, the report shall be submitted
42 to and reviewed by the rehabilitation administrator and copies
43 shall be furnished to each party. If all parties do not agree with the

1 report, the rehabilitation administrator shall confer with the reha-
2 bilitation service provider, the employee and the employer to review
3 the ~~evaluation~~ *assessment* and the proposed rehabilitation plan in
4 the report. The rehabilitation administrator shall ensure the eval-
5 uation ~~assessment~~ and the rehabilitation plan are objective and rea-
6 sonable and the rehabilitation goal is reasonably obtainable. Within
7 20 days after the initial review of the report, the rehabilitation ad-
8 ministrator shall deliver copies of the report, together with the re-
9 habilitation administrator's recommendations and any revisions of or
10 objections to the rehabilitation plan, to each party, to the director
11 and to the assigned administrative law judge, if there is one. Within
12 10 days after receipt of such report, any party may request a hearing
13 before the director on any matter contained in the report or any
14 such recommendations or revisions. After affording the parties an
15 opportunity to be heard and present evidence, the director:

16 (A) May order any treatment, or medical and physical rehabili-
17 tation, as recommended in the report or as the director may deem
18 necessary, be provided at the expense of the employer;

19 (B) may order the employer to pay temporary total disability
20 compensation, computed as provided in K.S.A. 44-510c and amend-
21 ments thereto, or temporary partial disability compensation, com-
22 puted as provided in K.S.A. 44-510e and amendments thereto,
23 during the period of rehabilitation ~~evaluation~~ *assessment* and con-
24 tinuing through the date the rehabilitation plan is delivered to the
25 director as provided in subsection (e)(2). Temporary total or tem-
26 porary partial disability compensation paid solely because of involve-
27 ment in the rehabilitation ~~evaluation~~ *assessment* process shall not
28 be payable for more than 70 days from the date of the ~~evaluation~~
29 *assessment*, except such temporary total or temporary partial disa-
30 bility compensation may be continued by the director for an addi-
31 tional period of not more than 30 days if circumstances outside the
32 control of the employee prevents completion of the ~~evaluation~~ *as-*
33 *essment* or the formulation of the rehabilitation plan;

34 (C) where vocational rehabilitation, reeducation or training is rec-
35 ommended in the report, or is deemed necessary by the director
36 to restore to the employee the ability to perform work in the open
37 labor market and to earn comparable wages, as determined pursuant
38 to subsection (a) of K.S.A. 44-510e and amendments thereto, may
39 direct the employee to the appropriate federal, state or other public
40 facility or agency where such services will or may be provided at
41 no cost to the employer, except as otherwise provided in this section,
42 or, upon the request of the employer, to a qualified rehabilitation
43 service program provided directly by the employer; and

1 (D) if the employee is not eligible for such vocational rehabili-
2 tation, reeducation or training through any such state, federal or
3 other public facility or agency, or where such services through such
4 facilities or agencies are not available to the employee within a
5 reasonable period of time, may order such services be provided at
6 the expense of the employer by any qualified private agency or
7 facility in this state or any state contiguous to this state or by a
8 qualified rehabilitation service program provided directly by the
9 employer.

10 (3) Any vocational rehabilitation, reeducation or training to be
11 provided at the expense of the employer under subsection (e)(2) shall
12 not extend for a period of more than 36 weeks, except, in extremely
13 unusual cases, after a hearing and the presentation of evidence, the
14 director, by special order, may extend the period for not more than
15 an additional 36 weeks. The employer shall have a right to appeal
16 to the district court any such special order by the director for any
17 extension of the initial thirty-six-week period, within the time and
18 in the manner provided in K.S.A. 44-556 and amendments thereto
19 and any such special order shall be stayed until the district court
20 has determined the appeal. There shall be no right of appeal to the
21 Kansas supreme court or court of appeals from a judgment of the
22 district court sustaining or overruling any such special order of the
23 director.

24 (f) Where vocational rehabilitation, reeducation or training is to
25 be furnished at the expense of the employer under this section, and
26 such services require that the employee reside at or near a facility
27 or institution, away from the employee's customary county of resi-
28 dence, either in or out of the state of Kansas, the reasonable costs
29 of the employee's board, lodging and travel, not to exceed a max-
30 imum total of \$3,500 for any thirty-six-week period, shall be paid
31 by the employer, except, in unusual cases where, after a hearing
32 and the presentation of evidence the director finds the costs are
33 clearly reasonable and necessary, the director may require by special
34 order that the employer pay an additional amount for the costs of
35 the employee's board, lodging and travel of not more than \$2,000.

36 (g) The employer shall pay temporary total disability compen-
37 sation during any period of vocational rehabilitation, reeducation or
38 training, computed as provided in K.S.A. 44-510c and amendments
39 thereto, but the employer shall receive credit for any weekly,
40 monthly or other monetary payments made to the employee or such
41 employee's family by any state, federal or other public agency during
42 any such period, exclusive of any such payments for the board,
43 lodging and travel expenses of the employee. Subject to a maximum

1 of 26 weeks, the number of weeks during which temporary total
2 disability compensation is paid during vocational rehabilitation, reedu-
3 cation or training shall not be deducted from the maximum number
4 of weeks available for the payment of disability compensation under
5 the schedule provided in K.S.A. 44-510d and amendments thereto.

6 (h) The director shall cooperate with federal, state and other
7 public or private agencies for vocational rehabilitation, reeducation
8 or training, or medical or physical rehabilitation. The employer shall
9 not be required to pay the reasonable costs of the employee's board,
10 lodging and travel where such costs are borne by any federal, state
11 or other public agency, nor shall any costs for vocational rehabili-
12 tation, reeducation or training be assessed to the employer if such
13 vocational rehabilitation, reeducation or training is in fact furnished
14 by and at the expense of any federal, state or other public agency.

15 (i) Whenever the director determines there is a reasonable prob-
16 ability that with appropriate medical, physical or vocational reha-
17 bilitation, reeducation or training, a person, who is entitled to
18 compensation for permanent total disability, partial disability or any
19 other disability under the workers compensation act, may be re-
20 habilitated to the extent such person can become able to perform
21 work in the open labor market and to earn comparable wages, as
22 determined pursuant to subsection (a) of K.S.A. 44-510e and amend-
23 ments thereto, and it is for the best interests of such person to
24 undertake such rehabilitation, reeducation or training, if the injured
25 employee without good cause refuses to undertake the rehabilitation,
26 educational or training program determined by the director to be
27 suitable for such employee or refuses to be evaluated under the
28 provisions of subsection (e) and the refusal is not due to the em-
29 ployee's physical or mental ability to do so, the employee shall be
30 considered as having elected not to participate in such rehabilitation,
31 reeducation or training and the director may suspend the payment
32 of any disability compensation until the employee consents to un-
33 dertake such program or to be so evaluated. The director may reduce
34 the disability compensation otherwise payable if any such refusal
35 persists for a period in excess of 90 days, except disability compen-
36 sation shall not be reduced to less than that payable for permanent
37 partial disability in accordance with K.S.A. 44-510d and amendments
38 thereto or for permanent partial general disability for functional im-
39 pairment in accordance with K.S.A. 44-510e and amendments
40 hereto.

41 (j) At such time as any medical, physical or vocational rehabili-
42 tation, reeducation or training has been completed under this section,
43 the employer shall have the right, by the filing of an application

1 with the director, to seek a modification of any award which has
2 been rendered granting any compensation to the employee for any
3 disability. Upon at least 20 days' notice by registered mail to all
4 parties, the director shall set the application for hearing and the
5 parties shall present all material and relevant evidence. In the event
6 the director determines the employee is rehabilitated so such em-
7 ployee is able to perform work in the open labor market and to earn
8 comparable wages, as determined pursuant to subsection (a) of K.S.A.
9 44-510e and amendments thereto, the director shall modify any
10 award of compensation or, if no such award has been made, the
11 director shall make an award to reflect only such disability, if any,
12 as exists at the conclusion of such rehabilitation. Any award of partial
13 disability, or modification of an existing award, made pursuant to
14 this subsection (j) shall be subject to the provisions of K.S.A. 44-
15 510d and 44-510e and amendments thereto.

16 *(k) For any week with respect to which the employee is receiving*
17 *unemployment compensation benefits under the employment security*
18 *law or any other unemployment compensation law of any other state*
19 *or a similar federal law, no temporary total disability compensation*
20 *or temporary partial disability compensation shall be payable under*
21 *this section.*

22 *(l) As used in this section, "assessment" means the process of*
23 *determining services and the vocational potential of the injured*
24 *worker. The assessment process includes the appointment of a re-*
25 *habilitation vendor to review the injured worker's medical restric-*
26 *tions, education, experience and training, the worker's aptitude and*
27 *abilities, and the job the worker was doing at the time of injury.*
28 *The assessment must include a documented decision of the need for*
29 *vocational rehabilitation services, and if needed, an individualized*
30 *rehabilitation plan that identifies realistic vocational goals. The as-*
31 *essment must identify the obstacles to returning to a comparable*
32 *wage position in the open labor market and the plan must provide*
33 *a step-by-step procedure that will either circumvent or alleviate the*
34 *obstacles identified in the counselor's determination that services are*
35 *needed.*

36 Sec. 7. K.S.A. 1989 Supp. 44-512a is hereby amended to read
37 as follows: 44-512a. (a) In the event any compensation, including
38 medical compensation, which has been awarded under the workers
39 compensation act, is not paid when due to the person, firm or
40 corporation entitled thereto, the employee shall be entitled to a civil
41 penalty, to be set by the director and assessed against the employer
42 or insurance carrier liable for such compensation in an amount of
43 not more than \$100 per week for each week any disability compen-

1 sation is past due and in *an amount for each past due medical bill*
 2 *equal to the larger of either the sum of \$25 for each or the sum*
 3 *equal to 10% of the amount which is past due on the medical bill,*
 4 if: (1) Service of written demand for payment, setting forth with
 5 particularity the items of disability and medical compensation claimed
 6 to be unpaid and past due, has been made personally or by registered
 7 mail on the employer or insurance carrier liable for such compen-
 8 sation and its attorney of record; and (2) payment of such demand
 9 is thereafter refused or is not made within 20 days from the date
 10 of service of such demand.

11 (b) After the service of such written demand, if the payment of
 12 disability compensation or medical compensation set forth in the
 13 written demand is not made within 20 days from the date of service
 14 of such written demand, plus any civil penalty, as provided in sub-
 15 section (a), if such compensation was in fact past due, then all past
 16 due compensation and any such penalties shall become immediately
 17 due and payable. Service of written demand shall be required only
 18 once after the final award. Subsequent failures to pay compensation,
 19 including medical compensation, shall entitle the employee to apply
 20 for the civil penalty without demand. The employee may maintain
 21 an action in the district court of the county where the cause of action
 22 arose for the collection of such past due disability compensation and
 23 medical compensation, any civil penalties due under this section and
 24 reasonable attorney fees incurred in connection with the action.

25 (c) The remedies of execution, attachment, garnishment or any
 26 other remedy or procedure for the collection of a debt now provided
 27 by the laws of this state shall apply to such action and also to all
 28 judgments entered under the provisions of K.S.A. 44-529 and amend-
 29 ments thereto, except that no exemption granted by any law shall
 30 apply except the homestead exemption granted and guaranteed by
 31 the constitution of this state.

32 Sec. 8. K.S.A. 44-515 is hereby amended to read as follows: 44-
 33 515. (a) After an employee sustains an injury, the employee shall,
 34 upon request of the employer, submit to an examination at any
 35 reasonable time and place by any one or more reputable ~~physicians,~~
 36 ~~as defined in K.S.A. 44-508 and amendments thereto health care~~
 37 ~~providers,~~ selected by the employer, and shall so submit to an
 38 examination thereafter at intervals during the pendency of such em-
 39 ployee's claim for compensation, upon the request of the employer,
 40 but the employee shall not be required to submit to an examination
 41 oftener than twice in any one ~~(1)~~ month, unless required to do so
 42 in accordance with such orders as may be made by the director.
 43 Any employee so submitting to an examination or such employee's

physicians, as defined in K.S.A. 44-508 and amendments thereto

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authorized representative shall upon request be entitled to receive and shall have delivered to such employee a copy of the ~~physieian's health care provider's~~ report of such examination within ~~fifteen (15)~~ 15 days after such examination, which report shall be identical to the report submitted to the employer. If the employee is notified to submit to an examination before any ~~physieian health care provider~~ in any town or city other than the residence of the employee at the time that the employee received an injury, the employee shall not be required to submit to an examination until such employee has been furnished with sufficient funds to pay for transportation to and from the place of examination at the rate prescribed for compensation of state officers and employees under K.S.A. 75-3203a and amendments thereto, for each mile actually and necessarily traveled to and from the place of examination, and in addition the sum of ~~fifteen dollars (\$15)~~ \$15 per day for each day or a part thereof that the employee was required to be away from such employee's residence to defray such employee's board and lodging and living expenses. The employee shall not be liable for any fees or charge of any ~~physieians health care provider~~ selected by the employer for making any examination of the employee. The employer or the insurance carrier of the employer of any ~~workman~~ employee making claim for compensation under the ~~workmen's~~ workers compensation act shall be entitled to a copy of the report of any ~~physieian~~ health care provider who has examined or treated the employee in regard to such claim upon written request to the employee or the employee's attorney within ~~fifteen (15)~~ 15 days after such examination or treatment, which report shall be identical to the report submitted to the employee or the employee's attorney.

physician's

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(b) If the employee requests, such employee shall be entitled to have ~~physieians health care providers~~ of such employee's own selection present at the time to participate in such examination.
(c) Unless a report is furnished as provided in subsection (a) and unless there ~~be is~~ a reasonable opportunity thereafter for the ~~physieians health care providers~~ selected by the employee to participate in the examination in the presence of the ~~physieians health care providers~~ selected by the employer, the ~~physieians health care providers~~ selected by the employer or employee shall not be permitted afterwards to give evidence of the condition of the employee at the time such examination was made.

physician

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Except as provided ~~herein in this section~~, there shall be no disqualification or privilege preventing the furnishing of reports by or the testimony of any ~~physieian health care provider~~ who actually makes an examination or treats an injured employee, prior to or

1 after an injury.

2 Sec. 9. K.S.A. 44-516 is hereby amended to read as follows: 44-
3 516. In case of a dispute as to the injury, the director as hereinafter
4 provided may, at his, in the director's discretion, or upon request
5 of either party, may employ one or more neutral physicians ~~health~~
6 ~~care providers~~, not exceeding three (3) in number, who shall be of
7 good standing and ability, whose duty it shall be to. ~~The health~~
8 ~~care providers~~, shall make such examinations of the injured workman
9 employee as the director may direct.

physicians

physicians

10 Sec. 10. K.S.A. 44-518 is hereby amended to read as follows:
11 44-518. If the employee refuses to submit himself for to an ex-
12 amination upon request of the employer as provided for in K.S.A.
13 44-515, and amendments thereto or if the employee or his physician
14 or surgeon the employee's ~~health care provider~~ unnecessarily ob-
15 structs or prevents such examination by the physician or surgeon
16 ~~health care provider~~ of the employer, the employee's right to pay-
17 ment of compensation shall be and remain suspended until he shall
18 submit the employee submits to an examination and until such ex-
19 amination shall have taken place, and is completed. No compen-
20 sation shall be payable under this the workers compensation act
21 during the period of suspension: *Provided further*, That in the
22 event. If the employee shall refuse refuses to submit himself to
23 an examination while any proceedings are pending for the purpose
24 of determining the amount of compensation due, said such pro-
25 ceedings shall be dismissed upon showing being made of said the
26 refusal of said the employee to submit himself for to an examination.

physician or surgeon

physician or surgeon

27 Sec. 11. K.S.A. 44-519 is hereby amended to read as follows:
28 44-519. No report of any examination of any employee by a phy-
29 sician or surgeon, as hereinbefore in this act provided for, nor
30 any ~~health care provider~~, as provided for in the workers compen-
31 sation act and no certificate issued or given by the physician or
32 surgeon ~~health care provider~~ making such examination, shall be
33 competent evidence in any proceeding for the determining or col-
34 lection of compensation unless supported by the testimony of such
35 physician or surgeon ~~health care provider~~, if this testimony is
36 admissible, nor and shall not be competent evidence in any case
37 where testimony of such physician or surgeon ~~health care provider~~
38 is not admissible.

physician or surgeon

physician or surgeon

physician

physician or surgeon

39 Sec. 12. K.S.A. 1989 Supp. 44-528 is hereby amended to read
40 as follows: 44-528. (a) Any award or modification thereof agreed upon
41 by the parties, except lump-sum settlements approved by the di-
42 rector or administrative law judge, whether the award provides for
43 compensation into the future or whether it does not, may be re-

1 viewed by the director for good cause shown upon the application
2 of the employee, employer, dependent, insurance carrier or any
3 other interested party. In connection with such review the director
4 may appoint one or two ~~physicians health care providers~~ physicians
5 the employee and report to the director. The director shall hear all
6 competent evidence offered and if the director finds that the award
7 has been obtained by fraud or undue influence, that the award was
8 made without authority or as a result of serious misconduct, that
9 the award is excessive or inadequate or that the functional impair-
10 ment or work disability of the employee has increased or diminished,
11 the director may modify such award, or reinstate a prior award, upon
12 such terms as may be just, by increasing or diminishing the com-
13 pensation subject to the limitations provided in the workers com-
14 pensation act.

15 (b) If the director finds that the employee has returned to work
16 for the same employer in whose employ the employee was injured
17 or for another employer and is earning or is capable of earning the
18 same or higher wages than the employee did at the time of the
19 accident, or is capable of gaining an income from any trade or
20 employment which is equal to or greater than the wages the em-
21 ployee was earning at the time of the accident, or finds that the
22 employee has absented and continues to be absent so that a rea-
23 sonable examination cannot be made of the employee by a ~~physician~~
24 ~~health care provider~~ physicians
25 beyond the boundaries of the United States, the director may modify
26 the award and reduce compensation or may cancel the award and
27 end the compensation.

28 (c) The number of reviews under this section shall be limited
29 pursuant to rules and regulations adopted by the director to avoid
30 abuse.

31 (d) Any modification of an award under this section on the basis
32 that the functional impairment or work disability of the employee
33 has increased or diminished shall be effective as of the date that the
34 increase or diminishment actually occurred, except that in no event
35 shall the effective date of any such modification be more than six
36 months prior to the date the application was made for review and
37 modification under this section.

38 Sec. 13. K.S.A. 44-551 is hereby amended to read as follows:
39 44-551. (a) The duties of the assistant directors of workers' compen-
40 sation shall include but not be limited to acting in the capacity of
41 an administrative law judge and the conducting of director reviews,
42 provided the director shall be the final approving authority for such
43 director reviews.

1 (b) (1) Administrative law judges shall have power to administer
2 oaths, certify official acts, take depositions, issue subpoenas, compel
3 the attendance of witnesses and the production of books, accounts
4 and papers, and under the direction of the director, may conduct
5 an investigation, inquiry, or hearing in the same manner and with
6 like effect as if done by the director. All acts, findings, awards,
7 decisions, rulings or modifications of findings or awards made by an
8 administrative law judge, shall be subject to review and approval by
9 the director upon written request of any interested party within 10
10 days and if no such request is made, then the director shall approve
11 such actions, findings, awards, decisions, rulings or modifications of
12 findings or awards of the administrative law judge. The filing of such
13 a request for review shall not be a prerequisite to judicial review
14 as provided for in K.S.A. 44-556 and amendments thereto.

15 (2) *If an administrative law judge has entered a preliminary*
16 *award under K.S.A. 44-534a and amendments thereto, a director's*
17 *review shall not be conducted under this section unless it is believed*
18 *that the administrative law judge exceeded the authority of admin-*
19 *istrative law judge in entering the preliminary award. Director's*
20 *orders on review of preliminary findings or preliminary awards*
21 *issued pursuant to K.S.A. 44-534a and amendments thereto shall be*
22 *issued within 30 days from the date the review was submitted on*
23 *the record where oral arguments were not requested and within 30*
24 *days from the date oral arguments were presented by the parties.*
25 *Director's orders on any other acts, findings, awards, decisions,*
26 *rulings or modifications of findings or awards made by an admin-*
27 *istrative law judge shall be issued within 90 days from the date the*
28 *review was submitted on the record where oral arguments were not*
29 *requested or within 90 days from the date oral arguments were*
30 *presented by the parties.*

31 (c) Each assistant director and each administrative law judge or
32 special administrative law judge shall be allowed all reasonable and
33 necessary expenses actually incurred while in the actual discharge
34 of official duties in administering the workmen's compensation act,
35 but such expenses shall be sworn to by the person incurring the
36 same and be approved by the secretary.

37 (d) In case of emergency the director may appoint special local
38 administrative law judges and assign to them the examination and
39 hearing of any designated case or cases. Such special local admin-
40 istrative law judges shall be attorneys and admitted to practice law
41 in the state of Kansas and shall, as to all cases assigned to them,
42 exercise the same powers as provided by this section for the regular
43 administrative law judges. Special local administrative law judges

1 shall receive a fee commensurate with the services rendered as fixed
2 by rules and regulations adopted by the director. The fees prescribed
3 by this section prior to the effective date of this act shall be effective
4 until different fees are fixed by such rules and regulations.

5 (c) All special local administrative law judge's fees and expenses
6 shall be taxed as cost in each case heard by such special local ad-
7 ministrative law judge and when collected shall be paid directly to
8 such special local administrative law judge by the party charged with
9 the payment of the same.

10 Sec. 14. K.S.A. 1989 Supp. 44-556 is hereby amended to read
11 as follows: 44-556. (a) Any action of the director pursuant to the
12 workers compensation act shall be subject to review in accordance
13 with the act for judicial review and civil enforcement of agency
14 actions. Such review shall be upon questions of law and fact as
15 presented and shown by a transcript of the evidence and proceedings
16 as presented, had and introduced before the director. The venue of
17 the action shall be the county where the cause of action arose or
18 the county mutually agreed upon by all of the parties. Any such
19 action shall have precedence over all other hearings except those of
20 like character, and shall be heard not later than the first term of
21 the district court after the appeal has been perfected, and the court
22 shall decide all such cases within 60 days after submission. The
23 appealing party shall notify the director when judgment is issued by
24 the court. If judgment is not issued within 60 days of submission,
25 ~~the appealing party shall~~ *any party may* notify the director to that
26 effect. The director will advise the judge to whom the case was
27 submitted that 60 days has elapsed since submission of the case and
28 request that a decision be rendered. If no decision is forthcoming
29 within 30 days of such request by the director, the director will
30 advise the supreme court justice having jurisdiction over such judge
31 of all of the facts in regard to the review and the failure of the judge
32 to render a decision as required by this section.

33 (b) On any such review the district court shall have jurisdiction
34 to grant or refuse compensation, or to increase or diminish any award
35 of the director as justice may require. No compensation shall be
36 due or payable until the expiration of the time for commencing an
37 action for review and then the payment of past due compensation
38 awarded by the director shall not be payable if, within such time a
39 petition for review, has been filed in accordance with the act for
40 judicial review and civil enforcement of agency actions. The right of
41 review shall include the right to make no payments of such com-
42 pensation until the review has been decided by the district court if
43 the employer is insured for workers compensation liability with an

1 insurance company authorized to do business in this state, if the
2 employer is maintaining membership in a qualified group-funded
3 workers compensation pool under K.S.A. 44-581 through 44-591 and
4 amendments thereto, if the employer is maintaining membership in
5 a group-funded pool under the Kansas municipal group-funded pool
6 act which includes workers compensation and employers' liability
7 under the workers compensation act, or if the employer is currently
8 approved by the director as a self-insurer and has filed a bond with
9 the district court in accordance with K.S.A. 44-530 and amendments
10 thereto. Commencement of an action for review shall not stay the
11 payment of compensation due for the ten-week period next preceding
12 the director's decision and for the period of time after the director's
13 decision and prior to the decision of the district court on review.

