

WORKERS' COMPENSATION LAWS AS OF JANUARY 1, 2025

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INTRODUCTION

The following tables are intended to represent workers' compensation regulations and benefit levels in effect as of **January 1, 2025** (unless a footnote indicates otherwise) in the United States and in the Canadian jurisdictions that chose to participate in this project.

This survey builds on many years of valuable work by the U.S. Department of Labor (USDOL). The USDOL pioneered the use of a standard set of tables to promote uniformity in responses across states and consistency in reports from year to year. For budgetary reasons, the USDOL suspended production of their tables after regulations that went into effect as of January 1, 2009. Based on popular demand for the continuation of these tables, the Workers Compensation Research Institute (WCRI) and the International Association of Industrial Accident Boards and Commissions (IAIABC), for a ninth edition, have agreed to work as partners in the continuation of this important resource. WCRI funded the principal effort of survey administration and the publication of responses into useful tables.

INFORMATION TO USERS

We recognize that both the jurisdictions responding to this survey and users of the results want the characterizations of laws to be accurate and fairly stated. Yet, it is inherently difficult to summarize complex laws with complete accuracy for all applications of that law. Our result strikes a balance between the utility of summary data and the complexity of application of the law.

Several caveats are important for users regarding limitations of the survey data. We provide these disclaimers for those less familiar with workers' compensation, the survey, and the current survey methodology.

In Canada and the United States, workers' compensation is entirely under the control of subnational legislative bodies and administrative agencies. For this reason, jurisdictions tend to have individualistic approaches to administering workers' compensation and often use the same legal constructs but apply different terms to describe them.

Workers' compensation is inherently complex, both in terms of coverage and of benefits. Subtle differences between jurisdictional laws and regulations may be misunderstood. The differences are expanded by agency interpretive bulletins and traditional practices. Additionally, case law is continually redefining interpretations and application, and the laws have exceptions to the general rules.

The wording of the survey and table headings was also open to misinterpretation and inconsistency of responses. Even within the same agency, different people might respond to the survey with different answers. Given all the complexities noted above, we added an additional level of quality assurance to gain as much accuracy and consistency as possible.

The 2025 tables provide a valuable tool for researching and understanding workers' compensation system differences. The report is best used to understand macro-level differences and general tendencies across jurisdictions. Examples of questions well suited for this survey data include the following:

- Which states and provinces allow individual or group self-insurance?
- Are my state's benefit payments for amputation lower or higher than in other jurisdictions?
- Which states cover mental stress claims, hearing loss, and cumulative trauma?
- How many jurisdictions allow the worker to choose the treating physician, and how many allow the employer to do so?

Employer coverage responsibilities, coverage and benefit determinations, and other compliance issues must be based on a careful review of the laws in each jurisdiction. To illustrate, assume two jurisdictions each had three-day waiting periods and paid 66 and 2/3 percent of lost wages for temporary total disability benefits. The actual indemnity benefit payable may be complicated by exceptions and qualifications:

- When the first day of disability begins
- How intermittent periods of disability are treated
- Compensation that is included in determining the wage
- Period(s) over which the average wage is calculated
- Caps on wages earned by the worker
- Differences in the calculation of the compensation rate
- Reductions due to safety violations or additions due to the worker's age or the fact he or she may be an apprentice
- Allowable attorney fees
- Government and/or pension offsets

This need to consider the facts surrounding particular applications of the law is true of most areas of workers' compensation. This is why we have encouraged jurisdictions to footnote their responses. In many cases the footnotes provide valuable insights and should be closely examined by the serious user of these tables. None of the information should be considered legal advice, and anyone wanting to understand specific details about any particular jurisdiction should consult the actual statute and rules or seek legal counsel.

CHANGES TO THIS EDITION

The current edition of the report does not include any new tables, but there are some changes to [Table 7](#), about payments for unambiguous injuries such as amputation. The jurisdictions were asked to report payment for a hypothetical worker who earned \$2,000 per week. This is larger than or close to the maximum weekly benefit amount in most places, so the state responses reflect the impact of those caps. In response to reader feedback, we asked the jurisdictions to report the dollar amount of those payments rather than just giving a percentage or number of weeks. This may make comparisons easier, especially in a long table.

This edition again shows historical data on maximum benefit rates for temporary disability benefits. The most current benefits are reported in [Table 4A](#) (Table 4 in earlier editions), but the historical table also shows the rate for workers with injuries on January 1 of each year from 2000 through 2025. For more details, please see [Appendix A](#).

THE DATA COLLECTION AND QUALITY ASSURANCE PROCESS

The tables were populated with information requested of jurisdictions in November of 2024. The fields asked were similar to those for the 2022 edition and allowed jurisdictions to see their earlier response so that they could either update the previous response or approve it as still valid.

The information gathered from the participating jurisdictions was input into the resulting tables. Every attempt was made to enter the actual information given by the jurisdiction into the tables accurately, and to work with the respondent to resolve any uncertainties, so the tables would be as clear and accurate as possible. However, in some cases, the information given was a statutory cite. In those instances, the information was summarized in the table or notation rather than citing the entire statute. This could result in an interpretation

other than what was intended by a thorough reading of the statutory language.

These resulting tables were returned to each jurisdiction for final review to ensure the data contained were accurate and current as displayed.

Finally, we ask that each user also become part of the continuous improvement process. If you find any information within these tables that is incorrect, please send the correct information to us with the statutory cite, rule number, or case law cite that will allow us to correct the information in subsequent publications. We would also appreciate your suggestions about extensions or modifications to the survey scope. Questions and suggestions for future reports should be sent to krothkin@wcrinet.org.

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GLOSSARY

AMA Guides: American Medical Association *Guides to the Evaluation of Permanent Impairment*.

ancillary legal expenses: Payments associated with the preparation and/or production of reports and transcripts, filing fees, performance of autopsies, conduct of surveillance and investigation, translator's fees, witnesses' fees, and costs associated with arbitration and alternate dispute resolution. Ancillary legal costs do not include attorney fees.

average weekly wage (AWW): The worker's average weekly preinjury earnings as determined by a jurisdiction-specific formula. This AWW typically serves to establish the worker's weekly indemnity benefit rate.

bifurcated approach: A method used to determine unscheduled permanent partial disability (PPD) benefits that depends on the worker's employment status at the time of the rating. Under this approach, if a worker has returned to work and is earning at or close to his or her preinjury wage, the PPD benefit is typically based on the degree of medical impairment. If a worker has not returned to work, the PPD benefit is typically based on the loss of wage-earning capacity.

Centers for Medicare & Medicaid Services (CMS): A division of the U.S. Department of Health and Human Services responsible for the oversight of Medicare, Medicaid, and the State Children's Health Insurance Program.

compensability: The issue of whether an injury qualifies as a basis for a claim to benefits under the applicable workers' compensation statute.

Consumer Price Index (CPI): Published by the U.S. Department of Labor, the CPI is a measure of increases in the price of a marketbasket of goods and services by region of the country. The medical component of the CPI is often used to monitor inflation in health care products and services.

cost-of-living adjustment (COLA): An inflation-based adjustment in benefits corresponding to a change in the cost of living. COLAs may be based on changes in various metrics such as the Consumer Price Index, published by the Bureau of Labor Statistics, or on changes in the statewide average weekly wage, or they may be specifically enacted by state legislatures from time to time.

date of disability: The date a worker first became disabled from work as the result of a workplace injury or occupational disease.

date of employer notice of injury: The date on which the employer first knew or was advised of an employee's workplace injury or occupational disease.

date of first indemnity payment: The earliest date in the transaction file on which an indemnity payment was made.

date of injury: The date on which a worker's injury occurred or his or her illness became manifest and was known to be associated with work-related causes.

date of payor notice of injury: The date on which the payor (insurer, third-party administrator, etc.) first knew or was advised of an employee's workplace injury or occupational disease.

defense attorney payments: The expense to an insurer or employer of having an attorney defend a workers' compensation claim (includes payments for either or both in-house and outside defense counsel).

duration of temporary disability: The imputed length of time for which temporary disability benefits have been paid, estimated from amounts of benefits and the average benefit rate.

fee schedule: A set of prescribed reimbursement levels for medical procedures provided by a wide range of practitioners, generally within nonhospital and/or hospital settings, to workers' compensation claimants. Fee schedules may also apply to durable medical supplies or pharmaceuticals. Fee

schedules may be subject to negotiation or adjustment by agreement of the parties in some systems.

Fee schedules can be adjusted according to provisions in statute and rule.

formal dispute resolution: Typically, an administrative process for resolving workers' compensation disputes in which an adjudicator conducts at least one formal hearing where (1) sworn testimony is taken, (2) cross-examination of witnesses is permitted, (3) a record of the proceeding is kept, and (4) a written decision is issued if voluntary agreement is not reached beforehand. Formal dispute resolution may also occur in state courts, after completion of any administrative processes.

impairment approach to unscheduled PPD benefits: Under this approach, the worker's PPD benefit is directly and entirely related to his or her degree of medical impairment. Medical impairment is the measure of physical loss of a body part or system or impairment of use thereof, as measured by a physician. Various formulas are applied to derive the impairment ratings and determine the benefits. In some jurisdictions, a supplemental benefit is also available under certain circumstances when the worker has exhausted the PPD benefits awarded.

impairment rating: A percentage that estimates how much a worker has lost the normal use of injured parts of the body. Typically, impairment ratings are determined using the American Medical Association *Guides*.

indemnity benefits: Payments to a worker for time lost from work or other adverse effects of an occupational injury or illness. Indemnity benefits can include payments for loss of earning capacity or wages or permanent impairment or disability. Some states use the term *income benefits* to describe the full range of payments to the worker.

indemnity payments: Income replacement and/or disability benefit payments made to workers with injuries.

independent medical evaluation: A physical examination by a medical doctor generally chosen by the worker and/or insurer for the purpose of providing a medical-legal report to help resolve a dispute.

informal dispute resolution: Informal administrative processes such as mediation and arbitration (either binding or nonbinding) used to resolve workers' compensation disputes. Informal dispute resolution is distinguished from *formal* dispute resolution by the following features of the former: (1) few or no procedural rules, (2) no rules governing admissibility of evidence, (3) no sworn testimony or cross-examination of witnesses, and (4) no transcript or other form of record of proceedings.

loss-of-wage-earning-capacity approach to unscheduled PPD benefits: A system in which PPD benefits for unscheduled injuries are based on the impact that permanent impairment is expected to have on a worker's ability to earn or to compete in the labor market. The estimated earnings impact is based on a number of factors that may include the worker's age, education, and training and skills, as well as the extent of the worker's physical impairment and existing labor market conditions.

lump-sum settlement: An agreement that typically closes out a workers' compensation claim and results in a single final payment to the worker. In some states, rights to future medical benefits or vocational rehabilitation benefits cannot be resolved by lump-sum settlements. Lump-sum settlements are also known as compromise and release agreements and commutations.

managed care: An approach to health care cost containment that enables the payor to influence the delivery of health services before the services are provided. As used in this report, *managed care* refers to the use of designated entities, referred to as managed care organizations, to deliver health care to workers with injuries. Techniques common to managed care organizations include case management, physician gatekeepers, provider networks, and components of utilization review (such as admission review, admission precertification, continued-stay review, discharge planning, mandatory second opinion programs, and quality assurance mechanisms).

- maximum medical improvement (MMI):** The point at which the worker's medical condition has stabilized or is not expected to improve even with additional medical treatment.
- medical-only claim:** An open or closed claim for which medical payments have been made but no indemnity payments have been made or no indemnity reserves have been established.
- medical payments:** Payments to medical providers for the medical treatment of workers' injuries. These include payments to physicians, chiropractors, and physical/occupational therapists, and for hospital, pharmacy, nursing home, and medical rehabilitation services.
- nonimpairment state:** A state that does not base benefits for permanent partial disability solely on the worker's impairment. Such states typically apply an approach that bases PPD benefits on loss of earnings or wage-earning capacity or a dual (bifurcated) approach based on the worker's employment and earnings status at the time permanency benefits are determined.
- non-wage-loss state (also termed a PPD state):** A state that does not base payments for permanent partial disability solely on actual or imputed loss of wages.
- pay without prejudice:** A process used in some states under which an insurer may pay a claim without accepting liability for a fixed time period. This period establishes a window where the insurer may refuse a claim and stop or reduce payments at will.
- payor:** The entity responsible for administering and making payments on a workers' compensation claim. Payors may be insurers, third-party administrators, or self-insured, self-administered employers.
- permanent disability claim:** A claim for either permanent partial disability or permanent total disability benefits.
- permanent partial disability (PPD) payments:** Payments and escalations (where applicable) for scheduled and unscheduled PPD benefits. The latter include disfigurement benefits; PPD life pensions and annuities; impairment compensation; economic recovery compensation; supplemental income compensation; loss of earning power or capacity; and all payments identified as lump-sum settlements, compromise and release agreements, settlements, and commutations—regardless of the type(s) of benefits for which the lump sum was paid. In most jurisdictions, PPD benefits may be paid weekly or at other set intervals, or they may be paid in a lump sum.
- permanent total disability (PTD) payments:** Payments and escalations (where applicable) for an injury that results in a permanent condition of total incapacity to work.
- presumption law:** Statute specifying conditions where an injury or illness is presumed to have come from the workplace and thus compensable. The presumption is generally limited to combinations of job type and illness, e.g., firefighters and some cancers. The presumption may be rebuttable, and the statute will describe the evidence needed.
- salary continuation program:** An employer program under which the employer continues to pay a worker's salary after a workplace injury or illness occurs until compensability under workers' compensation is determined, or continues paying for some prescribed period of time under a collective bargaining agreement.
- scheduled injuries, payments:** Payments made according to a schedule or list that defines PPD awards (usually in terms of number of weeks of benefits or total dollar amounts) for specific losses of function or use of different body parts (injuries).
- statewide average weekly wage (SAWW):** The average weekly wage in a given state. The SAWW or some multiple thereof is often used to determine the maximum weekly indemnity compensation rates.
- temporary disability claim:** A claim for which either temporary partial disability or temporary total disability benefits have been paid.
- temporary partial disability (TPD) benefits:** TPD benefits are paid for those periods during which a worker

has returned to work on a part-time basis or at reduced wages.

temporary total disability (TTD) benefits: TTD benefits are paid when a worker is temporarily unable to earn any wages.

temporary total disability (TTD) rate: The weekly amount payable for temporary total disability benefits.

treatment guidelines: Specifications for ranges and/or levels of service and the methods of treatment (protocols) that should be considered accepted medical practice for certain diagnoses or patient conditions.

unilateral termination: The ability of employers and insurers to terminate or suspend benefits without prior approval through a workers' compensation administrative or hearing process.

unscheduled injuries, payments: Payments made for injuries not included in the state's schedule that defines PPD awards for specific losses of function or use of different body parts. Compensation may be predicated on additional factors such as wage loss and/or wage-earning capacity.

utilization review: The assessment of a patient's medical care to ensure that it is medically necessary and reasonable. This assessment typically considers the appropriateness of the place of care; the level of care; and the duration, frequency, and/or quantity of services provided based on the accepted condition(s).

vocational rehabilitation maintenance payments: Indemnity benefits paid while a worker is receiving vocational rehabilitation services.

vocational rehabilitation service/provider expenses: Payments for vocational rehabilitation services provided by outside vendors, including vocational evaluation, testing, training, education, books, and supplies.

wage differential benefits: Payments made to a worker when he or she obtains a new job that pays less than the preinjury job(s).

wage-loss state: A state that bases compensation for permanent partial disability on the workers' earnings histories. Under this approach, compensation—a portion of the wages lost because of the work-related injury—is paid until the worker returns to work at or near his or her preinjury wage. Under a pure wage-loss system, a worker who has returned to work and is earning at the preinjury level, regardless of the extent of his or her injury, would not receive PPD benefits.

ACRONYMS AND ABBREVIATIONS

ABP = Additional benefits payable

ADA = Americans with Disabilities Act

AFL-CIO = American Federation of Labor and Congress of Industrial Organizations

ALJ = Administrative law judge

AMA = American Medical Association

ANSI = American National Standards Institute

ASW = Average state wage

ASWW = Average state weekly wage

AWW = Average weekly wage

BWC = Bureau of Workers' Compensation

CEO = Chief executive officer

CFO = Chief financial officer

COLA = Cost of living adjustment

Comp = Compensation

CPA = Certified public accountant

CPI = Consumer Price Index

CPP = Canada Pension Plan

CPPD = Canada Pension Plan disability

DCBS = Department of Consumer and Business Services

DCRB = Delaware Compensation Rating Bureau

DIA = Department of Industrial Accidents

DLR = Department of Labor and Regulation

DOI = Date of injury

DOL = Department of Labor

DOM = Date of manifestation

DSM-V = Diagnostic and Statistical Manual of Mental Disorders, 5th Edition

EI = Employment insurance

ER = Emergency room

FECA = Federal Employees' Compensation Act

FERS = Federal Employees Retirement System

FWW = Full weekly wage

FY = Fiscal year

GS = General Schedule

HCS = Health care services

IAB = Industrial Accident Board

IC = Industrial Commission

IME = Independent medical examination

IRE = Impairment rating examination

IWCC = Illinois Workers' Compensation Commission

JCC = Judge of compensation claims

LLC = Limited liability corporation

LOE = Loss of earnings

Max. = Maximum

MCO = Managed care organization

MEMIC = Maine Employers' Mutual Insurance Company

MHCP= Managed health care plan

Min. = Minimum

MMI = Maximum medical improvement

MPN = Medical provider network

MQRP = Medical Quality Review Panel

N/A = Not applicable

NAWW = National average weekly wage

NBIAE = New Brunswick industrial aggregate earnings

NCCI = National Council on Compensation Insurance

NEL = Non-economic loss

OD = Occupational disease

ODG = Official Disability Guidelines

OT = Occupational therapy

OWC = Office of Workers' Compensation

OWCP = Office of Workers' Compensation Programs

PD = Permanent disability

PI = Permanent impairment

PPD = Permanent partial disability
PPI = Permanent partial impairment
PPO = Preferred provider organization
PPP = Preferred provider program
PT = Physical therapy
PTD = Permanent total disability
PTSD = Post-traumatic stress disorder
PWOP = Payment without prejudice
QME = Qualified medical examiner
Rehab. = Rehabilitation
RSCM = Rehabilitation services and claims manual
RTW = Return to work
SAMW = Statewide average monthly wage
SAWW = Statewide average weekly wage
SIB = Supplemental income benefits
SIEF = Secondary Injury and Enhancement Fund
SIF = Second Injury Fund
SS = Social Security
SSDI = Social Security disability insurance
SWAMW = Statewide average monthly wage
TB = Temporary benefits
TDB = Total disability benefit
TERB = Temporary earnings-replacement benefits
TPD = Temporary partial disability
TTD = Temporary total disability
TWL = Temporary wage loss
VR = Vocational rehabilitation
WC = Workers' compensation
WCA = Workers' Compensation Agency
WCAT = Workers' Compensation Appeal Tribunal
WCB = Workers' Compensation Board
WCLJ = Workers' compensation law judge

WISBF = Workplace Injury Supplemental Benefit Fund

WPI = Whole person impairment

WSIB = Workplace Safety and Insurance Board

%PP = Percentage of permanent partial award

APPENDIX A

MAXIMUM WEEKLY BENEFIT (2000–2025)

This edition includes a section showing historical data on the maximum weekly benefit for temporary disability in the 50 U.S. states plus the District of Columbia. The table is shown on page 17. Below are three visualizations that summarize the data.