14 (c) If review of the decision of the district court is sought pursuant
15 to K.S.A. 77-623 and amendments thereto, the compensation payable
16 under the decision of the district court shall not be stayed pending
17 such review. Review of the decision of the district court shall take
18 precedence over other cases except cases of the same character.

19 (d) If compensation, including medical benefits, temporary total
20 disability benefits or vocational rehabilitation benefits, has been paid
21 to the worker by the employer or the employer's insurance carrier
22 during the pendency of review by the district court or by appellate
23 courts and the amount of compensation awarded by the director or
24 the district court is reduced or totally disallowed by the decision on
25 the appeal or review, the employer and the employer's insurance
26 carrier, except as otherwise provided in this section, shall be reim-
27 bursed from the workers compensation fund established in K.S.A.
28 44-566a and amendments thereto for all amounts of compensation
29 so paid which are in excess of the amount of compensation that the
30 worker is entitled to as determined by the final decision on review.
31 The director shall determine the amount of compensation paid by
32 the employer or insurance carrier which is to be reimbursed under
33 this subsection, and the director shall certify to the commissioner
34 of insurance the amount so determined. Upon receipt of such cert-
35 ification, the commissioner of insurance shall cause payment to be
36 made to the employer or the employer's insurance carrier in ac-
37 cordance therewith.

38 (e) If compensation, including medical benefits, temporary total
39 disability benefits or vocational rehabilitation benefits, has been paid
40 to the worker by the employer, the employer's insurance carrier or
41 the workers compensation fund during the pendency of review by
42 the district court or by appellate courts, and the employer, the
43 employer's insurance carrier or the workers compensation fund,

1 which was held liable for and ordered to pay all or part of the
2 amount of compensation awarded by the director or the district court,
3 is held not liable by the final decision on the appeal or review for
4 the compensation paid or is held liable on such appeal or review to
5 pay an amount of compensation which is less than the amount paid
6 pursuant to the award, then the employer, employer's insurance
7 carrier or workers compensation fund shall be reimbursed by the
8 party or parties which were held liable on such appeal or review to
9 pay the amount of compensation to the worker that was erroneously
10 ordered paid by the director or district court. The director shall
11 determine the amount of compensation which is to be reimbursed
12 to each party under this subsection, if any, in accordance with the
13 final decision on the appeal or review and shall certify each such
14 amount to be reimbursed to the party required to pay the amount
15 or amounts of such reimbursement. Upon receipt of such certifi-
16 cation, the party required to make the reimbursement shall pay the
17 amount or amounts required to be paid in accordance with such
18 certification. No worker shall be required to make reimbursement
19 under this subsection or subsection (d).

20 (f) As used in subsections (d) and (e), "employers' insurance car-
21 rier" includes any qualified group-funded workers compensation pool
22 under K.S.A. 44-581 through 44-591 and amendments thereto or a
23 group-funded pool under the Kansas municipal group-funded pool
24 act which includes workers compensation and employers' liability
25 under the workers compensation act.

26 (g) *If any temporary or permanent partial disability or temporary*
27 *or permanent total disability benefits have been paid to the worker*
28 *by the employer or the employer's insurance carrier during the*
29 *pendency of review by the district court or by appellate courts and*
30 *the amount of compensation awarded for such benefits by the di-*
31 *rector or the district court is reduced by the decision on the appeal*
32 *or review and the balance of compensation due the worker exceeds*
33 *the amount of such reduction, the employer and the employer's*
34 *insurance carrier shall receive a credit which shall be applied as*
35 *provided in this subsection for all amounts of such benefits which*
36 *are in excess of the amount of such benefits that the worker is entitled*
37 *to as determined by the final decision on review or appeal. If a*
38 *lump-sum amount of compensation is due and owing as a result of*
39 *the decision of the district court, the credit under this subsection*
40 *shall be applied first against such lump-sum amount. If there is no*
41 *such lump-sum amount or if there is any remaining credit after a*
42 *credit has been applied to a lump-sum amount due and owing, such*
43 *credit shall be applied against the last compensation payments which*

are payable for a period of time after the final decision on review or appeal so that the worker continues to receive compensation payments after such final decision until no further compensation is payable after the credit has been satisfied. The credit allowed under this subsection shall not be applied so as to stop or reduce benefit payments after such final decision, but shall be used to reduce the period of time over which benefit payments are payable after such final decision.

Sec. 15. K.S.A. 44-5a04 is hereby amended to read as follows: 44-5a04. (a) Except as hereinafter otherwise provided in this act "disablement" means the event of an employee or workman becoming actually incapacitated, partially or totally, because of an occupational disease, from performing his the employee's work in the last occupation in which injuriously exposed to the hazards of such disease, and "disability" means the state of being so incapacitated; *Provided,*

(b) *The director may cancel the award and end the compensation if the director shall find that the workman finds that the employee (1) has returned to work for the same employer in whose employ he the employee was disabled or for another employer and is capable of earning the same or higher wages than he the employee did at the time of the disablement, or is capable of gaining an income from any trade or employment which is equal to or greater than the wages he the employee was earning at the time of the disablement; or shall find;*

(2) *finds that the workman has absented himself employee is absent and continues to be absent himself so that a reasonable examination cannot be made of him the employee by a physician or surgeon health care provider selected by the employer; or*

physician or surgeon

(3) *has departed beyond the boundaries of the United States; the director may cancel the award and end the compensation.*

Sec. 16. K.S.A. 44-5a18 is hereby amended to read as follows: 44-5a18. Upon the filing or service of a claim for compensation for death from an occupational disease where an autopsy is necessary to accurately and scientifically ascertain and determine the cause of death, such autopsy shall be ordered by the director of workers' compensation. Such autopsy shall be made under the supervision of a medical examiner appointed by said the director. Such The medical examiner shall be a duly licensed physician, health care provider who is a specialist in such examinations and. The medical examiner shall perform or attend such autopsy and shall certify his or her the medical examiner's findings in a report of such the autopsy. Such The report of autopsy shall be filed with the director

duly licensed physician

1 and shall be a public record. The employer and claimants shall be
2 given reasonable notice of such autopsy and each shall have the right
3 to have a physician ~~health care provider~~ of his or her ~~the employer~~ physician
4 or claimant's own choosing present at the time. The director also
5 may exercise such authority on his or her ~~the director's~~ own motion
6 or on application made to the director at any time, upon the pres-
7 entation of facts showing that a controversy may exist in regard to
8 the cause of death or the existence of any occupational disease.

9 Sec. 17. K.S.A. 44-515, 44-516, 44-518, 44-519, 44-551, 44-5a04
10 and 44-5a18 and K.S.A. 1989 Supp. 44-501, 44-508, 44-510, 44-510c,
11 44-510e, 44-510g, 44-512a, 44-528 and 44-556 are hereby repealed.

12 Sec. 18. This act shall take effect and be in force from and after
13 its publication in the statute book.

44-510. Medical compensation; powers of director; judgments for services stayed; hepatitis preventive care. Except as otherwise provided therein, medical compensation under the workers compensation act shall be as follows:

(a) It shall be the duty of the employer to provide the services of a physician, and such medical, surgical and hospital treatment, including nursing, medicines, medical and surgical supplies, ambulance, crutches, and apparatus, and transportation to and from the home of the injured employee to a place outside the community in which such employee resides, and within such community if the director in the director's discretion so orders, as may be reasonably necessary to cure and relieve the employee from the effects of the injury. In every case, all fees, transportation costs and charges under this section and all costs and charges for medical records and testimony shall be subject to approval by the director and shall be limited to such as are fair, reasonable and necessary. The director shall have jurisdiction to hear and determine all disputes as to such charges and interest due thereon.

FALL ISSUE - UPDATE 1988, p. 8, 9.

MEDICAL COST CONTAINMENT IN WORKERS' COMPENSATION

By Director Robert A. Anderson

Containing escalating health care costs is an ever-present challenge for both workers' compensation systems and other health care systems. It was the non-workers' compensation health care world that first recognized the need for systematic action, and it has made significant progress toward meeting the need with an array of traditional and innovative cost containment strategies. Among the strategies currently in existence or statutorily mandated in over 25 states are mandatory fee schedules for medical services and related fees.

It is crystal-clear that the legislators, in enacting K.S.A. 44-510(a) which provides in part: ". . . all fees, transportation costs and charges under this section and all costs and charges for medical records and testimony shall be subject to the approval by the director and shall be limited to such as are fair, reasonable and necessary," intended to give the Director the power to establish a medical fee schedule in Kansas for health care providers. I also feel it is my duty to study the feasibility of such a program and to implement one as soon as practical, if it will assist in administering the Division of Workers Compensation in a more efficient manner.

On August 27, 1988, I traveled to Seattle, Washington, for the 74th Annual Convention of the International Association of Industrial Accident Boards and Commissions' (I.A.I.A.B.C.), which was held from August 28 through September 1, 1988. At that annual convention I spoke with my counterparts from various states who now have medical fee schedules to learn about their programs and to seek their assistance in implementing a similar program in Kansas. The I.A.I.A.B.C. Educational Foundation, Inc., will present "Health Care Cost Issues in Workers' Compensation," a national forum at the Fairmont Hotel, New Orleans, Louisiana, February 8 through 11, 1989. I plan to attend that national forum to gain additional insight on medical cost containment in workers' compensation.

In the meantime, I have asked Mr. James P. Schwartz, Jr., Consulting Director of the Kansas Employers Coalition on Health, Inc., to help form a task force to study medical cost containment in Kansas to include fee schedules in workers' compensation. It is expected that the Executive Director, or his representative, from the Kansas Medical Society and the Executive Director, or his representative, from the Kansas Industrial Council, Kansas Chamber of Commerce and Industry, will be members of that task force. If there is anyone with a serious interest in being a member of that task force and studying the issue of medical cost containment and medical fee schedules in workers' compensation and their feasibility for use in Kansas, please contact Mr. James P. Schwartz, Jr., Consulting Director, Kansas Employers Coalition on Health, Inc., 1271 S.W. Harrison, Topeka, Kansas 66612, or the Workers Compensation Director.

Similar medical cost containment measures and fee schedules in workers' compensation have been implemented in other states. It is not my intent in studying these issues to limit medical fees, per se, but rather it is to set a state-wide standard that all medical providers would be required to comply with if they continue to treat injured workers involved in workers' compensation cases which should in turn drastically limit the disputes between self-insureds or insurance companies and medical providers over the reasonableness of treatment and medical service fees, and provide protection to the injured worker.

In the next newsletter, I hope to be able to report on the formation of the task force, its initial findings and any relevant information discussed at the "Health Care Cost Issues in Workers' Compensation" national forum held February 8 through 11, 1989, in New Orleans, Louisiana.

Secretary Siehndel to select Workers Compensation Joint Advisory Committee

Ray D. Siehndel, Acting Secretary, Department of Human Resources announced that he will select a Workers Compensation Joint Advisory Committee to study the "New Act" and to make recommendations for any amendments to the Kansas Legislature. The Advisory Committee, who will serve without compensation, will be composed of two members representing labor groups; two members representing business and industry groups; two at-large members from the general public; a claimant's attorney; a respondent's attorney; an attorney representing the Workers' Compensation Fund; a vendor as defined in K.A.R. 51-24-3(a); the Rehabilitation Administrator; and the Workers Compensation Director. The labor members will be selected from a list submitted by the Kansas State Federation of Labor. The industrial and business mem-

bers will be selected from a list submitted by the Kansas State Chamber of Commerce. The at-large members, attorneys, and the vendor will be selected from recommendations and requests received for consideration.

Although there have been no meetings held during the last eight years, an advisory committee is not a new concept in Kansas. A joint advisory committee was first formed in 1964. A similar committee was formed on December 6, 1976, by then Secretary of Human Resources, Dr. James A. McCain, who appointed seven members from labor, management and the legal profession to serve on an advisory committee to the Division of Workers Compensation.

Secretary Siehndel stressed

that he expects the new advisory committee to make viable recommendations to the Senate Labor, Industry & Small Business Committee; the House Labor & Industry Committee; and other legislators. He believes this advisory committee is very important to the state of Kansas, and that committee member involvement will be important in determining the future shape of our workers compensation laws.

If you are interested in serving on this advisory committee as an at-large member, attorney, or vendor or if you would like Secretary Siehndel to consider someone for one of these at-large positions, please write to Director Robert A. Anderson, Division of Workers Compensation, Landon State Office Building, 900 SW Jackson, Room 651-S, Topeka, KS 66612-1276.

OUT FROM WC 20931 03/02/90

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DIRECTORS Reviews of Preliminary Orders
filed since 7/01/87 through 3/02/90

7/01/87 - 6/30/88 = 71 day Avg.
* 117 days - on reviews
7/01/88 - 3/02/90 = 39 day Avg.
* 77 days - on reviews

188 REVIEWS READ

07/01/87 -
06/30/88
1) 9 Affirmed
2) 8 Modified
3) 2 dismissed
4) 8 not reviewable
5) 7 not reviewed

07/01/88 -
03/02/90
1) 16 Affirmed
2) 5 Modified
3) 12 Dismissed
4) 6 not reviewable
5) 37 not reviewed.

5 modified
3 - Claimant
1 - Respondent
1 - W.C. Fund

25 REVIEWS AFFIRMED
5 REVIEWS MODIFIED
14 REVIEWS DISMISSED
6 CASES NOT REVIEWABLE
44 CASES NOT REVIEWED

94 TOTAL

31 APPLIED BY CLAIMANTS
59 APPLIED BY RESPONDENTS
4 APPLIED BY W.C. FUND
0 APPLIED BY OTHERS

58-E

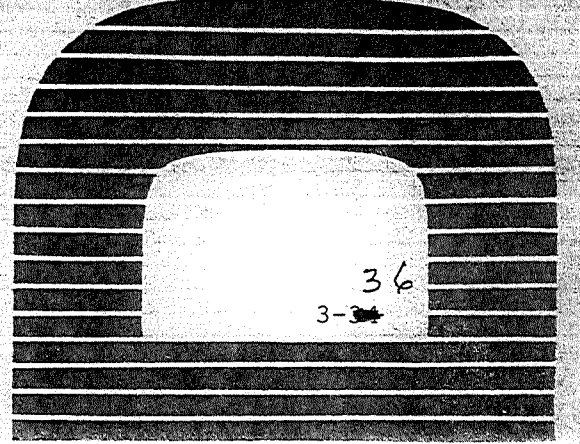
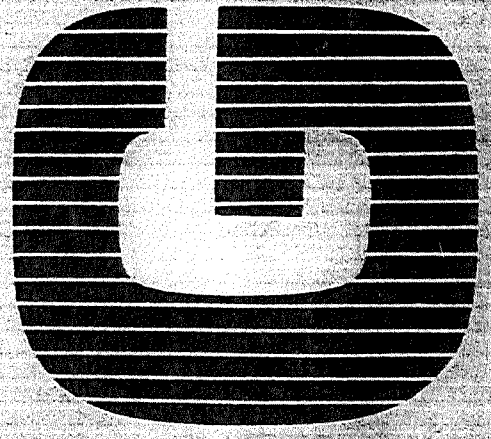
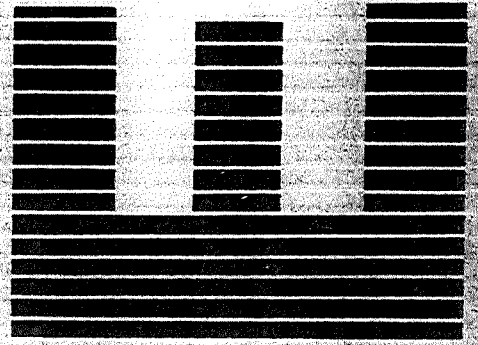
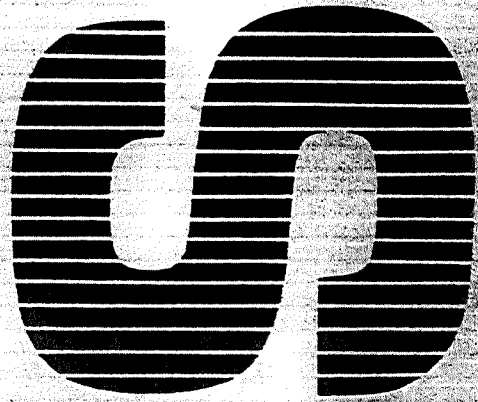
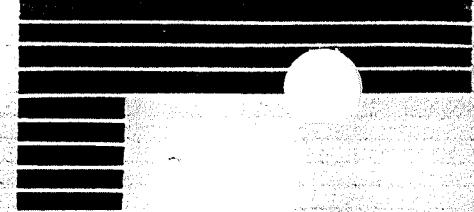
SUMMER-1988-UPDATE, P.9
3. Preliminary Orders not Appealable

The legislative intent of K.S.A. 44-534a is crystal clear that no appeal can be taken to the Director, District Court, or appellate court from a temporary order arising out of a preliminary hearing. See Lively v. MBPXL Corp., 7 Kan. App.2d 204, 207, 638 P.2d 999 (1982). Kansas Administrative Regulation (K.A.R.) 51-3-5a provides in part ". . . if any administrative law judge has entered a preliminary award, a director's review pursuant to K.S.A. 44-551 shall not be entertained, except if it is believed the administrative law judge exceeded the authority of an administrative law judge in entering the award."

The Director's office receives appeals each month on temporary awards arising out of a preliminary hearing that do not involve factual situations where the Administrative Law Judge exceeded his authority in entering the award. The Director's office has no jurisdiction to hear such appeals, and must summarily dismiss these appeals, which is both time-consuming and costly. Workers' compensation litigants should ascertain first if the Director's office has jurisdiction to hear an appeal before they appeal. The time saved from dealing with these frivolous appeals could be better spent on conducting timely and meaningful Director's reviews.

AUGUST-89 / NEWS + VIEWS, p.15

9. Despite a clear regulatory statement prohibiting a Director's review of a preliminary award, the Director continues to receive a substantial number of requests for such reviews. K.A.R. 51-3-5a, which deals with preliminary awards, provides in part: ". . . a director's review pursuant to K.S.A. 44-551 shall not be entertained except if it is believed the administrative law judge exceeded the authority of an administrative law judge in entering the award. . ." Previously, a review hearing would be conducted and the reviewability issue decided in turn with all other reviews held. The Director is instituting a new policy to conduct a review hearing by telephone at a special early setting time and render an immediate bench ruling. If the Director finds no jurisdictional ground for granting the review, the prevailing party will then draft an order denying a review.



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V. CURRENT COST CONTAINMENT PROGRAMS

It is useful to begin with the results of a recent survey by the Alliance of American Insurers, which are included in Exhibit 5.

Many of the programs discussed in Section III are currently being used by workers compensation insurers. In fact, of the first ten strategies indicated above (i.e., excluding HMOs, PPOs and IPAs), 36 percent of the companies employ all ten, 16 percent use nine, 32 percent use eight and only 16 percent use five or fewer. HMOs, PPOs and IPAs are less frequently

“ There is also significance in the perception of cost savings. ”

used, perhaps because of the large scale of operations required. As noted earlier, the largest workers compensation insurer in a jurisdiction is typically only 10 percent to 15 percent of the market, and is relatively small when compared to the large health insurers. To the extent that these delivery systems require large numbers of enrollees to achieve economies of scale, they will be more difficult to implement.

Although the Alliance survey does not indicate the magnitude of the savings realized, some information on ac-

tual cost savings is available. These findings are, of necessity, from a non-systematic sample of individual insurers, representing a major casualty insurer with a more than \$1 billion workers compensation exposure, a competitive State Fund, an exclusive State Fund, and a Blue Cross/Blue Shield workers compensation subsidiary.

Automated fee schedule review—14 percent savings of billed charges.

PPO contracting for hospital charges—17 percent—19 percent savings on inpatient charges; 10 percent savings on outpatient.

Utilization review—10 percent savings on hospital charges.

PPO contracting **with** utilization review—30 percent savings on inpatient; 20 percent savings on outpatient.

Hospital bill audits—10 percent savings on inpatient pharmacy and central supply charges.

Elimination of duplicate payment—5 percent—15 percent savings from closer integration with health coverage.

Chiropractic review program—30 percent savings after program costs.

Several respondents identified the savings associated with the entire medical cost containment program currently in place. For a large commercial insurer with an extensive array of cost controls, the total savings amounted to 12 percent of medical expenditures; for an exclusive State Fund with a less well developed program, the savings are expected to be 7 percent in 1989.

There is also significance in the per-

ception of cost savings. One program was widely agreed to be of critical importance in establishing a positive attitude on the part of both claimants and providers—prompt contact with the claimant subsequent to injury. Insurers, self-insurers and State Funds indicated that this step can be critically important in the success of any of the programs mentioned above. In fact, one carrier requires contact within 24 hours for any injury expected to result in more than six weeks of disability.

Summary: Workers compensation insurers have already adopted a significant number of the cost containment programs identified and employed in the health insurance industry. Among these, the most widely cited in terms of expected effectiveness were bill audits and utilization review. As discussed earlier, the strategies that remain unused are those that are either incompatible with statutory provisions, or that result from data systems that are not designed to promote cost containment objectives. Some of these will be the subject of recommendations made later in this paper.

VI. ADMINISTRATIVE STRUCTURE

An administrative structure to facilitate the cost containment programs of the carriers is critical. Two statutory provisions or administrative directives could enhance immeasurably the efficacy of cost containment initiatives—medical fee schedules and employer choice of physician. Further, individual states should support the carriers' efforts to control costs through audit and bill review.

Twenty states have a medical fee schedule and approximately half have some form of employer choice of physician. (See Exhibit 6.)

Historically, there has been disagreement over the impact of fee schedules on workers compensation medical costs. It is argued that fee schedules control costs by limiting reimbursement to reasonable levels, or that they increase costs by promoting over-utilization of services. A recent paper by Borba [1987] sheds some light on this matter, comparing the growth in average medical claim costs in both fee and non-fee schedule states, using NCCI Call for Detailed Claim Information data for two sample years, 1980 and 1983. The results indicate that medical claim costs grew at an annual 15 percent rate in fee schedule states as opposed to 18 percent in states without a fee schedule. On the question of employer choice of physician, Appel and Durbin [1987], using the same data base, found that employee choice of physician was associated with significantly shorter durations of disability. Although this does not directly address the question of medical costs, it is a startling finding nonetheless. This somewhat counter-intuitive result probably can be explained by the fact that the study used a sample of long duration claims (disability of 18 months or more), which are considerably different from the typical claim. For example, in such cases the ability to select the physician and develop a positive relationship may enhance return-to-work, rather than detract from it.

Summary: It was indicated at the beginning of this section that medical

fee schedules and employer choice of physician were important administrative aspects of the workers compensation system. The early results of the

NCCI study (see Appendix), if confirmed by the final results to be ready early in 1990, offer evidence of the validity of this contention.

**Exhibit 6
ADMINISTRATIVE PROFILE**

State	Fee Schedule	Choice of Physician	
Alabama	No	Employer	
Alaska	No		Employee
Arizona	Yes		Employee
Arkansas	No	Employer	
California	Yes	Employer	
Colorado	Yes	Employer	
Connecticut	No	Employer	
Delaware	No		Employee
District of Columbia	No		Employee
Florida	Yes	Employer	
Georgia	Yes	Employer	
Hawaii	Yes		Employee
Idaho	Yes	Employer	
Illinois	No		Employee
Indiana	No	Employer	
Iowa	No	Employer	
Kansas	No	Employer	
Kentucky	No		Employee
Louisiana	No		Employee
Maine	No		Employee
Maryland	Yes	Employer	
Massachusetts	No		Employee
Michigan	Yes	Employer	
Minnesota	Yes		Employee
Mississippi	No		Employee
Missouri	No	Employer	
Montana	Yes		Employee
Nebraska	Yes		Employee
New Hampshire	No		Employee
New Jersey	No	Employer	
New Mexico	No	Employer	
New York	Yes		Employee
North Carolina	Yes	Employer	
Oklahoma	Yes		Employee
Oregon	Yes		Employee
Pennsylvania	No	Employer	
Rhode Island	Yes		Employee
South Carolina	Yes	Employer	
South Dakota	No	Employer	
Tennessee	No	Employer	
Texas	Yes		Employee
Utah	Yes	Employer	
Vermont	No	Employer	
Virginia	No	Employer	
Wisconsin	No		Employee

Excluding monopolistic state funds

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VII. COST CONTAINMENT RECOMMENDATIONS

Workers compensation insurers have been slower than health insurers in implementing medical cost containment programs. Such initiatives are being rapidly developed to respond to the special requirements of this state-mandated, no-fault insurance program. This final section of the report summarizes the recommendations of the Cost Containment Committee.

These proposals are divided into two sections: consensus recommendations, upon which all committee members agree, and additional recommendations, which were voiced by at least one member, but which did not meet the test of consensus. The sense of the committee is not that these proposals are definitive; rather they are intended to provide the guidelines for future research and debate.

Consensus Recommendations

1. Immediately implement and/or enhance the following programs:
Utilization Review
Case Management
Bill Audit
2. Make use of HMOs, PPOs, IPAs and direct contracting for medical services where practical and permitted by law or administrative rule.
3. Develop data systems that capture diagnostic and service-related information to permit monitoring of programs.
4. Establish prompt claimant contact to minimize dispute and enhance positive relationships.

5. Support the institution of medical fee schedules.
6. Support employer choice of physician.
7. Coordinate benefits with health insurance and other forms of coverage to ensure against duplicate or excessive payments.
8. Promote the use of DRGs for hospital reimbursement.²⁴
9. Institute bulk purchase of drugs and other medical supplies.

Additional Recommendations

1. Impose employee cost-sharing, via deductibles, coinsurance or flexible benefit plans.
2. Limit services to those that are clinically proven to be beneficial in the treatment of injury.
3. Limit utilization of high technology equipment such as CATs and MRIs.
4. Eliminate work-relatedness as a requirement for entry into the system for conditions where causation is in doubt, e.g., low back pain, stress, heart disease, etc.²⁵
5. Support "light duty" return-to-work programs and effective rehabilitation efforts.
6. Abandon workers compensation in favor of 24-hour coverage.

APPENDIX ADMINISTRATIVE STRUCTURE AND MEDICAL CLAIM COSTS

In an effort to resolve some unanswered questions, the NCCI Research Division undertook another study of medical claim costs and administrative structures in conjunction with the Workers Compensation Congress. The final results of this study



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 Topeka, Kansas 66612-1227
 (General Information: 913-296-3441)

Mike Hayden, Governor

Ray D. Siehndel, Secretary

February 26, 1990

COPY

296-4000 Director's Office
 296-2050 Rehabilitation
 296-2996 Claims Advisory
 296-3606 Self Insurance
 296-7012 Law Judges

The Honorable Arthur Douville
 Chairman, House Labor & Industry Committee
 State Capitol, Room 115-S
 Topeka, KS 66612

Re: House Bill 3069

Dear Chairman Douville:

Thank you for allowing me to appear before your committee today to testify in support of House Bill 3069.

House Bill 3069 is a codification of the recommendations that I made in paragraph 6 of my January 23, 1990, letter to you and your committee as proposed amendments to the Workers Compensation Act which will eliminate existing problems and reduce litigation. I briefly discussed each of those proposed amendments with your committee on January 23, 1990, and was instructed by you to assist Jim Wilson, Revisor of Statutes in preparing the language for those amendments.

Although HB 3069 has 18 separate sections and proposes to amend 16 existing statutes; in 9 sections of the proposed legislation the only change is the term "physician" is changed to the term "health care provider."

Sections 1, 4, 8-12, 15 and 16 of the proposed legislation, HB 3069, are amendments to existing statutes [K.S.A. 1989 Supp. 44-501; 44-510c; 44-515; 44-516; 44-518; 44-519; 44-528; 44-5a04; and 44-5a18] to change the term physician to the term health care provider.

Section 2, of HB 3069, is an amendment to an existing statute [K.S.A. 1989 Supp. 44-508] to define the terms health care provider, utilization review, peer review and peer review committee.

These additional definitions are needed, if the proposed maximum medical fees schedule and utilization review measure proposed in Section 3 are adopted.

Honorable Arthur Douville
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Section 3 of HB 3069 is an amendment to an existing statute [K.S.A. 1989 Supp. 44-510] to provide that the director by rule and regulation establish a maximum fee schedule for medical, surgical, hospital, dental, nursing, vocational rehabilitation or any other treatment or services provided or ordered by health care providers and rendered to employees including costs and charges for medical records and testimony.

This section of the statute further provides that the director create an advisory panel to assist in the adoption of maximum fees and to annually review and approve the maximum fees; authorizes the director to hear and determine all disputes and prescribe procedural rules to be followed in the resolution of disputes; authorizes the director to investigate health care providers and health care facilities to assure compliance; and, authorizes development of utilization review procedures including show cause hearings if it is determined that a health care provider overutilized or ordered unjustified medical treatment.

Although the existing statute gives the director the authority, (and arguably the responsibility) to establish a medical fee schedule, I feel it is important that the enabling legislation be very specific and allow for the adoption of a fee schedule and utilization measures that will insure that medical care for injured workers is not more expensive than medical care for non-workers and that the fees and costs of services provided by those who health care providers refer patients to, or order tests and treatment from, are not more expensive than treatment for non-workers compensation injuries. It is also important that the medical providers are involved in initially establishing these maximum fees and in reviewing them on an annual basis. Another major consideration is that maximum fees must be sufficient to ensure availability of such reasonably necessary treatment, care and attendance to each injured employee to cure and relieve the employer from the effects of the injury. Finally, there must be a provision to allow utilization review and peer review, if needed. The proposed enabling legislation should accomplish all of those goals while helping to reduce rising cost for injured employees, employers and insurance carriers.

As a minor example, bills for copying charges of medical records are often received for \$25 to \$50 for a single sheet of paper. These expenses are often paid by insurance carriers without objection and the costs are passed on to the employer through premium increases. Injured employees, who order these records, may not initially pay for those charges, but will reimburse their attorney for these "cost of the litigation".

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In August 1989, the task force to evaluate medical cost containment and fee schedules for workers compensation in Kansas issued their report. You were all provided with a copy of that report on January 23, 1990.

The task force noted in the report that: All other insurance lines of business have implemented methods to control both medical utilization and individual fees. This means "cost shifting" could be taking place and workers compensation is paying the highest rates. Two actual examples gathered by the task force follow:

	<u>Managed Care</u>	<u>Group Health</u>	<u>Champus</u>	<u>Workers Comp</u>
Laminectomy	\$1,625	\$2,365	\$2,714	\$2,987
Ortho Office Visit	\$ 20	\$22 to \$24	\$ 25	\$ 27

The task force received the most accurate data on medical costs and indemnity increases from the largest employer in Kansas - the State of Kansas. This data (attachment #4 marked as Exhibit A) is directly out of the claims department and Claims Manager George Welch reports the number of claims did not vary significantly during the time period covered by the table. These medical costs have increased by 97 percent over a 5-year period - compared to the CPI medical costs 32 percent to 34 percent over a 6-year period.

The Kansas State data is also important because we can analyze the percentage of medical costs compared to total costs. This indicates Kansas paid almost as much in medical costs as in indemnity. Or, 45 percent to 49.7 percent of the workers compensation payments are made for medical care. The National Council on Compensation Insurance has advised us this range should actually be 30 to 40 percent.

The state of Kansas has since created an office of Risk Management, entered a contract with a Topeka hospital on a trial basis before contracting on a statewide basis for managed care of their injured workers and has prepared a return to work policy, all of which should reduce costs. Based upon the 1988 medical payout figures and a 22 - 25 percent projected savings, the state of Kansas would save between \$627,742 and \$713,343 a year on medical cost under a maximum medical fee schedule.

The fiscal impact of employment of additional personnel and clerical support staff to implement and administer a maximum fee schedule would be as follows:

Salaries and fringe benefits for one Range 27C	\$38,883
Salaries and fringe benefits for two Range 24	64,594
Salaries and fringe benefits for one Range 13	39,480
one two	

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Telephone and Postage	9,500
Supplies	4,000
Medical fee schedule book (printing 10,000 copies)	170,000
Telephone system and installation	4,500
Maintenance and Repair	2,500
Travel and Subsistence	6,000
Furniture, Equipment and Mobile file system	65,230
Computer cost, including programming and related charges	64,496
Allocated Overhead (DHR)	<u>14,250</u>
TOTAL	<u>\$483,433</u>

Although the start-up cost for this new section seems high, those that pay this assessment are very much in support of its adoption. After the first year the cost would be on salaries and benefits, etc; however, the printing cost would be reduced and any cost for printing would be reimbursed by charging for the printed schedules. Finally, if a medical fee schedule and utilization review are adopted as medical cost containment measures in Kansas, employers, insurance carriers and injured workers, based upon national data, can expect the overall cost of medical care in Kansas for injured workers to be reduced by an average of 22 to 25 percent. Based upon the 1988 statistical data of actual costs paid for medical care for injured workers, that would mean an annual savings of \$13 million to \$17.6 million.

In 1965, 12 states used fee schedules; by 1985, 17 states were using them. In 1989, 23 states had fee schedules, 2 others had schedules pending, and several more were considering their adoption, according to the Workers Compensation Research Institute. Today, 31 states have some form of legislatively authorized fee schedule. See Chart Exhibit 1.

Specific language was inadvertently left out of this enabling statute in subsections (6) and (8), and a balloon amendment is offered to add the additional language. *Attached as ex. S.*

Section 5, of HB of 3069, is an amendment to an existing statute [K.S.A. 1989 Supp. 44-510e] to provide that the director adopt and use a schedule for determining the degree of permanent impairment based upon medically or scientifically demonstrable findings and to further provide pending adoption of such permanent schedule that the Guides to the Evaluation of Permanent Impairment by the American Medical Association shall be the temporary schedule for use under this section. The statute now provides that functional impairment be established by competent medical evidence. (Since July 1, 1987)

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According to the U.S. Department of Labor, Employment Standards Administration, who published a chart entitled "The Use of American Medical Association Guide in State Workers Compensation Agency, March 1988", 37 states use the AMA Guides and 21 states have mandated use by statute, directive, policy, rule or regulation. A copy of that report is attached as Exhibit 2 and another copy of the map showing the use of AMA Guides as Exhibit 3.

Adoption of the AMA Guides would reduce litigation and establish more certainty and uniformity in the rating of permanent impairments. Adoption of the AMA Guides should insure that the injured worker who is unrepresented by counsel, treated and released, would be getting a fair and equitable settlement; and it should reduce the use of the "medical-legal experts" or multiple rating doctors.

On January 23, 1990, your committee was provided with the hard copy of the overlays, Dr. Alan L. Engelberg, M.D., M.P.H. presented as the keynote speaker at the Division's Annual Seminar entitled: Use of the AMA Guides to the Evaluation of Permanent Impairment (3rd Edition). Dr. Engelberg was the editor of the 2nd edition (1984) and 3rd edition (1988) of the AMA Guides.

Dr. George M. Smith, M.D., M.P.H. the author of Chapters 1 and 2 of the 3rd edition of the AMA Guides to the Evaluation of Permanent Impairment spoke at Wichita Seminar on the AMA Guides. Attached as Exhibit 4 is a copy of Dr. Smith's outline entitled "Assessment of Impairment and Disability in Accordance with the AMA Guides."

This statute would provide that a Kansas Administrative Regulation would be drafted to adopt the AMA Guides and other generally accepted guides could also be incorporated. However, until the Kansas Administrative Regulation was drafted the AMA guides would be used.

Section 6, of HB 3069, is an amendment to an existing statute [K.S.A. 1989 Supp. 44-510g] to substitute the term vocational assessment for vocational evaluation; to define the term vocational assessment and to provide that if an employee is receiving unemployment compensation benefits, no temporary total or temporary partial disability compensation shall be payable under this section.

The first part of the amendment will prohibit an injured worker from receiving both temporary total disability benefits and unemployment compensation during the same weeks. Although this has certainly been the exception and not the rule, employers across the state have raised this issue when they realize they are paying for

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both of these benefits for the same weeks. This amendment should help encourage employers to voluntarily provide benefits when they know there is no longer a loophole in the system that provides an employee to earn more while they are off work than when they were working.

This second part of the amendment was intended to be placed in the language of HB 3028, which is the proposed amendment to K.S.A. 44-510g which the Workers Compensation Joint Advisory Committee unanimously recommended but was inadvertently placed in HB 3069. It is language that needs to be a separate subsection of K.S.A. 44-510g to help clarify the purpose of assessment and the procedure.

Section 7, of HB 3069, is an amendment to an existing statute [K.S.A. 1989 Supp. 44-512a] to provide that a penalty for each past due medical bill shall be assessed in an amount equal to the larger of either \$25 or a sum equal to 10 percent of the amount past due on the medical bill. The statute now provides that the penalty for each past due medical bill is \$25.

This is a much needed amendment. As the statute now exists, there is no incentive to file a 44-512a demand for payment of a court-ordered medical bill, as the civil penalty is only \$25. Likewise, an employer or insurance carrier in theory will not fear not paying a \$5,000 or \$10,000 bill if the only penalty is \$25. However, with a potential civil penalty of 10 percent of the bill amount, medical bills will be paid more promptly.

Although the Act protects the injured worker from being initially sued for payment or collection of the medical bills, this amendment should keep the injured workers from receiving collection notices and when and if they do, there will be a more effective remedy to provide for future payment.

This amendment should help reduce the overhead of medical providers and insure prompt payments, which should help reduce the cost of medical care in Kansas.

Section 13, of HB 3069, is an amendment to an existing statute [K.S.A. 44-551] to provide that a director's review of a preliminary award under K.S.A. 44-534a shall not be conducted unless it is believed the administrative law judge exceeded his authority in entering the award. The proposed legislation further provides that director's orders on review of preliminary findings shall be issued within 30 days of oral argument or submission of the case on the record and any other director's orders shall be issued within 90 days of oral argument or submission of the case on the record.

Honorable Arthur Douville

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The statute does not now have a time limitation for issuance of a director's order on review. K.A.R. 51-3-5a now provides that a director's review of a preliminary award shall not be entertained except if it is believed the administrative law judge exceeded the authority of an administrative law judge in entering the award.

The "backlog" that had existed at least since March 1985 (according to Division memorandum) was finally eliminated January 1, 1990, after an 18 month effort. Although I am confident that there will never be another judicial backlog at either the administrative law judge level or the director's level during the time I remain as director, I realize I serve at the pleasure of the Secretary of Human Resources, and as an unclassified employee, this position can change with administrations. Because of that there is a need to insure that the parties have some statutory remedy if another judicial backlog at the director's review level should occur.

Under the proposed amendment, if an order wasn't issued on a preliminary award within 30 days, or final award within 90 days, a party could seek civil relief through mandamus.

Section 14, of HB 3069, is an amendment to an existing statute [K.S.A. 1989 Supp. 44-556] to provide that any party may notify the director if a district court has not issued judgment on review within 60 days after submission so that the director can request the district court judge to render a decision. The statute now provides that only the appealing party shall notify the director.

Section 14 further provides that when the compensation paid during pendency of review where the benefits awarded by the director or district court are ultimately reduced by decision on appeal and the balance due the employee exceeds the amount of reduction, the employer shall receive a credit for all amounts paid in excess of the benefits the worker is entitled to as determined by the final decision on appeal. The credit to the employer is applied to the any lump sum due under the award and any additional credit is applied against the last compensation payments to the employee by reducing the period of time over which payments are made without interrupting payment of benefits after the decision.

The first charge under Section 14 would allow any party to have their appeal to the district court decided in a timely manner by having the director notify the district court judge it has been over 60 days. Under the current statute, parties fear being labeled as the "appealing party" that has questioned the timeliness of the district court review.

Honorable Arthur Douville

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The second change would allow the employer or insurance carrier to take a credit for any payment of temporary total, partial or total disability or permanent partial or total disability after a district court has reduced or disallowed some compensation, if that credit can be taken from a lump sum due and owing the claimant without stopping or reducing the weekly compensation amount. In those cases where the lump sum would not be enough to take the credit from, the credit must be taken from the last weeks of compensation due under the district court or appellate court award.

This amendment will prevent those cases where the claimant receives a "windfall" because of the court decision that provides that the only way to get reimbursed is from the Workers' Compensation Fund and does not allow a credit from the worker's future compensation payments.

This amendment will encourage employers to voluntarily pay compensation prior to a court order and insure that all a claimant gets is just compensation, no more, no less, and will insure that neither side is penalized when it can be avoided.

This amendment should reduce the amount of money that is reimbursed by the Workers' Compensation Fund each year which should have an effect on the cost of the system. This amendment will also express how credits are to be taken and avoid the current methods, attempted by respondents which end up being litigated and subject to K.S.A. 44-512a penalties.

Finally, this amendment would legislatively change the judicial determination in Johnson v. Tony's Pizza Service, 232 Kan. 848, Syl.1, 658 P.2d 1047 (1983) which holds where a workers' compensation award is reduced or totally disallowed by a district or appellate court, K.S.A. 1982 Supp. 44-556(d) provides the sole means by which the employer and its insurance carrier may be reimbursed for any excess payment of compensation. Said statute provides that such reimbursement shall be from the Workers' Compensation Fund upon certification of the amount by the Director of Workers Compensation and is not limited in application to reimbursement of overpayment which exceeds the balance due claimant on the award as modified.

In Johnson v. Tony's Pizza Service, the Workers' Compensation Fund's brief was devoted to the policy argument that the claimant should not receive a windfall to which he or she is not entitled except when he or she would have to dig into his or her own pocket to repay the overpayment. The court noted and agreed with the claimant's counsel that the policy argument would be better addressed to the Legislature as its implementation would entail

Honorable Arthur Douville
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substantial statutory modification. Id. at 852. This amendment is that substantial statutory modification.

In conclusion, I submit that these proposed amendments should eliminate some existing problems and reduce litigation. If the maximum medical fee schedule is adopted, it should reduce the costs of the workers compensation system which will help reduce workers compensation insurance costs. The domino effect is that workers will be retained in their jobs where drastic premium increases would cause layoffs and business closings. Industry will be encouraged to expand or come to Kansas which will help the economy.

These minor amendments and the maximum medical fee schedule will promote health care cost containment and efficiency in the system, without reducing justified benefits, and I encourage you and all committee members to pass this proposed legislation on to the entire house for their consideration along with your strong recommendation that the HB 3036 be passed.

Thank you again for allowing me to appear before you.

Yours truly,



Robert A. Anderson
Workers Compensation Director

mr

Enclosures

pc: Each Committee Member
Secretary Ray D. Siehndel

Ex 1.

State Self-insured Fund
(State employees)

	<u>1984</u>	<u>1985</u>	<u>1986</u>	<u>1987</u>	<u>1988</u>
Disability	1,462,435	1,757,426	2,307,906	2,616,108	3,339,984
Medical	1,447,813	1,344,492	2,096,788	2,163,847	2,853,375
Total	2,910,248	3,101,918	4,404,694	4,779,955	6,193,359
Medical cost changes:		-7.6	155%	103%	131%
Medical as % of total	49.7	43.3	47.6	45.2	46.0

Don...

MEDICAL BENEFITS AND FEE SCHEDULES

Full Benefits				Full Benefits			
Jurisdiction	In Law	Law Authorizes Extension Without Limit	Fee Schedules (1)	Jurisdiction	In Law	Law Authorizes Extension Without Limit	Fee Schedules (1)
Alabama	Yes			Nevada	Yes		rel. value
Alaska	No	Yes	authorized	New Hampshire	Yes		
Arizona	Yes		rel. value	New Jersey	Yes		DRG
Arkansas	No	Yes	authorized	New Mexico	Yes		
California	Yes		rel. value	New York	Yes		max. & life
Colorado (2)	No	Yes	rel. value	North Carolina	Yes		rel. value & max.
Connecticut	Yes		DRG	North Dakota	Yes		
Delaware	Yes			Ohio (3)	Yes		
Dist. of Columbia	Yes			Oklahoma	Yes		authorized
Florida	Yes		max.	Oregon (3)	Yes		max. percentile
Georgia	No	Yes		Pennsylvania	Yes		
Hawaii	Yes		max.	Rhode Island	Yes		medicare
Idaho	Yes			South Carolina	Yes		max.
Illinois	Yes			South Dakota	Yes		
Indiana	Yes			Tennessee	Yes		
Iowa	Yes			Texas	Yes		rel. value
Kansas	Yes			Utah	Yes		rel. value
Kentucky	Yes		authorized	Vermont	Yes		
Louisiana	Yes		authorized	Virginia	Yes		
Maine	Yes		authorized	Washington	Yes		rel. value
Maryland	Yes		rel. value	West Virginia	Yes		authorized
Massachusetts	Yes		medical	Wisconsin	Yes		
Michigan	Yes		max.	Wyoming	Yes		rel. value
Minnesota	Yes		max. percentile	Longshorem	Yes		
Mississippi	Yes		authorized				
Missouri	Yes						
Montana	Yes		rel. value				
Nebraska	Yes		rel. value				

- (1) States which have legislatively authorized. Some may not have adopted as yet.
- (2) Colorado: There is a \$20,000 maximum on both W.C. and O.D. medical benefits; however, there is a Major Medical Insurance Fund Act which defrays all medical, hospital, surgical, nursing, and drug expenses in excess of the \$20,000 limit.
- (3) The Ohio and Oregon laws set no initial amount or period; all medical benefits authorized by the administrative agency. In Ohio, in silicosis cases, no medical benefits payable except in cases of total disability or a change of occupation.

The Use of American Medical Association Guide
in State Workers' Compensation Agency

Exh.
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MS. ST. FRANCIS HOSPITAL

State	AMA Guide Used	Mandated
Alabama	Yes	No
Alaska	Yes	Yes-by statute
Arizona	Yes	Yes-by rule
Arkansas	Yes	No
California	No	No
Colorado	Yes	No
Connecticut	Yes	No
Delaware	Yes	Yes-by policy
District of Columbia	Yes	Yes-by policy
Florida	Yes	Yes-by statute
Georgia	Yes	Yes-by statute
Hawaii	Yes	Yes-by policy
Idaho	Yes	No
Illinois	No	No
Indiana	Yes	No
Iowa	Yes	Yes-by rule
Kansas	No	No
Kentucky	Yes	Yes-by statute
Louisiana	Yes	Yes-by statute
Maine	No	No
Maryland	Yes	Yes-by statute
Massachusetts	Yes	No

The Use of American Medical Association Guide
in State Workers' Compensation Agency (Cont.)