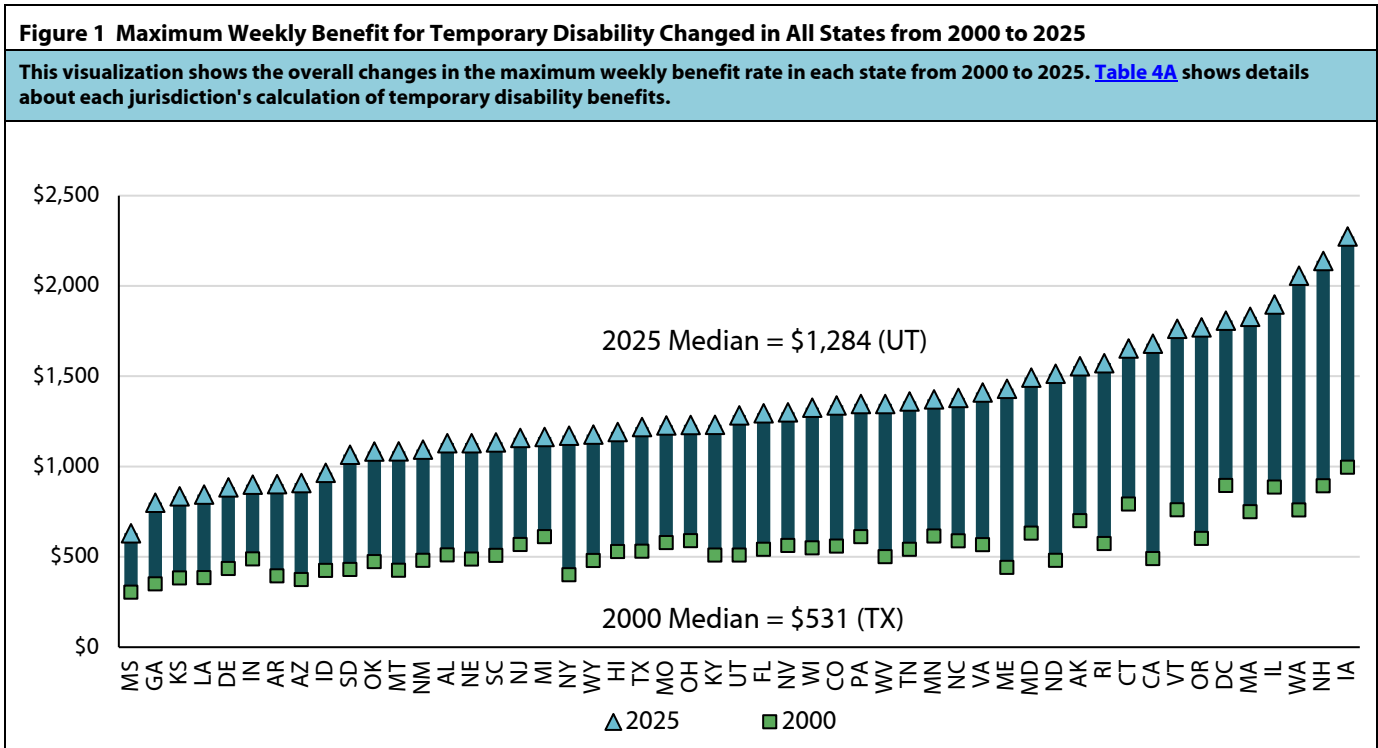
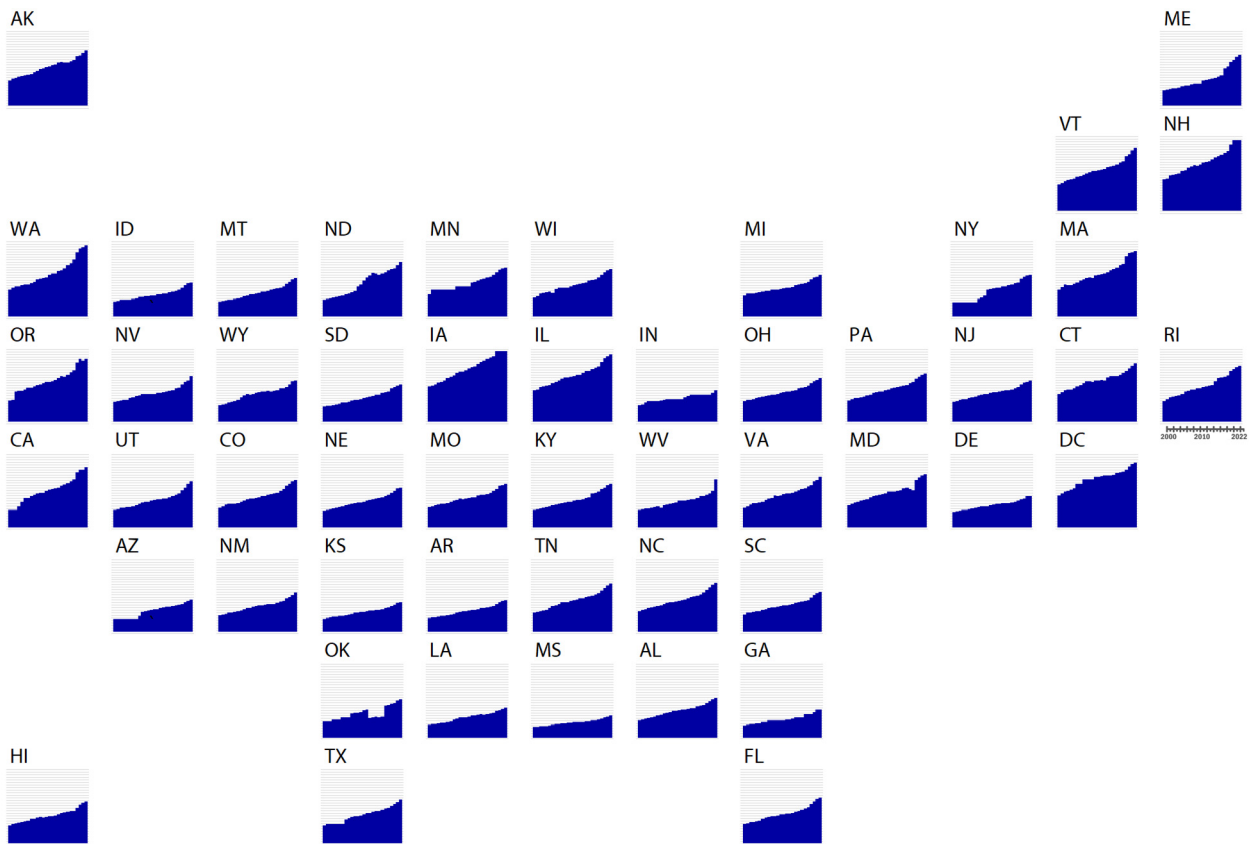


Figure 1 shows that the maximum weekly benefit for people injured at work nearly doubled over the period, from a median of \$531 in 2000 to \$1,284 in 2025. The cumulative increase ranged from 84 percent in Indiana to 243 percent in California. The growth patterns in different jurisdictions can be seen in Figure 2.

Figure 2 Maximum Weekly Benefit for Temporary Total Disability from 2000 to 2025

This visualization shows details of the historical maximum weekly benefit rate in each state from 2000 to 2025 (the period shown on the horizontal axis). [Table 4A](#) shows details about each jurisdiction's calculation of temporary disability benefits.



In many of the charts there was a noticeable increase in the benefit rate over the last six years (i.e., 2025 compared with 2020). [Table 4A](#) shows that many jurisdictions tie the maximum benefit to the statewide average weekly wage (SAWW) with a lag of up to 12 months (most commonly 6). The period between 2020 and 2025 included many changes to the labor market due to the pandemic,¹ demographic changes to the workforce, as well as increases in minimum wage in many jurisdictions. All of these factors tend to put upwards pressure on the SAWW, and thus on the maximum benefit rate.

Table A.1 shows the weekly maximum benefit rate in 50 states plus the District of Columbia as of January 1 in the years 2000 to 2025 inclusive. This is the data underpinning Figures 1 and 2 above.

¹ National data show that the average weekly wage grew in all states from September 2020 to September 2021 by 3.3 percent (Hawaii) to 15 percent (New Hampshire). https://data.bls.gov/maps/cew/US?period=2021-Q3&industry=10&pos_color=blue&neg_color=orange&chartData=7&ownerType=0&distribution=1&Update=Update#tab1 (accessed on March 24, 2022).

Table A.1 Maximum Weekly Benefit for Temporary Total Disability from 2000 to 2025 Provided by Workers' Compensation Systems as of January 1

This table shows the historical maximum weekly benefit rate in each state as of January 1 for each year from 2000 to 2025.

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
South Dakota	\$430.00	\$448.00	\$468.00	\$482.00	\$498.00	\$513.00	\$533.00	\$550.00	\$571.00	\$597.00	\$620.00	\$630.00	\$648.00	\$668.00	\$691.00	\$705.00	\$733.00	\$762.00	\$781.00	\$805.00	\$829.00	\$857.00	\$934.00	\$975.00	\$1,029.00	\$1,066.00
Tennessee	\$541.00	\$562.00	\$581.00	\$599.00	\$618.00	\$670.00	\$729.00	\$750.00	\$784.00	\$827.00	\$837.00	\$841.50	\$867.90	\$886.60	\$918.50	\$932.80	\$943.80	\$976.80	\$992.20	\$1,021.90	\$1,056.00	\$1,093.40	\$1,166.00	\$1,233.10	\$1,313.40	\$1,360.70
Texas	\$531.00	\$533.00	\$535.62	\$536.74	\$537.00	\$539.00	\$540.00	\$674.00	\$712.00	\$750.00	\$773.00	\$766.00	\$787.00	\$818.00	\$850.00	\$861.00	\$895.00	\$913.00	\$913.00	\$938.00	\$971.00	\$1,007.00	\$1,058.38	\$1,112.00	\$1,174.00	\$1,219.00
Utah	\$509.00	\$529.00	\$554.00	\$562.00	\$579.00	\$589.00	\$609.00	\$631.00	\$665.00	\$702.00	\$720.00	\$732.00	\$747.00	\$762.00	\$782.00	\$790.00	\$811.00	\$817.00	\$855.00	\$879.00	\$916.00	\$954.00	\$1,038.00	\$1,130.00	\$1,230.00	\$1,284.00
Vermont	\$760.00	\$790.00	\$827.00	\$865.00	\$887.00	\$915.00	\$950.00	\$974.00	\$1,013.00	\$1,053.00	\$1,092.00	\$1,119.00	\$1,122.00	\$1,145.00	\$1,166.00	\$1,197.00	\$1,224.00	\$1,259.00	\$1,281.00	\$1,311.00	\$1,353.00	\$1,403.00	\$1,542.00	\$1,604.00	\$1,700.00	\$1,763.00
Virginia	\$567.00	\$606.00	\$645.00	\$681.00	\$691.00	\$706.00	\$736.00	\$773.00	\$816.00	\$841.00	\$895.00	\$885.00	\$905.00	\$935.00	\$955.00	\$967.00	\$975.00	\$996.00	\$1,043.00	\$1,082.00	\$1,102.00	\$1,137.00	\$1,195.00	\$1,290.00	\$1,343.00	\$1,410.00
Washington	\$759.00	\$822.00	\$852.00	\$860.00	\$875.54	\$895.94	\$900.88	\$932.00	\$983.46	\$1,032.82	\$1,068.27	\$1,088.98	\$1,112.29	\$1,164.17	\$1,203.86	\$1,214.65	\$1,266.25	\$1,299.60	\$1,361.59	\$1,429.26	\$1,506.00	\$1,608.58	\$1,790.95	\$1,904.18	\$1,942.46	\$2,057.03
West Virginia	\$500.18	\$517.12	\$538.12	\$550.29	\$563.15	\$584.29	\$602.77	\$568.78	\$615.35	\$640.56	\$676.61	\$692.93	\$711.38	\$741.65	\$754.81	\$759.88	\$778.83	\$787.06	\$783.59	\$823.14	\$865.11	\$885.32	\$917.08	\$957.40	\$1,010.41	\$1,347.00
Wisconsin	\$549.00	\$582.00	\$647.00	\$669.00	\$687.00	\$711.00	\$676.00	\$777.00	\$805.00	\$808.00	\$815.00	\$820.00	\$854.00	\$879.00	\$892.00	\$911.00	\$936.00	\$961.00	\$994.00	\$1,016.00	\$1,051.00	\$1,094.00	\$1,159.00	\$1,247.00	\$1,296.00	\$1,326.00
Wyoming	\$479.00	\$501.00	\$527.00	\$547.00	\$563.00	\$586.00	\$616.00	\$686.00	\$740.00	\$782.00	\$768.00	\$789.60	\$819.63	\$842.65	\$858.00	\$864.00	\$868.67	\$850.65	\$875.67	\$901.69	\$932.72	\$946.73	\$986.00	\$1,061.00	\$1,145.00	\$1,177.00

Table 1A List of Jurisdictional Contacts on Workers' Compensation Laws as of January 1, 2025				
Jurisdiction	Name of Jurisdictional Contact	Name of Agency	Telephone	Email
Alabama	Craig White	Alabama Workers' Compensation Division	334-956-4047	craig.white@labor.alabama.gov
Alaska	Charles Collins	Alaska Department of Labor and Workforce Development, Workers' Compensation Division	907-465-2790	workerscomp@alaska.gov
Arizona	Gaetano Testini	Industrial Commission of Arizona	602-542-5905	Gaetano.Testini@azica.gov
Arkansas	Catherine Richart	Arkansas Workers' Compensation Commission	501-682-2707	catherine.richart@arkansas.gov
California	George P. Parisotto	California Department of Industrial Relations Division of Workers' Compensation	510-286-0924	gparisotto@dir.ca.gov
Colorado	Christy Culkin	Department of Labor & Employment, Division of Workers' Compensation	303-318-8668	christy.culkin@state.co.us
Connecticut	Stephen Morelli	Workers' Compensation Commission	860-493-1500	stephen.morelli@ct.gov
Delaware	Allison Stein	Department of Labor - Office of Workers' Compensation	302-761-8215	allison.stein@delaware.gov
District of Columbia	Office of Workers' Compensation	D.C. Dept. of Employment Services Office of Workers' Compensation	(202) 671-1000	owc@dc.gov
Florida	Brittany O'Neil	Division of Workers' Compensation	850-413-1927	brittany.oneil@myfloridacfo.com
Georgia	Delece A. Brooks	State Board of Workers' Compensation	404-656-2048	brooksd@sbwc.ga.gov
Hawaii	Shelli Newburg	Department of Labor and Industrial Relations, Disability Compensation Division	808 586-9151	DLIR.Workcomp@Hawaii.gov
Idaho	Kamerron Slay	Industrial Commission	208-334-6000	Kamerron.Slay@iic.idaho.gov
Illinois	Whitney Martin	Illinois Workers' Compensation Commission	312-814-6793	whitney.martin@illinois.gov
Indiana	Darren Dye	Indiana Worker's Compensation Board	317-233-3384	ddye@wcb.in.gov
Iowa	Penny Maxwell	Iowa Workers' Compensation Division	515-725-3836	penny.maxwell@iwd.iowa.gov
Kansas	Jazz Washington	Kansas Department of Labor	785-296-4000	jassina.washington@dol.ks.gov
Kentucky	Scott C. Wilhoit	Department of Workers' Claims	502-782-4532	scott.wilhoit@ky.gov
Louisiana	Brian Blackwood	Louisiana Workforce Commission, Office of Workers' Compensation Administration (OWCA)	225-342-7561	BBlackwood@lwc.la.gov
Maine	Richard N. Hewes	Maine Workers' Compensation Board	207-287-7107	Richard.Hewes@maine.gov
Maryland	Elizabeth Fletcher	Maryland Workers' Compensation Commission	410-864-5315	efletcher@wcc.state.md.us
Massachusetts	Bill Taupier	Department of Industrial Accidents	857-321-7560	bill.taupier@mass.gov
Michigan	Kara Barnhart	Workers Disability Compensation Agency	517-284-8891	barnhartk@michigan.gov
Minnesota	Ethan Landy	Minnesota Department of Labor and Industry	651-284-5302	ethan.landy@state.mn.us
Mississippi	Anthony Schmidt	Mississippi Workers' Compensation Commission	601-987-4284	aschmidt@mwcc.ms.gov
Missouri	Did not participate in the study this year			
Montana	Kristine Ediger	Employment Standards Division	406-444-1675	kediger@mt.gov
Nebraska	Lorra O'Banion	Nebraska Workers' Compensation Court	402.471.9745	lobanion@newcc.gov
Nevada	Victoria Carreon	State of Nevada, Division of Industrial Relations Workers' Compensation Section	702-486-9080	vcarreon@dir.nv.gov
New Hampshire	Wesley Gardner	Department of Labor	603-271-8492	Wesley.Gardner@dol.nh.gov
New Jersey	Hon. Maria Del-Valle Koch	NJ Division of Workers' Compensation	609-292-2414	maria.delvalle-koch@dol.nj.gov
New Mexico	Richard Adu-Asamoah, Ph.D.	New Mexico Workers' Compensation Administration	505-841-6044	Richard.Adu-Asamoah@wca.nm.gov
New York	Cheryl Wood	New York State Workers' Compensation Board	518-402-1074	cheryl.wood@wcb.ny.gov
North Carolina	Gina Cammarano	North Carolina Industrial Commission	919-807-2524	gina.cammarano@ic.nc.gov
North Dakota	Ryan Maddock	North Dakota Workforce Safety & Insurance	701-328-3806	rpmaddock@nd.gov
Ohio	Terri Kozanecki	Ohio Bureau of Workers' Compensation	614-466-5223	teresa.k.1@bwc.ohio.gov
Oklahoma	Ian Steedman	Oklahoma Workers' Compensation Commission	405-521-2649	ian.steedman@wcc.ok.gov
Oregon	Marie Rogers	Department of Consumer and Business Services, Workers' Compensation Division	971-286-0316	WCD.Policy@dcbs.oregon.gov
Pennsylvania	Marianne Saylor	Department of Labor & Industry, Bureau of Workers' Compensation	717-886-9001	masaylor@pa.gov
Rhode Island	Kathy McElroy	Department of Labor & Training, Division of Workers' Compensation	401-462-8122	kathy.mcelroy@dlt.ri.gov

Table 1A List of Jurisdictional Contacts on Workers' Compensation Laws as of January 1, 2025				
Jurisdiction	Name of Jurisdictional Contact	Name of Agency	Telephone	Email
South Carolina	Eric Baxley Gary M. Cannon	South Carolina Workers' Compensation Commission	803-904-7620 803-737-5744	ebaxley@wcc.sc.gov gcannon@wcc.sc.gov
South Dakota	Amber Mulder	Department of Labor and Regulation, Division of Labor and Management	605-773-3681	Amber.Mulder@state.sd.us
Tennessee	Troy Haley	Bureau of Workers' Compensation	615-532-0179	troy.haley@tn.gov
Texas	Jeff Nelson	Texas Department of Insurance, Division of Workers' Compensation	512-804-4405	Jeff.Nelson@tdi.Texas.gov
US Federal Programs - FECA	Jennifer Valdivieso	Office of Worker's Compensation Programs - Federal Employees Compensation Program	202-513-6860	Valdivieso.Jennifer@dol.gov
US Federal Programs - Longshore and Harbor Workers' Compensation	Stephanie S. Brown	OWCP, Division of Longshore and Harbor Workers' Compensation	202-513-6809	Brown.Stephanie.S@dol.gov
Utah	Ron Dressler	Division of Industrial Accidents	801-530-6841	rdressler@utah.gov
Vermont	Dirk Anderson	Vermont Department of Labor	802-828-4391	Dirk.Anderson@vermont.gov
Virginia	Evelyn McGill Jim Szablewicz	Virginia Workers' Compensation Commission	804-205-3060	Evelyn.McGill@workcomp.virginia.gov James.Szablewicz@workcomp.virginia.gov
Washington	Jordan Ely Suzy Campbell Sarah Jackson	Department of Labor and Industries	360-902-4616 360-902-5003 360-902-5118	jordan.ely@lni.wa.gov suzy.campbell@lni.wa.gov sarah.jackson@lni.wa.gov
West Virginia	Erin Hunter Juanita Wimmer	WV Offices of the Insurance Commissioner	304-558-6279	erin.k.hunter@wv.gov juanita.d.wimmer@wv.gov
Wisconsin	Kelly M. McCormick	Department of Workforce Development, Worker's Compensation Division	608-266-1340	KellyM.McCormick@dwd.wisconsin.gov
Wyoming	Jodi Bower	Department of Workforce Services	307-777-3614	jodi.bower@wyo.gov
Canadian Jurisdictions Participating				
British Columbia		WorkSafeBC		policy@worksafebc.com
New Brunswick	Carol Veysey	WorkSafeNB	506-647-7234	carol.veysey@ws-ts.nb.ca
Nova Scotia		Did not participate in the study this year		
Ontario	Lila Amara	Workplace Safety and Insurance Board	647-386-9740	lila_amara@wsib.on.ca
Prince Edward Island	Jody Jackson	Workers Compensation Board of Prince Edward Island	902-213-4547	jsjackson@wcb.pe.ca
Saskatchewan	Julia Lacell	Saskatchewan Workers' Compensation Board	306-787-9557	jlacell@wcbask.com

This chart displays information on whether a law is compulsory or elective by statute, if waivers are permitted, the market choices for purchasing coverage within each jurisdiction, and how the residual market is handled.												
Jurisdiction	Type of Law: Compulsory or Elective	Waivers Permitted				Employer to Insure Through			Self Insurance Allowed			Residual Market Administered By
		Yes/No	For Corporate Officers	For Sole Proprietors	For Children on Family Farms	Exclusive State Fund	Private Carriers	Competitive State Fund	Individual Employer	Groups of Employers	Political Subdivisions	
Alabama	Compulsory	Yes	Yes	May elect to be covered	No	No	No	No	Yes	Yes	Yes	NCCI
Alaska	Compulsory	Yes	No	Excluded, but may elect to be covered	No	No	No	Yes	No	No	Yes	NCCI
Arizona	Compulsory	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	None
Arkansas	Compulsory	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	NCCI
California	Compulsory (1)	Yes	Yes (2)	May elect to be covered	No	No	Yes	Yes	Yes	Yes	Yes	Non-exclusive state fund
Colorado	Compulsory	Yes (3)	Yes	May elect to be covered	No	No	Yes	Yes (4)	Yes	Yes	Yes	Pinnacle Assurance
Connecticut	Compulsory	Yes (5)	Yes	Yes	No	No	Yes	No	Yes	Yes	Yes	NCCI
Delaware	Compulsory	Yes (6)	Yes	Yes	No	No	Yes	No	Yes (7)	Yes (7)	Yes (7)	An independent rating bureau through DCRB
District of Columbia	Compulsory	No	No	No	No	No	Yes	No	Yes	Yes	No	NCCI
Florida	Compulsory	Yes	Yes (8)	No (9)	No	No	Yes	No	Yes	Yes	Yes	Florida Workers Compensation Joint Underwriting Association, Inc.
Georgia	Compulsory	Yes	Yes	No	No	No	Yes	No	Yes	Yes	Yes	NCCI
Hawaii	Compulsory	Yes	Yes	Yes	No	No	Yes	No	Yes	Yes	Yes	None
Idaho	Compulsory	No (10)	No	May elect to be covered	No	No	Yes	Yes	Yes	No	Yes	NCCI
Illinois	Compulsory	Yes	Yes	Yes	Yes	No	Yes	No	Yes	Yes	Yes	NCCI
Indiana	Compulsory	Yes	Yes	Yes	Yes	No	Yes	No	Yes	No	Yes	An independent rating bureau
Iowa	Compulsory	Yes	Yes	Yes	May elect to cover	No	Yes	No	Yes	Yes	N/A	NCCI
Kansas	Compulsory	Yes	Yes (11)	May elect to be covered	May elect to cover	No	Yes	No	Yes	Yes	Yes	NCCI
Kentucky	Compulsory	Yes	No	No	No	No	Yes	Yes	Yes	Yes	Yes	N/A
Louisiana	Compulsory	Yes	Yes	Yes	No	No	Yes	No	Yes	Yes	Yes	Louisiana Workers' Compensation Corporation
Maine	Compulsory	Yes	Yes (12)	N/A	Yes	No	Yes	No	Yes	Yes	Yes	MEMIC
Maryland	Compulsory	Yes	Yes (13)	May elect to be covered	No	No	Yes	Yes	Yes	Yes	Yes	Non-exclusive state fund
Massachusetts	Compulsory	Yes	Yes, if they own at least 25% of corporation	Yes, MA law states that WC is optional	No	No	Yes	No	Yes	Yes	Yes	An independent rating bureau
Michigan	Compulsory	Yes	Yes	No (14)	Yes	No	Yes	No	Yes	Yes	Yes	An independent rating bureau
Minnesota	Compulsory	Yes	Yes (15)	Yes (16)	Yes	No	Yes	No	Yes	Yes	Yes	Minnesota Workers' Compensation Insurers Association, Inc. (17)
Mississippi	Compulsory	Yes	Yes (18)	Yes	No	No	Yes	No	Yes	Yes	Yes	NCCI
Missouri as of January 1, 2019 (19)	Compulsory	Yes	Yes (20)	Excluded unless they opt in	Farm labor is excluded but employer may elect to be covered	No	Yes	No	Yes	Yes	Political subdivisions can self-insure but cannot provide coverage for other entities	Commercial carrier contracted through Missouri Department of Insurance
Montana	Compulsory	No (21)	No	No	No	No	Yes	Yes	Yes	Yes	Yes	Non-exclusive state fund
Nebraska	Compulsory	No	(22)	(22)	No	No	Yes	No	Yes	No	Yes	Assigned risk plan contracted to a licensed carrier
Nevada	Compulsory	Yes	Yes	May elect to be covered	No	No	Yes	No	Yes	Yes	Yes	NCCI
New Hampshire	Compulsory	Yes	Yes, up to 3	Yes	No	No	Yes	No	Yes	Yes	Yes (23)	NCCI
New Jersey	Compulsory (24) (25)	Yes	No	Yes	No	No	Yes	No	Yes	Yes (26)	Yes	An independent rating bureau
New Mexico	Compulsory	Yes	Yes	Yes	N/A	No	Yes	Yes	Yes	Yes	Yes	NCCI
New York	Compulsory	No	No (27)	No (28)	(29)	No	Yes	Yes	Yes	(30)	Yes	Non-exclusive state fund
North Carolina	Compulsory	Yes	Yes (31) (32)	Yes (33)	No	No	Yes	No	Yes	Yes	Yes	Assigned risk plan
North Dakota	Compulsory	Yes (34)	Yes	Yes	Yes	Yes	No	No	No	No	No	Exclusive fund
Ohio	Compulsory	Yes	No/yes for non-profit	Yes	No	Yes	No	No	Yes	No	Yes	Exclusive fund

This chart displays information on whether a law is compulsory or elective by statute, if waivers are permitted, the market choices for purchasing coverage within each jurisdiction, and how the residual market is handled.												
Jurisdiction	Type of Law: Compulsory or Elective	Waivers Permitted				Employer to Insure Through			Self Insurance Allowed			Residual Market Administered By
		Yes/No	For Corporate Officers	For Sole Proprietors	For Children on Family Farms	Exclusive State Fund	Private Carriers	Competitive State Fund	Individual Employer	Groups of Employers	Political Subdivisions	
Oklahoma	Compulsory	No	No	No	No	No	Yes	No	Yes	Yes	Yes	N/A
Oregon	Compulsory	Yes (35)	Yes (35) (36)	Yes (35)	No (35)	No	Yes	Yes (37)	Yes	Yes	Yes	NCCI
Pennsylvania	Compulsory	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	Yes	Non-exclusive state fund
Rhode Island	Compulsory	Yes (38)	Yes	No	No	No	Yes	Yes	Yes	Yes	No	Non-exclusive state fund
South Carolina	Compulsory	Yes	Yes (39)	No (40)	N/A (41)	No	Yes	No	Yes	Yes	Yes	NCCI
South Dakota	Compulsory	Yes	Yes	Yes	No	No	Yes	No	Yes	No (42)	Yes	NCCI
Tennessee	Compulsory	Yes	Corporate officers engaged in the construction services industry may obtain an exemption through the Bureau of Workers' Compensation	Non-construction sole proprietors are automatically exempt but can elect to be covered. Sole proprietors engaged in the construction services industry may obtain an exemption through the Bureau of Workers' Compensation	Agricultural workers are exempt in general (43)	No	Yes	No	Yes	Yes	Yes	Tennessee Workers' Compensation Insurance Plan (assigned risk plan) administered by NCCI
Texas	Elective	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Competitive state fund
US Federal Programs - FECA	Compulsory	No	No	No	No	N/A (44)					There is no market of last resort	
US Federal Programs - Longshore (45)	Compulsory	No	No	No	No	No	Yes	Yes	Yes	Yes	N/A	Follows state-specific method in which the Longshore exposure arises
Utah	Compulsory	Yes	Yes	No	Yes	No	Yes	Yes	Yes (46)	No (46)	Yes (46)	Insurer of last resort—Workers Compensation Fund of Utah
Vermont	Compulsory	Yes	Yes (47)	No, except under limited exceptions provided by statute. See 21 V.S.A. sec. 601(14)(F)	Yes (47)	No	Yes	No	Yes	Yes	Yes	NCCI
Virginia	Compulsory	Yes	Yes	No	No	No	Yes	No	Yes	Yes	Yes	NCCI (48)
Washington	Compulsory	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Exclusive fund
West Virginia	Compulsory	Yes	Yes	May elect to be covered	No	No	Yes (49)	No	Yes	Yes	Yes	NCCI
Wisconsin	Compulsory (50)	Yes	Yes	Yes	Yes	No	Yes	No	Yes	No	Yes	Wisconsin Compensation Rating Bureau (WCRB)—an independent rating bureau
Wyoming	Compulsory (51)	Yes	Yes	May elect to be covered	May elect to cover	Yes	No	No	Yes (52)	Yes (52)	No	Exclusive fund
Canadian Jurisdictions Participating (stated in Canadian currency)												
British Columbia	Compulsory (53)	Yes	Yes (54)	May apply for coverage (55)	No	Yes	No	No	No	No	No	Exclusive fund
New Brunswick	Compulsory	No	No	No	No	Yes	No	No	No	Yes (56)	No	Exclusive fund
Nova Scotia as of January 1, 2022 (57)	Compulsory	Yes	Yes	Yes	No	Yes	No	No	No	Yes (58)	No	Exclusive fund
Ontario	Compulsory	Generally no (59)		N/A	N/A	Yes	No	No	No (not instead of WSIB coverage)	No	No	N/A
Prince Edward Island	Compulsory	No	No	No	No	Yes	No	No	No	No	No	WCB is responsible to administer the Accident Fund
Saskatchewan	Compulsory	No	May apply/purchase coverage	May apply/purchase coverage	No	Yes	No	No	No	No	Yes (60)	Exclusive fund
Notes:												
Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.												
1 California - Collective bargaining agreements establishing alternative dispute resolution programs (a.k.a. "carve-outs") permitted pursuant to CA Labor Code sections 3201.5 and 3201.7.												
2 California - Officers of a quasi-public or private corporation may waive coverage if they meet certain criteria pursuant to CA Labor Code section 3352.												

Table 1 Type of Law and Insurance Requirements as of January 1, 2025

This chart displays information on whether a law is compulsory or elective by statute, if waivers are permitted, the market choices for purchasing coverage within each jurisdiction, and how the residual market is handled.												
Jurisdiction	Type of Law: Compulsory or Elective	Waivers Permitted				Employer to Insure Through			Self Insurance Allowed			Residual Market Administered By
		Yes/No	For Corporate Officers	For Sole Proprietors	For Children on Family Farms	Exclusive State Fund	Private Carriers	Competitive State Fund	Individual Employer	Groups of Employers	Political Subdivisions	
3	Colorado	Coverage cannot be waived, only rejected. Corporate officers and members of a limited liability company, who are at least 10 percent shareholders, may reject coverage. Coverage is elective for working general partners or sole proprietors. Coverage is required for construction workers unless specifically rejected.										
4	Colorado	Pinnacle Assurance only in the state of Colorado.										
5	Connecticut	Family members dwelling in residence under certain conditions and service workers for a household employed less than 26 hours per week.										
6	Delaware	Waivers are permitted for farm labor, sole proprietors, partners not in the construction industry, and eight corporate and four members of an LLC not in the construction industry (if in the construction industry that reduces to four and four).										
7	Delaware	Self insurance program is on hold.										
8	Florida	No more than three corporate officers within the construction industry allowed for exemption.										
9	Florida	Sole proprietors may elect to be covered.										
10	Idaho	An employer's family (first degree of consanguinity), not dwelling in his household, can file an exemption from coverage. Unless the employee is exempted from coverage by law, there is no option to waive coverage.										
11	Kansas	Corporate owners with 10 percent of stock can elect out.										
12	Maine	Owners of a business are also excluded; sole proprietors are excluded.										
13	Maryland	A corporate officer is exempt if he or she is: (1) an officer of a close corporation; (2) an officer of a corporation that earns at least 75 percent of income from farming and owns at least 20 percent of outstanding capital stock; (3) an officer of a professional corporation, owns at least 20 percent, and performs a professional service for the corporation; or (4) a member of an LLC and owns at least 20 percent of the outstanding interests in profits of the LLC.										
14	Michigan	In a sole proprietorship, if it has one or more employees and all employees are the spouse, child, or parent of the sole proprietor, then exclusion can be granted.										
15	Missouri	2019 responses. No 2025 data were provided.										
16	Missouri	Corporations with no more than two officers, who are also the only employees of the corporation, may withdraw from the workers' compensation provisions by filing a notice of election to be withdrawn with the Division. Written waivers may also be filed with the Division by employees and employers who are members of a recognized religious sect or division, as defined in 26 USC Section 1402 (g).										
17	Minnesota	Excluded from coverage are executive officers holding at least 25 percent of stock in a closely-held corporation with less than 22,880 hours of payroll in preceding calendar year, and the officer's spouse, parent or child, regardless of age, and executive officers of family farm corporations, and the officer's spouse, parent, or child, regardless of age. Although coverage is excluded, it can be elected.										
18	Minnesota	A sole proprietor, and the sole proprietor's spouse, parent or child, regardless of age. Although coverage is excluded, it can be elected.										
19	Minnesota	The administrator for the Minnesota Workers' Compensation Assigned Risk Plan is Affinity Insurance Services (Aon).										
20	Mississippi	And employees who own 15 percent or more of stock in a corporation are exempt altogether.										
21	Montana	Waivers do not exist for these three categories. However, the following entity types may be exempted from WC coverage requirements: sole proprietors, working members of a partnership, working members of a limited liability partnership, or working members of a member-managed limited liability company; an officer of a quasi-public or a private corporation or manager of a manager-managed limited liability company, in accordance with 39-71-401(3), MCA.										
22	Nebraska	Self-employed individuals, sole proprietors, partners, and limited liability company members who are actually engaged in the business on a substantially full-time basis may elect to be covered. Executive officers who own 25 percent or more of the corporation's common stock are not considered employees unless they elect to be covered. Executive officers of a non-profit corporation who receive annual compensation of one thousand dollars or less from such corporation shall not be construed to be an employee unless they elect to be covered.										
23	New Hampshire	Any employer can be self-insured in New Hampshire with NH DOL permission.										
24	New Jersey	If employers do not choose to purchase workers' compensation coverage, they must notify their employees and obtain an employer-liability policy, which carriers do not currently offer. Employees can opt out in advance.										
25	New Jersey	Sole proprietors and members of an LLC can opt out of coverage for themselves only.										
26	New Jersey	Only for hospitals.										
27	New York	Except if there is only one corporate officer who holds all offices and owns all stock, such an officer can elect to be excluded from coverage. Except if there are two executive officers who hold all the offices and own all of the stock of the corporation, one or both of the officers can elect to be excluded from coverage.										
28	New York	Except a sole proprietor can elect whether or not to be covered by the policy for employees.										
29	New York	Except minor children of the farmer are not considered employees and are not covered, unless they are engaged by the farmer under an express contract for hire.										
30	New York	As of January 1, 2012, this option is only allowed for groups of employers that were in existence prior to March 31, 2011, and meet certain financial criteria.										
31	North Carolina	Corporate officers are counted in determining whether the corporation has 3 or more employees. However, corporate officers may specifically exclude themselves from coverage under a workers' compensation policy.										
32	North Carolina	There are special statutory provisions for nonprofit corporations. See N.C. Gen. Stat. §97-2(2).										
33	North Carolina	Sole proprietors, partners, and members of limited liability companies are not automatically counted as employees, but they may elect to include coverage for themselves under the workers' compensation policy if they are actually engaged in the operation of the business and if the insurer is notified of their election to be included.										
34	North Dakota	Farm laborers, domestic servants, members of boards of directors of business corporations, casual workers, illegal enterprises or occupations, clergy, and real estate brokers or salespersons and newspaper delivery personnel with written agreements defining them as independent contractors are all exempt from coverage.										
35	Oregon	For 'waivers', read 'exemptions'.										
36	Oregon	Exemptions for corporate officers are limited - see ORS 656.027(10) and (24).										
37	Oregon	SAIF Corporation is a not-for-profit, state-chartered workers' compensation company.										
38	Rhode Island	Employees can claim common law rights and opt out.										
39	South Carolina	Corporate officers are covered unless coverage is rejected.										
40	South Carolina	By definition, a sole proprietor is an employer.										
41	South Carolina	Agriculture is excluded. See S.C. Code Ann. § 42-1-360(4).										
42	South Dakota	Only utilities and political subdivisions can group self-insure.										
43	Tennessee	Employers of agricultural workers are exempt but have option to purchase coverage on and after 5/2/18 per TCA 50-6-106(4).										

Table 1 Type of Law and Insurance Requirements as of January 1, 2025												
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		Yes/No	For Corporate Officers	For Sole Proprietors	For Children on Family Farms	Exclusive State Fund	Private Carriers	Competitive State Fund	Individual Employer	Groups of Employers	Political Subdivisions	
44	US Federal Programs - FECA	Administers benefits for U.S. government employees through the Office of WC Programs. They can be considered self-insured and self-administered.										
45	US Federal Programs - Longshore	Longshore pays for benefits to workers injured while working in areas and in occupations that traditionally are adjacent to waterways, like those who load and unload ships or build and repair ships.										
46	Utah	Employers, both public and private, may become self-insured by satisfying statutory requirements. Public entities may form public agency insurance mutual associations to establish group self-insurance status.										
47	Vermont	Waivers are permitted for up to four corporate officers or LLC members. See for further detail on employee definition and exceptions, 21 V.S.A. sec. 601(14).										
48	Virginia	Only for uninsured employers who are subject to the Act.										
49	West Virginia	On July 1, 2008, West Virginia opened its workers' compensation market to private insurers. Prior to July 1, 2008, there was a single private insurer.										
50	Wisconsin	The exceptions are exclusive by type of employment, organizational structure, and amount of payroll. Sole proprietors, partners, and members of limited liability companies are exempt from coverage, but may elect to cover themselves. Two officers of a closely-held corporation (a corporation with not more than 10 stockholders) may exclude themselves from coverage. The only employee exceptions are: (1) domestic servants; (2) any person whose employment is not in the trade or business profession or occupation of the employer; (3) some farm employees; (4) volunteers, including volunteers of non-profit organizations that receive money or other things of value totaling not more than \$10.00 per week; (5) religious sect members that qualify and are certified for an exemption; (6) employees of Native American tribal enterprises (including casinos), unless the tribe elects to waive its sovereign immunity and voluntarily become subject to the law; and (7) real estate brokers, agents, and salespersons that satisfy the two elements pursuant to s. 452.38, Wis. Stats.										
51	Wyoming	Compulsory for extra-hazardous industries; all others may elect coverage.										
52	Wyoming	Self insurance is an option only for non-hazardous industries.										
53	British Columbia	Coverage is universally mandatory for all employers, in their capacity as employers, and all workers in British Columbia, other than employers and workers exempted by order of the Board. [Section 4(1), WCA]										
54	British Columbia	A director, shareholder or other principal of a company who is active in the business operations of the company is generally considered to be a worker under the Act. However, there is a policy exception: principals are not entitled to compensation if the injured principal was personally responsible for the failure to register for coverage. [Item AP1-1-1 of the Assessment Manual]										
55	British Columbia	An independent operator may be a sole proprietor or a partner of a partnership. Registration with the Board is optional for an independent operator. An independent operator who registers with the Board by purchasing Personal Optional Protection is a worker for the purposes of the compensation provisions of the Act. [Item AP1-1-1 of the Assessment Manual]										
56	New Brunswick	There is group self insurance for the government of New Brunswick. It continues to pay loss of earnings benefits, and WorkSafeNB administers the claim. It pays full costs of the claim.										
57	Nova Scotia	2022 responses. No 2025 data were provided.										
58	Nova Scotia	Self insurance is only available for provincial and federal government departments and agencies.										
59	Ontario	There is a waiver permitted in the construction industry—one partner in a partnership and one executive officer in a corporation may choose to be exempt from coverage if he/she does not perform construction work.										
60	Saskatchewan	The Saskatchewan Workers' Compensation Board has an agreement with the Federal Government of Canada to administer work-related injury claims for federal employees. According to this agreement, the Federal Government is required to pay to the WCB the cost of all compensation benefits distributed to their workers plus a share of the administration costs rather than an assessment rated on payroll.										

Jurisdiction	Specific Exclusions for Small Employers		Specific Exclusions for Agricultural Employers		Specific Exclusions for Domestic Employers		Other Employees Excluded from Coverage				
	Yes/No	Employers Are Exempt Who Employ Fewer Than	Yes/No	Conditions for Exclusion	Yes/No	Conditions for Exclusion	Independent Contractors	Casual Employees	Volunteers	Prof. Athletes	Other (see notes)
Alabama	Yes	5	Yes	None	Yes	None	No	Yes	No	No	Yes
Alaska	No	N/A	No (1)	Harvest help excluded from coverage	No (2)	Part-time baby-sitters and cleaning persons excluded from coverage	Yes	No	Yes	Yes (3)	Yes (3)
Arizona	No	N/A	No	N/A	Yes	ARS 23-902 has an exception for domestic servants	Yes	Yes	No	No	Yes (4)
Arkansas	Yes	3 (5)	Yes		Yes		Yes	Yes (6)	(7)	No	Yes
California	No	N/A	No	N/A	Yes	During 90 days preceding date of injury, if: (a) employment was, or was contracted to be, for less than 52 hours, or (b) employment was, or was contracted to be, for wages of less than \$100	Yes	No	Yes (8)	No (9)	N/A
Colorado	No	N/A	Yes	Exclusion applies if the employer does not pay persons engaged in casual agricultural activities more than \$2,000 in wages for any calendar year	Yes	Exclusion applies if the employer does not employ persons engaged in domestic work for more than 40 hours/week AND more than 5 days/week	Yes	Yes	No (10)	No	Yes (10)
Connecticut	No	N/A	No	N/A	Yes	If employee works 26 hours or less per week (11)	Yes	No	No (12)	No	
Delaware	No	N/A	Yes	Agribusiness must provide coverage to workers	Yes	If a worker earns less than a certain amount of money (13)	Yes (14)	No	No	No	N/A
District of Columbia	No	n/a	No		Yes	If a domestic employer works less than 240 hours during any calendar quarter in the same or previous year		See 32-1501 (9) A-F			See 32-1501 (9) A-F
Florida	Yes	4, in non-construction businesses	Yes	If employer employs < 6 regular employees and < 12 for seasonal employees not exceeding 45 days in a calendar year	Yes		Yes (15)	Yes	Yes	Yes	Yes (15)
Georgia	Yes	3	Yes	Exclusions include laborers employed in or about the business of farming, defined as the cultivation of land for the production of agricultural crops with incidental enterprises. Also specifically excluded is any person employed in connection with the raising and caring for wildlife	Yes		Yes	No	Yes (16)	No	Yes (17)
Hawaii	Yes (18)	N/A	No	N/A	Yes	If the cash remuneration is less than \$225 during the current calendar quarter	Yes	No	No	No	N/A
Idaho	No	N/A	No	N/A	Yes		Yes (19)	Yes (19)	Volunteer ski patrol (19)	Yes (20)	Yes (19)
Illinois	No	N/A	Yes	If employer employed less than 400 working days of labor per quarter during the preceding calendar year (Sec. 3(19))	Yes	If not employed more than 40 hours per week for 13+ weeks during a calendar year (Sec. 3(18))	Yes	No	Yes	No	N/A
Indiana	No	N/A	Yes		Yes		Yes	Yes	Yes	No	(21)
Iowa	No	N/A	Yes	If the employer's total cash payroll is less than \$2,500 during the preceding calendar year	Yes	If a worker earns less than \$1,500 during the twelve consecutive months prior to the injury	Yes	Yes	No	No	(22)
Kansas	Yes	No numerical exemption, but employers who pay \$20,000 or less in payroll per year are exempt	Yes	For agricultural pursuits	No	N/A	Yes	No	Yes	No	(23)
Kentucky	No	N/A	Yes	None	Yes	Excluded if 2 or fewer employees working less than 40 hours/week	Yes	No	Yes	Yes	Yes

Jurisdiction	Specific Exclusions for Small Employers		Specific Exclusions for Agricultural Employers		Specific Exclusions for Domestic Employers		Other Employees Excluded from Coverage				
	Yes/No	Employers Are Exempt Who Employ Fewer Than	Yes/No	Conditions for Exclusion	Yes/No	Conditions for Exclusion	Independent Contractors	Casual Employees	Volunteers	Prof. Athletes	Other (see notes)
Louisiana	No	N/A	Yes	La. R.S. 23:1035.B.(1) (24)	Yes	La. R.S. 23:1035.B.(1) (24)	No, per La. R.S. 23:1021(7) (25) and La. R.S. 23:1045 (26)	No	No	No	La. R.S. 1035
Maine	No	N/A	Yes	If a worker works less than a certain time period; if an employer has fewer than a certain number of employees	Yes		Yes	No	Yes (27)	No	N/A
Maryland	No	N/A	Yes	If an employer has fewer than 3 employees; if an employer pays less than a certain amount in wages (\$15,000/year); if the individual receives compensation from a farmer for only office work	Yes	If a worker earns less than a certain amount of money (\$1,000/quarter)	Yes, if true independent contractors	Yes	Yes (28)	No	Yes (29)
Massachusetts	No	N/A	No	N/A	Yes	If a domestic employee works less than 16 hours per week	No	No	Yes	Yes	Yes (30)
Michigan	Yes	3 part-time employees, but all full-time employees must be covered	Yes	Depending on hours worked, some employees may only have medical coverage	Yes	If a worker works 35 hours or less per week	Yes	No	Yes	No	(31)
Minnesota	No	N/A	Yes	An executive officer of a family farm; a partner engaged in a farm operation; spouse, parent, or child of an executive officer of a family farm corporation; farm families exchanging work; a person employed by a family farm as defined in Minn. Stat. § 176.011, subdivision 11a (obligated to pay cash wages to farm laborers less than \$8,000 or less than the SAAWW with liability and medical coverage equal to \$300,000 and \$5,000)	Yes	If a household worker in a private home earns less than \$1,000 in cash in a 3-month period or in the previous year	Yes	Yes	No (volunteers are not employees except as specified in 176.011, subd. 1)	No	Other exemptions and details are specified in Minn. Stat. 176.041
Mississippi	Yes	5	Yes	Farmers and farm labor are excluded	Yes	Domestic servants are excluded	Yes	Yes	Yes	No	No
Missouri as of January 1, 2019 (32)	Yes	5 (33)	Yes (34)	Performing "farm labor" only (34)	Yes	The Missouri Workers' Compensation Law does not apply to work done in private homes to care for the members of private households	No (35)	No	Yes	No	Yes (36)
Montana	No	N/A	Yes	Agricultural employers are not required to cover employees who are performing temporary agricultural work for an employer (if the person performing the work is otherwise exempt from the coverage requirement)	Yes	N/A	Yes	Yes	Yes	Yes	Yes (37)
Nebraska	No	N/A	Yes	Employers engaged in an agricultural operation are exempt from providing workers' compensation insurance coverage if they employ only related employees; agricultural employers who employ unrelated employees are also exempt unless in a calendar year they employ 10 or more unrelated, full-time employees, on each working day for 13 calendar weeks (consecutive or not); the act applies to an employer 30 days after the 13th week	Yes	Service performed by a worker who is a household domestic servant in a private residence	Yes	Yes	Yes	No	N/A
Nevada	No	One employee (sole proprietor only, no additional employees)	Yes	NRS 616A.110	Yes	NRS 616A.110	Yes	Yes	No	Yes	(38)
New Hampshire	No	N/A	No	N/A	No	N/A	Yes	No	Yes	No	N/A
New Jersey	No	N/A	No	N/A	No	Can be covered by homeowner's insurance rider	Yes	Yes	Yes	No	N/A
New Mexico	Yes	3	No	N/A	Yes	N/A	Yes	Yes	No	No	Yes (39)
New York	No	N/A	Yes	(40)	Yes	If a worker works less than 40 hours per week for the same employer (41)	Yes	Yes (42)	Yes (43)	No	(44)