State	AMA Guide Used	Mandated
Michigan	No	No
Minnesota	No	No
Mississippi	Yes	No
Missouri	No	No
Montana	Yes	Yes-by statute
Nebraska	Yes	No
Nevada	Yes	Yes-by statute
New Hampshire	Yes	Yes-by statute
New Jersey	No	No
New Mexico	Yes	No
New York	No	No
North Carolina	No	No
North Dakota	Yes	Yes-by directive
Ohio	Yes	No
Oklahoma	Yes	Yes-by statute
Oregon	Yes	Yes-by statute
Pennsylvania	No	No
Rhode Island	Yes	No
South Carolina	Yes	No
South Dakota	Yes	Yes-by policy
Tennessee	Yes	Yes-by statute
Texas	Yes	No

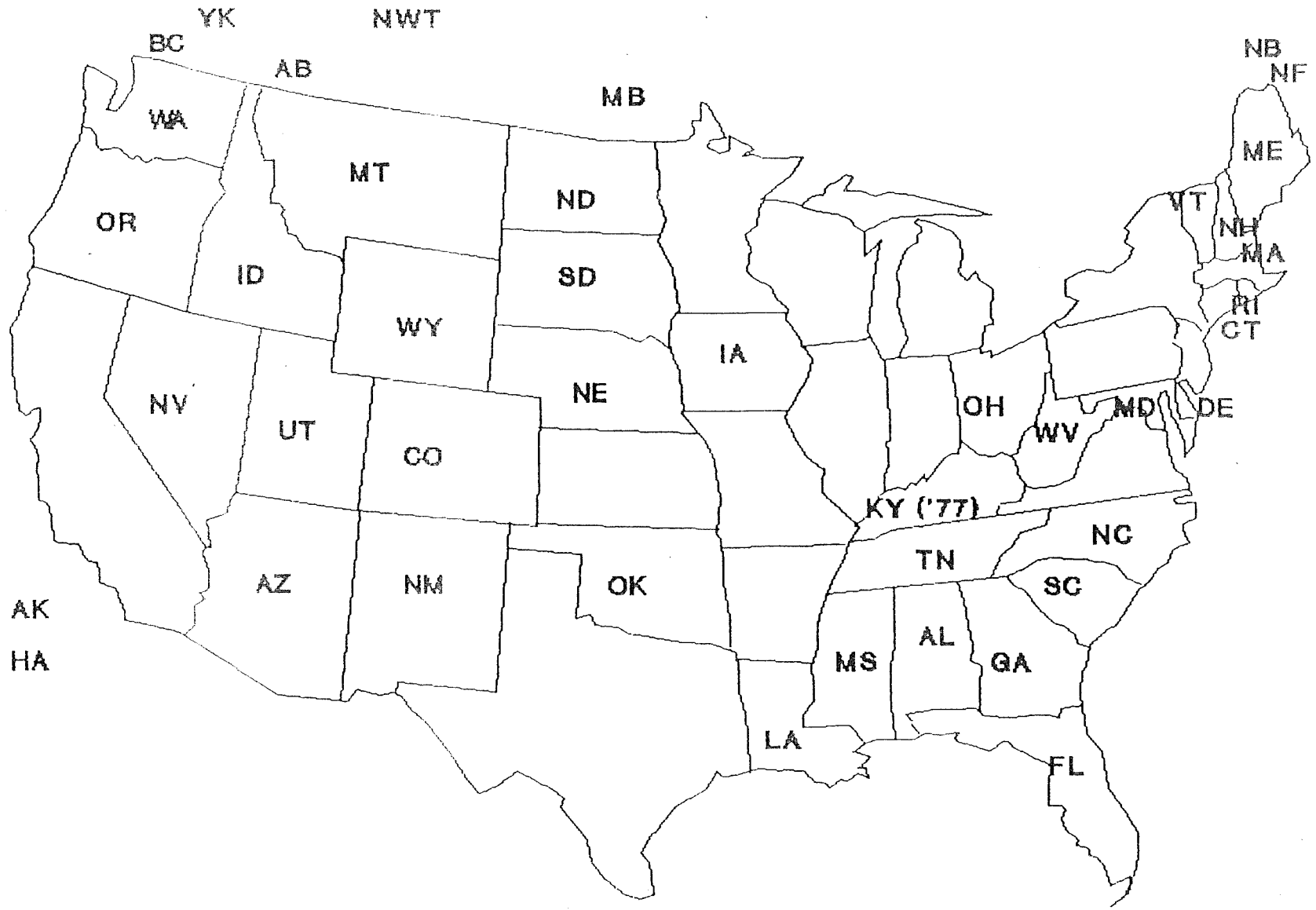
The Use of American Medical Association Code
in State Workers' Compensation Agency (Cont.)

State	AMA Guide Used	Mandated
Utah	Yes	No
Vermont	Yes	Yes-by regulation
Virginia	No	No
Washington	Yes	Yes-by regulation
West Virginia	No	No
Wisconsin	No	No
Wyoming	Yes	No

U.S. Department of Labor
Employment Standards Administration
Office of State Liaison
and Legislative Analysis
Division of State Workers'
Compensation Programs

March 1988

States & Prov. That Use the Guides in Workers Compensation



DIVISION OF WORKERS COMPENSATION

REHABILITATION STATISTICS

PLANS AND ASSESSMENTS

REHABILITATION CATEGORY	FY 89 7/1/88 - 6/30/89	FY 90 (8 months) 7/1/89 - 2/28/90	FY 90 PROJECTION	PROJECTED & INCREASE
PLANS RECEIVED	583	677	1016	74%
PLANS APPROVED	364	509	764	109%
PLAN AMENDMENT RECEIVED	104	254	381	266%
AMENDMENTS APPROVED	64	208	312	388%
ASSESSMENTS RECEIVED	892	1097	1646	85%
MEDIATIONS	75	163	245	227%
ORDERS/VOC EVALUATIONS	*	228	342	*

*ALL OF FY 89 NOT RECORDED

CLOSURE REPORTS

MEDICAL MANAGEMENT RETURN TO WORK	238	241	362	52%
VOCATIONAL REHABILITATION RETURN TO WORK (PRIVATE)	59	117	176	198%
VOCATIONAL REHABILITATION RETURN TO WORK (PUBLIC)	63	65	98	55%
TOTAL RETURN TO WORK	360	423	635	76%
CASE SETTLED AFTER PLAN APPROVED	**	99	149	**
TOTAL SETTLEMENT CASES REFERRED TO A VENDOR	642	504	756	18%

** STAT NOT KEPT IN FY 89.

15th ANNUAL STATISTICAL REPORT

Division of
Workers Compensation

78th YEAR OF SERVICE

Kansas Department
of Human
Resources



July 1, 1989

INTRODUCTION AND DISCUSSION OF STATISTICAL TRENDS

This is the Department of Human Resources, Division of Workers Compensation's 15th Annual Statistical Report. Following is a summary discussion of general trends reflected by the statistics.

In the fall of 1985, the Division of Workers Compensation, under the supervision of Assistant Director William F. Morrissey, began a comprehensive computerization effort to change the manner in which record keeping, research, case handling and tracking, docket control and work output were performed. Because of Assistant Director Morrissey's and Administrative Section supervisor Georgie Coker's foresight in 1985 and their continued efforts to computerize the Division these last four years, this year's statistical report was generated exclusively from the information stored on the Department of Human Resource's mainframe computer. We converted from a program which captured skeletal information about reported accidents to a program that allows us to analyze the information in greater detail. The conversion involved creating more codes and a heavier workload for our data entry personnel. The Computer Services Division of the Department of Human Resources provided excellent programming and invaluable data entry assistance.

Because of this computer capability, we are able to generate greater detailed data relating to the severity of injuries and the industries in which they occur and reports that provide similar detailed breakdowns on litigated claims.

The information gathered during the last fiscal year once again indicates an increase in the level of activity of all services provided by the Division of Workers Compensation. The number of accidents reported increased from 69,933 in FY 88 to 72,674 in FY 89. This is the sixth consecutive year in which the number of accidents reported increased from the previous year. Although the number of reported accidents increased by 2,741, the increase is not an indicator of unsafe working conditions. First, Kansas had 25,500 more jobs in FY 89 than FY 88. Second, the Division of Workers Compensation in cooperation with the Department of Human Resources conducted a series of employer's institutes across the state and stressed to over 3,000 employers their duty under K.S.A. 44-557 to make or cause to be made a report to the director of any accident, or claimed or alleged accident. Finally, the percentage of time loss count decreased from 41.91 percent in FY 88 to 35.22 percent in FY 89; the percentage of hospitalized count decreased from 4.28 percent in FY 88 to 4.10 percent in FY 89; and the fatal count decreased from 70 in FY 88 to 66 in FY 89.

Litigation activity continues to increase, justifying the Legislature's wisdom in enacting HB 2832 which allows an increase in the number of Workers Compensation Administrative Law Judges from seven to ten. An eighth Administrative Law Judge was hired in October 1988. The new office was placed in Salina, Kansas, and a new

judicial district was established by redistricting counties previously covered by three other Administrative Law Judges located in Liberal, Wichita and Topeka. A ninth Administrative Law Judge was hired in October 1989. The newest judge is located in Topeka and will cover one half of the cases in Shawnee County and five counties previously covered by our Johnson County office. Additionally, southeast Kansas was redistricted and reassigned to the two judges located in Wichita. In addition to decreasing the actual caseload of all the Judges, the decrease in travel time for several Judges should enable them to concentrate additional efforts on rendering timely decisions in contested cases. With nine full-time Administrative Law Judges strategically located, the Division will be able to expeditiously deliver the legislatively mandated services to all parties involved in workers compensation litigation on a statewide basis.

In FY 89, 5,218 applications for regular hearings were filed, a 27 percent increase from the previous year. There was an increase of 47 percent in settlements on cases not set for hearing from 2,368 in FY 88 to 3,480 in FY 89. Settlements on cases set for hearing decreased 15.7 percent from 3,264 in FY 88 to 2,752 in FY 89. There was an increase in the total cases settled of 12.3 percent from 5,795 in FY 88 to 6,504 in FY 89.

There was an increase of 33.4 percent in active cases at the beginning of the fiscal year from 5,669 in FY 88 to 7,559 in FY 89. However, due to the Division's efforts to remove 1,481 cases from active status of which only 137 orders were issued reinstating cases to active status, there was an 8.7 percent decrease in active cases by the end of FY 89 from 7,559 to 6,900.

The Administrative Law Judges produced 894 awards on contested cases in FY 89 compared to 946 in FY 88, a decrease of 5.5 percent. This follows an 8 percent increase in awards for FY 88. However, two of the eight Judges were new and there were several months when the Kansas City Judge's office remained vacant due to the retirement of a Judge.

Perhaps the most alarming increase was in the applications for preliminary hearings. There was an increase of 51.8 percent from 1,764 in FY 88 to 2,677 in FY 89. This increase is directly attributed to the director's ruling in Hudson v. Martin Eby Construction Co., Docket No. 129,181 (Opinion filed January 5, 1989) holding that a claimant must file a 7-day notice and an application for preliminary hearing (Form E-3) with the Director's office in Topeka on any preliminary hearing whether it is the initial or a subsequent filing.

Although there was a much larger increase in the actual number of applications received, there was a slight increase of 18.72 percent in the total number of preliminary hearings held from 844 in FY 88 to 1,002 in FY 89. In FY 88, 48 percent of preliminary applications had actual hearings while in FY 89 only 37 percent of applications had actual hearings.

During FY 89, 17 percent of hearings resulted in preliminary awards being denied compared to 23 percent in FY 88. These statistics suggest that the legislative intent of requiring claimants to notify employers of the intent to file an application for preliminary hearing, in order to give an employer the opportunity to voluntarily provide medical treatment, temporary total payments or vocational rehabilitation is working as designed. With 72,674 accidents reported in FY 89, there were only 2,677 applications for preliminary hearing and only 1,002 actual hearings held. Employers were able to voluntarily provide requested benefits, or resolve the claimant's concerns in 1,675 of the cases, or 63 percent of the applications.

Applications for Director's Reviews increased 32.7 percent from 594 in FY 88 to 788 in FY 89. This figures justifies the 12.7 percent decrease in Director's orders without review from 509 in FY 88 to 444 in FY 89. There was a 26.9 percent decrease in Director's orders with review from 454 in FY 88 to 332 in FY 89. However, the emphasis on providing a meaningful appellate review of the record by the Director's office explains in part the decrease in productivity. The requirement that parties file a docketing statement has resulted in a significant number of cases being settled after application but prior to oral argument. The miscellaneous order category shows a 61.2 percent increase from 1,205 in FY 88 to 1,943 in FY 89.

Awards appealed to the District Court increased 11.6 percent from 370 in FY 88 to 413 in FY 89. Decisions rendered by District Courts increased by 79.8 percent from 129 in FY 88 to 232 in FY 89. Decisions rendered by the Court of Appeals and Supreme Court decreased 4.3 percent from 47 in FY 88 to 45 in FY 89.

The following chart compares the workload and production of the average Administrative Law Judge in FY 75, FY 87, FY 88 and FY 89.

WORKLOAD & PRODUCTION OF THE AVERAGE ADMINISTRATIVE LAW JUDGE

	<u>FY 75</u>	<u>FY87</u>	<u>% INC.</u>	<u>FY 88</u>	<u>FY89</u>	<u>% INC.</u>
Pending Cases	233	810	248	944	863	8.6(-)
Applications for Hearing	287	612	113	513	652	27
Appl. for Preliminary Hrgs.	45	176	291	220	335	52
Preliminary orders	22	126	472	106	125	18
Awards	75	123	64	118	112	5(-)
Motions to Implead	26	151	481	N/A	N/A	N/A

The vocational rehabilitation statistics for FY 89 are thoroughly discussed on pages 5-8 of this report. This reporting period is

the second reporting period following the sweeping changes in vocational rehabilitation benefits enacted by the state legislature.

The Workers' Compensation Fund litigation activity continues to increase. The Insurance Department reports the number of Fund impleadings increased by 71 from 1,862 in FY 88 to 1,933 in FY 89. In FY 88, 112,782 Form 88s were filed compared to 109,872 in FY 89, a 2.6 percent decrease. Total expenditures by the Workers' Compensation Fund increased by approximately 3.9 percent from \$22,222,603.92 in FY 88 to \$23,085,771 in FY 89.

Chris Cowger, Staff Attorney from the Kansas Insurance Department, furnished the statistics regarding the Kansas Workers' Compensation Fund. The work of the Kansas Insurance Department in providing this information for the Division's Statistical Report is greatly appreciated.

Georgie Coker, the Division's Statistical Supervisor, once again coordinated the preparation of this report. I commend her for her excellent efforts in supervising this task, and thank the individual members of the Division of Workers Compensation who helped in gathering the statistics for this report and in preparing the final report. The remaining staff at the Division of Workers Compensation, who may not have had an active role in the preparation of this report, are to be commended and thanked for their diligent efforts in performing the administrative functions of the Division shorthanded while their supervisors and co-workers battled with these statistics.

Hopefully, this Statistical Report serves as a useful tool to anyone interested in the administration of the Kansas Workers Compensation Act. If there are areas of information which do not appear in this Statistical Report and would be of interest or benefit to you or your organization, we welcome your comments and suggestions.

Yours truly,



Robert A. Anderson
Workers Compensation Director

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DEPARTMENT OF HUMAN RESOURCES
DIVISION OF WORKERS COMPENSATION

Robert A. Anderson
Director

William F. Morrissey
Assistant Director

David A. Shufelt
Assistant Director

Richard H. Smelser
Administrative Assistant

The Division employs 54 people and is divided into 4 sections, Judicial, Administrative, Claims Advisory, and Vocational Rehabilitation.

David A. Shufelt, Assistant Director, oversees the Judicial Section. There are nine Administrative Law Judges with regional offices in Kansas City, Liberal, Overland Park, Salina, Topeka and Wichita. The Act requires the Director, Assistant Directors, and Judges to be attorneys.

William F. Morrissey, Assistant Director, oversees the Administrative, Claims Advisory and Vocational Rehabilitation sections.

JUDICIAL SECTION

- Kansas City -

Robert Foerschler - Administrative Law Judge
Vacant - Secretary to Administrative Law Judge

- Liberal -

Thomas Richardson - Administrative Law Judge
Mary Wehkamp - Secretary to Administrative Law Judge

- Overland Park -

Alvin Witwer - Administrative Law Judge
Georgette Pemberton - Secretary to Administrative Law Judge

Steven Howard - Administrative Law Judge
Judy Hacker - Secretary to Administrative Law Judge

- Salina -

George Robertson - Administrative Law Judge
Sandy Thorne - Secretary to Administrative Law Judge

- Topeka -

Linda Eckhart - Secretary to Director and Assistant Director
Marcelle Roberts - Secretary to Assistant Director

James Ward - Administrative Law Judge
Debbie Atherton - Secretary to Administrative Law Judge

Floyd V. Palmer - Administrative Law Judge
Vacant - Secretary to Administrative Law Judge

- Wichita -

John Clark - Administrative Law Judge
Shelli Shafer - Secretary to Administrative Law Judge

David Jackson - Administrative Law Judge
Joan Shafer - Secretary to Administrative Law Judge

ADMINISTRATIVE SECTION

Richard Smelser - Business Manager and Self-Insured Program
Louise Sumner - Assessment and Self-Insured Assistant

Statistical & Program Services Unit

Georgie Coker - Supervisor of Statistical & Program Services
Mary Allen - Pending Cases
Lois Stallard - Settlements/Final Releases
Linda Gardner - Mail & Research
Sharon Harry - Mail & Research
Andrew Bell - Research/Employer File
Randy Hewitt - Research/Employer File
Margie Kufahl - Hearing Applications
Phyllis Nesbitt - Hearing Applications
Tiffany Blackwell - Hearing Applications
Marita Peterson - Hearing Applications
Karen Allen - Data Entry
Lisa Bruggen - Data Entry
Cheryl Ray - Data Entry
Eldon Handley - Receptionist
Lorene Damewood - Forms/Receptionist

CLAIMS ADVISORY SECTION

Jack Sippel - Claims Advisory Administrator
Faith Judd - Claims Advisor
David Walker - Claims Advisor
Sandy McCormick - Clerical Assistant & Elections

REHABILITATION SECTION

Richard Thomas - Rehabilitation Administrator
Richard Santner - Assistant Rehabilitation Administrator
Mark Conboy - Assistant Rehabilitation Administrator
Alan Stanton - Assistant Rehabilitation Administrator
Patricia Young - Rehabilitation Clerical
Barbara Zeller - Rehabilitation Clerical
Angela Roberson - Rehabilitation Clerical

- Overland Park -

Robin O'Dell - Assistant Rehabilitation Administrator

FINANCIAL INFORMATION

K.S.A. 74-712 through 74-719 mandates that the administration of the Kansas Workers Compensation Act will be financed by annual assessment of insurance companies authorized to write workers compensation insurance in the state of Kansas; and annual assessment of self-insureds. The assessment shall be made against the losses paid which are reported to our office by each company for a given calendar year, and shall not exceed 3 percent. The percentage factor is determined each year, taking into consideration the estimated office expenditures, changes in the law that will affect the agency, and loss information obtained from carriers and self-insureds.

Division expenditures for FY 90 will be financed as shown:

Reported losses paid in calendar year 1988	\$195,906,156
Current assessment factor	.01667
Assessments collected for FY 90	3,267,321
Number of carriers and self-insureds reporting	612

The state operates on a fiscal year that begins July 1 of a given year and ends on June 30 of the following year. The law requires our Division to remit 20 percent (not to exceed \$200,000) of all collected monies to the Department of Administration for payment of services extended to us by their Divisions, e.g. Accounts and Reports and Budget. An assessment is paid to Department of Human Resources based on services they perform for this Division.

The following reflects estimated expenditures to administer the Workers Compensation Act for FY 90:

Salaries and Wages	\$1,686,787
Contractual Services - communication, printing, rent, maintenance, travel	636,744
Commodities - general office supplies	34,700
Capital Outlay - furniture, equipment, books	54,701
Subtotal	<u>\$2,412,932</u>
Assessment paid to Department of Administration	200,000
Assessment paid to Department of Human Resources	<u>204,510</u>
TOTAL ESTIMATED FY 90 EXPENDITURES	<u>\$2,817,442</u>

CLAIMS ADVISORY SECTION

The Claims Advisory Section is under the direction of the Claims Advisor Administrator, Jack Sippel. He is assisted by Claims Advisors, Faith Judd and Dave Walker; and an Office Assistant III, Sandra McCormick in the Topeka office, and coordinates questions and complaints received by the regional offices.

The Claims Advisory Section works exclusively in an advisory capacity with injured workers, insurance carriers, self-insureds, and others interested in resolving issues prior to litigation. Claimants and interested parties are advised of their entitlements, obligations, and proper procedures regarding claims. Administrative procedures are enforced to bring non-qualified self-insured employers into compliance with the workers compensation law. This section also monitors the insurance carriers and third party administrators for timely and proper administration of claims.

FISCAL YEAR ENDING JUNE 30, 1989

<u>*Month</u>	<u>Topeka</u>	<u>Kansas City</u>	<u>Wichita</u>	<u>Overland Park</u>	<u>Liberal</u>	<u>Salina</u>	<u>Total</u>	<u>**Slow</u>
July	1,246	41	18	17	18		1,340	1
Aug.	1,450	42	16	20	9		1,537	5
Sept.	1,442	43	22	23	13		1,543	1
Oct.	1,234	30	17	15	15		1,311	1
Nov.	1,041	47	11	36	7		1,142	2
Dec.	998	0	8	49	9	1	1,065	2
Jan.	1,336	0	40	71	14	0	1,461	0
Feb.	1,130	45	15	48	9	0	1,247	1
March	1,279	19	9	37	13	2	1,359	3
April	1,279	60	8	55	13	1	1,416	0
May	1,368	74	11	40	8	1	1,502	1
June	1,453	88	16	51	14	4	1,626	1
FY 89	15,256	489	191	462	142	9	16,549	18
FY 88	14,200	422	412	353	75		15,462	31
FY 87	11,457	547	867	533	40		13,444	55
FY 86	11,737	724	896	118	74		13,549	89

* Numbers in first six columns represent initial contacts from interested parties relating to workers compensation claims.

** Number of cases where the Advisory Section judged that slow processing was involved by carriers.

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VOCATIONAL REHABILITATION STATISTICS FY 89
by Richard L. Thomas, Rehabilitation Administrator

FY 89 was the first full year since the Rehabilitation Section began its computerization. As this tracking system becomes more sophisticated the reports will become more diversified.

The data on page 6 shows the increase in the new law (post July 1, 1987) cases to 1,948 and a decrease in the old law (pre July 1, 1987) cases to 557. The new law cases are being served predominately by the private sector rehabilitation vendors while the old law cases continue to be served by Rehabilitation Services (Social and Rehabilitation Services).

At the end of FY 88 the Rehabilitation Section had 2,505 active cases. The data at the bottom of page 6 is a breakdown of the successful return to work closures coordinated by public and private rehabilitation. The 63 public closures are old law and the 59 private closures are new law cases. There were 297 medical management return to work closures reported by private vendors. The total combined public and private rehabilitation return to work closures was 360, an 82 percent increase. In comparison there were 197 successful closures in FY 87 and 198 in FY 88.

With the computerization we are now able to track the number of plans and assessments received by the Rehabilitation Section. The data on page 7 indicate 892 vocational assessments, 583 plans and 104 plan amendments were received during the past fiscal year. There has been an increase in the number of plans and assessment which should continue next fiscal year. The Rehabilitation Section can expect over 1400 assessments and over 900 plans during the next fiscal year.

The chart #2 at the top of page 7 shows that the Rehabilitation Section closed 2,532 cases during FY 88. This figure includes old law and new law closures. The figures include all cases assigned to the rehabilitation section that either were referred to a vendor or the claimant or his/her attorney contacted the office and expressed an interest in rehabilitation services. Within the 642 cases closed, closures 92 were closed after a plan or plan amendment had been approved.

The chart on page 8 is a report on each of the current vendors and the number of plans, assessments and the return to work outcomes. It also includes a total of all closures for each vendor. This chart does not include data from the three or four vendors who are no longer working in Kansas or vendors that had no performance in any of the reporting categories.

Future reports will include the average weekly wages of those claimants who have returned to work with the assistance of rehabilitation vendors.

Cost data was obtained on some of the cases closed by rehabilitation vendors. On the data available we have the following:

	<u>Total Cost</u>	<u>Avg. Cost Per Case</u>
474 Rehabilitation Cases	\$883,584	\$1,865
442 Medical Management Cases	\$677,432	\$1,605

The above data includes cases closed in all categories (successful and unsuccessful) but does not include the cost for public rehabilitation closures.