Jurisdiction	Specific Exclusions for Small Employers		Specific Exclusions for Agricultural Employers		Specific Exclusions for Domestic Employers		Other Employees Excluded from Coverage				
	Yes/No	Employers Are Exempt Who Employ Fewer Than	Yes/No	Conditions for Exclusion	Yes/No	Conditions for Exclusion	Independent Contractors	Casual Employees	Volunteers	Prof. Athletes	Other (see notes)
North Carolina	Yes	3 (45)	Yes	Farm laborers are excluded when fewer than 10 full-time, non-seasonal farm laborers are regularly employed by the same employer	Yes	(46)	Yes	Yes (47)	Yes (48)	No	Yes (49)
North Dakota	No	N/A	Yes	NDCC65-01-17	Yes	NDCC65-01-02.16(b)	Yes	Yes	Yes	No	Yes (50)
Ohio	No	N/A	Yes	Limited to Officers of a Family Farm Corporation. See R.C.4123.01	Yes	Household workers who earn less than \$160 in cash in any calendar quarter from a single household and casual workers who earn less than \$160 in cash in any calendar quarter from a single employer	Yes	No	Yes (51)	No	N/A
Oklahoma	Yes	Those employed by employers with 5 or fewer total employees, all related by blood or marriage to the employer, where the employer is a natural person, general or limited partnership, or incorporator of a corporation, do not meet the definition of "employee" and thus are exempt	Yes	Agricultural or horticultural workers who are employed by an employer with less than \$100,000 in payroll for such workers in the preceding calendar year	N/A	N/A	Yes (52)	No	Yes	No	N/A
Oregon	No	N/A	No	N/A	Yes	Workers employed in a private home as domestic servants, or workers employed to do gardening, maintenance, repair, remodeling or similar work in or about their employer's private home	Yes	Yes	Yes	No	Yes (53)
Pennsylvania	No	N/A	Yes	Not covered unless the worker works more than a certain time period; when an employer pays more than a certain amount in wages	Yes	Persons engaged in domestic service at the time of injury are excluded from coverage under the Act	Yes	Yes	No	No	Yes (54)
Rhode Island	No	N/A	Yes	Coverage is required with 25 or more farm laborers or agricultural workers employed for 13 consecutive weeks producing and raising specified crops and livestock	No	N/A	Yes	Yes	Yes	Yes	Yes (55)
South Carolina	Yes	4	Yes		No	N/A	Yes	Yes	Yes	No	N/A
South Dakota	No	N/A	Yes	Based on the predominant nature of the employee's work, and the employer's business. No exclusion if primarily in the business of operating threshing machines, grain combines, corn shellers, cornhuskers, shredders, silage cutters, and seed hullers for profit	Yes	The employee works less than 6 weeks in a 13-week period or less than 20 hours a week	Yes	Yes	Yes	No	Elected officials
Tennessee	Yes	5 (56)	Yes	(57)	Yes		Yes	Yes	Yes	No	N/A
Texas	No	N/A	Yes (58)		Yes		Yes	Yes	Yes	Yes	N/A
US Federal Programs- FECA	No	N/A	No	N/A	No	N/A	Yes	No	No	Yes	N/A
US Federal Programs - Longshore	No	N/A	No	N/A	No	N/A	No	No	No	No	Yes (59)
Utah	No	N/A	Yes (60)	(60)	Yes	Work week totals less than 40 hours	Yes (61)	No	Yes (62)	No	Yes (63)
Vermont	No	N/A	Yes	If total aggregate payroll is less than \$10K (64)	Yes	A homeowner is not required to provide WC for work performed in or about the homeowner-employer dwelling	No	Yes	Yes	No	Yes (65)
Virginia	Yes	3	Yes	Employees of farm and horticultural laborers are excluded from coverage unless the employer regularly has in service more than three full-time employees	Yes	Domestic servants are excluded from coverage when employed by the homeowner or household	Yes	Yes	No	No	Yes (66)

Jurisdiction	Specific Exclusions for Small Employers		Specific Exclusions for Agricultural Employers		Specific Exclusions for Domestic Employers		Other Employees Excluded from Coverage				
	Yes/No	Employers Are Exempt Who Employ Fewer Than	Yes/No	Conditions for Exclusion	Yes/No	Conditions for Exclusion	Independent Contractors	Casual Employees	Volunteers	Prof. Athletes	Other (see notes)
Washington	No	N/A	Yes	Coverage isn't required if a child under 18 years is employed by a parent in agricultural activities on the family farm. An 18, 19, or 20 year-old on a family farm may be excluded if they meet the following requirements: (a) The person resides with his or her parent or parents or resides on their family farm; and (b) The parent or parents file a written notice with the department electing exclusion from coverage	Yes	Coverage is not required if the employer has fewer than two full-time employees regularly employed forty or more hours a week in such employment	Yes (67)	Yes	Yes (67)	No	Yes (67)
West Virginia	No	N/A	Yes	5 or fewer full-time employees	Yes	Domestic servant performing work in or about a private home of the person by whom they are employed	Yes	Yes (68)	Yes	Yes	Yes (69)
Wisconsin	Yes	3 (70)	Yes	A farm or farmer does not need coverage unless they have 6 or more employees (at one or more locations) on the same day for 20 days (consecutive or non-consecutive) in a calendar year; some relatives are not counted towards the 6 employees	Yes	Persons hired in a private home to perform general household services such as nanny services, babysitting, cooking, cleaning, laundering, gardening, yard and maintenance work, and other duties commonly associated with the meaning of domestic servant	Yes (71)	No	Yes	No	(72)
Wyoming	No	N/A	No	N/A	No	N/A	Yes	Yes (73)	Yes (73)	No	Yes (73)
Canadian Jurisdictions Participating (stated in Canadian currency)											
British Columbia	No	N/A	No	N/A	Yes (74)	(74)	(75)	(75)	Generally yes, certain exclusions apply. See (75)	Yes (75)	(75)
New Brunswick	Yes	3 (76)	No	N/A	Yes (77)	N/A	No	Yes (78)	No	Yes	Yes (77)
Nova Scotia as of January 1, 2022 (79)	Yes	3	Yes	Agriculture is not a mandatory industry in Nova Scotia	Yes	If an employer has 3 or fewer employees	No	No	Yes (80)	Yes	N/A
Ontario	No	N/A	No	N/A	Yes	Some exclusions apply for part-time workers	Yes, except in construction industry where most are compulsorily covered	Yes	Yes, except volunteers with certain emergency services	Yes	Yes
Prince Edward Island (81)	No	N/A	No	N/A	Yes	N/A	Yes	No	Yes	Yes	Yes, as outlined in Section 2 of the General Regulations and POL-19 and POL-74
Saskatchewan	No	N/A	Yes		Yes		Yes (82)	No	Yes (83)	Yes (84)	N/A
Notes:	Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.										
1	Alaska - Agricultural and farm workers are covered generally, subject to the exception that "harvest help" and similar part-time or transient help are not covered.										
2	Alaska - Domestic workers are generally not covered. An employer is defined under the statute as a person employing someone in connection with a business or industry.										
3	Alaska - Individuals excluded from the definition of employee include part-time babysitters, part-time cleaning persons, harvest help/similar part-time or transient help, contract sports officials working amateur sports events, contract entertainers, commercial fishermen, taxicab drivers (conditional), Temporary Assistance Program participants, professional hockey team players/coaches covered by team-supplied health insurance covering both work-related and non-work-related injuries, licensed real estate professionals (conditional), sole proprietors, partnership members, limited liability company members, and executive officers of municipal and not-for-profit corporations.										
4	Arizona - All sole proprietors, and a working member of an LLC, or working shareholder of a corporation who owns more than 50 percent membership interest, can opt into coverage; otherwise they are excluded.										
5	Arkansas - The stated number of employees triggering requirement to have workers' compensation insurance may be as low as one.										
6	Arkansas - Casual employees are excluded from coverage under A.C.A. 11-9-102 (9)(A), where <i>casual employee</i> is defined as follows: "Employee" means any person, including a minor, whether lawfully or unlawfully employed in the service of an employer under any contract of hire or apprenticeship, written or oral, expressed or implied, but excluding one whose employment is casual and not in the course of the trade, business, profession, or occupation of his or her employer and excluding one who is required to perform work for a municipality or county or the state or federal government upon having been convicted of a criminal offense or while incarcerated."										

Table 2 Coverage Exemptions from Workers' Compensation as of January 1, 2025											
This table displays information on which jurisdictions have exceptions to coverage for small employers, agricultural employers, and domestic employers, as well as other employees who may be excluded from workers' compensation laws.											
Jurisdiction	Specific Exclusions for Small Employers		Specific Exclusions for Agricultural Employers		Specific Exclusions for Domestic Employers		Other Employees Excluded from Coverage				
	Yes/No	Employers Are Exempt Who Employ Fewer Than	Yes/No	Conditions for Exclusion	Yes/No	Conditions for Exclusion	Independent Contractors	Casual Employees	Volunteers	Prof. Athletes	Other (see notes)
7											Arkansas - Volunteers are generally excluded since they are not employees. Our statute doesn't specifically exclude them but since they are not employees they don't meet the definition of who is covered. Some employers arrange their policy to cover them but they aren't required to do this.
8											California - Volunteer firefighters are covered by CA Labor Code section 4458. Only limited volunteers are excluded pursuant to CA Labor Code section 3352, for example, ski patrol or camp volunteers.
9											California - See CA Labor Code section 3600.5 for statutory criteria governing which professional athletes are excluded from coverage.
10											Colorado - Employees of eleemosynary, charitable, fraternal, religious, or social employers who are elected or appointed to serve in an advisory capacity and receive an annual salary or an amount not in excess of \$750 and who are not otherwise subject to the Workers' Compensation Act of Colorado are not covered.
11											Connecticut - 31-275(9)(B) "Employee" shall not be construed to include: (iv) Any person engaged in any type of service in or about a private dwelling provided he is not regularly employed by the owner or occupier over twenty-six hours per week.
12											Connecticut - Police, fire, and ambulance workers are covered.
13											Delaware - Does not apply to any person employed as a household worker in a private home or household who earns less than \$750 in cash in any 3-month period from a single private home or household or to any person employed as a casual worker in a private home or household who earns less than \$750 in cash in any 3-month period from a single private home or household.
14											Delaware - Independent contractors working in the construction industry are not exempt from coverage unless they are one of four members of an LLC.
15											Florida - Also excluded from the definition of employee are independent contractors engaged in the non-construction industry, state prisoners, county inmates, or individuals performing labor under a sentence of court to perform community services, and volunteers (except a volunteer worker for the state, county, municipality, or other governmental entity).
16											Georgia - There have been some legislative exceptions.
17											Georgia - Employees not in the usual course of business.
18											Hawaii - Effective 7/8/2011, excludes services performed by an individual who is a member of a limited liability company or a partner of a limited liability partnership who has a distributional interest in the company or partnership of at least 50 percent, a partner of a partnership, and a sole proprietor from the definition of employment.
19											Idaho - Unless coverage is elected.
20											Idaho - Officials of athletic contests involving secondary schools.
21											Indiana - No exclusions.
22											Iowa - Owner-operators and directors of a corporation (who are not at the same time employees of the corporation), proprietors, limited liability partners, and partners.
23											Kansas - \$20,000 in payroll (less payment to family members) is the employer threshold for coverage; members of limited liability companies, real estate sales paid strictly on commission, partnerships, and self-employed individuals are also specifically exempt.
24											Louisiana - La. R.S. 23:1035 Employees Covered B.(1) There is exempt from coverage under this Chapter all labor, work, or services performed by any employee of a private residential householder in connection with the private residential premises of such householder or any employee of a private unincorporated farm, in connection with cultivating the soil, or in connection with raising or harvesting of any agricultural commodity, including the management of livestock, when the employee's annual net earnings for labor, work, or services amounts to one thousand dollars or less and the total net earnings of all employees of such farm do not exceed two thousand five hundred dollars and which labor, work, or services are not incidental to and do not arise out of any trade, business, or occupation of such householder or private unincorporated farm.
25											Louisiana - La. R.S. 23:1021 Terms Defined (7) "Independent contractor" means any person who renders service, other than manual labor, for a specified recompense for a specified result either as a unit or as a whole, under the control of his principal as to results of his work only, and not as to the means by which such result is accomplished, and are expressly excluded from the provisions of this Chapter unless a substantial part of the work time of an independent contractor is spent in manual labor by him in carrying out the terms of the contract, in which case the independent contractor is expressly covered by the provisions of this Chapter. The operation of a truck tractor or truck tractor trailer, including fueling, driving, connecting and disconnecting electrical lines and air hoses, hooking and unhooking trailers, and vehicle inspections are not manual labor within the meaning of this Chapter.
26											Louisiana - La. R.S. 23:1045. Persons exempt from coverage A.(1) This Chapter shall not apply to, and there is specific exclusion from the operation thereof for, all members of the crew of any airplane engaged in dusting or spraying operations insofar as such members of an airplane crew might be regarded as independent contractors, subcontractors, or employees of any person, firm, or corporation engaged in the principal business of agriculture or farming operations. (2) All rights of employers and employees in tort are reserved to the parties. B.(1) The provisions of Subsection A of this Section shall not exempt or in any way apply to independent contractors, subcontractors, or employees of any person, firm, partnership, or corporation engaged in the business of applying any products by use of aircraft, either fixed wing or rotor craft, in connection with commercial agricultural, aquacultural, horticultural, silvicultural, floricultural, or agronomic operations or vegetation suppression. (2) The provisions of this Subsection shall apply to all independent contractors, subcontractors, and employees of such businesses irrespective of whether such person would be considered a member of the crew of such aircraft.
27											Maine - Volunteer firefighters and emergency medical persons are not excluded.
28											Maryland - See LE §§ 9-231-9-234.
29											Maryland - Also excluded are workers working for aid or sustenance only, sole proprietors, residents in a facility, real estate salespersons and associate real estate brokers, a partner, an owner/operator of a class E vehicle, a maintenance worker, or a remodeler.
30											Massachusetts - Real estate brokers or agents, taxi drivers (operating independently or under a cab leasing agreement), police (covered by a separate compensation system via collective bargaining), firefighters (covered by a separate compensation system via collective bargaining), and employees covered under other federal programs.
31											Michigan - See Sec418.119 of the Workers' Disability Compensation (WDC) Act regarding exclusions of real estate salespeople; see Sec. 418.161 of the WDC Act for exclusion language on family members of an employer.
32											Missouri - 2019 responses. No 2025 data were provided.
33											Missouri - In construction all employees must be covered.
34											Missouri - The Missouri Workers' Compensation Law does not apply to employment of farm labor. Missouri courts have interpreted the term "farm labor" according to its ordinary and customary usage. This interpretation does not exclude workers from the jurisdiction of the law who would otherwise be included in the definition of the term "agriculture." Agriculture is broader than farming.
35											Missouri - Independent contractors may be ruled to be "statutory employees" under Mo. Rev. Stat. § 287.040, depending upon the particular facts shown.
36											Missouri - Also excluded are qualified real estate agents, certain inmates, volunteers of a 501(c)(3) organization, and sports officials of interscholastic sports programs.
37											Montana - Exemptions are listed in 39-71-401, MCA.
38											Nevada - Excluded employees also include volunteer ski patrol persons; amateur sports officials; persons who perform services under a written agreement, which provides they are not an employee for purposes of the workers' compensation act; some musicians and theatrical or stage performers; and real estate brokers, broker-sales people, or sales people licensed pursuant to chapter 645 of NRS.
39											New Mexico - Also excluded are qualified real estate sales persons.

Table 2 Coverage Exemptions from Workers' Compensation as of January 1, 2025

This table displays information on which jurisdictions have exceptions to coverage for small employers, agricultural employers, and domestic employers, as well as other employees who may be excluded from workers' compensation laws.										
Jurisdiction	Specific Exclusions for Small Employers		Specific Exclusions for Agricultural Employers		Specific Exclusions for Domestic Employers		Other Employees Excluded from Coverage			
	Yes/No	Employers Are Exempt Who Employ Fewer Than	Yes/No	Conditions for Exclusion	Yes/No	Conditions for Exclusion	Independent Contractors	Casual Employees	Volunteers	Prof. Athletes
40	New York - The only exclusion is for spouse and minor children (under 18 years old) of a farmer, who are not considered employees as long as they are not under an express contract of hire.									
41	New York - Time spent at the residence including sleeping and eating and any additional time spent off premises running errands and performing other duties for the employer count towards the total hours worked per week. Also included in the calculation of hours worked per week are all hours where the employer requires the domestic worker's presence.									
42	New York - Casual employees excluded from coverage include minors fourteen years of age or over engaged in casual employment consisting of yard work and household chores in and about a one-family owner-occupied residence or the premises of a nonprofit, noncommercial organization, not involving the use of power-driven machinery. Persons engaged by the owner in casual employment consisting of yard work, household chores and making repairs to or painting in and about a one-family owner-occupied residence are also excluded from coverage. Casual means occasionally, without regularity, without foresight, plan or method.									
43	New York - Volunteers for nonprofit organizations who receive no compensation are excluded from coverage. Compensation includes stipends, room, board, and other perks that have monetary value. Stipends used solely to offset expenses incurred while performing activities for the nonprofit are not counted as stipends. For-profit business entities cannot have volunteers doing work for the business.									
44	New York - Other employees excluded from coverage include: 1) New York City police officers, firefighters, and sanitation workers; 2) duly ordained, commissioned or licensed ministers, priests and rabbis, sextons, Christian Science readers, and members of religious orders; 3) people engaged in a teaching capacity in or for a nonprofit religious, charitable or educational institution; 4) certain real estate salespersons who sign a contract with a broker stating that they are an independent contractor; 5) certain media sales representatives who sign a contract stating that they are independent contractors; and 6) certain insurance agents or brokers who sign a contract stating that they are independent contractors.									
45	North Carolina - Unless the work activities involve the use or presence of radiation, in which case employers are not exempt if they employ one or more employees.									
46	North Carolina - Excludes domestic servants and employees of such persons. See N.C. Gen. Stat. §97-13.									
47	North Carolina - So long as both casual and not in the course of the trade, business, profession or occupation of the employer.									
48	North Carolina - Officers and volunteers of nonprofit corporations may be excluded, provided that they receive no compensation (other than reasonable expense reimbursement) for their service to the nonprofit corporation.									
49	North Carolina - Federal government employees and other statutory exceptions are excluded. See N.C. Gen. Stat. §97-13.									
50	North Dakota - Excluded employees also include farm laborers, domestic servants, members of boards of directors of business corporations, casual workers, illegal enterprises or corporations, clergy, real estate brokers or sales persons, newspaper delivery personnel with written agreements defining them as independent contractors, and athletes participating in the contact sports of football or hockey. NDCC65-01-02.16(b).									
51	Ohio - Volunteer members of lawfully constituted police and fire departments are not excluded from coverage. See R.C.4123.01.									
52	Oklahoma - Independent contractors are by definition not employees, and thus excluded.									
53	Oregon - In Oregon, every person who furnishes services for remuneration and is not an independent contractor is considered a worker. Every worker is a subject worker unless the worker falls under an exemption. There are about 30 exemptions, most of which are found under ORS 656.027. The state of Oregon requires all employers that have subject workers to carry workers' compensation insurance.									
54	Pennsylvania - Licensed real estate salesperson or an associate real estate broker affiliated with a licensed real estate broker, or a licensed insurance agent affiliated with a licensed insurance agency, under a written agreement, remunerated on a commission-only basis and who qualifies as an independent contractor for state tax purposes or for federal tax purposes are excluded from coverage under the Act.									
55	Rhode Island - Also excluded are sole proprietors, regular organized police, and fire departments. Partners are also excluded.									
56	Tennessee - In the construction industry, employers are required to cover their employees, even if they have only one. Effective March 1, 2011, owners and officers in the construction industry may apply for an exemption through the Secretary of State's office from the requirement to cover themselves with workers' compensation coverage. Also, there is an available exemption if applied for through the Secretary of State's office for certain members of recognized religious sects. Effective January 1, 2022, exemption applications will be applied for through the Bureau of Workers' Compensation.									
57	Tennessee - Employers of agricultural workers are exempt but have option to purchase coverage on and after 5/2/18 per TCA 50-6-106(4).									
58	Texas - Certain migrant and seasonal workers are subject to the Workers' Compensation Act.									
59	US Federal Programs - Longshore - Excluded from the definition of <i>employee</i> under the Longshore Act are the following individuals if covered by a state workers' compensation law: individuals employed exclusively to perform office clerical, secretarial, security, or data processing work; individuals employed by a club, camp, recreational operation, restaurant, museum, or retail outlet; individuals employed by a marina and who are not engaged in construction, replacement, or expansion of such marina (except for routine maintenance); individuals who (a) are employed by suppliers, transporters, or vendors, (b) are temporarily doing business on the premises of a maritime employer, and (c) are not engaged in work normally performed by employees of that employer covered under this Act; aquaculture workers; individuals employed to build any recreational vessel under 65 feet in length, or individuals employed to repair any recreational vessel, or dismantle any part of a recreational vessel in connection with the repair of such vessel. Excluded are also a master or member of a crew of any vessel; any person engaged by a master to load or unload or repair any small vessel under 18 tons net; and employees of the United States government or of any state or foreign government.									
60	Utah - Sole proprietors, partners, and agricultural employers and immediate family (i.e., spouse, grandparent, parent, sibling, child, grandchild, nephew, or niece) are exempt. Non-immediate family employees are exempt if non-immediate family payroll is less than \$8,000 (or payroll is \$8,000 but less than \$50,000, and the employer has general liability insurance of \$300,000 with health benefits of \$5,000).									
61	Utah - In order for an independent contractor not to be considered an employee, the independent contractor must have either a workers' compensation policy or a workers' compensation coverage waiver.									
62	Utah - Any state or local government volunteer receives workers' compensation medical benefits as the exclusive remedy for any work-related injuries or occupational diseases. The same exclusive remedy is provided to interns at public and private schools, and institutions of higher learning.									
63	Utah - Other exempt employment includes an offender performing labor and individual contracted agents (realtors, insurance sales, and other persons receiving compensation from only commissions).									
64	Vermont - If the agricultural employer's total aggregate payroll is \$10,000 or more, the agricultural employer must cover all employees. Aggregate payroll includes the fair market value of housing and other amenities provided to the worker. If the total aggregate payroll is less than \$10,000, the agricultural employer may choose to not provide workers' compensation insurance.									
65	Vermont - Also excluded are amateur sports, agricultural employees of an employer with less than \$10,000 in annual payroll, real estate brokers and salespeople under certain conditions, employees engaged in service in or about a private dwelling, sole proprietor or partner/owner of unincorporated business, and employer's family members residing in the employer's household. Coverage may be required for an independent contractor when an independent contractor performs work that is "a part of, or process in, the trade, business, or occupation of the owner" (e.g., nature of the business test).									
66	Virginia - Also excluded are certain public officials and employees, certain real estate salespersons and brokers, taxi drivers, employees of certain common carriers and railroads, certain volunteers, certain sports officials, certain non-compensated employees, and officers of nonprofit corporations.									