REHABILITATION STATISTICS

<u>CASES ON HAND</u>	<u>FY 88</u>	<u>FY 89</u>
Number of Active Vocational Rehabilitation Cases.	1,318	1,526
Number of Medical Management Cases by Private Vendors. Public VR does not provide this service.	351	845
Number of Insurance Carrier Status. Not actively involved with public or private rehabilitation.	522	134
Total cases on hand as of June 30, 1989.	2,191	2,505
Total Old Law Cases	829	557
Total New Law Cases	1,362	1,948

<u>SUCCESSFUL CLOSURES - RETURN TO WORK</u>	<u>FY 88</u>	<u>FY 89</u>
State Vocational Rehabilitation	128	63
Private Vocational Rehabilitation	29	59
Private Medical Management	<u>41</u>	<u>238</u>
Subtotal Private	70	297
Total State & Private	198	360

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REHABILITATION CLOSURES IN FY 89

Cases Closed	721
Claimant Returned to Work	228
Cases Closed - Settlement	642
Released to Return to Work	85
Claimant Refused Services	56
Medical Management Returned to Work	238
Medical Management Closure	139
Successful Return to Work - Public	63
Successful Return to Work - Private	59
Unsuccessful Closure Before Services - Public	254
Unsuccessful Closure Before Services - Private	<u>47</u>
CLOSURE TOTALS	2,532

**REHABILITATION PLANS & ASSESSMENTS RECEIVED
FROM JULY 1, 1988 THROUGH JUNE 30, 1989**

Plan Received	583
Plan Reviewed Approved	230
Plan Reviewed Approved With Recommendation	134
Plan Reviewed - Mediation Occurred	59
Plan Reviewed - Clarification Requested	67
Plan Not Approved	74
Plan Exceeds 36 Weeks/Recommended	5
Plan Exceeds 36 Weeks/Not Recommended	1
Plan Amendment Received	104
Amendment Approved	44
Amendment Approved With Recommendations	20
Amendment Mediation Occurred	3
Vocational Assessment Received	892
Request Assessment Clarification	173
Assessment Approved	117
Assessment Approved With Recommendations	19
Assessment Not Approved	38
Assessment Mediation Occurred	<u>16</u>
TOTAL	2,579

VENDOR PERFORMANCE FY 89

<u>VENDOR</u>	<u>I</u>	<u>II</u>	<u>III</u>	<u>IV</u>	<u>V</u>	<u>VI</u>	<u>VII</u>	<u>VIII</u>
American International Health	5	3	0	0	0	1	0	5
Anderson Voc. Rehab. Services	4	2	0	0	0	0	0	0
Assoc. Rehab. Consultants	38	34	30	5	3	1	6	21
Centennial Rehab. Assoc. Inc.	34	14	15	2	1	12	2	63
Cerebral Palsy Research	7	8	1	0	1	0	0	0
Conservco	113	71	47	9	3	77	8	386
Crawford Health & Rehabilitation	56	29	19	4	1	5	1	56
Fortis Corporation	35	16	3	2	0	3	1	24
GRS Rehabilitation Services	0	0	0	0	0	0	0	1
Intracorp/IRA	126	78	56	7	3	44	9	344
Jewish Vocational Service	9	15	10	3	1	1	1	15
Kansas Comprehensive Rehab	2	2	2	0	0	0	0	3
Ks Rehab & Clinical Consultants	126	91	64	27	14	8	10	36
Kansas Rehabilitation Services	3	7	4	3	4	0	63	317
Lange & Associates	4	7	2	0	0	0	0	0
McClellan & Associates	1	3	1	1	1	0	0	0
Menninger Return to Work Ctr.	14	10	5	4	3	0	1	11
Midwest Pain Management Center	1	1	1	3	3	0	0	5
Prof Rehab Consultants Inc.	73	51	25	5	2	52	5	196
Professional Rehab Management	143	63	46	6	5	13	4	120
Progressive Evaluation & Rehab	19	11	3	2	1	8	2	37
Rehabilitation Institute	7	7	5	0	0	0	1	4
Rehabilitation Management	26	30	20	13	10	8	4	47
The Principal Financial Group	0	2	2	0	0	0	0	5
Upjohn Health Programs	14	7	1	0	0	0	0	3
Wesley Medical Center	11	12	9	2	1	1	1	10
Wx Work Capacities, Inc.	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>5</u>
TOTALS	872	574	371	98	57	234	119	1,397

I = Assessment Received; II = Vocational Plan Received; III = Plan Approved; IV = Amendment Received; V = Amendment Approved; VI = Medical Management Return to Work; VII = Rehabilitation Return to Work; VIII = Total Closures

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Kansas Labor Force Estimates Annual Average 1988
Place of Residence Data

Area	Civilian Labor Force	Employment	Unemployment	Unemployment Rate (%)
Kansas	1,277,000	1,216,000	61,000	4.8
Kansas Part of the Kansas City MSA (Johnson, Leavenworth, Miami, and Wyandotte Counties)	327,009	311,705	15,304	4.7
Lawrence MSA (Douglas County)	40,756	39,204	1,552	3.8
Topeka MSA (Shawnee County)	92,093	87,748	4,345	4.7
Wichita MSA (Butler, Harvey, and Sedgwick Counties)	254,422	241,642	12,780	5.0
Allen County	6,756	6,369	387	5.7
Anderson County	4,061	3,800	261	6.4
Atchison County	7,317	6,884	433	5.9
Barber County	2,970	2,856	114	3.8
Barton County	14,550	13,730	820	5.6
Bourbon County	7,413	6,887	526	7.1
Brown County	4,970	4,672	298	6.0
Butler County	25,041	23,952	1,089	4.3
Chase County	1,824	1,740	84	4.6
Chautauqua County	1,962	1,848	114	5.8
Cherokee County	9,622	8,956	666	6.9
Cheyenne County	1,449	1,403	46	3.2
Clark County	1,138	1,099	39	3.4
Clay County	4,305	4,083	222	5.2
Cloud County	5,214	5,036	178	3.4
Coffey County	3,930	3,666	264	6.7
Comanche County	1,270	1,231	39	3.1
Cowley County	17,551	16,564	987	5.6
Crawford County	17,086	16,116	970	5.7
Decatur County	2,039	1,962	77	3.8
Dickinson County	9,061	8,639	422	4.7
Doniphan County	4,052	3,806	246	6.1
Douglas County	40,756	39,204	1,552	3.8
Edwards County	1,626	1,568	58	3.6
Elk County	1,459	1,378	81	5.6
Ellis County	14,125	13,511	614	4.3
Ellsworth County	2,734	2,625	109	4.0
Finney County	17,870	17,196	674	3.8
Ford County	14,879	14,363	516	3.5
Franklin County	11,011	10,234	777	7.1
Geary County	11,552	10,885	667	5.8
Gove County	1,586	1,539	47	3.0
Graham County	1,728	1,658	70	4.1
Grant County	3,132	3,016	116	3.7
Gray County	2,194	2,124	70	3.2
Greeley County	971	930	41	4.2
Greenwood County	3,593	3,407	186	5.2
Hamilton County	1,147	1,110	37	3.2
Harper County	3,726	3,628	98	2.6
Harvey County	16,143	15,516	627	3.9
Haskell County	1,739	1,683	56	3.2
Hodgeman County	1,013	977	36	3.6
Jackson County	5,140	4,779	361	7.0
Jefferson County	8,048	7,560	488	6.1
Jewell County	1,694	1,623	71	4.2
Johnson County	199,120	192,886	6,234	3.1
Kearny County	1,552	1,487	65	4.2
Kingman County	4,144	3,967	177	4.3
Kiowa County	1,847	1,799	48	2.6
Labette County	13,304	12,640	664	5.0
Lane County	1,088	1,053	35	3.2
Leavenworth County	26,921	25,622	1,299	4.8
Lincoln County	1,656	1,572	84	5.1
Linn County	3,852	3,532	320	8.3
Logan County	1,489	1,433	56	3.8

Kansas Labor Force Estimates Annual Average 1988
Place of Residence Data

Area	Civilian Labor Force	Employment	Unemployment	Unemployment Rate (%)
Lyon County	19,454	18,508	946	4.9
McPherson County	14,429	13,916	513	3.6
Marion County	6,428	6,209	219	3.4
Marshall County	6,181	5,994	187	3.0
Meade County	2,017	1,952	65	3.2
Miami County	11,533	10,819	719	6.2
Mitchell County	3,551	3,449	102	2.9
Montgomery County	17,948	16,816	1,132	6.3
Morris County	3,377	3,241	136	4.0
Morton County	1,646	1,582	64	3.9
Nemaha County	5,875	5,708	167	2.8
Neosho County	8,793	8,287	506	5.8
Ness County	2,196	2,136	60	2.7
Norton County	2,962	2,873	89	3.0
Osage County	8,262	7,724	538	6.5
Osborne County	2,328	2,258	70	3.0
Ottawa County	3,620	3,494	126	3.5
Pawnee County	3,641	3,537	104	2.9
Phillips County	3,204	3,109	95	3.0
Pottawatomie County	8,576	8,161	415	4.8
Pratt County	5,179	4,991	188	3.6
Rawlins County	1,956	1,904	52	2.7
Reno County	31,032	29,372	1,660	5.3
Republic County	3,478	3,412	66	1.9
Rice County	4,909	4,683	226	4.6
Riley County	28,220	27,086	1,134	4.0
Rooks County	2,990	2,853	137	4.6
Rush County	1,786	1,700	86	4.8
Russell County	3,807	3,658	149	3.9
Saline County	27,608	26,193	1,415	5.1
Scott County	2,544	2,453	91	3.6
Sedgwick County	213,238	202,174	11,064	5.2
Seward County	9,701	9,283	418	4.3
Shawnee County	92,093	87,748	4,345	4.7
Sheridan County	1,436	1,390	46	3.2
Sherman County	3,421	3,294	127	3.7
Smith County	2,613	2,547	66	2.5
Stafford County	2,274	2,178	96	4.2
Stanton County	1,094	1,057	37	3.4
Stevens County	2,417	2,335	82	3.4
Sumner County	11,450	10,926	524	4.6
Thomas County	4,214	4,083	131	3.1
Trego County	1,802	1,725	77	4.3
Wabaunsee County	3,238	3,068	170	5.3
Wallace County	829	798	31	3.7
Washington County	3,626	3,495	131	3.6
Wichita County	997	953	44	4.4
Wilson County	5,488	5,095	393	7.2
Woodson County	1,680	1,588	92	5.5
Wyandotte County	89,430	82,378	7,052	7.9
City of Emporia	14,385	13,642	743	5.2
City of Hutchinson	19,396	18,221	1,175	6.1
City of Kansas City	83,421	76,679	6,742	8.1
City of Lawrence	32,081	30,835	1,246	3.9
City of Leavenworth	14,963	14,178	785	5.2
City of Manhattan	19,057	18,391	666	3.5
City of Olathe	26,582	25,592	990	3.7
City of Overland Park	61,940	60,163	1,777	2.9
City of Salina	23,771	22,493	1,278	5.4
City of Shawnee	22,629	21,933	696	3.1
City of Topeka	68,480	65,129	3,351	4.9
City of Wichita	165,595	156,588	9,007	5.4

Kansas Department of Human Resources, Research and Analysis Section, phone (913) 296-5058. Developed in cooperation with the U. S. Bureau of Labor Statistics. These estimates are based partly on unemployment insurance records through March 1988.

ADMINISTRATIVE SUPPORT SECTION
(Work Processed Through Agency During Fiscal Year 1989)

<u>Classification</u>	<u>FY 89</u>	<u>FY 88</u>	<u>FY 87</u>	<u>FY 86</u>
ACCIDENT REPORTS filed during fiscal year	72,674	69,933	67,386	66,767
ELECTIONS				
Form 50 (Employee Not to Come Under the Act 10% or more shareholder)	2,236	2,126	2,070	2,250
Form 50a (Cancellation of Form 50)	164	117	113	114
Form 51 (Employer to Come Under the Act, Gross Payroll \$10,000 or less, Agricultural Pursuits)	164	246	287	38
Form 51a (Cancellation of Form 51)	7	13	25	22
Form 113 (Individual, Partner or Self-Employed)	1,218	1,454	1,219	1,400
Form 114 (Cancellation of Form 113)	104	93	102	96
Form 123 (Employer to Provide Coverage for Volunteer Workers)	125	86	66	58
Form 124 (Cancellation of Form 123)	1	3	4	0
Fireman's Election Out of Act	0	3	17	0
Form 135 (Cover Community Service)	4	N/A	N/A	N/A
Form 136 (Cancellation of Form 135)	0	N/A	N/A	N/A
HANDICAPPED EMPLOYEES Form 88 filed during fiscal year	109,872	112,782	98,496	93,987
SELF-INSURED				
Employer's Self-Insured Application	5	5	12	8
Cancelled Self-Insurer Permits	3	12	13	18
Employers Qualified as Self-Insureds	123	121	127	13
Groups	4	N/A	N/A	N/A

ACCIDENTS REPORTED FOR FISCAL YEARS 1984-1989

	<u>FY 89</u>	<u>FY 88</u>	<u>FY 87</u>	<u>FY 86</u>	<u>FY 85</u>	<u>FY 84</u>
Total Accidents	72,674	69,933	67,386	66,767	62,769	57,156
Occupational Disease	1,199	923	1,016	762	640	623
Fatals	66	70	69	96	88	99

JUDICIAL SECTION
(Work Processed Through Agency During Fiscal Year 1989)

<u>Classification</u>	<u>FY 89</u>	<u>FY 88</u>	<u>FY 87</u>	<u>FY 86</u>
Active Cases - Beginning of Fiscal Year	7,559	5,669	5,270	4,567
Applications for Regular Hearings	5,218	4,106	4,282	4,156
Orders Reinstating Cases to Active Status	137	36	70	39
Application for Review & Modification of Existing Awards	33	N/A	N/A	N/A
Awards on Contested Cases	894	946	874	722
Awards on Joint Petition & Stipulation (Docketed)	91	54	47	
Settlements on Cases Set for Hearing	2,752	3,264	2,514	2,256
Orders Removing Case to Inactive Status	1,481	N/A	N/A	N/A
Orders of Dismissal	77	388	697	366
*Adjustment - Case Totaling vs. Accident Totaling	752	N/A	N/A	N/A
Active cases - End of Fiscal Year	6,900	7,559	5,669	5,270
Applications for Director's Review	788	594	604	N/A
Director's Orders with Review	332	454	378	442
Director's Orders Without Review	444	509	506	363
Awards Appealed to District Court	413	370	294	397
Decisions Rendered by District Court	232	129	180	227
Decisions Rendered by Court of Appeals or Supreme Court	45	47	34	31
Awards on Joint Petition & Stipulation (Undocketed)	181	109	94	83
Settlements on Cases Not Set for Hearing	3,480	2,368	2,126	2,012
Awards Modified by the Director	20	36	70	7
Miscellaneous Orders	1,943	1,205	2,078	1,522
APPLICATIONS FOR PRELIMINARY HEARINGS FOR FISCAL YEARS				
Applications for Preliminary Hearings	2,677	1,764	1,232	1,194
Preliminary Awards of Compensation	836	649	719	676
Preliminary Awards Denied	166	195	162	205

*New computer program tracks multiple dates of accident as one case rather than multiple cases.

WORKERS COMPENSATION INSURANCE EXPERIENCE
Prepared by Kansas Insurance Department

<u>Year</u>	<u>Direct Premiums Written</u>	<u>Direct Premiums Earned</u>	<u>Direct Losses Paid</u>	<u>Direct Losses Incurred</u>	<u>Premium Written to Losses Paid</u>	<u>Premium Earned to Losses Incurred</u>
1968	28,908,220	28,221,489	14,831,568	16,625,404	51.3	58.9
1969	28,451,385	30,627,729	15,539,762	16,435,978	54.6	53.6
1970	32,103,022	31,002,826	16,779,241	18,337,520	52.2	59.1
1971	30,278,679	30,097,337	17,947,366	19,327,951	59.2	64.2
1972	34,622,948	33,203,461	19,125,394	21,376,326	55.2	64.4
1973	37,024,905	35,456,396	21,194,243	23,915,584	57.2	67.4
1974	48,829,189	45,391,621	24,936,749	30,801,921	51.1	67.9
1975	60,931,943	58,384,479	30,919,290	39,391,122	50.7	67.5
1976	74,905,244	69,745,184	36,281,750	46,947,995	48.4	67.3
1977	95,030,094	91,946,121	41,987,153	52,384,640	44.2	57.0
1978	111,624,578	110,678,942	50,153,935	72,202,238	44.9	65.2
1979	118,240,623	113,676,699	60,281,756	82,086,752	51.0	72.2
1980	141,189,216	138,145,343	72,697,056	102,896,246	51.5	74.5
1981	156,207,756	149,261,425	80,425,265	101,691,667	51.5	68.1
1982	154,944,245	152,315,135	88,345,714	107,979,341	57.0	70.9
1983	147,137,981	148,669,330	96,289,968	115,282,150	65.4	77.5
1984	141,097,000	140,223,000	106,701,000	125,520,000	75.6	89.5
1985	172,985,620	170,955,138	120,755,675	147,438,366	69.8	86.2
1986	208,167,277	202,033,619	134,554,116	170,153,475	64.6	84.2
1987	233,674,161	222,846,661	147,885,631	195,885,084	66.1	87.9
1988	257,039,527	259,548,305	164,553,813	208,332,654	64.0	80.3

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KANSAS WORKERS' COMPENSATION FUND
Prepared by the Kansas Insurance Department

<u>Case Load Scheduled</u>	<u>FY 89</u>		<u>FY 88</u>		<u>FY 87</u>	
Total Number of Impleadings	1,933		1,862		1,603	
Total Number of Closed Cases	1,472		1,455		1,170	
<u>Receipts Analysis</u>	<u>FY 89</u>	<u>% of Total</u>	<u>FY 88</u>	<u>% of Total</u>	<u>FY 87</u>	<u>% of Total</u>
Assessment Receipts	\$22,595,122	(84.14)	\$17,983,751	(80.89)	\$ 6,542,599	(55.75)
General Fund Entitlement	4,000,000	(14.90)	4,000,000	(17.99)	4,000,000	(34.07)
Non-Dependent Death Receipts	92,500	(.35)	136,131	(.62)	153,000	(1.30)
Misc. Reimbursements	147,188	(.55)	92,052	(.42)	127,846	(1.08)
Total Receipts	\$26,834,810		\$22,211,934		\$10,823,445	
Previous Year Carryover Balance	9,125	(.03)	16,553	(.07)	908,156	(7.73)
Cancelled Checks	8,916	(.03)	3,242	(.01)	9,486	(.07)
TOTAL FUNDS AVAILABLE	\$26,852,851	(100)	\$22,231,729	(100)	\$11,741,087	(100)

Note: Figures rounded off to the nearest dollar amount.

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EXPENDITURE ANALYSIS

	<u>FY 89</u>	<u>% of Total</u>	<u>FY 88</u>	<u>% of Total</u>	<u>FY 87</u>	<u>% of Total</u>
Disability Compensation	\$16,606,747	(71.94)	\$15,945,464	(71.75)	\$ 8,167,171	(69.66)
Work Assessment	7,045	(.03)	N/A		N/A	
<u>Medical</u>						
Doctor	178,962	(.77)	152,173	(.68)	97,933	(.84)
Hospital	227,381	(.99)	246,717	(1.11)	163,296	(1.35)
Drugs	21,319	(.09)	15,413	(.07)	6,509	(.06)
Misc. (Braces, etc.)	25,337	(.11)	12,736	(.06)	11,957	(.10)
Other Services (Mileage, etc.)	31,874	(.14)	12,995	(.06)	7,763	(.07)
Reimbursement to Ins. Co. (K.S.A. 44-569(a) & K.S.A. 44-569)	3,242,189	(14.04)	3,118,950	(14.04)	1,054,831	(9.00)
Attorney Fees	2,356,858	(10.21)	2,330,799	(10.49)	1,953,605	(16.66)
Court Costs & Depositions, Medical Reports, etc.	210,661	(.91)	233,153	(1.05)	125,989	(1.07)
Refunds (Non-Dependent Death Cases)	9,587	(.04)	50	(.00)	7,493	(.06)
Other Operating Expenses	167,811	(.73)	154,153	(.69)	127,988	(1.09)
TOTAL EXPENDITURES	\$23,085,771	(100)	\$22,222,603	(100)	\$11,724,535	(100)

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ACCIDENT SEVERITY BY INDUSTRY FOR FISCAL YEAR 1989

TABLE I

INDUSTRY	TOTAL		NO TIME LOST		TIME LOST		HOSPITALIZED		FATAL	
	COUNT	COUNT	%	COUNT	%	COUNT	%	COUNT	%	
1 AGRICULTURAL PRODUCTION - CROPS	158	95	60.13	52	32.91	10	6.33	1	.63	
2 AGRICULTURAL PRODUCTION - LIVESTOCK	523	298	56.98	190	36.33	34	6.50	1	.19	
3 BEEF CATTLE FEEDLOTS	322	189	58.70	110	34.16	22	6.83	1	.31	
4 LIVESTOCK N.E.C.	201	109	54.23	80	39.80	12	5.97			
5 AGRICULTURAL SERVICES	450	242	53.78	168	37.33	40	8.89			
6 LAWN AND GARDEN SERVICES	199	100	50.25	86	43.22	13	6.53			
7 AGRICULTURAL SERVICES N.E.C.	251	142	56.57	82	32.67	27	10.76			
8 FORESTRY	5	2	40.00	3	60.00					
9 FISHING, HUNTING AND TRAPPING	0									
10 BITUMINOUS COAL AND LIGNITE MINING	14	8	57.14	5	35.72	1	7.14			
11 OIL AND GAS EXTRACTION	905	427	47.18	385	42.54	90	9.95	3	.33	
12 DRILLING OIL AND GAS WELLS	325	153	47.08	143	44.00	28	8.61	1	.31	
13 OIL AND GAS FIELD SERVICES	402	191	47.51	168	41.79	41	10.20	2	.50	
14 OIL AND GAS EXTRACTION N.E.C.	178	83	46.63	74	41.57	21	11.80			
15 MINING & QUARRYING NONMETALLIC MINERALS	88	50	56.82	29	32.95	9	10.23			
16 BUILDING CONSTRUCTION - GENERAL CONTRACTORS	1,782	998	56.00	670	37.60	109	6.12	5	.28	
17 GENERAL CONTRACTORS - SINGLE-FAMILY HOUSES	620	330	53.22	245	39.52	44	7.10	1	.16	
18 GENERAL CONTRACTORS - INDUSTRIAL BUILDINGS	291	141	48.45	122	41.93	26	8.93	2	.69	
19 GENERAL CONTRACTORS - NONRESIDENTIAL BLDG.	798	475	59.53	283	35.46	38	4.76	2	.25	
20 BUILDING CONSTRUCTION N.E.C.	66	46	69.70	19	28.79	1	1.51			
21 CONSTRUCTION OTHER THAN BUILDING - GEN. CONT.	1,374	775	56.40	507	36.90	85	6.19	7	.51	
22 HIGHWAY & STREET CONSTRUCTION, NOT ELEVATED	384	212	55.21	144	37.50	25	6.51	3	.78	
23 BRIDGE, TUNNEL, ELEVATED HIGHWAY CONSTRUCTION	135	69	51.11	45	33.33	19	14.08	2	1.48	
24 WATER, SEWER, PIPE & POWER LINE, COMMUNICATION	358	198	55.31	141	39.38	18	5.03	1	.28	
25 HEAVY CONSTRUCTION, N.E.C.	497	296	59.56	177	35.61	23	4.63	1	.20	
26 CONSTRUCTION OTHER THAN BUILDING N.E.C.	0									
27 CONSTRUCTION - SPECIAL TRADE CONTRACTORS	3,361	1,886	56.11	1,273	37.88	199	5.92	3	.09	
28 PLUMBING, HEATING (NOT ELECTRIC), AIR COND.	755	451	59.74	266	35.23	37	4.90	1	.13	
29 ELECTRIC WORK	355	224	63.10	119	33.52	11	3.10	1	.28	
30 PLASTERING, DRYWALL, ACCOUSTICAL, INSULATION	346	204	58.96	132	38.15	10	2.89			
31 CARPENTERING	211	109	51.66	80	37.91	22	10.43			
32 ROOFING AND SHEET METAL WORK	439	217	49.43	181	41.23	41	9.34			
33 CONCRETE WORK	319	155	48.59	147	46.08	17	5.33			
34 CONSTRUCTION - SPECIAL TRADE CONTRACTORS N.E.C.	936	526	56.20	348	37.18	61	6.52	1	.10	
35 FOOD AND KINDRED PRODUCTS	3,995	2,394	59.92	1,462	36.60	135	3.38	4	.10	
36 MEAT PACKING PLANTS	2,214	1,361	61.47	769	34.73	83	3.75	1	.05	
37 SAUSAGES & OTHER PREPARED MEAT PRODUCTS	262	143	54.58	113	43.13	6	2.29			
38 FLUID MILK	248	145	58.47	98	39.52	5	2.01			
39 DOG, CAT & OTHER PET FOOD	198	152	76.77	45	22.73	1	.50			
40 BOTTLED & CANNED SOFT DRINKS	222	127	57.21	90	40.54	5	2.25			

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ACCIDENT SEVERITY BY INDUSTRY FOR FISCAL YEAR 1989

TABLE I

INDUSTRY	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
FOOD AND KINDRED PRODUCTS N.E.C.	843	463	54.92	343	40.69	34	4.03	3	.36
TEXTILE MILL PRODUCTS	37	27	72.97	10	27.03				
APPAREL AND OTHER FINISHED PRODUCTS - FABRICS	610	380	62.30	222	36.39	8	1.31		
MENS & BOYS SHIRTS (NOT WORK) & NIGHTWEAR	248	159	64.11	87	35.08	2	.81		
APPAREL AND OTHER FABRIC PRODUCTS N.E.C.	362	221	61.05	135	37.29	6	1.66		
LUMBER & WOOD PRODUCTS - EXCEPT FURNITURE	863	578	66.98	261	30.24	23	2.67	1	.11
WOOD KITCHEN CABINETS	356	247	69.38	102	28.65	7	1.97		
LUMBER & WOOD PRODUCTS N.E.C.	507	331	65.29	159	31.36	16	3.15	1	.20
FURNITURE AND FIXTURES	189	125	66.14	60	31.75	4	2.11		
PAPER AND ALLIED PRODUCTS	437	269	61.56	156	35.70	12	2.74		
PRINTING, PUBLISHING & ALLIED INDUSTRIES	1,267	797	62.91	415	32.75	55	4.34		
COMMERCIAL PRINTING, LETTERPRESS & SCREEN	244	175	71.72	98	23.77	11	4.51		
COMMERCIAL PRINTING, LITHOGRAPHIC	206	106	51.46	91	44.17	9	4.37		
PRINTING, PUBLISHING & ALLIED IND. N.E.C.	817	516	63.16	266	32.56	35	4.28		
CHEMICALS AND ALLIED PRODUCTS	630	384	60.95	202	32.06	44	6.99		
PETROLEUM REFINING & RELATED INDUSTRIES	194	128	65.98	59	30.41	7	3.61		
PETROLEUM REFINING	131	90	68.70	36	27.48	5	3.82		
PETROLEUM REFINING & RELATED IND. N.E.C.	63	38	60.32	23	36.51	2	3.17		
RUBBER & MISC. PLASTICS PRODUCTS	1,857	1,230	66.24	584	31.45	43	2.31		
TIRES AND INNER TUBES	415	313	75.42	90	21.69	12	2.89		
MISC. PLASTIC PRODUCTS	363	192	52.89	156	42.98	15	4.13		
RUBBER & MISC. PLASTICS PRODUCTS N.E.C.	1,079	725	67.19	338	31.33	16	1.48		
LEATHER AND LEATHER PRODUCTS	44	32	72.73	12	27.27				
STONE, CLAY, GLASS & CONCRETE PRODUCTS	817	505	61.81	290	35.50	22	2.69		
PRIMARY METALS INDUSTRIES	821	546	66.51	257	31.30	18	2.19		
FABRICATED METAL PRODUCTS NOT MACH. OR TRANS.	1,818	1,147	63.09	629	34.60	42	2.31		
METAL DOORS, SASH, FRAMES, MOLDING & TRIM	265	162	61.13	99	37.36	4	1.51		
FABRICATED PLATE WORK (BOILER SHOPS)	363	239	65.84	118	32.51	6	1.65		
SHEET METAL WORK	198	143	72.22	49	24.75	6	3.03		
AMMUNITION, EXCEPT SMALL ARMS	363	231	63.64	129	35.54	3	.82		
FABRICATED METAL PRODUCTS N.E.C.	629	372	59.14	234	37.20	23	3.66		
MACHINERY, EXCEPT ELECTRICAL	2,658	1,702	64.03	883	33.22	71	2.67	2	.08
FARM MACHINERY AND EQUIPMENT	730	467	63.97	249	34.11	13	1.78	1	.14
MACHINERY, EXCEPT ELECTRICAL N.E.C.	1,926	1,234	64.07	633	32.87	58	3.01	1	.05
ELECTRICAL & ELECTRONIC MACH., EQUIP., SUPPLIES	490	314	64.08	160	32.65	16	3.27		
TRANSPORTATION EQUIPMENT	2,140	1,367	63.88	720	33.64	53	2.48		
MOTOR VEHICLE PARTS AND ACCESSORIES	350	242	69.14	101	28.86	7	2.00		
AIRCRAFT	309	160	51.78	133	43.04	16	5.18		
AIRCRAFT PARTS & AUXILIARY EQUIPMENT N.E.C.	770	515	66.88	241	31.30	14	1.82		
TRAVEL TRAILERS AND CAMPERS	253	193	76.29	56	22.13	4	1.58		

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ACCIDENT SEVERITY BY INDUSTRY FOR FISCAL YEAR 1989

TABLE I

INDUSTRY	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
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ACCIDENT SEVERITY BY INDUSTRY FOR FISCAL YEAR 1989

TABLE I

INDUSTRY	TOTAL	NO TIME LOST		TIME LOST		HOSPITALIZED		FATAL	
	COUNT	COUNT	%	COUNT	%	COUNT	%	COUNT	%
GROCERY STORES	1,706	989	57.97	652	38.22	65	3.81		
FOOD STORES N.E.C.	94	52	55.32	38	40.43	4	4.25		
AUTOMOTIVE DEALERS & GAS SERVICE STATIONS	1,277	794	62.18	407	31.87	74	5.79	2	.16
MOTOR VEHICLE DEALERS (NEW AND USED)	426	274	64.32	128	30.05	24	5.63		
AUTO AND HOME SUPPLY STORES	378	237	62.70	125	33.07	16	4.23		
AUTOMOTIVE DEALERS & GAS SERV. STAT. N.E.C.	473	283	59.83	154	32.56	34	7.19	2	.42
APPAREL AND ACCESSORY STORES	151	91	60.27	50	33.11	10	6.62		
FURNITURE, HOME FURNISHINGS & EQUIP. STORES	280	166	59.28	99	35.36	15	5.36		
EATING AND DRINKING PLACES	3,502	2,170	61.96	1,193	34.07	137	3.91	2	.06
EATING PLACES	3,455	2,144	62.05	1,174	33.98	135	3.91	2	.06
EATING AND DRINKING PLACES N.E.C.	47	26	55.32	19	40.43	2	4.25		
MISC. RETAIL	1,055	595	56.40	435	41.23	22	2.09	3	.28
MAIL ORDER HOUSES	314	172	54.78	140	44.58	2	.64		
AUTOMATIC MERCHANDIZING MACHINE OPERATORS	266	141	53.01	121	45.49	4	1.50		
MISC. RETAIL N.E.C.	475	282	59.37	174	36.63	16	3.37	3	.63
BANKING	94	56	59.58	32	34.04	6	6.38		
CREDIT AGENCIES OTHER THAN BANKS	77	53	68.83	20	25.97	3	3.90	1	1.30
SECURITY & COMMODITY BROKERS, DEALERS, SERV.	3	2	66.67	1	33.33				
INSURANCE	137	90	65.69	40	29.20	7	5.11		
INSURANCE AGENTS, BROKERS AND SERVICE	106	67	63.21	38	35.85	1	.94		
REAL ESTATE	463	249	53.78	182	39.31	32	6.91		
OPERATORS OF APARTMENT BUILDINGS	198	109	55.05	73	36.87	16	8.08		
REAL ESTATE N.E.C.	265	140	52.83	109	41.13	16	6.04		
COMBINED REAL ESTATE, INSURANCE, LOANS & LAW	0								
HOLDING AND OTHER INVESTMENT OFFICES	53	35	66.04	14	26.42	2	3.77	2	3.77
HOTELS, ROOMING HOUSES, CAMPS, OTHER LODGINGS	576	336	58.34	213	36.98	26	4.51	1	.17
HOTELS, MOTELS AND TOURIST COURTS	554	322	58.12	207	37.37	24	4.33	1	.18
HOTELS, ROOMING HOUSES, CAMPS, OTHERS N.E.C.	17	13	76.47	2	11.77	2	11.76		
PERSONAL SERVICES	325	192	59.08	122	37.54	10	3.07	1	.31
BUSINESS SERVICES	1,870	1,046	55.93	730	39.04	92	4.92	2	.11
CLEANING & MAINTENANCE SERVICES N.E.C.	433	219	50.58	204	47.11	10	2.31		
TEMPORARY HELP SUPPLY SERVICES	185	98	52.97	78	42.16	8	4.33	1	.54
BUSINESS SERVICES N.E.C.	1,252	729	58.23	448	35.78	74	5.91	1	.08
AUTOMOTIVE REPAIR, SERVICES, AND GARAGES	690	436	63.19	220	31.88	34	4.93		
GENERAL AUTOMOTIVE REPAIR SHOPS	272	172	63.24	83	30.51	17	6.25		
AUTOMOTIVE REPAIR, SERV., & GARAGES N.E.C.	418	264	63.16	137	32.77	17	4.07		
MISC. REPAIR SERVICES	463	285	61.56	164	35.42	13	2.81	1	.21
MOTION PICTURES	30	22	73.34	7	23.33	1	3.33		
AMUSEMENT & RECREATION SERVICES NOT MOVIES	335	207	61.79	109	32.54	19	5.67		
MEMBERSHIP, SPORTS & RECREATION CLUBS	162	100	61.73	52	32.10	10	6.17		

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ACCIDENT SEVERITY BY INDUSTRY FOR FISCAL YEAR 1989

TABLE I

INDUSTRY	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
AMUSEMENT & RECREATION SERVICES N.E.C.	173	107	61.85	57	32.95	9	5.20		
HEALTH SERVICES	9,211	5,873	63.76	3,022	32.81	315	3.42	1	.01
SKILLED NURSING CARE FACILITIES	2,127	1,209	56.84	868	40.81	50	2.35		
NURSING AND PERSONAL CARE FACILITIES N.E.C.	102	44	43.14	57	55.88	1	.98		
GENERAL MEDICAL AND SURGICAL HOSPITALS	4,641	3,282	70.72	1,314	28.31	44	.95	1	.02
PSYCHIATRIC HOSPITALS	1,906	1,086	56.98	620	32.53	200	10.49		
SPECIALTY HOSPITALS, EXCEPT PSYCHIATRIC	42	29	69.05	11	26.19	2	4.76		
HEALTH SERVICES N.E.C.	393	223	56.74	152	38.68	18	4.58		
LEGAL SERVICES	31	23	74.19	7	22.58	1	3.23		
EDUCATIONAL SERVICES	2,644	1,673	63.28	871	32.94	99	3.74	1	.04
ELEMENTARY AND SECONDARY SCHOOLS	1,461	887	60.71	520	35.59	53	3.63	1	.07
COLLEGES, UNIVERSITIES & PROF. SCHOOLS	1,038	702	67.63	298	28.71	38	3.66		
EDUCATIONAL SERVICES N.E.C.	145	84	57.93	53	36.55	8	5.52		
SOCIAL SERVICES	613	334	54.49	251	40.95	26	4.24	2	.32
MUSEUMS, ART GALLERIES, BOTANICAL, ZOOLOGICAL	11	9	81.82	2	18.18				
MEMBERSHIP ORGANIZATIONS	242	140	57.85	85	35.12	17	7.03		
PRIVATE HOUSEHOLDS	58	35	60.35	22	37.93	1	1.72		
MISC. SERVICES	63	40	63.49	21	33.33	2	3.18		
ENGINEERING, ARCHITECTURAL & SURVEYING	60	38	63.34	20	33.33	2	3.33		
MISC. SERVICES N.E.C.	3	2	66.67	1	33.33				
EXECUTIVE, LEGISLATIVE, GENERAL GOVERNMENT	3,214	1,851	57.59	1,238	38.52	121	3.77	4	.12
EXECUTIVE & LEGISLATIVE OFFICES COMBINED	3,207	1,848	57.62	1,234	38.48	121	3.77	4	.13
EXECUTIVE, LEGISLATIVE, GENERAL GOV. N.E.C.	7	3	42.86	4	57.14				
JUSTICE, PUBLIC ORDER, AND SAFETY	576	383	66.49	173	30.04	19	3.30	1	.17
CORRECTIONAL INSTITUTIONS	426	291	68.31	126	29.58	9	2.11		
JUSTICE, PUBLIC ORDER, AND SAFETY N.E.C.	150	92	61.33	47	31.33	10	6.67	1	.67
PUBLIC FINANCE, TAXATION, MONETARY POLICY	46	30	65.22	13	28.26	3	6.52		
ADMINISTRATION OF HUMAN RESOURCES PROGRAMS	398	259	65.08	127	31.91	12	3.01		
ADMIN. OF SOCIAL, MANPOWER, & INCOME MAINT.	295	194	65.76	93	31.53	8	2.71		
ADMIN. OF HUMAN RESOURCES PROGRAMS N.E.C.	103	65	63.11	34	33.01	4	3.88		
ADMIN. OF ENVIRONMENTAL QUALITY, HOUSING PROG	115	75	65.22	36	31.30	4	3.48		
ADMINISTRATION OF ECONOMIC PROGRAMS	691	429	62.08	236	34.15	25	3.62	1	.15
REGULATION & ADMIN. OF TRANSPORTATION PROG.	613	382	62.32	209	34.09	21	3.43	1	.16
ADMINISTRATION OF ECONOMIC PROGRAMS N.E.C.	78	47	60.26	27	34.61	4	5.13		
NATIONAL SECURITY & INTERNATIONAL AFFAIRS	20	13	65.00	7	35.00				
NONCLASSIFIABLE	427	284	66.51	121	28.34	22	5.15		
TOTALS	72,674	44,034	60.59	25,594	35.22	2,979	4.10	67	.09

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ACCIDENT SEVERITY BY CAUSE OF INJURY FOR FISCAL YEAR 1989

TABLE II

CAUSE	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
AIRCRAFT ACCIDENT	8	3	37.50	5	62.50				
BODILY REACTION (STRESS, STRAIN ON BODY)	4,100	2,408	58.73	1,580	38.54	104	2.54	8	.19
CAUGHT IN, UNDER, BETWEEN (SQUEEZE, PINCH, CRUSH)	4,748	3,143	66.20	1,336	28.14	266	5.60	3	.06
CONTACT WITH ELECTRIC CURRENT	131	89	67.94	28	21.37	11	8.40	3	2.29
CONTACT WITH TEMPERATURE EXTREMES	1,440	824	57.22	529	36.74	87	6.04		
CONTACT WITH RADIATION, CAUSTICS, ETC.	1,811	1,372	75.76	335	18.50	102	5.63	2	.11
EXPLOSIONS	125	86	68.80	24	19.20	13	10.40	2	1.60
FALL TO LOWER LEVEL (INCLUDES JUMPING)	1,356	666	49.11	573	42.26	115	8.48	2	.15
FALL, ON STAIRS	618	340	55.02	253	40.94	25	4.04		
FALL, ONTO OR AGAINST OBJECTS	724	446	61.60	240	33.15	38	5.25		
FALL, SAME LEVEL	7,694	4,238	55.08	3,089	40.15	363	4.72	4	.05
FOREIGN MATTER IN EYES	4,126	3,267	79.18	806	19.54	53	1.28		
LIFTING OBJECTS (LIFTING, PULLING, LOADING)	15,356	7,616	49.60	7,188	46.81	548	3.57	4	.02
MOTOR VEHICLE ACCIDENT	730	278	38.08	314	43.01	120	16.44	18	2.47
MOTOR VEHICLE NON COLLISION (OVERTURNED ETC.)	199	81	40.70	75	37.69	38	19.10	5	2.51
NOISE - EXPOSURE TO	30	26	86.67	4	13.33				
NON HIGHWAY MOTOR VEHICLE (LIFTS, TRACTORS)	93	47	50.54	39	41.94	6	6.45	1	1.07
OBJECTS HANDLED (CUTS, KNIFE, AX, GLASS, TOOLS)	6,405	3,952	61.70	2,221	34.68	231	3.61	1	.01
PULLING OR PUSHING OBJECTS	1,252	699	55.83	531	42.41	22	1.76		
REPETITIVE MOTION	1,189	804	67.62	353	29.69	32	2.69		
REPETITION OF PRESSURE	67	41	61.19	26	38.81				
SHIP OR BOAT ACCIDENT	0								
STRUCK AGAINST (STEPPING ON OBJECTS)	6,673	5,123	76.77	1,422	21.31	127	1.90	1	.02
STRUCK BY	11,096	7,088	63.88	3,484	31.40	517	4.66	7	.06
TRAIN ACCIDENT	0								
VIBRATING OBJECTS (INCLUDES ROUGH MACHINES)	178	122	68.54	53	29.78	3	1.68		
WELDING, THROWING, HOLDING OR CARRYING	733	365	49.80	351	47.88	17	2.32		
MISCELLANEOUS	1,792	910	50.78	735	41.02	141	7.87	6	.33
TOTALS	72,674	44,034	60.59	25,594	35.22	2,979	4.10	67	.09

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ACCIDENT SEVERITY BY MEMBER INJURED FOR FISCAL YEAR 1989

TABLE III

MEMBER	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
1									
2	ABDOMEN	1,232	570	46.27	485	39.37	177	14.36	
3	ANKLE	2,123	1,133	53.37	908	42.77	82	3.86	
4	ARM	1,701	1,149	67.55	505	29.69	47	2.76	
5									
6	BACK	11,582	4,876	42.10	6,356	54.88	350	3.02	
7	BODY PARTS, NEC	224	147	65.63	47	20.98	22	9.82	8 3.57
8	BRAIN (SEIZURE)	1					1	100.00	
9									
10	CHEST	833	512	61.47	272	32.65	47	5.64	2 .24
11	CIRCULATORY SYSTEM (STROKE)	69	15	21.74	11	15.94	30	43.48	13 18.84
12	DIGESTIVE SYSTEM	21	10	47.62	8	38.10	3	14.28	
13									
14	EAR(S)	155	116	74.84	38	24.52	1	.64	
15	EAR(S), INTERNAL (HEARING)	72	64	88.89	8	11.11			
16	ELBOW	1,213	804	66.28	380	31.33	29	2.39	
17									
18	EYE(S)	5,749	4,309	74.95	1,347	23.43	93	1.62	
19	FACE	636	545	85.69	76	11.95	15	2.36	
20	FINGER(S)	8,796	6,587	74.89	1,975	22.45	232	2.64	2 .02
21									
22	FOOT	2,676	1,632	60.99	950	35.50	94	3.51	
23	FOREARM	1,088	782	71.87	287	26.38	19	1.75	
24	HAND	4,597	3,233	70.33	1,240	26.97	124	2.70	
25									
26	HEAD	1,511	1,090	72.14	345	22.83	72	4.77	4 .26
27	HIP(S)	526	288	54.75	206	39.17	32	6.08	
28	JAW	40	26	65.00	11	27.50	3	7.50	
29									
30	KNEE	3,509	2,011	57.31	1,353	38.56	145	4.13	
31	LEG	1,183	705	59.60	405	34.23	73	6.17	
32	LEGS	42	25	59.52	15	35.72	2	4.76	
33									
34	LOWER EXTREMITIES, MULTIPLE	211	95	45.02	109	51.66	7	3.32	
35	LOWER LEG	303	211	69.64	75	24.75	17	5.61	
36	MOUTH (TEETH)	595	446	74.96	137	23.02	12	2.02	
37									
38	MULTIPLE INJURIES	0							
39	NECK	686	427	62.24	239	34.84	20	2.92	
40	NERVOUS SYSTEM	10			8	80.00	2	20.00	
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ACCIDENT SEVERITY BY MEMBER INJURED FOR FISCAL YEAR 1989

TABLE III

MEMBER	TOTAL COUNT	NO TIME COUNT	LOST %	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
NOSE	202	152	75.25	39	19.31	11	5.44		
PROSTHETIC DEVICES	412	384	93.21	27	6.55	1	.24		
RESPIRATORY SYSTEM	253	150	59.29	63	24.90	40	15.81		
SHOULDER	2,354	1,414	60.07	894	37.98	46	1.95		
THIGH	316	207	65.51	97	30.69	12	3.80		
THUMB	2,156	1,499	69.53	582	26.99	75	3.48		
TOE(S)	866	542	62.59	303	34.99	21	2.42		
TRUNK	829	501	60.43	296	35.71	31	3.74	1	.12
UPPER EXTREMITIES, MULTIPLE	504	304	60.32	185	36.71	15	2.97		
WRIST	2,709	1,776	65.56	859	31.71	74	2.73		
WRISTS (BI-LATERAL)	67	32	47.76	29	43.28	6	8.96		
MISCELLANEOUS	10,622	5,265	49.57	4,424	41.65	896	8.43	37	.35
TOTALS	72,674	44,034	60.59	25,594	35.22	2,979	4.10	67	.09

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ACCIDENT SEVERITY BY NATURE OF INJURY FOR FISCAL YEAR 1989

TABLE IV

NATURE		TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
1	AMPUTATION (BONE LOSS MUST BE INVOLVED)	207	70	33.82	88	42.51	49	23.67		
2	BRUISE, CONTUSION, CRUSHING	7,307	5,072	69.41	2,083	28.51	150	2.05	2	.03
3	BURN (CHEMICAL)	453	336	74.17	95	20.97	22	4.86		
4	BURN (HEAT)	1,697	1,033	60.87	580	34.18	84	4.95		
5	CARPOL TUNNEL SYNDROME, GANGLIA (BELLS PALSEY)	542	324	59.78	196	36.16	22	4.06		
6	COLD - ENVIRANMENTAL (FROSTBITE, FREEZING)	18	8	44.45	8	44.44	2	11.11		
7	CONCUSSION	99	54	54.55	34	34.34	11	11.11		
8	CUT, LACERATION, PUNCTURE (IN EYE, NAIL LOSS)	16,896	12,043	71.28	4,346	25.72	501	2.97	6	.03
9	DAMAGE TO PROSTHETIC DEVICES - GLASSES	410	381	92.93	28	6.83	1	.24		
10	DERMATITIS - CEMENT, RUBBER, POISON IVY	160	113	70.63	44	27.50	3	1.87		
11	DISEASES OF THE EYE (CONJUNCTIVITUS, ETC)	189	157	83.07	27	14.29	5	2.64		
12	DISLOCATION (HERNIATED DISC)	1,013	496	48.96	452	44.62	65	6.42		
13	DROWNING, ASPHYXIE, STRANGULATION	27	18	66.67	2	7.41	4	14.81	3	11.11
14	ELECTRIC SHOCK, ELECTROCUTION	138	86	62.32	37	26.81	13	9.42	2	1.45
15	FRACTURE	2,777	1,213	43.68	1,205	43.39	358	12.89	1	.04
16	HEARING LOSS OR IMPAIRMENT	59	49	83.05	10	16.95				
17	HEART CONDITIONS (HEART ATTACK)	78	7	8.98	16	20.51	41	52.56	14	17.95
18	HEAT - ENVIRONMENTAL (HEAT STROKE, EXHAUSTION)	115	64	55.65	39	33.91	12	10.44		
19	HERNIA, RUPTURE	498	170	34.14	220	44.18	107	21.48	1	.20
20	INFLAMATION (TENDONITIS, REPETITIVE ACTIVITY)	2,472	1,579	63.87	833	33.70	60	2.43		
21	MULTIPLE INJURIES	918	357	38.89	419	45.64	138	15.03	4	.44
22	NO INJURY OR ILLNESS	133	121	90.98	11	8.27	1	.75		
23	OTHER INJURIES	364	199	54.67	138	37.91	27	7.42		
24	POISONING, SYSTEMIC, UNS (BEE STINGS)	367	287	78.20	52	14.17	28	7.63		
25	RESPIRATORY SYSTEM, CONDITIONS OF	214	128	59.81	66	30.84	20	9.35		
26	SCRATCHES, ABRASIONS (OBJECTS IN EYE OR EAR)	1,995	1,751	87.77	223	11.18	21	1.05		
27	SPRAINS, STRAINS	22,443	11,344	50.55	10,515	46.85	584	2.60		
28	WELDERS FLASH	211	144	68.25	65	30.80	2	.95		
29	MISCELLANEOUS	10,874	6,430	59.13	3,762	34.60	648	5.96	34	.31
30	TOTALS	72,674	44,034	60.59	25,594	35.22	2,979	4.10	67	.09