Table 2 Coverage Exemptions from Workers' Compensation as of January 1, 2025											
This table displays information on which jurisdictions have exceptions to coverage for small employers, agricultural employers, and domestic employers, as well as other employees who may be excluded from workers' compensation laws.											
Jurisdiction	Specific Exclusions for Small Employers		Specific Exclusions for Agricultural Employers		Specific Exclusions for Domestic Employers		Other Employees Excluded from Coverage				
	Yes/No	Employers Are Exempt Who Employ Fewer Than	Yes/No	Conditions for Exclusion	Yes/No	Conditions for Exclusion	Independent Contractors	Casual Employees	Volunteers	Prof. Athletes	Other (see notes)
67											Washington - Generally coverage isn't required for independent contractors who are appropriately licensed to engage in business if the contract is outside the usual course of business. Volunteers can be covered for medical aid only and employer may elect optional "elective" coverage for unpaid students and unpaid student interns. The remaining excluded workers are: a domestic worker in a private home; a person employed to do gardening, maintenance, repair, or similar work at an employer's private home (this does not include an individual hired to do home improvements or upgrades); a person who is not a regular employee of the trade, business, or profession of the employer and isn't working at the employer's private home (this exclusion refers to a person hired to perform a personal errand or chore that benefits the employer as an individual, but not the business; for example, a professional golfer would need to provide coverage for a golf caddy, but a recreational golfer would not); a person working in return for aid or sustenance from a religious or charitable organization; jockeys participating in or preparing horses for race meets, licensed by the WA Horse Racing Commission; musicians or entertainers, if the "employer's" primary business is something other than entertainment, the musician or entertainer doesn't also work for the employer's primary business, and the musician or entertainer doesn't perform on a regular and ongoing basis for the employer, (example: a bar owner isn't required to report a musician as long as the musician doesn't also work in the bar when not performing and the contract isn't regular and continuous, such as a long-term piano player at a piano bar); newspaper carriers or vendors who distribute newspapers to residences, businesses, or on the street, and freelance journalists or photo journalists who are paid solely by piece work and use their own equipment; an insurance producer; a cosmetologist, beautician or barber who rents or leases booth space; for-hire vehicle operators who own or lease the for-hire vehicle, chauffeurs who own or lease the limousine, and operators of taxicabs who own or lease the taxicab. Individuals who own and control any type of business are generally excluded from mandatory workers' compensation coverage. However, there are limits on both the number of owners who can be excluded and the level of control required for exclusion.
68											West Virginia - An employer is a casual employer when the number of his or her employees does not exceed 3, and the period of employment is temporary, intermittent and sporadic in nature, and does not exceed 10 calendar days in any calendar quarter. (WV Code 23-2-1(b)(4)).
69											West Virginia - Churches (WV Code 22-2-1(b)(5)) and employers whose employees are eligible to receive benefits under the federal Longshore and Harbor Workers Compensation Act, 33 U.S.C. 901, et seq. (WV Code 21-2-1(b)(8)).
70											Wisconsin - Every person who employs fewer than three employees, but who has paid wages of \$500 or more in any calendar quarter for services performed in the state must have insurance by the 10th day of the month next succeeding such quarter. Section 102.04(1)(b)2., Wis. Stats.
71											Wisconsin - Must meet and maintain all nine requirements specified in s. 102.07(8), Wis. Stats.
72											Wisconsin - Religious sect members that qualify and are certified for an exemption; employees of Native American tribal enterprises, unless the tribe waives sovereign immunity and voluntarily becomes subject to law; real estate brokers, agents and salespersons that satisfy two elements pursuant to s. 452.38, Wis. Stats.
73											Wyoming - Casual employees are only covered if they work full-time for the same employer for over two consecutive weeks, and only volunteers for emergency response government organizations (police, fire, etc.) are required to have coverage; other volunteers are not covered.
74											British Columbia - The Board has made general exemptions for coverage for an individual employed by the owner or occupier in or around a private residence, other than for the purpose of the owner's/occupier's trade or business, or employed in serving the personal needs of the owner/occupier or the owner's/occupier's family where certain conditions are met. [Item AP1-4-1 of the Assessment Manual]
75											British Columbia - Information on exemptions is set out in Item AP1-4-1 of the Assessment Manual. The compensation provisions of the Workers Compensation Act (Act) apply to all employers and all workers in BC except: a) where the Act does not apply for constitutional reasons; or b) where employers or workers have been exempted by order of the Board.
76											New Brunswick - The exception is the fishing industry, where it is fewer than 25 for exemption. Regulation 82-79 - Exclusion of Workers Regulation - Workers' Compensation Act.
77											New Brunswick - Also excluded from coverage are persons who play sports as their main source of income, outworkers, employer's family members under 16 residing with the employer, and persons employed as domestic servants. WC ACT s. 2(3).
78											New Brunswick - Casual employee is defined as not working for the purpose of the industry (work that is done for personal use, such as picking fruit at a U-pick).
79											Nova Scotia - 2022 responses. No 2025 data were provided.
80											Nova Scotia - Volunteer firefighter coverage is mandatory effective October 2020.
81											Prince Edward Island - Non-PEI residents must work (or intend to work) a total of 10 or more days in PEI in a calendar year to be considered a worker and subject to employer assessments.
82											Saskatchewan - Contractors covered if working for one principal; on application if work for multiple employers.
83											Saskatchewan - Except those in mine rescue work and members of the Emergency Measures Organization or a municipal fire brigade.
84											Saskatchewan - While participating as a player or competitor in a sporting event of any kind.

Table 3 Workers' Compensation Medical Benefits and Method of Physician Selection as of January 1, 2025					
Most jurisdictions pay for reasonable and necessary medical treatment to cure and relieve the effects of the injury without co-insurance or a deductible. This section identifies whether there are fee schedules in place and covers any exceptions to that general rule for types of care, specific providers, or limits on care that will be paid for under each statute. It also itemizes who has the initial choice of treating physician, when a change of physician is allowed, and if there are any limits on second medical opinions.					
Jurisdiction	Fee Schedule in Place	Limitations on Medical Treatment	Initial Choice of Treating Physician Lies With	Circumstances Under Which Employee Can Change Treating Physician	Limits on Requesting Second Medical Opinions
Alabama	Yes	None	Employer	With the approval by the employer/insurer and if dissatisfied with care, they can select from a panel of 4 (once)	Must be reasonable and necessary; if requested by the employee, the employer is not obligated to pay
Alaska	Yes	Chiropractic, physical therapy, occupational therapy, and palliative care are limited (1)	Employee (2)	One change allowed without restriction; subsequent changes require written approval of the employer/insurer	One allowed without restriction; subsequent exams require written approval of the employee; (timing, place, and scope of examinations limited in certain regards) (3)
Arizona	Yes	None	Employee, unless the employer is self-insured and directs care	(1) With the approval of the treating doctor, (2) with the approval of the carrier, or (3) with the approval of the Commission	None (4)
Arkansas	Yes	(5)	Employer	The employee has the right to petition the Commission for a one-time-only change of physician within the managed care organization or to his or her regular treating physician, demonstrated by history of treatment prior to injury (6)	None
California	Yes	Chiropractic, physical therapy, and occupational therapy are limited (7)	Employee, if employee pre-designated physician (8); Employer, from within the employer's managed care plan, Employee can change to another physician within plan after initial evaluation; (9) Employer, for first 30 days only, if no managed care plan, and no employee pre-designation (8)	If employer maintains managed care plan (medical provider network [MPN]), employee can select a different physician within the network at any time after initial evaluation (9) If no managed care plan and no pre-designated physician: EE may change after 30 days from injury, and may also request a one-time change of physicians within the 30 days	Within the MPN, employee may obtain 2nd and 3rd opinions from physicians within the MPN; if employee disagrees with the third opinion physician, employee may request an MPN Independent Medical Review
Colorado	Yes	Treatment must be reasonable and necessary; prior authorization is needed if treatment goes beyond the established medical treatment guidelines	Employee, from a list of four physicians, corporate medical providers, or a combination of both, where available (10)	With the approval of the employer/insurer; if ordered by WC agency; by referral from a treating physician; for insurer's failure to respond to a written request for change within 20 days (11)	None
Connecticut	Yes	Subject to a fee schedule, and palliative care is limited to that necessary to maintain employment (12)	Employee, but if managed care plan exists, initial choice must be within plan network	If ordered by the Workers' Compensation Commission; upon approval by the insurer or self insurer; employee can request a hearing	Must be reasonable
Delaware	Yes	None	Employee, from a list provided by the Workers' Compensation Agency (13)	Employee has right to choose at any time	None
District of Columbia	32-1507 a-1 (5) Yes (113% of Medicare)	None	Employee	32-1507 (a) (4)	None
Florida	Yes	Statute requires a co-pay of \$10 for each visit once the employee reaches maximum medical improvement, and chiropractic care is limited to 24 treatments within 12 weeks of the initial treatment	Employer/carrier	Upon written request, the employee is entitled to a one-time change in physician	Each party is entitled to one IME per accident; additionally, the parties may agree to "consensus" IMEs
Georgia	Yes	Reasonable and necessary care, not to exceed 400 weeks from date of injury unless catastrophic. Additionally, the 400 week limitation on medical treatment does not apply to prosthetics, spinal cord stimulators and durable medical equipment as defined by statute and originally furnished within 400 weeks of the date of injury	Employee, from a panel of six provided by the employer; employee, from within the employer's managed care plan	One free change from one panel provider to another	Employer—no limit; employee—one, which is paid for by the employer/insurer if it is requested within 120 days of the last payment of income benefits

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Jurisdiction	Fee Schedule in Place	Limitations on Medical Treatment	Initial Choice of Treating Physician Lies With	Circumstances Under Which Employee Can Change Treating Physician	Limits on Requesting Second Medical Opinions
Hawaii	Yes	Subject to the Hawaii workers' compensation medical fee schedule	Employee	Employee can file a request for additional changes	One per case unless good and valid reasons exist with regard to the medical progress of the employee's treatment
Idaho	Yes	None	Employers may direct initial care, but, if they do not, employee may seek reasonable care on his or her own at the employer's expense	With the approval of the employer/insurer; by referral from the treating physician; by petitioning the Commission in writing for a change	None
Illinois	Yes	Utilization review may limit treatment	Employee	Any (2 free choices)	None
Indiana	No	None	Employer	With the approval of the employer/insurer	Only when benefits are terminated
Iowa	No	None	Employer	If ordered by the WC agency or with the approval of the employer/insurer or self insurer	None
Kansas	Yes	Physical therapy must be authorized beyond 21 visits	Employer	Agreements of parties; order by the administrative law judge	Employee has \$800 unauthorized medical allowance; examination upon request of employer not more than twice a month
Kentucky	yes	Reasonable and necessary (14)	Employee (15)	Employee can change one time for any reason; thereafter, he or she must show reasonable cause in order to change	None
Louisiana	Yes	Subject to medical treatment guidelines	Employee	With approval of the employer/insurer	Yes, per 23:1121.B (16); 23:1124 and 23:1317.1
Maine	Yes	None	Employer, for first 10 days postinjury; after that, the employee can seek his or her own provider	Employee may change once with notice to employer, which the employer/insurer may contest	The employer may not request that the employee be examined more than once by the same specialty; a binding IME may be requested pursuant to Section 312
Maryland	Yes	Reasonable and necessary	Employee	At any time	None
Massachusetts	Yes	Fee schedule for treatment set by the Division of Health Care Finance and Policy; only a statute of limitations of 4 years from the date the injured worker becomes aware that the injury is work related	Employee	Upon approval by the insurer/self insurer only for second change; unless the employee is subject to a preferred provider agreement, he or she may change treating physicians once without the consent of the employer/insurer	None
Michigan	Yes	None (17)	Employer may direct for the first 28 days of care, then the injured workers may choose his or her own treating physician	Employee can notify employer/carrier in writing of desire to change treating physicians after initial 28-day period	No limits as long as deemed reasonable and necessary
Minnesota	Yes—RBRVS, DRG, hospital outpatient, and ambulatory surgical center	Some limitations on care specified in the workers' compensation treatment parameters in M.R. 5221.6040 et. seq.; treatment by certain complementary and alternative health care providers is not compensable; M.S. 176.135, subd. 2	Employee (18)	May change within 60 days of initial injury without approval; upon approval of the insurer or self insurer after 60 days; employee can file a request for additional changes	None
Mississippi	Yes	Chiropractic care, physical therapy, and occupational therapy are limited to 15 visits or 30 days without additional authorization, among other limitations	Employee	If ordered by the WC agency; upon approval by the insurer or self insurer; employee can file a request for additional changes; with the approval of the employer/insurer	None
Missouri as of January 1, 2019 (19)	No	None	Employer	If ordered by an administrative law judge or upon approval of the employer/insurer	None
Montana	Yes	After initial visit to hospital ER, there is a \$25 co-payment for each subsequent visit to an ER unless requested by the insurer; palliative care is also limited (20)	Employee (21)	With the approval of the employer/insurer (21)	N/A

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Jurisdiction	Fee Schedule in Place	Limitations on Medical Treatment	Initial Choice of Treating Physician Lies With	Circumstances Under Which Employee Can Change Treating Physician	Limits on Requesting Second Medical Opinions
Nebraska	Yes	None; cosmetic surgery is not covered	Employee	With the agreement of both the employee and employer/insurer, or if ordered by the Court (22)	None
Nevada	Yes	None	Employee, from the insurer's treating provider list composed of physicians and or chiropractic physicians from WCS Treating Panel	Within the first 90 days of a claim and thereafter upon the employee's written request and the insurer's approval	None
New Hampshire	No	None	Injured employee; from within the employer's managed care plan if participating in an MCO	No statutory provision	Employers/WC Insurance carriers are limited to no more than 2 independent medical opinions per year unless waiver is granted by the Commissioner of Labor
New Jersey	No	None	Employer	With the approval of the employer/insurer, or if ordered by the WC Court	None
New Mexico	Yes	None (23)	Employer may direct care for the first 60 days or allow the worker to select and then the other party may choose to direct it for the next 60 days	If employer directed care for the first 60 days, the employee can change after that	None
New York	Yes	Prior authorization must be requested: 1) for treatment and tests costing more than \$1,000 when there is no applicable medical treatment guideline (24) ; 2) for medical treatment and tests that vary from the medical treatment guidelines (25) ; 3) for special services as required by the medical treatment guidelines (24) ; 4) for drugs not listed on the New York Workers' Compensation Drug Formulary, a formulary brand name drug when a generic is available, compound drugs, and medical marijuana (25) ; and 5) for durable medical equipment not on the official durable medical equipment fee schedule or for an item on the fee schedule that requires prior authorization (26) (27)	The initial choice of treating physician lies with the employee, who can choose from a list of providers authorized by the Workers' Compensation Board (28)	Employee can change provider at any time except where employer is part of a PPO, the employee may choose any provider authorized by the Workers' Compensation Board after 30 days	None
North Carolina	Yes	Medical treatment must be reasonably related to compensable injury; medical utilization review is authorized by statute; certain inpatient services, as well as surgery, can invoke pre-authorization requirements	Employer	Employee may change physicians subject to approval of the Commission pursuant to N.C. Gen. Stat. §97-25; employee may consult such additional physicians as employee deems reasonably necessary without imposing liability on the employer/carrier	Plaintiff may request a second opinion regarding treatment pursuant to N.C. Gen. Stat. §97-25, which may be done by agreement with employer or by order of the Commission, if granted. Plaintiff may request a second opinion as to the PPD rating only pursuant to N.C. Gen. Stat. §97-27(b). The employer may request an IME at reasonable times and places pursuant to N.C. Gen. Stat. §97-27(a)
North Dakota	Yes	There are some limits to remodeling expenses	Employee (29)	Employee may request a change, but it must be approved by the WCA	None
Ohio	Yes	Medical provider must be BWC-certified	Employee	Employee can change physician at any time	No limits on employee requesting second medical opinion—subject to a reasonable test; employer may only get one independent examination per issue
Oklahoma	Yes	Reasonable and necessary; medical treatment guidelines and utilization controls; managed care organizations	Employer; unless emergency or employer fails or refuses to provide within statutory timeframe	Employee allowed one change of treating physician upon petitioning the WC Commission	IME may be ordered within discretion of administrative law judge

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Jurisdiction	Fee Schedule in Place	Limitations on Medical Treatment	Initial Choice of Treating Physician Lies With	Circumstances Under Which Employee Can Change Treating Physician	Limits on Requesting Second Medical Opinions
Oregon	Yes (30)	Provided treatment must be directed to conditions caused by the compensable injury, medically necessary, not excessive or inappropriate, and not in violation of rules regarding the performance of medical services	Employee (31); employee, from within the managed care plan (32)	Employee is allowed two changes by choice and may petition for more	Up to 3 IMEs may be required by the employer/insurer; may petition (state agency) director for more; worker can request a worker's IME if insurer denies claim based on its IME, the worker appeals, and the worker's physician does not concur with the findings of the insurer's IME
Pennsylvania	Yes	The treatment must be related to the compensable injury and must be reasonable and necessary	Employee, from a list provided by the employer; if no list, employee can treat with physician of his or her choice	Employee must treat with a provider on the list for 90 days; after 90 days, employee can treat with provider of choice but must notify employer within 5 days of first visit	None
Rhode Island	Yes	After reaching MMI, palliative care is limited to 12 visits; additional care must be authorized by the employer/insurer	Employee	If the employer or insurer maintains an approved preferred provider network, then a change of physician must be from within the network	None
South Carolina	Yes	None	Employer	If ordered by the WC agency; employee can file a request for additional changes; with the approval of the employer/insurer	None
South Dakota	Yes	No	Employee	With the approval of the employer/insurer	No more than one a month
Tennessee	Yes	Services are subject to the medical fee schedule and services must be deemed a necessary, appropriate, efficient, and accepted standard (33)	Employee must choose from a list of 3 or more provided by employer	If ordered by the WC Bureau (pre-7/1/2014 dates of injury); upon approval by the insurer or self insurer; if ordered by the Court of WC Claims (post-7/1/2014 dates of injury) (34)	Only if approved by employer/insurance carrier, ordered by a court, or employee may request on the issue of surgery, impairment, and diagnosis under certain limited circumstances
Texas	Yes	Injured employee may choose to pay for upgrade to name-brand pharmaceuticals (35)	Employee; for non-network claims, any willing provider; for network claims, a list provided by the network	For non-network claims, if approved by the Texas Department of Insurance, Division of Workers' Compensation (DWC); for network claims, if approved by the network (36)	Yes (37)
US Federal Programs - FECA	Yes	Chiropractic care is limited to manual manipulation of a subluxation as demonstrated on X ray; physical therapy is limited to 120 days after an orthopedic injury or surgery but can be extended on a case-by-case basis	Employee	With the approval of OWCP	The employee cannot choose to have a second opinion without authorization; the program can send the employee to unlimited second opinion examinations
US Federal Programs - Longshore	Yes	Must be reasonable and necessary	Employee	If ordered by the WC agency; upon approval by the insurer/self insured or WC agency; employee can file a request for additional changes	None
Utah	Yes	Physical therapy and chiropractic care are limited to 8 visits; additional visits beyond the initial 8 visits must be approved by employer/insurer	Employee must visit employer's declared preferred provider; if provider is not declared, employee is authorized one choice of provider	Employee can make one change without the approval of the employer/insurer; after that, the employee needs pre-authorization by employer/insurer; Industrial Accident Division Director resolves disputes	Employee can make one change without the approval of the employer/insurer; after that, the employee needs pre-authorization by employer/insurer; Industrial Accident Division Director resolves disputes (38)
Vermont	Yes	Reasonable and necessary	Employer	Employee may elect to change the employer's choice of provider at any time by filing written notice	Employer can request examination at "reasonable times and places"; employer/carrier not required to pay for an employee's second opinion, but employees can obtain it. Examination must be within a 2-hour drive unless otherwise approved

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Jurisdiction	Fee Schedule in Place	Limitations on Medical Treatment	Initial Choice of Treating Physician Lies With	Circumstances Under Which Employee Can Change Treating Physician	Limits on Requesting Second Medical Opinions
Virginia	Yes	Reasonable, necessary, and causally related to the work injury	Employee from a panel of physicians provided by the employer; if either party wants to change treating physicians and there is no agreement, the Commission can decide	If ordered by the WC agency; upon approval by the insurer or self insurer; employee can file a request for additional changes	Employees can obtain as many IMEs as they wish at their own expense; employer generally can require the employee to attend one IME per medical specialty per year
Washington	Yes	Limit of 6 trigger point injections; 3 injections initially and 3 more if doctor submits justification. Bilateral epidural steroid injections (ESIs) aren't allowed. No more than 2 levels on one side per date of service are allowed. No more than 2 ESIs on 2 different dates can be given without clinically meaningful improvement of pain and function of at least 30%, compared to the baseline pain and function prior to the first ESI. Changes should be measured and documented using a validated scale. If there isn't improvement, no more allowed. No more than 3 ESIs within 6 months with at least 6 weeks between are allowed. Clinically meaningful improvement of pain and function of at least 30%, as measured and documented by a validated scale, must be shown for allowance of subsequent ESIs. No more than 4 ESIs within a 365-day period with at least 6 weeks between them unless there is documented improvement of pain and function of at least 50% from baseline, as measured by a validated scale, AND at least one of the following is present: a. Sustained, progressive improvement in strength, stamina or agility. b. Sustained participation in work-hardening or work conditioning programs. c. Sustained participation in the retraining phase of the voc rehabilitation process. d. The worker has returned to work. Physical therapy and occupational therapy requires utilization review after 24 visits	Employee; must be with a provider from network established by workers' compensation agency (except an initial office or emergency visit)	Employee can change a treating physician as long as treating physician is from network established by workers' compensation agency	None
West Virginia	Maximum medical reimbursement for those not participating in an approved WC MHCP (39)	Causally related to the work injury	Employee, unless the employer, private carrier or TPA has a managed health care plan (approved by the insurance commissioner); in those cases, the employee must choose from physicians in the plan or approved by the plan	Upon approval by the insurer or self insurer	None
Wisconsin	No (40)	None	Employee	Upon notice to the employer or insurer; with the approval of the employer/insurer (41)	None
Wyoming	Yes	None	Employee (the employer may have an on-site medical provider that employees must see first, but then employee can select his or her own treating provider)	With the approval of the employer/insurer	None
Canadian Jurisdictions Participating (stated in Canadian currency)					
British Columbia	Yes (42)	(43)	Employee	Various circumstances exist under which an employee can change treating physician (44)	No independent medical examiners in the system
New Brunswick	Yes (45)	Yes, only treatment necessary as a result of the accident, with the necessity, character, and sufficiency of treatment determined by WorkSafeNB per sections 41(1) & 41(3) of <i>Workers' Compensation Act</i>	Employee, provided the employee chooses a licensed and WorkSafeNB approved provider	In the event that recovery is not progressing, or WorkSafeNB staff have concerns about a proposed treatment plan	Yes, only treatment necessary as a result of the accident, with the necessity, character, and sufficiency of treatment determined by WorkSafeNB per sections 41(1) & 41(3) of <i>Workers' Compensation Act</i>