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ACCIDENT SEVERITY BY AGE AND SEX FOR FISCAL YEAR 1989

TABLE V

AGE AND SEX		TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
00 - 19	MALE	3,045	1,850	60.76	1,064	34.94	131	4.30		
	FEMALE	1,305	833	63.83	433	33.18	39	2.99		
	N/A	2	1	50.00	1	50.00				
	TOTAL	4,352	2,684	61.67	1,498	34.42	170	3.91		
20 - 29	MALE	19,184	11,776	61.39	6,634	34.58	766	3.99	8	.04
	FEMALE	7,161	4,505	62.91	2,444	34.13	209	2.92	3	.04
	N/A	23	16	69.57	7	30.43				
	TOTAL	26,368	16,297	61.81	9,085	34.45	975	3.70	11	.04
30 - 39	MALE	14,345	8,562	59.69	5,157	35.95	613	4.27	13	.09
	FEMALE	6,409	4,022	62.76	2,239	34.93	148	2.31		
	N/A	22	12	54.55	9	40.91	1	4.54		
	TOTAL	20,776	12,596	60.63	7,405	35.64	762	3.67	13	.06
40 - 49	MALE	6,892	4,058	58.88	2,476	35.93	344	4.99	14	.20
	FEMALE	4,071	2,514	61.75	1,433	35.20	124	3.05		
	N/A	9	5	55.56	4	44.44				
	TOTAL	10,972	6,577	59.94	3,913	35.66	468	4.27	14	.13
50 - 59	MALE	3,886	2,204	56.72	1,399	36.00	266	6.84	17	.44
	FEMALE	2,319	1,418	61.15	818	35.27	82	3.54	1	.04
	N/A	1		100.00	1					
	TOTAL	6,206	3,622	58.36	2,218	35.74	348	5.61	18	.29
60 - 69	MALE	1,303	731	56.10	446	34.23	120	9.21	6	.46
	FEMALE	759	462	60.87	263	34.65	34	4.48		
	N/A	3	3	100.00						
	TOTAL	2,065	1,196	57.92	709	34.33	154	7.46	6	.29
70 - 79	MALE	94	50	53.19	25	26.60	17	18.08	2	2.13
	FEMALE	84	47	55.95	32	38.10	4	4.76	1	1.19
	TOTAL	178	97	54.49	57	32.02	21	11.80	3	1.69
OVER 80	MALE	13	5	38.46	8	61.54				
	FEMALE	10	5	50.00	4	40.00	1	10.00		
	TOTAL	23	10	43.48	12	52.17	1	4.35		
N/A	MALE	1,304	698	53.53	537	41.18	67	5.14	2	.15
	FEMALE	420	249	59.29	158	37.62	13	3.09		
	N/A	10	8	80.00	2	20.00				
	TOTAL	1,734	955	55.07	697	40.20	80	4.61	2	.12
TOTAL	MALE	50,066	29,934	59.79	17,746	35.45	2,324	4.64	62	.12
	FEMALE	22,538	14,055	62.36	7,824	34.72	654	2.90	5	.02
	N/A	70	45	64.29	24	34.28	1	1.43		
GRAND TOTAL		72,674	44,034	60.59	25,594	35.22	2,979	4.10	67	.09

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ACCIDENT SEVERITY BY COUNTY FOR FISCAL YEAR 1989

TABLE VI

COUNTY	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
ALLEN	355	205	57.75	127	35.77	23	6.48		
ANDERSON	126	79	62.70	44	34.92	3	2.38		
ATCHISON	575	397	69.04	158	27.48	20	3.48		
BARBER	145	86	59.31	52	35.86	7	4.83		
BARTON	756	420	55.56	299	39.55	37	4.89		
BOURBON	333	190	57.06	130	39.04	13	3.90		
BROWN	240	168	70.00	60	25.00	12	5.00		
BUTLER	926	571	61.66	316	34.13	39	4.21		
CHASE	35	13	37.14	19	54.29	3	8.57		
CHAUTAUQUA	82	46	56.10	30	36.58	6	7.32		
CHEROKEE	387	219	56.59	149	38.50	19	4.91		
CHEYENNE	32	21	65.63	11	34.37				
CLARK	44	24	54.55	16	36.36	4	9.09		
CLAY	144	87	60.42	48	33.33	8	5.56	1	.69
CLOUD	258	142	55.04	109	42.25	7	2.71		
COFFEY	103	70	67.96	30	29.13	2	1.94	1	.97
COMANCHE	37	19	51.35	13	35.14	5	13.51		
COWLEY	1,943	1,162	59.80	750	38.60	31	1.60		
CRAWFORD	795	506	63.65	257	32.33	30	3.77	2	.25
DECATUR	103	65	63.11	32	31.07	6	5.82		
DICKINSON	346	202	58.38	130	37.57	13	3.76	1	.29
DONIPHAN	182	94	51.65	83	45.60	5	2.75		
DOUGLAS	2,338	1,472	62.96	799	34.17	67	2.87		
EDWARDS	150	100	66.67	44	29.33	5	3.33	1	.67
ELK	46	24	52.17	20	43.48	2	4.35		
ELLIS	555	353	63.60	178	32.07	23	4.15	1	.18
ELLSWORTH	154	106	68.83	38	24.68	10	6.49		
FINNEY	1,345	810	60.23	479	35.61	56	4.16		
FORD	1,052	656	62.36	336	31.94	58	5.51	2	.19
FRANKLIN	478	306	64.02	158	33.05	14	2.93		

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ACCIDENT SEVERITY BY COUNTY FOR FISCAL YEAR 1989

TABLE VI

COUNTY	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
GEARY	626	366	58.47	233	37.22	26	4.15	1	.16
GOVE	58	37	63.79	18	31.04	3	5.17		
GRAHAM	67	38	56.72	26	38.80	3	4.48		
GRANT	217	130	59.91	73	33.64	14	6.45		
GRAY	90	47	52.22	36	40.00	7	7.78		
GREELEY	39	21	53.85	17	43.59	1	2.56		
GREENWOOD	90	52	57.78	30	33.33	7	7.78	1	1.11
HAMILTON	57	38	66.67	15	26.31	4	7.02		
HARPER	133	76	57.14	50	37.60	7	5.26		
HARVEY	869	557	64.10	286	32.91	26	2.99		
HASKELL	78	34	43.59	36	46.15	8	10.26		
HODGEMAN	49	36	73.47	11	22.45	2	4.08		
JACKSON	170	95	55.88	70	41.18	5	2.94		
JEFFERSON	113	68	60.18	39	34.51	6	5.31		
JEWELL	46	28	60.87	17	36.96	1	2.17		
JOHNSON	10,786	6,585	61.05	3,798	35.21	398	3.69	5	.05
KEARNY	76	44	57.90	26	34.21	6	7.89		
KINGMAN	160	94	58.75	57	35.63	9	5.62		
KIOWA	76	45	59.21	25	32.90	6	7.89		
LABETTE	1,246	819	65.73	408	32.75	19	1.52		
LANE	56	30	53.57	17	30.36	9	16.07		
LEAVENWORTH	724	430	59.39	253	34.95	40	5.52	1	.14
LINCOLN	60	34	56.67	21	35.00	5	8.33		
LINN	103	62	60.20	40	38.83	1	.97		
LOGAN	44	29	65.91	11	25.00	4	9.09		
LYON	1,309	887	67.76	389	29.72	33	2.52		
MCPHERSON	648	441	68.06	192	29.63	15	2.31		
MARION	184	107	58.15	66	35.87	11	5.98		
MARSHALL	159	96	60.38	51	32.07	11	6.92	1	.63
MEADE	151	89	58.94	52	34.44	10	6.62		

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ACCIDENT SEVERITY BY COUNTY FOR FISCAL YEAR 1989

TABLE VI

COUNTY	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
MIAMI	443	264	59.59	160	36.12	19	4.29		
MITCHELL	160	82	51.25	65	40.63	12	7.50	1	.62
MONTGOMERY	989	592	59.86	348	35.19	48	4.85	1	.10
MORRIS	92	53	57.61	33	35.87	6	6.52		
MORTON	73	36	49.31	29	39.73	8	10.96		
NEMAHA	214	139	64.96	65	30.37	10	4.67		
NEOSHO	616	403	65.42	187	30.36	26	4.22		
NESS	79	44	55.70	31	39.24	3	3.80	1	1.26
NORTON	226	148	65.49	73	32.30	5	2.21		
OSAGE	172	104	60.47	59	34.30	9	5.23		
OSBORNE	90	48	53.33	36	40.00	6	6.67		
OTTAWA	88	49	55.68	36	40.91	3	3.41		
PAWNEE	412	264	64.08	135	32.77	13	3.15		
PHILLIPS	109	58	53.21	46	42.20	5	4.59		
POTTAWATOMIE	355	205	57.75	132	37.18	18	5.07		
PRATT	269	192	71.38	63	23.42	14	5.20		
RAWLINS	63	39	61.91	22	34.92	2	3.17		
RENO	2,545	1,585	62.28	887	34.85	73	2.87		
REPUBLIC	77	39	50.65	32	41.56	6	7.79		
RICE	325	205	63.08	110	33.85	10	3.07		
RILEY	987	647	65.55	311	31.51	29	2.94		
ROOKS	91	59	64.83	30	32.97	2	2.20		
RUSH	51	29	56.86	17	33.34	5	9.80		
RUSSELL	189	111	58.73	71	37.57	7	3.70		
SALINE	1,561	996	63.81	524	33.57	40	2.56	1	.06
SCOTT	170	107	62.94	57	33.53	5	2.94	1	.59
SEDGWICK	9,511	5,597	58.85	3,539	37.21	365	3.84	10	.10
SEWARD	702	406	57.83	240	34.19	53	7.55	3	.43
SHAWNEE	7,142	4,494	62.92	2,272	31.81	370	5.18	6	.09
SHERIDAN	39	20	51.28	16	41.03	3	7.69		

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ACCIDENT SEVERITY BY COUNTY FOR FISCAL YEAR 1989

TABLE VI

COUNTY	TOTAL COUNT	NO TIME COUNT	LOST %	TIME COUNT	LOST %	HOSPITALIZED COUNT	%	FATAL COUNT	%
SHERMAN	136	92	67.65	37	27.20	7	5.15		
SMITH	58	33	56.90	23	39.65	2	3.45		
STAFFORD	133	77	57.89	51	38.35	4	3.01	1	.75
STANTON	49	23	46.94	21	42.86	5	10.20		
STEVENS	127	72	56.69	47	37.01	8	6.30		
SUMNER	431	287	66.59	130	30.16	14	3.25		
THOMAS	176	100	56.82	60	34.09	16	9.09		
TREGO	72	38	52.78	32	44.44	2	2.78		
WABAUNSEE	86	50	58.14	30	34.88	6	6.98		
WALLACE	26	22	84.62	4	15.38				
WASHINGTON	59	26	44.07	30	50.85	3	5.08		
WICHITA	10	7	70.00	3	30.00				
WILSON	257	163	63.42	81	31.52	12	4.67	1	.39
WOODSON	65	43	66.15	21	32.31	1	1.54		
WYANDOTTE	7,397	4,375	59.15	2,795	37.79	220	2.97	7	.09
UNKNOWN	454	221	48.68	201	44.27	31	6.83	1	.22
OTHER STATE	2,746	1,360	49.53	1,124	40.93	247	8.99	15	.55
FOR IEGN	3	2	66.67			1	33.33		
TOTALS	72,674	44,034	60.59	25,594	35.22	2,979	4.10	67	.09

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ACCIDENT SEVERITY BY SOURCE OF INJURY FOR FISCAL YEAR 1989

TABLE VII

SOURCE	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
HIGHWAY VEHICLES	1,327	521	39.26	589	44.39	195	14.69	22	1.66
HOISTING APPARATUS	189	113	59.79	61	32.27	15	7.94		
ICE, SNOW	541	319	58.97	199	36.78	23	4.25		
INFECTIOUS, PARASITIC AGENTS (BACTERIA)	81	65	80.25	13	16.05	2	2.47	1	1.23
LADDERS	693	364	52.52	283	40.84	46	6.64		
LIQUIDS (WATER, LIQUIDS NEC)	1,038	551	53.08	438	42.20	49	4.72		
MACHINES, UNS	2,804	1,633	58.24	1,019	36.34	151	5.39	1	.03
METAL CHIPS, SPLINTERS, PARTICLES	1,017	888	87.31	115	11.31	14	1.38		
METAL FASTENERS (BOLTS, NAILS, SCREWS)	1,080	803	74.35	236	21.85	41	3.80		
METAL ITEMS, UNS	4,060	2,819	69.43	1,142	28.13	99	2.44		
METAL PARTS (EXCEPT AUTO, UNASSEMBLED)	1,312	911	69.44	373	28.43	28	2.13		
MINERAL ITEMS (CLAY, SAND, GRAVEL, STONE)	348	235	67.53	105	30.17	8	2.30		
MISCELLANEOUS (EARPLUGS, SHEETROCK ETC)	4,101	2,002	48.82	1,875	45.72	218	5.31	6	.15
NOISE	21	16	76.19	5	23.81				
NONCLASSIFIABLE	1,206	705	58.46	446	36.98	52	4.31	3	.25
OFFICE MACHINES	117	83	70.94	33	28.21	1	.85		
PALLETS, SKIDS	844	465	55.10	355	42.06	24	2.84		
PAPER AND PULP ITEMS	258	150	58.14	101	39.15	7	2.71		
PARTICLES - UNIDENTIFIED	1,423	1,246	87.56	168	11.81	9	.63		
PERSON, INJURED (HEART FAILER, MENTAL)	350	176	50.29	134	38.28	38	10.86	2	.57
PERSON, OTHER THAN INJURED	5,290	3,046	57.58	1,988	37.58	255	4.82	1	.02
PIPE AND FITTINGS	892	499	55.94	362	40.58	30	3.37	1	.11
PLANT OR INDUSTRIAL VEHICLES	205	103	50.25	82	40.00	17	8.29	3	1.46
PLANTS, TREES, VEGETATION	855	416	48.66	410	47.95	29	3.39		
PLASTIC ITEMS	219	150	68.49	66	30.14	3	1.37		
POTS, PANS, DISHES, TRAYS	741	468	63.16	251	33.87	21	2.84	1	.13
PRINTING MACHINES	88	57	64.77	26	29.55	5	5.68		
PUMPS & PRIME MOVERS (ENGINES, TURBINES)	184	103	55.98	71	38.59	10	5.43		
RADIATING SUBSTANCES (ISOTOPES, SUN, XRAY)	47	43	91.49	4	8.51				
RAIL VEHICLES	107	47	43.93	48	44.86	11	10.28	1	.93

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ACCIDENT SEVERITY BY SOURCE OF INJURY FOR FISCAL YEAR 1989

TABLE VII

SOURCE	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
RAMPS	77	41	53.25	34	44.15	2	2.60		
RECREATION AND ATHLETIC EQUIPMENT	187	136	72.73	47	25.13	4	2.14		
ROOFS	86	36	41.86	35	40.70	15	17.44		
RUBBER PRODUCTS	657	353	53.73	268	40.79	35	5.33	1	.15
RUNWAYS, PLATFORMS	0								
SAWS (NOT HAND TOOLS)	244	167	68.44	64	26.23	13	5.33		
SCRAP, DEBRIS, WASTE MATERIALS (SLAG)	628	385	61.30	226	35.99	16	2.55	1	.16
SHEARS, SLITTERS, SLICERS	2,678	1,274	47.57	1,267	47.31	134	5.01	3	.11
SIDEWALKS, PATHS, WALKWAYS (OUTDOORS)	342	196	57.31	124	36.26	22	6.43		
STAIRS, STEPS INCLUDE ESCALATORS	1,014	570	56.21	402	39.65	42	4.14		
STEAM	82	59	71.95	21	25.61	2	2.44		
STITCHING, SEWING MACHINES	52	34	65.38	15	28.85	3	5.77		
STREET, ROAD	120	65	54.17	45	37.50	10	8.33		
TEXTILE ITEMS	294	174	59.18	104	35.38	16	5.44		
VEHICLES, UNS	744	406	54.57	292	39.25	41	5.51	5	.67
WOOD ITEMS	881	588	66.74	275	31.22	18	2.04		
WOOD ITEMS, NEC	0								
MISCELLANEOUS	208	128	61.54	68	32.69	11	5.29	1	.48
TOTALS	72,674	44,034	60.59	25,594	35.22	2,979	4.10	67	.09

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OCCUPATIONAL DISEASE SEVERITY BY INDUSTRY FOR FISCAL YEAR 1989

TABLE VIII

INDUSTRY	TOTAL		NO TIME LOST		TIME LOST		HOSPITALIZED		FATAL	
	COUNT	%	COUNT	%	COUNT	%	COUNT	%	COUNT	%
1 AGRICULTURAL PRODUCTION - CROPS	5		2	40.00	3	60.00				
2 AGRICULTURAL PRODUCTION - LIVESTOCK	2		1	50.00	1	50.00				
3 BEEF CATTLE FEEDLOTS	2		1	50.00	1	50.00				
4 LIVESTOCK N.E.C.	0									
5 AGRICULTURAL SERVICES	17		10	58.82	7	41.18				
6 LAWN AND GARDEN SERVICES	7		5	71.43	2	28.57				
7 AGRICULTURAL SERVICES N.E.C.	10		5	50.00	5	50.00				
8 FORESTRY	0									
9 FISHING, HUNTING AND TRAPPING	0									
10 BITUMINOUS COAL AND LIGNITE MINING	0									
11 OIL AND GAS EXTRACTION	14		12	85.71	2	14.29				
12 DRILLING OIL AND GAS WELLS	1		1	100.00						
13 OIL AND GAS FIELD SERVICES	6		5	83.33	1	16.67				
14 OIL AND GAS EXTRACTION N.E.C.	7		6	85.71	1	14.29				
15 MINING & QUARRYING NONMETALLIC MINERALS	0									
16 BUILDING CONSTRUCTION - GENERAL CONTRACTORS	14		10	71.43	4	28.57				
17 GENERAL CONTRACTORS - SINGLE-FAMILY HOUSES	3		2	66.67	1	33.33				
18 GENERAL CONTRACTORS - INDUSTRIAL BUILDINGS	3		2	66.67	1	33.33				
19 GENERAL CONTRACTORS - NONRESIDENTIAL BLDG.	7		5	71.43	2	28.57				
20 BUILDING CONSTRUCTION N.E.C.	1		1	100.00						
21 CONSTRUCTION OTHER THAN BUILDING - GEN. CONT.	27		19	70.37	6	22.22	2	7.41		
22 HIGHWAY & STREET CONSTRUCTION, NOT ELEVATED	6		3	50.00	3	50.00				
23 BRIDGE, TUNNEL, ELEVATED HIGHWAY CONSTRUCTION	1		1	100.00						
24 WATER, SEWER, PIPE & POWER LINE, COMMUNICATION	9		7	77.78	1	11.11	1	11.11		
25 HEAVY CONSTRUCTION, N.E.C.	11		8	72.73	2	18.18	1	9.09		
26 CONSTRUCTION OTHER THAN BUILDING N.E.C.	0									
27 CONSTRUCTION - SPECIAL TRADE CONTRACTORS	34		22	64.71	12	35.29				
28 PLUMBING, HEATING (NOT ELECTRIC), AIR COND.	7		3	42.86	4	57.14				
29 ELECTRIC WORK	0									
30 PLASTERING, DRYWALL, ACOUSTICAL, INSULATION	4		2	50.00	2	50.00				
31 CARPENTERING	0									
32 ROOFING AND SHEET METAL WORK	3		2	66.67	1	33.33				
33 CONCRETE WORK	3		2	66.67	1	33.33				
34 CONSTRUCTION - SPECIAL TRADE CONTRACTORS N.E.C.	17		13	76.47	4	23.53				
35 FOOD AND KINDRED PRODUCTS	47		36	76.59	10	21.28	1	2.13		
36 MEAT PACKING PLANTS	29		22	75.86	7	24.14				
37 SAUSAGES & OTHER PREPARED MEAT PRODUCTS	1		1	100.00						
38 FLUID MILK	2		2	100.00						
39 DOG, CAT & OTHER PET FOOD	5		4	80.00			1	20.00		
40 BOTTLED & CANNED SOFT DRINKS	1		1	100.00						
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OCCUPATIONAL DISEASE SEVERITY BY INDUSTRY FOR FISCAL YEAR 1989

TABLE VIII

INDUSTRY	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
1 FOOD AND KINDRED PRODUCTS N.E.C.	9	6	66.67	3	33.33				
2 TEXTILE MILL PRODUCTS	0								
3 APPAREL AND OTHER FINISHED PRODUCTS - FABRICS	17	13	76.47	4	23.53				
4 MENS & BOYS SHIRTS (NOT WORK) & NIGHTWEAR	9	9	100.00						
5 APPAREL AND OTHER FABRIC PRODUCTS N.E.C.	8	4	50.00	4	50.00				
6 LUMBER & WOOD PRODUCTS - EXCEPT FURNITURE	6	6	100.00						
7 WOOD KITCHEN CABINETS	5	5	100.00						
8 LUMBER & WOOD PRODUCTS N.E.C.	1	1	100.00						
9 FURNITURE AND FIXTURES	4	4	100.00						
10 PAPER AND ALLIED PRODUCTS	3	3	100.00						
11 PRINTING, PUBLISHING & ALLIED INDUSTRIES	25	20	80.00	5	20.00				
12 COMMERCIAL PRINTING, LETTERPRESS & SCREEN	11	10	90.91	1	9.09				
13 COMMERCIAL PRINTING, LITHOGRAPHIC	5	4	80.00	1	20.00				
14 PRINTING, PUBLISHING & ALLIED IND. N.E.C.	9	6	66.67	3	33.33				
15 CHEMICALS AND ALLIED PRODUCTS	30	22	73.34	7	23.33	1	3.33		
16 PETROLEUM REFINING & RELATED INDUSTRIES	10	9	90.00	1	10.00				
17 PETROLEUM REFINING	9	8	88.89	1	11.11				
18 PETROLEUM REFINING & RELATED IND. N.E.C.	1	1	100.00						
19 RUBBER & MISC. PLASTICS PRODUCTS	25	21	84.00	4	16.00				
20 TIRES AND INNER TUBES	1	1	100.00						
21 MISC. PLASTIC PRODUCTS	7	6	85.71	1	14.29				
22 RUBBER & MISC. PLASTICS PRODUCTS N.E.C.	17	14	82.35	3	17.65				
23 LEATHER AND LEATHER PRODUCTS	0								
24 STONE, CLAY, GLASS & CONCRETE PRODUCTS	11	9	81.82	2	18.18				
25 PRIMARY METALS INDUSTRIES	15	10	66.67	4	26.67	1	6.66		
26 FABRICATED METAL PRODUCTS NOT MACH. OR TRANS.	20	16	80.00	4	20.00				
27 METAL DOORS, SASH, FRAMES, MOLDING & TRIM	1	1	100.00						
28 FABRICATED PLATE WORK (BOILER SHOPS)	1	1	100.00						
29 SHEET METAL WORK	0								
30 AMMUNITION, EXCEPT SMALL ARMS	12	10	83.33	2	16.67				
31 FABRICATED METAL PRODUCTS N.E.C.	6	4	66.67	2	33.33				
32 MACHINERY, EXCEPT ELECTRICAL	39	29	74.36	8	20.51	2	5.13		
33 FARM MACHINERY AND EQUIPMENT	8	7	87.50	1	12.50				
34 MACHINERY, EXCEPT ELECTRICAL N.E.C.	31	22	70.97	7	22.58	2	6.45		
35 ELECTRICAL & ELECTRONIC MACH.,EQUIP.,SUPPLIES	24	19	79.17	5	20.83				
36 TRANSPORTATION EQUIPMENT	52	42	80.77	9	17.31	1	1.92		
37 MOTOR VEHICLE PARTS AND ACCESSORIES	14	11	78.57	3	21.43				
38 AIRCRAFT	11	6	54.55	5	45.45				
39 AIRCRAFT PARTS & AUXILIARY EQUIPMENT N.E.C.	17	16	94.12	1	5.88				
40 TRAVEL TRAILERS AND CAMPERS	1	1	100.00						
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OCCUPATIONAL DISEASE SEVERITY BY INDUSTRY FOR FISCAL YEAR 1989

TABLE VIII

INDUSTRY	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
TRANSPORTATION EQUIPMENT N.E.C.	9	8	88.89			1	11.11		
MEASURING, ANALYZING, CONTROLLING INSTRUMENTS	16	13	81.25	3	18.75				
MISC. MANUFACTURING INDUSTRIES	4	4	100.00						
RAILROAD TRANSPORTATION	0								
LOCAL & SUBURBAN TRANSIT AND INTERURBAN TRANS	0								
MOTOR FREIGHT TRANSPORTING & WAREHOUSING	13	6	46.15	5	38.46	2	15.39		
LOCAL TRUCKING WITHOUT STORAGE	2	1	50.00	1	50.00				
TRUCKING, EXCEPT LOCAL	9	3	33.33	4	44.45	2	22.22		
LOCAL TRUCKING WITH STORAGE	0								
REFRIGERATED WAREHOUSING	1	1	100.00						
MOTOR FREIGHT TRANS. & WHSE N.E.C.	1	1	100.00						
U.S. POSTAL SERVICE	0								
WATER TRANSPORTATION	0								
TRANSPORTATION BY AIR	1	1	100.00						
PIPE LINES, EXCEPT NATURAL GAS	5	4	80.00	1	20.00				
TRANSPORTATION SERVICES	0								
COMMUNICATION	10	8	80.00	2	20.00				
ELECTRIC, GAS AND SANITARY SERVICES	24	17	70.83	7	29.17				
ELECTRIC SERVICES	9	5	55.56	4	44.44				
ELECTRIC, GAS AND SANITARY SERVICES N.E.C.	15	12	80.00	3	20.00				
WHOLESALE TRADE - DURABLE GOODS	16	14	87.50	2	12.50				
AUTOMOTIVE PARTS AND SUPPLIES	2	2	100.00						
FARM AND GARDEN MACHINERY AND EQUIPMENT	0								
INDUSTRIAL MACHINERY AND EQUIPMENT	1	1	100.00						
SCRAP AND WASTE MATERIALS	0								
WHOLESALE TRADE - DURABLE GOODS N.E.C.	13	11	84.62	2	15.38				
WHOLESALE TRADE - NONDURABLE GOODS	35	28	80.00	6	17.14	1	2.86		
FOOTWEAR	1	1	100.00						
GROCERIES, GENERAL LINE	3	2	66.67	1	33.33				
GRAIN	20	17	85.00	2	10.00	1	5.00		
FARM SUPPLIES	1	1	100.00						
WHOLESALE TRADE - NONDURABLE GOODS N.E.C.	10	7	70.00	3	30.00				
BUILDING MATERIALS, HARDWARE, GARDEN SUPPLIES	5	4	80.00	1	20.00				
LUMBER AND OTHER BUILDING MATERIALS DEALERS	1			1	100.00				
BLDG. MATERIALS, HARDWARE, GARDEN SUP N.E.C.	4	4	100.00						
GENERAL MERCHANDISE STORES	9	8	88.89	1	11.11				
DEPARTMENT STORES	6	6	100.00						
VARIETY STORES	3	2	66.67	1	33.33				
GENERAL MERCHANDISE STORES N.E.C.	0								
FOOD STORES	3	2	66.67	1	33.33				

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OCCUPATIONAL DISEASE SEVERITY BY INDUSTRY FOR FISCAL YEAR 1989

TABLE VIII

INDUSTRY		TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
1										
2	GROCERY STORES	2	2	100.00						
3	FOOD STORES N.E.C.	1			1	100.00				
4	AUTOMOTIVE DEALERS & GAS SERVICE STATIONS	13	9	69.23	4	30.77				
5	MOTOR VEHICLE DEALERS (NEW AND USED)	6	2	33.33	4	66.67				
6	AUTO AND HOME SUPPLY STORES	1	1	100.00						
7	AUTOMOTIVE DEALERS & GAS SERV. STAT. N.E.C.	6	6	100.00						
8	APPAREL AND ACCESSORY STORES	0								
9	FURNITURE, HOME FURNISHINGS & EQUIP. STORES	1			1	100.00				
10	EATING AND DRINKING PLACES	27	15	55.56	12	44.44				
11	EATING PLACES	27	15	55.56	12	44.44				
12	EATING AND DRINKING PLACES N.E.C.	0								
13	MISC. RETAIL	6	3	50.00	3	50.00				
14	MAIL ORDER HOUSES	3	3	100.00						
15	AUTOMATIC MERCHANDIZING MACHINE OPERATORS	0								
16	MISC. RETAIL N.E.C.	3			3	100.00				
17	BANKING	0								
18	CREDIT AGENCIES OTHER THAN BANKS	0								
19	SECURITY & COMMODITY BROKERS, DEALERS, SERV.	0								
20	INSURANCE	0								
21	INSURANCE AGENTS, BROKERS AND SERVICE	1	1	100.00						
22	REAL ESTATE	7	6	85.71			1	14.29		
23	OPERATORS OF APARTMENT BUILDINGS	6	6	100.00						
24	REAL ESTATE N.E.C.	1					1	100.00		
25	COMBINED REAL ESTATE, INSURANCE, LOANS & LAW	0								
26	HOLDING AND OTHER INVESTMENT OFFICES	0								
27	HOTELS, ROOMING HOUSES, CAMPS, OTHER LODGINGS	10	10	100.00						
28	HOTELS, MOTELS AND TOURIST COURTS	8	8	100.00						
29	HOTELS, ROOMING HOUSES, CAMPS, OTHERS N.E.C.	2	2	100.00						
30	PERSONAL SERVICES	6	2	33.33	3	50.00	1	16.67		
31	BUSINESS SERVICES	36	25	69.44	10	27.78	1	2.78		
32	CLEANING & MAINTENANCE SERVICES N.E.C.	10	6	60.00	4	40.00				
33	TEMPORARY HELP SUPPLY SERVICES	4	1	25.00	2	50.00	1	25.00		
34	BUSINESS SERVICES N.E.C.	22	18	81.82	4	18.18				
35	AUTOMOTIVE REPAIR, SERVICES, AND GARAGES	6	4	66.67	2	33.33				
36	GENERAL AUTOMOTIVE REPAIR SHOPS	1	1	100.00						
37	AUTOMOTIVE REPAIR, SERV., & GARAGES N.E.C.	5	3	60.00	2	40.00				
38	MISC. REPAIR SERVICES	7	5	71.43	2	28.57				
39	MOTION PICTURES	0								
40	AMUSEMENT & RECREATION SERVICES NOT MOVIES	8	5	62.50	3	37.50				
41	MEMBERSHIP, SPORTS & RECREATION CLUBS	5	3	60.00	2	40.00				
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OCCUPATIONAL DISEASE SEVERITY BY INDUSTRY FOR FISCAL YEAR 1989

TABLE VIII

INDUSTRY	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
AMUSEMENT & RECREATION SERVICES N.E.C.	3	2	66.67	1	33.33				
HEALTH SERVICES	245	207	84.49	37	15.10	1	.41		
SKILLED NURSING CARE FACILITIES	19	12	63.16	6	31.58	1	5.26		
NURSING AND PERSONAL CARE FACILITIES N.E.C.	1	1	100.00						
GENERAL MEDICAL AND SURGICAL HOSPITALS	206	178	86.41	28	13.59				
PSYCHIATRIC HOSPITALS	13	12	92.31	1	7.69				
SPECIALTY HOSPITALS, EXCEPT PSYCHIATRIC	1	1	100.00						
HEALTH SERVICES N.E.C.	5	3	60.00	2	40.00				
LEGAL SERVICES	0								
EDUCATIONAL SERVICES	31	19	61.29	9	29.03	3	9.68		
ELEMENTARY AND SECONDARY SCHOOLS	9	7	77.78			2	22.22		
COLLEGES, UNIVERSITIES & PROF. SCHOOLS	18	9	50.00	8	44.44	1	5.56		
EDUCATIONAL SERVICES N.E.C.	4	3	75.00	1	25.00				
SOCIAL SERVICES	4	3	75.00	1	25.00				
MUSEUMS, ART GALLERIES, BOTANICAL, ZOOLOGICAL	0								
MEMBERSHIP ORGANIZATIONS	2	1	50.00	1	50.00				
PRIVATE HOUSEHOLDS	2	2	100.00						
MISC. SERVICES	7	2	28.57	5	71.43				
ENGINEERING, ARCHITECTURAL & SURVEYING	7	2	28.57	5	71.43				
MISC. SERVICES N.E.C.	0								
EXECUTIVE, LEGISLATIVE, GENERAL GOVERNMENT	119	82	68.91	35	29.41	2	1.68		
EXECUTIVE & LEGISLATIVE OFFICES COMBINED	119	82	68.91	35	29.41	2	1.68		
EXECUTIVE, LEGISLATIVE, GENERAL GOV. N.E.C.	0								
JUSTICE, PUBLIC ORDER, AND SAFETY	3	2	66.67	1	33.33				
CORRECTIONAL INSTITUTIONS	2	1	50.00	1	50.00				
JUSTICE, PUBLIC ORDER, AND SAFETY N.E.C.	1	1	100.00						
PUBLIC FINANCE, TAXATION, MONETARY POLICY	0								
ADMINISTRATION OF HUMAN RESOURCES PROGRAMS	18	11	61.11	7	38.89				
ADMIN. OF SOCIAL, MANPOWER, & INCOME MAINT.	4	1	25.00	3	75.00				
ADMIN. OF HUMAN RESOURCES PROGRAMS N.E.C.	14	10	71.43	4	28.57				
ADMIN. OF ENVIRONMENTAL QUALITY, HOUSING PROG	6	5	83.33	1	16.67				
ADMINISTRATION OF ECONOMIC PROGRAMS	14	10	71.43	4	28.57				
REGULATION & ADMIN. OF TRANSPORTATION PROG.	13	9	69.23	4	30.77				
ADMINISTRATION OF ECONOMIC PROGRAMS N.E.C.	1	1	100.00						
NATIONAL SECURITY & INTERNATIONAL AFFAIRS	0								
NONCLASSIFIABLE	38	36	94.74	2	5.26				
TOTALS	1,199	909	75.81	270	22.52	20	1.67		

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OCCUPATIONAL DISEASE SEVERITY BY CAUSE OF INJURY FOR FISCAL YEAR 1989 TABLE IX

CAUSE	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
CONTACT WITH RADIATION, CAUSTICS, ETC.	1,060	780	73.59	263	24.81	17	1.60		
FOREIGN MATTER IN EYES	51	47	92.16	3	5.88	1	1.96		
OBJECTS HANDLED (CUTS, KNIFE, AX, GLASS, TOOLS)	45	44	97.78	1	2.22				
MISCELLANEOUS	70	56	80.00	6	8.57	8	11.43		
TOTALS	1,199	909	75.81	270	22.52	20	1.67		

OCCUPATIONAL DISEASE SEVERITY BY MEMBER INJURED FOR FISCAL YEAR 1989 TABLE X

MEMBER	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
ABDOMEN	4	3	75.00	1	25.00				
ARM	95	76	80.00	19	20.00				
BODY PARTS, NEC	59	51	86.44	8	13.56				
CHEST	5	3	60.00	2	40.00				
DIGESTIVE SYSTEM	4	2	50.00	2	50.00				
EYE(S)	245	201	82.04	42	17.14	2	.82		
FACE	24	18	75.00	6	25.00				
FINGER(S)	41	34	82.93	6	14.63	1	2.44		
FOOT	11	8	72.73	3	27.27				
FOREARM	24	19	79.17	5	20.83				
HAND	140	113	80.72	26	18.57	1	.71		
HEAD	14	12	85.71	2	14.29				
LEG	7	4	57.14	2	28.57	1	14.29		
LEGS	5	5	100.00						
MOUTH (TEETH)	5	3	60.00	2	40.00				
NECK	4	2	50.00	2	50.00				
RESPIRATORY SYSTEM	42	27	64.28	8	19.05	7	16.67		
THUMB	8	8	100.00						
TRUNK	4	4	100.00						
UPPER EXTREMITIES, MULTIPLE	25	19	76.00	6	24.00				
WRIST	7	6	85.71	1	14.29				
MISCELLANEOUS	825	606	73.45	190	23.03	29	3.52		
TOTALS	1,199	909	75.81	270	22.52	20	1.67		

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OCCUPATIONAL DISEASE SEVERITY BY NATURE OF INJURY FOR FISCAL YEAR 1989 **TABLE XI**

NATURE	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
BURN (CHEMICAL)	139	99	71.22	38	27.34	2	1.44		
BURN (HEAT)	7	4	57.14	2	28.57	1	14.29		
CARPOL TUNNEL SYNDROME, GANGLIA (BELLS PALSEY)	5	4	80.00	1	20.00				
CUT, LACERATION, PUNCTURE (IN EYE, NAIL LOSS)	47	45	95.74	1	2.13	1	2.13		
DERMATITIS - CEMENT, RUBBER, POISON IVY	628	452	71.97	172	27.39	4	.64		
DISEASES OF THE EYE (CONJUNCTIVITUS, ETC)	163	137	84.05	25	15.34	1	.61		
INFLAMATION (TENDONITIS, REPETITIVE ACTIVITY)	6	6	100.00						
NO INJURY OR ILLNESS	17	16	94.12	1	5.88				
POISONING, SYSTEMIC, UNS (BEE STINGS)	12	9	75.00	2	16.67	1	8.33		
RESPIRATORY SYSTEM, CONDITIONS OF	32	21	65.63	5	15.62	6	18.75		
SCRATCHES, ABRASIONS (OBJECTS IN EYE OR EAR)	10	9	90.00			1	10.00		
WELDERS FLASH	7	5	71.43	2	28.57				
MISCELLANEOUS	246	174	70.73	57	23.17	15	6.10		
TOTALS	1,199	909	75.81	270	22.52	20	1.67		

OCCUPATIONAL DISEASE SEVERITY BY SOURCE OF INJURY FOR FISCAL YEAR 1989 **TABLE XII**

SOURCE	TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
ANIMAL PRODUCTS	8	7	87.50			1	12.50		
ANIMALS, INSECTS, ETC, UNS	11	7	63.64	3	27.27	1	9.09		
BUILDINGS & STRUCTURES (WALLS, FENCES)	4	1	25.00	3	75.00				
CERAMIC ITEMS (BRICK, CHINA, TILE ETC)	18	16	88.89	2	11.11				
CHEMICALS	545	414	75.96	121	22.20	10	1.84		
CLOTHING, APPAREL, SHOES	10	9	90.00	1	10.00				
COAL AND PETROLEUM PRODUCTS	9	6	66.67	2	22.22	1	11.11		
FLAME, FIRE, SMOKE	8	6	75.00	2	25.00				
FLOOR	4	1	25.00	3	75.00				
FOOD PRODUCTS (COOKING OIL)	4	3	75.00	1	25.00				
GLASS ITEMS (FIBERGLASS, SEE ALSO 650)	18	14	77.78	4	22.22				
HAND TOOLS, NOT POWERED	5	2	40.00	3	60.00				
INFECTIOUS, PARASITIC AGENTS (BACTERIA)	58	38	65.52	19	32.76	1	1.72		
LIQUIDS (WATER, LIQUIDS NEC)	4	3	75.00	1	25.00				
METAL CHIPS, SPLINTERS, PARTICLES	6	6	100.00						
METAL ITEMS, UNS	9	7	77.78	2	22.22				
MISCELLANEOUS (EARPLUGS, SHEETROCK ETC)	62	52	83.87	9	14.52	1	1.61		
NONCLASSIFIABLE	47	44	93.62	3	6.38				
PARTICLES - UNIDENTIFIED	23	22	95.65	1	4.35				
PERSON, OTHER THAN INJURED	53	46	86.79	5	9.44	2	3.77		
PLANTS, TREES, VEGETATION	235	158	67.24	75	31.91	2	.85		
RADIATING SUBSTANCES (ISOTOPES, SUN, XRAY)	12	9	75.00	3	25.00				
RUBBER PRODUCTS	6	4	66.67	2	33.33				
SCRAP, DEBRIS, WASTE MATERIALS (SLAG)	8	5	62.50	3	37.50				
TEXTILE ITEMS	4	4	100.00						
MISCELLANEOUS	553	475	85.90	52	9.40	26	4.70		
TOTALS	1,199	909	75.81	270	22.52	20	1.67		

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OCCUPATIONAL DISEASE SEVERITY BY AGE AND SEX FOR FISCAL YEAR 1989 TABLE XIII

AGE AND SEX		TOTAL COUNT	NO TIME LOST COUNT	%	TIME LOST COUNT	%	HOSPITALIZED COUNT	%	FATAL COUNT	%
00 - 19	MALE	68	51	75.00	17	25.00				
	FEMALE	22	13	59.09	9	40.91				
	TOTAL	90	64	71.11	26	28.89				
20 - 29	MALE	277	217	78.34	59	21.30	1	.36		
	FEMALE	149	118	79.20	30	20.13	1	.67		
	TOTAL	426	335	78.64	89	20.89	2	.47		
30 - 39	MALE	228	169	74.12	52	22.81	7	3.07		
	FEMALE	141	118	83.69	21	14.89	2	1.42		
	TOTAL	369	287	77.78	73	19.78	9	2.44		
40 - 49	MALE	96	68	70.83	24	25.00	4	4.17		
	FEMALE	66	50	75.76	14	21.21	2	3.03		
	TOTAL	162	118	72.84	38	23.46	6	3.70		
50 - 59	MALE	52	31	59.61	19	36.54	2	3.85		
	FEMALE	36	25	69.44	11	30.56				
	TOTAL	88	56	63.64	30	34.09	2	2.27		
60 - 69	MALE	12	9	75.00	3	25.00				
	FEMALE	11	6	54.55	5	45.45				
	TOTAL	23	15	65.22	8	34.78				
70 - 79	MALE	0								
	FEMALE	1	1	100.00						
	TOTAL	1	1	100.00						
OVER 80	MALE	0								
	FEMALE	0								
	N/A	9	9	100.00						
	TOTAL	9	9	100.00						
N/A	MALE	13	7	53.85	5	38.46	1	7.69		
	FEMALE	3	2	66.67	1	33.33				
	N/A	15	15	100.00						
	TOTAL	31	24	77.42	6	19.35	1	3.23		
TOTAL	MALE	746	552	74.00	179	23.99	15	2.01		
	FEMALE	429	333	77.62	91	21.21	5	1.17		
	N/A	24	24	100.00						
GRAND TOTAL		1,199	909	75.81	270	22.52	20	1.67		

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LORI M. CALLAHAN

FAX (913) 267-2652

March 15, 1990

TO: House Labor and Industry

FROM: Lori M. Callahan
Legislative Counsel
American Insurance Association

SUBJECT: H.B. 3069

The American Insurance Association is a trade organization of over 200 property and casualty insurance companies providing insurance in all lines of property casualty insurance nationwide.

AIA supports H.B. 3069.

Initially, it is the position of AIA that medical fee schedules make claim administration easier; allow actuarial projections to be based upon more predictable data; allow for consistent and uniform understanding as to what services have been rendered; eliminate fee disputes; and expedite payments. AIA also believes that quality assurance and utilization review is an excellent medical cost containment tool to evaluate the treatment being provided to injured workers. It allows confirmation of quality care and control of medical costs.

AIA also supports the use of generally accepted schedules for determination of the existence and degree of permanent impairment, such as the Guides to the Evaluation of Permanent Impairment of the American Medical Association. It is the position of AIA that the utilization of such standardized guides can provide greater uniformity and understanding as to opinions regarding disability.

We would, therefore, encourage the legislature to positively consider H.B. 3069.

House Labor & Industry
Attachment #4
03-15-90

Kansas Association of Osteopathic Medicine

Harold E. Riehm, Executive Director

1260 S.W. Topeka
Topeka, Kansas 66612
(913) 234-5563

March 14, 1990

To: Members, House Committee on Labor and Industry
From: Harold E. Riehm, Executive Director, KAOM
Subject: Recap of Testimony on HOUSE BILL 3069

Earlier this month KAOM testified on H.B. 3069. We stated our opposition to the concept of imposing a fee schedule for physician fees in the Workers' Compensation Act.

We also testified that, while we oppose such a schedule, if a schedule is indeed implemented, we prefer the approach found in H.B. 3069--i.e., substantial health care provider input into the establishment of a fee schedule.

THEREFORE, IF 3069 IS APPROVED BY THE COMMITTEE, WE STRONGLY URGE THE ADDITION OF AN OSTEOPATHIC PHYSICIAN TO THE ADVISORY PANEL PROVIDED FOR ON PAGE 7 OF THE BILL, LINES 16 THROUGH 26. THE TWO OTHER LICENSED HEALTH CARE PROVIDER GROUPS OF THE BOARD OF HEALING ARTS ARE REPRESENTED ON THE PANEL; OSTEOPATHIC PHYSICIANS ARE NOT.

PROPOSED AMENDMENT TO H.B. 3069 - PAGE 7, (3) (B)

HB 3069

7

16 (B) There is hereby created an advisory panel to assist the di-
17 rector in adopting schedules of maximum fees as required by this
18 section. The panel shall consist of the commissioner of insurance,
19 one representative each from the Kansas medical society, the Kansas
20 hospital association and the Kansas chiropractic association, and two
21 members appointed by the secretary. One member appointed by the
22 secretary shall be classified as a representative of employers on the
23 basis of previous vocation, employment or affiliation. The other mem-
24 ber appointed by the secretary shall be classified as a representative
25 of employees on the basis of previous vocation, employment or
26 affiliation.

Insert on line 19:

"the Kansas association of
osteopathic medicine,

NOTE: THE KANSAS MEDICAL SOCIETY HAS ENDORSED INCLUDING AN
OSTEOAPTHIC PHYSICIAN ON THIS ADVISORY PANEL!

House Labor & Industry
Attachment #5
03-15-90