Table 3 Workers' Compensation Medical Benefits and Method of Physician Selection as of January 1, 2025					
Most jurisdictions pay for reasonable and necessary medical treatment to cure and relieve the effects of the injury without co-insurance or a deductible. This section identifies whether there are fee schedules in place and covers any exceptions to that general rule for types of care, specific providers, or limits on care that will be paid for under each statute. It also itemizes who has the initial choice of treating physician, when a change of physician is allowed, and if there are any limits on second medical opinions.					
Jurisdiction	Fee Schedule in Place	Limitations on Medical Treatment	Initial Choice of Treating Physician Lies With	Circumstances Under Which Employee Can Change Treating Physician	Limits on Requesting Second Medical Opinions
Nova Scotia as of January 1, 2022 (46)	Yes	None	Employee, from a list provided by the WC agency	None	None
Ontario	Yes	None (47)	Employee	Upon approval by the WSIB	None
Prince Edward Island	Yes	None	Worker	With WCB approval	Must be pre-approved by the WCB
Saskatchewan	Yes	None	Worker, provided the worker chooses a licensed and WCB-accredited care provider (when a specialist is required)	Upon WCB approval	None
Notes:	Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.				
1	Alaska - The limits for chiropractic, physical, and occupational care are up to three treatments a week for the first month, two treatments a week for the second and third months, one treatment per week in the fourth and fifth months, and one treatment per month in the sixth through twelfth months in the year following injury. If a sufficient treatment plan is submitted timely and approved by the Board, more frequent treatments may be covered. For palliative care after medical stability, care is payable if necessary to enable continued employment, continued participation in an approved reemployment plan, or to relieve chronic, debilitating pain.				
2	Alaska - If the employee is unable or does not desire to choose, then the employer may choose; employer may establish a list of preferred physicians, but must inform the employee he or she is not required to choose one of them.				
3	Alaska - A referral to a specialist by the primary treating physician is not considered a change of physician.				
4	Arizona - An employee can file a Motion for Protective Order with the Presiding ALJ, but must show the examination is unnecessary, cumulative or could be scheduled in a place closer to the employee's residence.				
5	Arkansas - The amounts payable or time periods allowable for authorized medical, hospital, and other services and treatment furnished unless waived by the employer-respondent or approved by the Workers' Compensation Commission are (1) six months if the claimant lost no compensable time from work as a result of his or her injury, (2) six months following the return to work by an injured employee who has been receiving authorized medical or hospital or other services or treatment, and (3) \$10,000 aggregate for all authorized medical, hospital, and other services and treatment.				
6	Arkansas - However, a worker's personal physician must agree to refer to the employer's chosen MCO for specialty care and to abide by the MCO rules and regulations. If the employer does not have a contract with an MCO, the employee may choose a physician who must either be associated with any MCO certified by the Commission or be the regular treating physician of the employee.				
7	California - Labor Code section 4604.5 - Chiropractic care, physical therapy, and occupational therapy are limited to 24 visits for the life of the claim, except post-surgical patients can exceed the 24-visit cap pursuant to treatment guidelines. Some employers will authorize more, but it is not required. All medical treatment of any type is subject to utilization review based on treatment guidelines. CA Labor Code section 4604.5.				
8	California - Employees have the ability to pre-designate a physician if employee has group health care, and the physician agreed to treat the employee for work injuries prior to the injury. If there is no medical provider network (MPN), and no pre-designated physician, the employer loses medical control after 30 days. CA Labor Code section 4600.				
9	California - Medical Provider Network rules govern initial selection of physician, change of physician, and second/third opinions. CA Labor Code sections 4616.3, 4616.4; Title 8, CA Code of Regulations sections 9767.6, 9767.7.				
10	Colorado - There are exemptions for rural areas of the state.				
11	Colorado - Employee may change once to a provider on the employer's list where 1) maximum medical improvement has not yet been attained, and 2) the claimant requests the change within 90 days of the date of injury (this is in addition to the statute which allows an employee to change physicians with the permission of the insurer or if the insurer fails to respond in writing within 20 days of such a request).				
12	Connecticut - On a case-by-case basis, palliative care may be allowed to keep employee active and/or capable of ADLs.				
13	Delaware - Injured workers may choose a health care provider not on the list if the employer pre-authorizes.				
14	Kentucky - For injuries and occupational diseases occurring on and after July 14, 2018, medical benefits are limited to 780 weeks from the date of injury or last exposure in most permanent partial disability claims. Lifetime medicals remain for permanent total disability and a limited class of permanent partial disability claims. The employee has the right to apply for an extension of medical benefits and have the application adjudicated by an ALJ.				
15	Kentucky - Managed care is optional. If the employer has a managed care plan, an employee must choose from doctors within that plan.				
16	Louisiana - La. R.S. 23:1121. Examination of injured employee. B.(1) The employee shall have the right to select one treating physician in any field or specialty. The employee shall have a right to an expedited summary proceeding pursuant to R.S. 23:1201.1(K)(8), when denied his right to an initial physician of choice. The workers' compensation judge shall set the hearing date for the matter within three days of receiving the employee's motion for the expedited hearing. The hearing shall be held not less than ten nor more than thirty days after the employee or his attorney files the motion for an expedited hearing. The workers' compensation judge shall provide notice of the hearing date to the employer and insurer at the same time and in the same manner that notice of the hearing date is provided to the employee or his attorney. For the purposes of this Section, an employee shall not be required to submit the dispute on the choice of physician to mediation nor go through a pretrial conference before obtaining a hearing. The hearing shall be conducted as a rule to show cause. The workers' compensation judge shall order the employer or payor to authorize the claimant's choice of physician unless the employer or payor can show good cause for his refusal. After his initial choice the employee shall obtain prior consent from the employer or his workers' compensation carrier for a change of treating physician within that same field or specialty. The employee, however, is not required to obtain approval for change to a treating physician in another field or specialty. (2)(a) If the employee is treated by any physician to whom he is not specifically directed by the employer or insurer, that physician shall be regarded as his choice of treating physician. (b) When the employee is specifically directed to a physician by the employer or insurer, that physician may also be deemed as the employee's choice of physician, if the employee has received written notice of his right to select one treating physician in any field or specialty, and then chooses to select the employer's referral as his treating specialist after the initial medical examination as signified by his signature on a choice of physician form. The notice required by this Subparagraph shall be on a choice of physician form promulgated by the assistant secretary of the office of workers' compensation and shall contain the notice of the employee's rights provided under R.S. 23:1121(B)(1). Such form shall be provided to the employee either in person or by certified mail. (3) Paragraph (2) of this Subsection shall not apply to other physicians to whom the employee is referred by the physician selected by the employer unless the employer or insurer has obtained the choice of physician form provided for under Subparagraph (2)(b) separately for any such physician after the initial medical examination with that physician. (4) In instances where the employee is illiterate or has a language barrier, an authorized representative of the employer or insurer shall attest by his signature on the form that he has reasonably read and explained the form to such employee prior to their signatures. (5) If the employee fails or refuses to sign the form as provided in Subparagraph (2)(b) and Paragraph (3) of this Subsection, the employer or payor may suspend medical benefits until such time as the employee complies with Subparagraph (2)(b) and Paragraph (3) of this Subsection. Suspension of medical benefits by the employer or payor shall be made in accordance with the provisions of R.S. 23:1201.1(A)(4) and (5). When the employee has filed a disputed claim, the employer or payor may move for an order to compel the employee to return the form.				

Table 3 Workers' Compensation Medical Benefits and Method of Physician Selection as of January 1, 2025					
Most jurisdictions pay for reasonable and necessary medical treatment to cure and relieve the effects of the injury without co-insurance or a deductible. This section identifies whether there are fee schedules in place and covers any exceptions to that general rule for types of care, specific providers, or limits on care that will be paid for under each statute. It also itemizes who has the initial choice of treating physician, when a change of physician is allowed, and if there are any limits on second medical opinions.					
Jurisdiction	Fee Schedule in Place	Limitations on Medical Treatment	Initial Choice of Treating Physician Lies With	Circumstances Under Which Employee Can Change Treating Physician	Limits on Requesting Second Medical Opinions
17	Michigan - 418.315(1):	The employer shall furnish, or cause to be furnished to an employee who receives a personal injury arising out of and in the course of employment, reasonable medical, surgical, and hospital services and medicines, or other attendance or treatment recognized by the laws of this state as legal, when they are needed.			
18	Minnesota -	If an employee is covered by a certified managed care plan, the employee must seek treatment from a participating provider in the certified plan unless the employee chooses to receive treatment from a provider with whom the employee has a documented history of treatment.			
19	Missouri -	2019 responses. No 2025 data were provided.			
20	Montana -	Palliative care may not be payable after medical stability unless the worker is PTD, it is necessary to monitor a prosthetic device, or it enables the worker to continue employment or is necessary to return the worker to work. Medical benefits terminate 60 months from the date of injury, with limited reopening subject to 39-71-717, MCA.			
21	Montana -	Any time after the insurer accepts liability for the claim, the insurer may designate the treating physician and transfer care to the designated treating physician.			
22	Nebraska -	See Neb. Rev. Stat. § 48-120(2)(a).			
23	New Mexico -	In 2013, the WCA adopted the Official Disability Guidelines, which provide a rebuttable presumption that the limitations for treatment set forth by the guidelines are reasonable and necessary.			
24	New York -	New York has medical treatment guidelines for the Mid and Low Back, Neck, Shoulder, Knee, Non-Acute Pain, Ankle and Foot disorders, Elbow Injuries, Hip and Groin Disorders, Hand, Wrist and Forearm Injuries (including Carpal Tunnel Syndrome), Occupational Interstitial Lung Disease, Occupational/Work-Related Asthma, Post-Traumatic Stress Disorder and Acute Stress Disorder, Work-Related Depression and Depressive Disorders, Eye Disorders, Traumatic Brain Injury, and Complex Regional Pain Syndrome.			
25	New York -	The Chair adopted the New York Workers' Compensation Drug Formulary regulations in 2019, which required, effective December 5, 2019, that all new prescriptions must comply with the New York Workers' Compensation Formulary (NY Formulary). A new prescription is for a medication the injured worker is not currently taking or an increased strength of a medication they are taking. Due to the COVID-19 pandemic, the effective date for application of the NY Formulary to refill and renewal prescriptions was delayed to March 7, 2022, to coincide with the launch of the first phase of the Workers' Compensation Board's new business information system, OnBoard: Limited Release.			
26	New York -	The Chair adopted regulatory amendments in March 2021 to replace the New York workers' compensation fee schedule for durable medical equipment and create a prior authorization process. The amendments became effective on April 4, 2022, to coincide with the implementation of the durable medical equipment prior authorization request in the Workers' Compensation Board's new business information system, OnBoard: Limited Release.			
27	New York -	In addition to the situations set forth above when a provider must request prior authorization, providers have the option of submitting a request to confirm that the proposed treatment or tests are based on a correct application of the <i>New York Medical Treatment Guidelines</i> , and to request authorization of treatment or tests costing \$1,000 or less when there is no applicable medical treatment guideline. While confirmation or authorization is optional for the provider, a response is mandatory for insurance carriers, self-insured employers, and third-party administrators.			
28	New York -	However, if the employer is part of a PPO, the employee must choose from physicians within the PPO.			
29	North Dakota -	In the event an employer has elected a designated medical provider, employee may still choose their own provider but only if they designate a provider prior to injury. Employee may request a change in physicians after 30 days. NDCC 65-05-28.1 & 2.			
30	Oregon -	Fee schedules: Physician; Ambulatory Surgery Center; Hospital; Durable Medical Equipment, Prosthetics, Orthotics, and Supplies; and Pharmacy.			
31	Oregon -	Medical doctors, doctors of osteopathic medicine, oral and maxillofacial surgeons, and podiatric physicians can act as attending physicians without limitations. Unless authorized by an attending physician, Oregon-authorized nurse practitioners are allowed to treat for 180 days from initial visit on initial claim. Certified physician associates are allowed to act as attending physician for 180 days from initial visit on initial claim. Certified chiropractic physicians, and naturopathic physicians are allowed to act as attending physician for 60 days from initial visit, or 18 visits, whichever occurs first, on initial claim. After these periods, Oregon-authorized nurse practitioners, physician associates, chiropractic physicians, and naturopathic physicians must have a referral from an attending physician to continue treatment. If governed by a managed care organization (MCO), treatment and choice are specified by the MCO contract.			
32	Oregon -	If the employee is enrolled in an MCO, the employee chooses from physicians on the MCO's panel.			
33	Tennessee -	Chiropractic visits may be authorized for up to 12 visits per back injury. More than 12 visits to such a doctor of chiropractic must be specifically approved by the employer or insurance carrier.			
34	Tennessee -	There is a limitation on second opinions.			
35	Texas -	For claims treated outside of certified health care networks, treatment provided in accordance with agency-adopted, evidence-based medical treatment guidelines is presumed reasonable and necessary. Medical treatment provided in excess of, not recommended, or not addressed by the agency-adopted treatment guidelines requires pre-authorization from the insurance carrier. For claims treated in certified health care networks, treatment is provided in accordance with evidence-based treatment guidelines selected by the network. Certified networks can develop their own pre-authorization requirements. See §413.017, Labor Code, and §1305, Insurance Code, for references.			
36	Texas -	For certified workers' compensation health care network claims, the injured employee may change treating doctors one time without network approval. Network approval must occur for all subsequent changes. For non-network claims, injured employees may request subsequent changes with approval from the agency unless certain exceptions apply (e.g., treating doctor dies or retires, treating doctor moves, etc.).			
37	Texas -	The insurance carrier is limited to one required medical exam on the issue of the employee's ability to return to work per year after the second anniversary of entitlement to supplemental income benefits. Insurance carriers are prohibited from requesting required medical exams to review the appropriateness of medical care for certified workers' compensation network claims and are limited to one required medical exam every 180 business days to review the appropriateness of medical care for non-network claims. The injured employee may not submit to more than 3 exams in a 180 business day period. A subsequent exam must be performed by the same RME doctor who performed the initial exam.			
38	Utah -	However, in permanent total disability awards, employers/carriers may have medical evaluations once every three years, unless good cause is shown for more frequent evaluations.			

Table 3 Workers' Compensation Medical Benefits and Method of Physician Selection as of January 1, 2025					
Most jurisdictions pay for reasonable and necessary medical treatment to cure and relieve the effects of the injury without co-insurance or a deductible. This section identifies whether there are fee schedules in place and covers any exceptions to that general rule for types of care, specific providers, or limits on care that will be paid for under each statute. It also itemizes who has the initial choice of treating physician, when a change of physician is allowed, and if there are any limits on second medical opinions.					
Jurisdiction	Fee Schedule in Place	Limitations on Medical Treatment	Initial Choice of Treating Physician Lies With	Circumstances Under Which Employee Can Change Treating Physician	Limits on Requesting Second Medical Opinions
39	West Virginia - A claimant may be liable for fees in excess of the fee schedule charged by out-of-state providers unless the care was emergent and the claimant was transferred once stable, or there is no health care provider reasonably near the claimant's home who is qualified to provide the needed medical services. (WV Code 23-4-3(a)(4).				
40	Wisconsin - Certified databases used to resolve reasonableness of fee disputes.				
41	Wisconsin - The employee has a right to two choices of treating physicians licensed and practicing in the state. Any third choice or out-of-state physician must be by mutual agreement. (Also, a referral is not considered a new choice and does not require approval of the carrier/self-insurer.)				
42	British Columbia - The types of treatment and fees paid for health care and related services are established through contracts or by implementation of fee schedules, as appropriate. If there is no contract or fee schedule in place at the time of service delivery with respect to a certain type of health care, the Board pays an amount for that health care that it considers reasonable.				
43	British Columbia - Limitations on medical treatment depend on the type of health care treatment administered and as determined by the Board for an injured worker's claim. [Items C10-76.00 and C10-77.00 of the Rehabilitation Services & Claims Manual, Volume II (RS&CM)]				
44	British Columbia - Generally, only one physician at a time should be the primary treating physician, although the Board may consider concurrent treatment to be reasonable in some cases. [Item C10-73.00 of the RS&CM]				
45	New Brunswick - Fees are established by negotiating with individuals or health care provider groups or by adopting health care provider fee schedules.				
46	Nova Scotia - 2022 responses. No 2025 data were provided.				
47	Ontario - The worker is covered for such health care as may be necessary, appropriate, and sufficient as a result of the injury.				

Table 4A Benefits for Temporary Total Disability Provided by Workers' Compensation Systems as of January 1, 2025									
Information on the basis for calculating the temporary total disability (TTD) benefit, the maximum and minimum to be paid, and for how long those payments are allowed for people injured at work.									
Jurisdiction	Basis of TTD Calculation	Temporary Total Disability		Basis of Weekly Maximum Calculation	Maximum Benefit Changes	Maximum Length of TTD Benefits	Subject to the Following Offsets	How Statewide Average Weekly Wage (SAWW) or Other Basis for Weekly Maximum Is Calculated	
		Weekly Minimum	Weekly Maximum					Over What Time Period and Lag, from Which Agency, and Using What Data?	Link to Website or Citation
Alabama	66 2/3% of the worker's preinjury weekly wage	\$311.00	\$1,130.00	100% of the SAWW	July 1st each year	For the duration of temporary disability	None	Labor Market Information Division calculates the SAWW from the previous calendar year's data	\$25-5-68(c)
Alaska	80% of the worker's spendable, after-tax, or net weekly wages	\$342.00	\$1,556.00	120% of the AAWW	January 1st each year	Continue until employee is medically stable or released to work	See footnote (1)	AS 23.30.175 (2). https://labor.alaska.gov/wc/benefitcalculator.htm Based on weekly wages	Microsoft Word - Bulletin No. 24-07 AWW Min-Max.docx
Arizona	66 2/3% of the worker's average monthly wage plus an additional \$25 per month if dependents	N/A	\$908.82	66 2/3% of maximum average monthly wage of \$5,906.55 divided by 4.333	The Commission, not later than August 1st of each calendar year, adjusts the amount based upon criteria set forth in statute that is effective for the following calendar year	None	Unemployment benefits received	One year, the Bureau of Labor Statistics, Employment Cost Index for Wages and Salaries, for Civilian Workers, by Occupational Group and Industry, All Workers, available at http://www.bls.gov/	A.R.S. § 23-1041 (E); A.A.C. R20-5-165
Arkansas	66 2/3% of the worker's preinjury weekly wage	\$20.00	\$903.00	85% of the SAWW	January 1st each year	450 weeks maximum for disability benefits	Unemployment compensation; group disability or loss of income policies unless the injured worker has paid for the policy	The state average weekly wage is determined annually by the Division of Workforce Services in the preceding calendar year pursuant to § 11-10-502	Ark. Code Ann. 11-9-102(17)
California	2/3 of the worker's preinjury weekly wage	\$252.03	\$1,680.29	Beginning with base year of 2007, limits increased each January 1st by an amount equal to percentage increase in SAWW compared to the prior year	January 1st of each year	104 compensable weeks within a period of five years from the date of injury; 240 compensable weeks within a period of five years from the date of injury for specified serious injuries/conditions	None	Increase each year is based upon increase in the state average weekly wage paid by employers to employees covered by unemployment insurance as reported by the United States Department of Labor for California for the 12 months ending March 31 of the preceding calendar year	CA Labor Code section 4453
Colorado	66 2/3% of the worker's preinjury weekly wage	\$150.00	\$1,338.96	91% of the SAWW	July 1st each year	For the duration of temporary disability	Social Security, unemployment, and other (3)	Computed by the Department of Labor & Employment using agency records in June for the ensuing 12 months beginning July 1	§58-47-106 and 8-73-102(1)-(3)
Connecticut	75% of worker's spendable, after-tax, or net weekly wages	\$330.80	\$1,654.00	100% of the SAWW	October 1st each year	For the duration of temporary disability	None	Determined by the Labor Commissioner. Average of all workers' weekly earnings for the year ending the previous June 13th and in accordance with the standards for the determination of average weekly earnings of all workers established by the US Department of Labor, Bureau of Labor Statistics	https://www.ctdol.state.ct.us/
Delaware	66 2/3% of the worker's preinjury weekly wage	\$295.12	\$885.34	66 2/3% of the SAWW	July 1 of each year	Unlimited	None	See below (4)	https://labor.delaware.gov/divisions/colmi/
District of Columbia	66 2/3% of the worker's preinjury weekly wage	\$452.17	\$1,808.66	32-1505 (d)	January 1st of each year	500 weeks for all disability benefits, with ability to petition for an additional 167 weeks	None		
Florida	66 2/3% of the worker's preinjury weekly wage	\$20, unless wages are less than \$20, then full wages	\$1,295.00	100% of the SAWW	January 1st of each year	260 weeks	Social Security and unemployment benefits	Section 440.12(2), Florida Statutes (2024), expressly provides that, for injuries occurring on or after August 1, 1979, the weekly compensation rate shall be equal to 100 percent of the statewide average weekly wage, adjusted to the nearest dollar, and that the average weekly wage determined by the Florida Department of Commerce for the four calendar quarters ending each June 30 shall be used in determining the maximum weekly compensation rate with respect to injuries occurring in the calendar year immediately following	Section 440.12(2), Florida Statutes Informational Bulletin - MaxCompRate 2025
Georgia	66 2/3% of the worker's preinjury weekly wage	\$50.00	\$800.00	Legislative decision	Legislative decision	400 weeks unless catastrophic injury	Unemployment, disability plans funded by the employer	Use State Average Weekly Wage as a guide to advise the legislature as to where to set the max. TTD rate	www.bls.gov

Table 4A Benefits for Temporary Total Disability Provided by Workers' Compensation Systems as of January 1, 2025									
Information on the basis for calculating the temporary total disability (TTD) benefit, the maximum and minimum to be paid, and for how long those payments are allowed for people injured at work.									
Jurisdiction	Basis of TTD Calculation	Temporary Total Disability		Basis of Weekly Maximum Calculation	Maximum Benefit Changes	Maximum Length of TTD Benefits	Subject to the Following Offsets	How Statewide Average Weekly Wage (SAWW) or Other Basis for Weekly Maximum Is Calculated	
		Weekly Minimum	Weekly Maximum					Over What Time Period and Lag, from Which Agency, and Using What Data?	Link to Website or Citation
Hawaii	66 2/3% of the worker's preinjury weekly wage	\$298.00	\$1,192.00	100% of the SAWW	January 1st each year	For the duration of temporary disability	None	Pursuant to §383-22, SAWW is determined annually by/on November 30, by dividing total remuneration paid by employers from the four consecutive quarters ending on June 30 that year by the average monthly number of individuals employed in that time period; this amount is then divided by 52 to determine SAWW that will apply to injuries in the upcoming calendar year	§386-1 Definitions
Idaho	67% of the worker's preinjury average weekly wage	\$160.95	\$965.70	90% of 2025 average state wage of \$1,073.00	January 1st, and after the first 52 weeks of TTD	None (5)	Benefits	On or before June 1 of each year, the total wages reported on contribution reports to the department of employment for the preceding calendar year shall be divided by the average monthly number of insured workers determined by dividing the total insured workers reported for the preceding year by twelve (12). The average annual wage thus obtained shall be divided by fifty-two (52) and the average weekly state wage thus determined rounded to the nearest dollar. The average weekly state wage as so determined shall be applicable for the calendar year commencing January 1 following the June 1 determination.	Section 72-409 - Idaho State Legislature
Illinois	Calculate 66 2/3% of the worker's preinjury gross average weekly wage, subject to max. and min. levels	\$711.72 through 1/14/24, \$715.42 beginning 1/15/25	\$1,897.92 through 1/14/24, \$1,907.79 beginning 1/15/25	133 1/3% of the SAWW	133 1/3% of the SAWW	For the duration of temporary disability	None	Calculated twice annually by IDES (Illinois Department of Employment Security)	https://www2.illinois.gov/sites/twcc/resources/Pages/benefits.aspx
Indiana	66 2/3% of average weekly wage	\$50.00	\$780.00	Legislative decision	July 1st	500 weeks	None	Legislative decision	Implied by statute
Iowa	80% of the worker's spendable, after-tax, or net weekly wages	Less of \$398 or Employee's Spendable Weekly Earnings	\$2,274.00	200% of the SAWW	July 1st each year	Benefits are for length of disability and may be paid for life	None	6-month delay. Info is from Iowa Workforce Development using the annual and weekly wages for insured employment	Iowa Department of Workforce Development under 96.1A, subsection 36
Kansas	66 2/3% of the worker's preinjury weekly wage	\$25.00	\$835.00	75% of the SAWW	July 1st each year	225 to 415 weeks (6)	None	See below (7)	https://dol.ks.gov/
Kentucky	66 2/3% of employee's average	\$223.86	\$1,231.22	110% of the SAWW	January 1st each year	For the duration of temporary total disability or until age 70 or a minimum of four years	Employer-funded disability plans and unemployment insurance	Pursuant to KRS 342.143 and 342.740, we need the AWW for 2023 certified by the Commissioner of the Department of Workforce Development	
Louisiana	66 2/3% of the worker's preinjury weekly wage	\$225 or actual wage, whichever is less	\$845.00	75% of the SAWW	September 1st each year	No maximum	Social Security, private disability, and/or retirement funded by the employer	The annual average quarterly wages/13 weeks on a 6-month lag from the USDOL BLS Quarterly Census of Employment & Wages	https://www.laworks.net/Downloads/OWC/AvgWage_MinMaxRates.pdf
Maine	1/1/1993-12/31/2012: 80% of the worker's spendable, after-tax, or net wage; 1/1/2013 and after: 2/3 of average gross weekly wages	None	DOI 1/1/1993-12/31/2012: \$746.37; DOI on/after 1/1/2013: \$829.30; on/after 1/1/2020: \$1,230; 7/1/2024 to 6/30/2025: \$1,430.84	DOI 1/1/1993-12/31/2012: 90% of the SAWW; DOI on/after 1/1/2013: 100% SAWW; the maximum rate is 125% of the SAWW for injuries on/after 1/1/2020 for total and partial benefits	July 1st each year	520 weeks	Social Security, wage continuation and disability plans, and pension or retirement plan established or maintained by the employer	Benefit calculated by ME Department of Labor and Industry over the period from June 1 to May 31, and applies as of July 1 of the same year, so there is a one month lag	39-A ME Rev Stat §211
Maryland	66 2/3% of the worker's preinjury wage	\$50 or the employee's AWW	\$1,493.00	100% of the SAWW	January 1st each year	For the duration of temporary total disability	Disability retirement paid to employees of governmental units or quasi-public corporations	\$9-603 Dept. of Labor, Licensing and Regulation determines SAWW for calendar year based on previous fiscal year (that ended six months earlier)	https://www.wcc.state.md.us/adjud_claims/comp_rates.html
Massachusetts	60% of the worker's preinjury weekly wage	\$365.83	\$1,829.13	100% of the SAWW	October 1st each year	156 weeks	Unemployment benefits and child support liens	SAWW is calculated by the Division of Unemployment Assistance pursuant to statute. The calculation is made every Oct. 1st for the 12 month period ending on the previous March 31st	WC statute - G.L. c. 152, Sec. 34B Unemployment statute - G.L. c. 151A, Sec. 29 (8) (9)

Table 4A Benefits for Temporary Total Disability Provided by Workers' Compensation Systems as of January 1, 2025									
Information on the basis for calculating the temporary total disability (TTD) benefit, the maximum and minimum to be paid, and for how long those payments are allowed for people injured at work.									
Jurisdiction	Basis of TTD Calculation	Temporary Total Disability		Basis of Weekly Maximum Calculation	Maximum Benefit Changes	Maximum Length of TTD Benefits	Subject to the Following Offsets	How Statewide Average Weekly Wage (SAWW) or Other Basis for Weekly Maximum Is Calculated	
		Weekly Minimum	Weekly Maximum					Over What Time Period and Lag, from Which Agency, and Using What Data?	Link to Website or Citation
Michigan	80% of the worker's spendable, after-tax, or net weekly wages	None	\$1,164.00	90% of the SAWW	January 1st each year	For the duration of temporary total disability	(10)	The SAWW is calculated from employment and wages for private sector employers covered under the state Unemployment Insurance law for the 12 months ending June 30th of a given period	Department of Technology, Management, and Budget Bureau of Labor Market Information & Strategic Initiatives: https://mimi.org/
Minnesota	66 2/3% of the worker's weekly wage at the time of injury	\$296.35 (11)	\$1,372.00 (12)	108% of the SAWW for the preceding calendar year	Annually, on October 1	130 weeks	None	On or before July 1 preceding the year in which the wage is to be applicable, the total wages reported on wage detail reports to the Department of Employment and Economic Development for the preceding 12 months ending on December 31 of that year shall be divided by the average monthly number of covered workers (determined by dividing the total covered workers reported for the year ending December 31 by 12). The average annual wage thus obtained shall be divided by 52 and the average weekly wage thus determined rounded to the next highest dollar	Minn. Stat. § 176.011, subd. 1b
Mississippi	66 2/3% x AWW	\$25.00	\$630.73	66 2/3% x SAWW	January 1st each year	450 weeks	Disability benefits paid 100% by the employer; wages paid in lieu of compensation	July 1, 2023 to June 30, 2024, from MS Dept. of Employment Sec. using covered employment under MS Employment Sec. Law (includes state and local gov't, but excludes federal gov't employment)	Miss. Code Ann. Section 71-3-13
Missouri as of January 1, 2019 (13)	66 2/3% of the injured employee's preinjury average weekly wage, not to exceed 105% of the state average weekly wage (SAWW)	\$40.00	\$974.64	105% of the SAWW	July 1st of each year	400 weeks	None, but an injured employee is disqualified from receiving TTD during any period of time in which he or she applies for and receives unemployment compensation		
Montana	66 2/3% of the worker's preinjury wage	None	\$1,084.00	100% of SAWW	July 1st each year	For the duration of temporary total disability	Social Security disability	Average annual employment and total wages, from Workforce Services Division, not including federal government employers	(14)
Nebraska	66 2/3% of the worker's preinjury wage	\$49 or actual wages if less	\$1,130.00	100% of the SAWW	January 1st of each year	For the duration of temporary total disability	None	Total insured wages reported to the Department of Labor, excluding federal employees, for the preceding calendar year	Neb. Rev. Stat. § 48-121.02
Nevada	66 2/3% of the worker's average monthly wage	No minimum	\$1,300.33	150% of the SAWW	July 1st each year	For the duration of temporary total disability	Federal disability insurance benefits received	Data annually from NV Dept of Employment, Training and Rehabilitation, Employment Security Division	NRS 616A.065
New Hampshire	60% of injured worker's preinjury wage	\$427.87	\$2,139.00	150% of the SAWW	July 1st of each year	For the duration of the total disability	None	Calculated by July 1st of each year using data provided through NH Employment Security, in accord with RSA 281-A:28	NH RSA 281-A:28
New Jersey	70% of the worker's preinjury weekly wage	\$309.00	\$1,159.00	75% of the SAWW	January 1st each year	400 weeks	None	See footnote (15)	N.J.S.A. 34:15-12(a)
New Mexico	66 2/3% of the worker's preinjury wage	\$36.00	\$1,093.83	100% of the SAWW	January 1st each year	700 weeks	Unemployment compensation and private disability insurance if premiums paid by the employer	Average Weekly (covered) Wage = Average Annual Wage / 52. Where, Average Annual Wage = Total (covered) Wages/ Average (covered) Employment	Not available
New York	66 2/3% of the worker's average weekly wage which is based on the worker's earnings in the 52 weeks prior to the injury	\$325, unless employee's wages are less than \$325.00, then claimant receives full weekly wages (16)	\$1,171.46	2/3 of the New York State average weekly wage	July 1st of each year	For the duration of temporary total disability	None	New York SAWW is the average weekly wage of the state of New York for the previous calendar year, as reported by the Commissioner of Labor to the Superintendent of Financial Services on March 31st of each year	New York State Average Weekly Wage (NYSAWW) Department of Labor https://dol.ny.gov/new-york-state-average-weekly-wage-nysaww-0
North Carolina	66 2/3% of the worker's AWW	\$30.00	\$1,380	(17)	Each July 1st to be effective the next January 1st	500 weeks under N.C. Gen. Stat. §97-29(b), unless extended compensation is awarded by the Commission under N.C. Gen. Stat. §97-29(c)	Unemployment compensation, full retirement benefits under section 202(a) of the Social Security Act	AWW for the calendar year 2023, as determined by the Division of Employment Security, multiplied by 1.10 and rounded to its nearest multiple of two dollars (\$2.00)	https://www.ic.nc.gov/ncic/pages/matrix%20comp%20rate%20letter%20for%202022.pdf

Table 4A Benefits for Temporary Total Disability Provided by Workers' Compensation Systems as of January 1, 2025									
Information on the basis for calculating the temporary total disability (TTD) benefit, the maximum and minimum to be paid, and for how long those payments are allowed for people injured at work.									
Jurisdiction	Basis of TTD Calculation	Temporary Total Disability		Basis of Weekly Maximum Calculation	Maximum Benefit Changes	Maximum Length of TTD Benefits	Subject to the Following Offsets	How Statewide Average Weekly Wage (SAWW) or Other Basis for Weekly Maximum Is Calculated	
		Weekly Minimum	Weekly Maximum					Over What Time Period and Lag, from Which Agency, and Using What Data?	Link to Website or Citation
North Dakota	66 2/3% of the worker's preinjury wage	\$727.00 (18)	\$1,514.00	125% of the SAWW	July 1st each year	104 weeks (19)	Social Security Disability	Based on total wages and unemployment reported to Job Service North Dakota for the most recent calendar year	https://www.workforcesafety.com/sites/www/files/documents/reports/SAW/W%20Chart%20July%202024.pdf
Ohio	72% of the employee's preinjury wage for the first 12 weeks and then 66 2/3% of preinjury wage thereafter. However, if the FWW or AWW is below the minimum, the TTD is 100 percent of the FWW or AWW	\$410.33	\$1,231.00	If 72 percent of the FWW or 66 2/3 percent of the AWW is above the maximum, TTD is paid at the maximum amount	January 1st of each year	For the duration of temporary total disability	Periods for which temporary nonoccupational accident and sickness insurance is or has been paid pursuant to an insurance policy or program to which the employer has made the entire contribution or payment for providing insurance or under a nonoccupational accident and sickness program fully funded by the employer. When an injured worker is receiving Social Security retirement benefits and TTD is being paid at a rate greater than 66 2/3 percent of the SAWW for the date of injury. When an injured worker is receiving unemployment compensation that was paid and funded by the Ohio Department of Job and Family Services. When the employer has paid sick leave, and the injured worker is also entitled to TTD	The average weekly earnings of all workers in Ohio employment subject to Chapter 4141 of the Revised Code as determined as of the first day of September for the four full calendar quarters preceding the first day of July of each year, by the director of job and family services	R.C. 4123.62
Oklahoma	70% of the worker's preinjury wage	None	\$1,083.46	Benefit capped at 70% of the SAWW	Changes annually effective November 1	104 weeks, with an additional 52 weeks if consequential injury found	None, except TTD is not payable for same time period during which unemployment was collected	Based on data on total wages and employment from the previous calendar year, collected by the Commission	Cite as: 85A O.S. § 59 (OSCN 2022)
Oregon	66 2/3% of the worker's pre-injury weekly wage (20)	\$50 or 90% of the worker's pre-injury weekly wage; whichever is less	\$1,770.87	Not more than 133% of the state AWW	July 1 of each year (limited to increase in state AWW)	N/A	Offsets permitted to recover an overpayment or a penalty imposed for failure to attend independent medical examination, but not to exceed 25% of each TTD payment without prior authorization from the worker. Payable TTD is also subject to an order to enforce child support obligations, up to 25% of moneys paid for continuing support and up to 50% of a lump-sum award	The SAWW is based on the average weekly wage of workers in covered employment in Oregon for the last quarter of the calendar year preceding the fiscal year in which compensation is paid, as computed by the Oregon Employment Department, as of May 15 of each year	See ORS 656.211 https://www.oregonlegislature.gov/bills_laws/ors/ors656.html
Pennsylvania	66 2/3% of the worker's preinjury weekly wage	50% of statewide average weekly wage or 90% worker's average weekly wage, whichever is lower	\$1,205.00	100% of the SAWW	January 1st each year	For duration of disability, subject to conversion to partial benefits at 104 weeks (21)	Unemployment, pension, old age Social Security, and severance	The fiscal year of July 1–June 30 SAWW is used to calculate workers' compensation benefits for the following calendar year. The SAWW is calculated from the monthly employment and quarterly wage data reported by employers covered under the state unemployment compensation law. The monthly employment numbers are summed to get an employment total and the quarterly wages are summed to get total annual wages. The employment total is divided by 12 to get the average monthly employment. The total annual wage is divided by the average monthly employment to yield the statewide annual wage. The statewide annual average wage is divided by fifty-two to get the statewide average weekly wage	Workers' Compensation Claim Department of Labor and Industry Commonwealth of Pennsylvania

Table 4A Benefits for Temporary Total Disability Provided by Workers' Compensation Systems as of January 1, 2025									
Information on the basis for calculating the temporary total disability (TTD) benefit, the maximum and minimum to be paid, and for how long those payments are allowed for people injured at work.									
Jurisdiction	Basis of TTD Calculation	Temporary Total Disability		Basis of Weekly Maximum Calculation	Maximum Benefit Changes	Maximum Length of TTD Benefits	Subject to the Following Offsets	How Statewide Average Weekly Wage (SAWW) or Other Basis for Weekly Maximum Is Calculated	
		Weekly Minimum	Weekly Maximum					Over What Time Period and Lag, from Which Agency, and Using What Data?	Link to Website or Citation
Rhode Island	62% of average weekly wage	None	\$1,573.00	125% of the SAWW	October 1st each year	For the duration of temporary total disability	Retirement benefits	http://webserver.rilegis.state.rhodeisland.gov/Statutes/TITLE28/28-33/28-33-17_1.htm#:~:text=Effective%20September%201%2C%202007,of%20one%20dollar%20(%241.00)	See 28-33-17(a)(1)
South Carolina	66 2/3% of the worker's preinjury wage	\$75 if wages are > \$75; otherwise, comp rate is equal to wages	\$1,134.43	100% of the SAWW	January 1st each year	For the duration of temporary total disability with a maximum of 500 weeks	Salary in lieu of benefits	Calculated and certified by the South Carolina Department of Employment and Workforce for July–June of preceding year	https://www.wcc.sc.gov/claims/compensation-rates
South Dakota	66 2/3% of the worker's preinjury wage (22)	\$533.00	\$1,066.00	100% of the SAWW	July 1st each year	For the duration of temporary total disability	None	Total wages reported to the agency administering the Employment Security Act for the preceding calendar year	SDCL 62-4-3.1
Tennessee	66 2/3% of the worker's preinjury average weekly wage	\$185.55	\$1,360.70	110% of SAWW	July 1 each year	Duration of TTD for physical injuries; 104 weeks for psychological injuries; 104 weeks after the commencement of pain management	Employer-funded disability plans	TN Department of Labor and Workforce Development, prior calendar year data	https://www.tn.gov/content/dam/tn/workforce/documents/max_and_min_comp_rates.pdf
Texas	70% of the injured employee's preinjury weekly wage, but, if the employee earns less than \$10 per hour, the first 26 weeks are paid at 75% of the state average weekly wage (AWW) and then 70% thereafter	183	1,219	100% of the state AWW	October 1st of each year	105 weeks (23)	None, based on current case law (City of San Antonio v. Diehl)	TDI Benefits § 408.047 are based on SAWW from the TX Workforce Commission which determines SAWW based on current employment data for the preceding calendar year. §207.002(c)	https://www.tdi.texas.gov/wc/employee/benefits.html
US Federal Programs - FECA	75% of the worker's preinjury wage if worker has dependents; 66 2/3% of preinjury wage if not	GS-2 - step 1	GS-15 - step 10	Maximum and minimum are based on federal GS pay schedules	When pay schedule changes	For the duration of temporary disability	Social Security retirement on federal earnings	N/A	N/A
US Federal Programs - Longshore	66 2/3% of the worker's preinjury wage	\$499.78	\$1,999.10	200% of the national average weekly wage	October 1st each year	For the duration of temporary disability	Benefits being paid under any other workers' compensation system	See notes below (24)	33 U.S.C. § 906(b)(3) https://www.dol.gov/agencies/owcp/dlhwc/lhwca#906
Utah	66 2/3% of the worker's AWW at the time of injury not to exceed the SAWW	\$45.00	\$1,284.00	100% of the SAWW	July 1st each year	312 weeks	None	SAWW is computed based on total wages reported to the Unemployment Insurance Division for the previous calendar year, and determines the maximum benefit as of July 1	34A-2-410, U.C.A. The Department of Workforce
Vermont	66 2/3% of the worker's preinjury wage plus \$20 per week per dependent	\$588.00	\$1,763.00	150% of the SAWW	July 1st each year	For the duration of temporary total disability; insurer must review after 2 years	None	"(g) On or before the first day of June of each year the total wages reported on contribution reports for the preceding calendar year shall be divided by the average monthly number of covered workers (determined by dividing the total covered employment reported on contribution reports pursuant to this chapter for the preceding year by 12). The state average annual wage thus obtained shall be divided by 52 and the state average weekly wage thus determined shall be rounded down to the nearest dollar"	21 V.S.A. § 1338(g)
Virginia	66 2/3% of the worker's preinjury wage	\$352.50	\$1,410.00	100% of the SAWW	July 1st each year	500 weeks	None	Quarterly Census of Employment and Wages (QCEW) - 3rd and 4th Qtr earnings of preceding year; 1st and 2nd Qtr earnings (immediately preceding 3rd and 4th Qtr earnings)	https://www.virginiaworks.com/Quarterly-Census-of-Employment-and-Wages-QCEW/index

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Information on the basis for calculating the temporary total disability (TTD) benefit, the maximum and minimum to be paid, and for how long those payments are allowed for people injured at work.									
Jurisdiction	Basis of TTD Calculation	Temporary Total Disability		Basis of Weekly Maximum Calculation	Maximum Benefit Changes	Maximum Length of TTD Benefits	Subject to the Following Offsets	How Statewide Average Weekly Wage (SAWW) or Other Basis for Weekly Maximum Is Calculated	
		Weekly Minimum	Weekly Maximum					Over What Time Period and Lag, from Which Agency, and Using What Data?	Link to Website or Citation
Washington	60% of the worker's preinjury monthly wage (plus 5% if married or in a state registered domestic partnership on DOI; 2% per dependent for up to 5 – maximum is 75%)	(25)	\$2,057.03	120% SAMW	July 1st each year	For the duration of temporary total disability	Social Security and third party recoveries	Computed on or before the fifteenth day of June each year by the Employment Securing Department (ESD). Takes effect July 1st each year and goes through June 30th each year. "The 'average annual wage for contributions purposes' is the quotient derived by dividing the total remuneration reported by all employers subject to contributions by the average number of workers reported for all months by these same employers and if the result is not a multiple of one dollar, rounding the result to the next lower multiple of one dollar. The 'average weekly wage' is the quotient derived by dividing the 'average annual wage' obtained under (a) of this subsection by fifty-two and if the result is not a multiple of one dollar, rounding the result to the next lower multiple of one dollar."	https://app.leg.wa.gov/RW/default.aspx?cite=50.04.355
West Virginia	66 2/3% of the worker's preinjury weekly wage, not to exceed 100% of the average weekly wage in West Virginia	Federal minimum wage	\$1,067.12	100% of the SAWW	Rate changes with the state's AWW	104 weeks	Wage replacement plan benefits funded by employer	https://code.wvlegislature.gov/21A-6-10(26)	https://www.wvinsurance.gov/Workers-Compensation(27)
Wisconsin	66 2/3% of the worker's preinjury wage (28)	\$20.00 (29)	\$1,326.00	110% of the SAWW	The maximum TTD rate changes on January 1 of each year	For the length of temporary total disability	Social Security Disability	Department of Workforce Development - Unemployment Insurance Division maintains this information. For WC, SAWW is as determined under s. 108.05, Wis. Stats., as of June 30 of the previous year	Section 102.11 (1), Wis. Stats.
Wyoming	30% of statewide average wage or 2/3 of actual earnings but can not exceed the lesser of 100% of the actual earnings or SWAMW	30% of the statewide average monthly wage or 2/3 of the actual monthly earnings at the time of injury, whichever is greater, but shall not exceed the lesser of 100% of the actual monthly earnings	\$986 (30)	100% of the statewide average monthly wage calculated quarterly	With each quarterly reporting of the statewide average monthly wage (ws. 27-14-404)	24 months (ws. 27-14-404) or in extraordinary circumstances, may extend beyond to provide a reasonable recuperation period	Not paid while unemployment compensation is paid or when injuries occur during incarceration (ws. 27-14-404)	Before the last day of each quarter in each year, the department shall estimate the average monthly and weekly wage for the twelve (12) months preceding the quarter, based on Unemployment Insurance Commission information, and other available statistics	Wyoming Statute 27-14-802(b)
Canadian Jurisdictions Participating (stated in Canadian currency)									
British Columbia	90% of the worker's average net earnings (31)	\$ 491.75 (32)	\$1,500.61 (33)	\$116,700 for 2024 (34)	January 1st each year	(35)	(36)	N/A	N/A
New Brunswick	90% of loss of earning (average net earnings minus net estimated capable earnings) (37)	N/A	\$1,117.49 for single worker and \$1,176.44 for claiming spouse	Based on New Brunswick Industrial Aggregate Earnings multiplied by 1.6	Benefits are indexed annually by the change in the consumer price index (CPI)	Until loss of earnings resulting from injury by accident ceases, the worker turns 65, or the occurrence of a personal intervening condition or any circumstance not related to the injury by accident has become the dominant cause for the worker's inability to return to work or participate in rehabilitation (38)	Canada Pension Plan disability benefits (CPPD) (39); supplements to compensation (40)	The maximum annual earnings is defined as 1.6 times the New Brunswick Industrial Aggregate Earnings. The New Brunswick Industrial Aggregate Earnings was \$27,323 in 1993 and is indexed annually by percent increase in the Consumer Price Index for Canada for the twelve month period ending June 30th	The Workers' Compensation Act defines maximum annual earnings at sections 38.1(3), 38.1(4) and 38.1(5). The Workers' Compensation Act defines New Brunswick Industrial Aggregate Earnings at section 38.1(1). The Consumer Price Index is from Statistics Canada in Table 18-10-0004-13 Consumer Price Index by product group, monthly, percentage change, not seasonally adjusted, Canada, provinces, Whitehorse, Yellowknife and Iqaluit
Nova Scotia as of January 1, 2022 (41)	75% of preinjury net income for first 26 weeks, 85% of preinjury net income after 26 weeks	\$1.00	\$1,326.92	135.7% of the average industrial wage for Nova Scotia	January 1st each year	For the duration of total temporary disability	None	April–March of the preceding year	Section 22(1) of the General Regulations

Table 4A Benefits for Temporary Total Disability Provided by Workers' Compensation Systems as of January 1, 2025									
Information on the basis for calculating the temporary total disability (TTD) benefit, the maximum and minimum to be paid, and for how long those payments are allowed for people injured at work.									
Jurisdiction	Basis of TTD Calculation	Temporary Total Disability		Basis of Weekly Maximum Calculation	Maximum Benefit Changes	Maximum Length of TTD Benefits	Subject to the Following Offsets	How Statewide Average Weekly Wage (SAWW) or Other Basis for Weekly Maximum Is Calculated	
		Weekly Minimum	Weekly Maximum					Over What Time Period and Lag, from Which Agency, and Using What Data?	Link to Website or Citation
Ontario	85% of net average earnings	For full loss of earnings the minimum is lesser of \$537.49/week and the worker's net average earnings prior to the injury	\$2,163.46	Based on 175% of the average industrial wage for Ontario	January 1st each year	For the duration of the disability or until age 65 (or 2 years from date of injury if worker 63 or older at time of injury)	None	Based on the average industrial wage for Ontario provided by Statistics Canada for the year	https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1410006401
Prince Edward Island	Temporary wage loss benefits (TWL) 90% of the worker's net average earnings	N/A	\$1,124.67	Based on preinjury earnings; 90% of a worker's pre-accident net earnings, up to a maximum annual earnings of \$82,900 for 2025 (see Workers Compensation Board of PEI, POL-86)	January of each year	For the duration of temporary total disability	Any periodic benefit the worker is entitled to receive as a result of the same accident that is paid for in whole or in part by the employer	Average earnings are calculated based on pre-injury earnings. The time period can vary from 6 weeks to 12 months prior to the accident, generally. Earnings information is generally confirmed with the employer. It may also be confirmed with a source of income documentation. If the worker's earnings do not represent their actual loss of earning capacity, an average earnings review will take place after eight weeks. Their earnings information over a consecutive twelve-month period during the two years preceding the date of accident will be used to determine their benefit rate	http://www.wcb.pe.ca/DocumentManagement/Document/pol86_wagelossbenefits.pdf
Saskatchewan	90% of the worker's spendable, after-tax, or net weekly earnings	\$609.16	\$2,010.21	Based on a covered annual wage of \$104,531	January 1st of each year	For the duration of temporary total disability	50% of any federal government disability payment related to the same injury (after 12 months)	The maximum wage rate for a worker who sustains an injury on or after January 1, 2014 will be adjusted annually to equal to 165% of the product of Saskatchewan's average weekly wage and 52. "Average weekly wage" means the average weekly wage of the industrial composite for Saskatchewan as determined by the board for a year from information published by Statistics Canada	https://www.wcsask.com/earnings-loss-benefits
Notes: Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.									
1	Alaska - TTD benefits are reduced to the lesser of 100 percent of spendable weekly wage minus the offsets from the following benefits being received or the maximum weekly compensation rate minus the benefits from the Alaska Teachers' retirement system, Alaska Public Employees' Retirement System, or any employer-funded union and group retirement systems. In addition, TTD rate reduction is one-half for any Social Security retirement or survivor's benefits received and reduced to no more than 80 percent of spendable weekly wages for any Social Security disability benefits being received. Lastly, any employer contributions included in the calculations of weekly TTD rate, plan payments may be offset up to total increase due to inclusion in the compensation rate.								
2	Alaska - Alaska Average Weekly Wages are computed for the upcoming year using data from the previous calendar year creating a twelve-month lag in data. ADOLWD publishes a bulletin in December to provide for guidance.								
3	Colorado - An insurer may modify TTD to offset Social Security disability, pension, or similar benefits pursuant to statute by filing an admission of liability form with the Division, with documentation which substantiates the offset and figures showing how the amount of the offset was calculated.								
4	Delaware - Delaware Employment Wages - non-federal employees are covered by Delaware Unemployment Insurance. Information provided by the Office of Occupational Labor Market Information. SAWW is calculated on July 1 from the first 4 of the last 6 quarters of data, i.e., the previous calendar year. 19 DE Code § 3302 (23).								
5	Idaho - No maximum period—TTD continues while in the period of recovery.								
6	Kansas - Depending on the type of injury; also there may be a limitation of \$130,000 or \$155,000 for all indemnity benefits depending on types of benefits paid.								
7	Kansas - To calculate AWW, we take Total Wages and divide it by Total Employment and then divide that number by 52. The numbers include all Kansas employers.								
8	Massachusetts - G.L. c. 152, Sec. 34B - https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXXI/Chapter152/Section34B .								
9	Massachusetts - G.L. c. 151A, Sec. 29 - https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXXI/Chapter151A/Section29 .								
10	Michigan - Weekly WC benefits are offset according to Sec. 418.354: 50 percent of the amount of old-age insurance benefits received under Social Security; the after-tax amount of the payments received under a self-insurance plan, a wage continuation plan, or under a disability insurance policy provided by the same employer from whom benefits are being paid under section 351, 361, or 835 if the employee did not contribute to the plan or to the payment of premiums regarding the disability insurance policy; and a number of other provisions related to after-tax pension, retirement benefits, and after-tax profit sharing plans (see 418.354 for details).								
11	Minnesota - As of 10/1/21, the minimum under Minn. Stat. § 176.101, subd. 1(c) is 20% of the maximum weekly benefit or the employee's actual weekly wage, whichever is less.								
12	Minnesota - As of 10/1/24, maximum under Minn. Stat. § 176.101, subd. 1(b)(1) increased from 102% of the SAWW to 108% of the SAWW for the preceding calendar year.								
13	Missouri - 2019 responses. No 2025 data were provided.								
14	Montana - The calculation is in accordance with 39-51-2105 and 39-51-2201, MCA.								
15	New Jersey - The SAWW is based on the average weekly wages earned by all employees covered by the "unemployment compensation" law. The amount of maximum compensation shall be computed, determined, rounded to the nearest dollar, and promulgated by the Commissioner of the NJ Dept. of Labor & Workforce Development on or before Sept. 1 each year based on said average weekly wages as of the calendar year proceeding and shall be effective as to injuries occurring in the calendar year following such promulgation.								
16	New York - The weekly minimum is determined based on the date of accident. For accidents occurring after May 1, 2013, through December 31, 2023, the minimum benefit amount is \$150.00 per week; for accidents occurring on or after January 1, 2024, the minimum benefit amount is \$275.00 per week; for accidents occurring on or after January 1, 2025, and before July 1, 2026, the minimum benefit amount is \$375.00 per week; and for accidents occurring on or after July 1, 2026, and on or after July 1st of each succeeding year shall be one-fifth of the New York Statewide Average Weekly Wage for the year in which it is reported. If the employee's wages on the date of accident are less than minimum benefit amount, the employee receives their full wages.								
17	North Carolina - AWW for the calendar year 2023, as determined by the Division of Employment Security, multiplied by 1.10 and rounded to its nearest multiple of two dollars (\$2.00).								
18	North Dakota - The minimum benefit is equal to 60 percent of the SAWW unless the amount exceeds the employee's net wages, in which case the employee receives net wages as a weekly compensation rate.								
19	North Dakota - An additional 20 weeks of benefits may be added if the employee is enrolled in a vocational rehabilitation program.								
20	Oregon - If a worker is employed in more than one job at the time of injury, and meets the requirements in ORS 656.210, the worker's preinjury weekly wage is ascertained by adding all earnings the worker was receiving from all subject employment.								

Table 4A Benefits for Temporary Total Disability Provided by Workers' Compensation Systems as of January 1, 2025								
Information on the basis for calculating the temporary total disability (TTD) benefit, the maximum and minimum to be paid, and for how long those payments are allowed for people injured at work.								
Jurisdiction	Basis of TTD Calculation	Temporary Total Disability		Basis of Weekly Maximum Calculation	Maximum Benefit Changes	Maximum Length of TTD Benefits	Subject to the Following Offsets	How Statewide Average Weekly Wage (SAWW) or Other Basis for Weekly Maximum Is Calculated
		Weekly Minimum	Weekly Maximum					Over What Time Period and Lag, from Which Agency, and Using What Data?
21	Pennsylvania - Disability under PA law means loss of earning power. PA law allows the employer/insurer to request an impairment rating examination after the employee has received 104 weeks of full benefit payments. If the IRE shows less than 35 percent impairment based on the AMA 6th Edition Guide (2nd printing April 2009), then benefits are reclassified as partial disability compensation and are subject to a 500-week cap.							
22	South Dakota - If the weekly wage is below 50 percent of the SAWW, the calculation is wages, less income tax and Social Security.							
23	Texas - 104 weeks from the 8th day of disability. An exception to this amount could be made when an extension of maximum medical improvement based on spinal surgery is approved by DWC.							
24	US Federal Programs - Longshore - Section 6(b)(3) of the Longshore and Harbor Workers' Compensation Act (LHWCA) provides that prior to October 1 of each year, based on the national average weekly wage (NAWW) for the three calendar quarters ending June 30 of that year, the Secretary of Labor shall determine the NAWW to be applicable for the 12-month period beginning October 1.							
25	Washington - The Washington State legislature has increased the minimum workers' compensation benefits for claims with dates of injury (DOI) or dates of manifestation (DOM) on or after July 2, 2008. This change results in three different possible minimum rates: -15 percent of the state average monthly wage (SAMW) + \$10.00 for spouse + \$10.00 for each dependent child up to five dependent children; -100 percent of the worker's gross monthly wage; and -Minimum time-loss rate in effect prior to July 2, 2008.							
26	West Virginia - The State Average Weekly Wage (SAWW) is calculated annually in accordance with WV Code 21A-6-10(e): "Average weekly wage shall be computed by dividing the number of employees in West Virginia earning wages in covered employment into the total wages paid to employees in West Virginia in covered employment, and by further dividing said result by fifty-two, and shall be determined from employer wage and contribution reports for the previous calendar year which are furnished to the department on or before June 1 following such calendar year. The average weekly wage, as determined by the commissioner, shall be rounded to the next higher dollar."							
27	West Virginia - The expression "average weekly wage in West Virginia", within the meaning of [the Workers' Compensation] chapter, is ... determined by the Commissioner of Workforce WV in accordance with the provisions of sections ten [21A-6-10] and eleven [21A-6-11], article six, chapter twenty-one-a of this code and other applicable provisions of said chapter (WV Code 23-4-14(c)). See section "Workers' Compensation Benefit Rates" on the linked page for current rates.							
28	Wisconsin - TTD rate may be set at 100 percent of actual earnings if part-time employee and self-restricts.							
29	Wisconsin - The minimum AWW is \$30 so the minimum TTD rate would be \$20. However, this is obsolete and would only come up in circumstances in which the employer was licensed to pay subminimum wages (e.g., sheltered workers).							
30	Wyoming - Wyoming Workers' Compensation calculates all payments/wages based on a monthly rate, rather than a weekly rate. Each claimant's payment depends on their gross monthly wage on the date of injury and cannot exceed the statewide average monthly wage.							
31	British Columbia - Section 191(1), Act.							
32	British Columbia - Section 191(2), Act. If the worker's pre-injury average earnings per week are less than the minimum amount set out by the Act for the year of injury, the Board uses the worker's pre-injury average earnings as the worker's pre-injury average net earnings to calculate the worker's wage-loss benefits [Item C5-33.10 of the RS&CM]. If rounded-up gross annualized earnings are below the minimum of \$25,641.39 (or \$491.75 weekly), the worker will receive 100% gross average earnings, see 2024 Net Compensation Table at WorkSafeBC.com.							
33	British Columbia - The weekly maximum is based on the 2024 maximum annual wage rate of \$116,700 [90% x (\$116,700 - federal tax - provincial tax - Canada Pension Plan contributions - employment insurance premium)]. The actual amount would depend on the percentage of disability and taxation status, status for Canada Pension Plan Disability, and employment insurance used in the calculation of net. [Policy item #69.00 of the RS&CM]. The maximum wage rate as of January 1, 2025 is \$121,500.							
34	British Columbia - The maximum wage rate as of January 1, 2025 is \$121,500. See Policy item #69.00 of the RS&CM.							
35	British Columbia - TT and TP benefits are payable until the later of age 65 or date of retirement, as determined by the board, for workers younger than 63 on the date of injury. For workers 63 or older on the date of injury, benefits are paid until the later of two years after the date of injury or the date of retirement [Section 201(1), Act].							
36	British Columbia - Weekly benefits are based on 90% of net earnings minus CPP, employment insurance, and income tax deductions. [Sections 220 and 221, Act].							
37	New Brunswick - Earnings are adjusted by contributions under the Canada Pension Plan, premiums under the Employment Insurance Act, and income tax rates for the current year. There is a lump-sum permanent physical impairment award provided under sections 38.101(9), 38.11(17) and 38.2(8) of the Workers' Compensation Act and calculated in accordance to Regulation 82-165 - Permanent Physical Impairment Rating Schedule Regulation - Workers' Compensation Act.							
38	New Brunswick - Also ceases when injured worker has received benefits for a period not exceeding two years following the commencement of benefits when the injured worker is 63 years of age or more at the time of injury or recurrence.							
39	New Brunswick - Canada Pension Plan disability benefit (CPPD): worker's benefits reduced by CPPD amount attributable to the compensable injury.							
40	New Brunswick - Remuneration received during the worker's compensation period but earned prior to the compensation period shall not be deducted from loss of earning benefits. Examples include but are not limited to vacation pay, bonuses, sick leave benefits.							
41	Nova Scotia - 2022 responses. No 2025 data were provided.							

Table 4B Calculation of Preinjury Wage for Temporary Total Disability Benefits Provided by Workers' Compensation Systems as of January 1, 2025						
Information on the basis for calculating a worker's temporary total disability (TTD) benefit in cases where, at the time of injury, the worker was concurrently employed elsewhere.						
Jurisdiction	Workers with Concurrent Employment at Time of Injury					
	AWW Calculation Includes Income From	AWW Includes Income from Jobs Not Covered by Workers' Compensation	Exceptions/Additions	TTD Benefit Payments Apportioned Among All Covered Employers	Job Protections for Worker at Other Jobs	Worker Injured at One Job May Be Terminated from Another Job for Reasons Related to Injury
Alabama	Only the job where injury occurred	No	N/A	No	No	Yes (1)
Alaska	All jobs	Yes	No	No	No	Yes, Alaska is an at-will state regarding terminations
Arizona	All jobs covered by workers' compensation	No		No	No	Yes
Arkansas	Only the job where injured	No	None	N/A	No	Yes, but subject to ADA
California	All jobs	Yes	None	No	No (2)	Yes, if unable to perform the duties of the job (3)
Colorado	All Jobs	Yes	AWW wages must be taxable income; any financial assistance that is not taxable (like reimbursement for mileage) is not considered as part of a claimant's AWW	N/A	No	Workers remain at-will employees, as applicable. Employees may be terminated for any non-illegal reason, such as inability to accommodate restrictions. State law protects against termination for filing a workers' compensation claim and retaliation
Connecticut	All jobs (4)	No (4)		No (5)	Yes (6)	(7)
Delaware	Jurisdiction opted not to answer questions about concurrent employment					
District of Columbia	32-1511 (a) as amended	Wage stacking is allowed	N/A	No	This depends on individual employer	Yes
Florida	All jobs	Yes	Wages are included if the secondary employment is missed due to the compensable work injury	No	No	N/A
Georgia	All jobs that are "concurrent and similar"	No	Concurrent but dissimilar employment is not included in the AWW	No	No	Yes
Hawaii	All jobs	No	No	No	N/A (8)	N/A (8)
Idaho	All concurrent employment at time of injury; TOI employer must have knowledge of concurrent employment prior to the injury	Yes	N/A	Only the time of injury employer	No	Yes
Illinois	All jobs	Yes	N/A	N/A	Yes	No
Indiana	Only job where injured	No	Like employment	No	No	Not addressed by workers' compensation law
Iowa	Only the job where the injury occurred	Yes	If injured on a part-time job, income from the full-time job is included in the AWW calculation	No	No	An employee can be terminated at any time for any reason
Kansas	Job where injury occurred	No		Yes	No	Yes, if they are unable to work
Kentucky	All jobs	No		No	No	Yes; at-will state
Louisiana	La. R.S. 23:1031 (9)	No	See note (9)	Yes	No (10)	(10)
Maine	All jobs	Yes	None	No	Yes, provided termination is not discriminatory	Yes, provided termination is not discriminatory
Maryland	Only job where injured					
Massachusetts	All jobs	No		Benefits are paid by the insurer for the job where the injury took place	Yes	No
Michigan	Wages should be included from all employments	MCL 418.371(2) states "average weekly wage means the weekly wage earned by the employee at the time of the employee's injury in all employment..."	N/A	No (11)	No	While Michigan is an "at-will" employment state, MCL 418.301(13) prohibits retaliation for pursuing an action related to a work injury
Minnesota	All jobs (12)	Yes		No	This depends on the job	If unable to perform the other job due to restrictions from the first injury
Mississippi	Only the job where injury occurred	Yes	N/A	No	No	Yes, at-will employment

Table 4B Calculation of Preinjury Wage for Temporary Total Disability Benefits Provided by Workers' Compensation Systems as of January 1, 2025						
Information on the basis for calculating a worker's temporary total disability (TTD) benefit in cases where, at the time of injury, the worker was concurrently employed elsewhere.						
Jurisdiction	Workers with Concurrent Employment at Time of Injury					
	AWW Calculation Includes Income From	AWW Includes Income from Jobs Not Covered by Workers' Compensation	Exceptions/Additions	TTD Benefit Payments Apportioned Among All Covered Employers	Job Protections for Worker at Other Jobs	Worker Injured at One Job May Be Terminated from Another Job for Reasons Related to Injury
Missouri as of January 1, 2019 (13)	Only the job wherein injury occurred (14)	No (14)	Mo. Rev. Stat. § 287.220.11 (14)	Yes	Missouri law provides, "No employer or agent shall discharge or discriminate against any employee for exercising any of his or her rights under this chapter when the exercising of such rights is the motivating factor in the discharge or discrimination." Mo. Rev. Stat. § 287.780	Missouri law provides, "No employer or agent shall discharge or discriminate against any employee for exercising any of his or her rights under this chapter when the exercising of such rights is the motivating factor in the discharge or discrimination." Mo. Rev. Stat. § 287.780
Montana	Wages received at time of injury	Yes	(15)	No	No	Yes (16)
Nebraska	Only wages under the contract for hiring in force at the time of contracting	N/A	N/A	N/A	N/A	It is a public policy exception to the at-will employment doctrine that an employer cannot terminate an employee for filing a workers' compensation claim
Nevada	NRS 616A.400, 616C.420). May include, but not limited to wages; commissions, incentive pay; payment for sick leave; bonuses; termination pay; tips; tool allowance; salary; payment for piecework; payment for vacation; payment for holidays; payment for overtime; payment for travel; room and board; meals	No	(a) Reimbursement to perform his/her job (per diem allowance, reimbursement for travel expenses); (b) payment for employment not subject to coverage (NRS 616 A-D, 617); (c) payment for employments for which coverage is elective and has not been elected; (d) allowances for laundry or uniforms	Yes	N/A	Not regulated
New Hampshire	All jobs/employment subject to 281-A	No	None	No	No	No prohibition under the Workers' Compensation statute. Other laws may apply
New Jersey	Only the job where injury occurred	No	N/A	No	No	Yes, if worker is unable to perform job
New Mexico	All concurrent employment	Yes	N/A	No	Employment and other laws may apply	Employment and other laws may apply
New York	All jobs (17)	No (18)	N/A	No (19)	(20)	Yes (21)
North Carolina	Only the job in which the injury occurred	No	Volunteer firefighters and other volunteer emergency responders receive a minimum of 66 2/3% of the maximum weekly benefit (22)	No	The NC Workers' Compensation Act does not address this	The NC Workers' Compensation Act does not address this
North Dakota	The AWW calculation only includes income from jobs that have worker's compensation insurance in North Dakota. NDCC 65-01-02	No (NDCC 65-01-02 (5))	N/A	Normally no. However there may be a time in which two employers are assigned and held responsible for the injury. Most of the time that occurs in repetitive use claims. In those cases, both employers are responsible for a percentage of all costs (medical and indemnity). This is not a normal occurrence but it has happened	No	North Dakota Workforce Safety and Insurance does not have jurisdiction or get involved in employer personnel issues or terminations. However if an injured worker is terminated from any job for reasons related to the work injury, that injured worker may be eligible for wage loss benefits and/or vocational rehabilitation benefits from Workforce Safety and Insurance
Ohio	All jobs	Yes	None	No	See R.C. 4123.90	See R.C. 4123.90
Oklahoma	If, because of exceptional circumstances, the AWW cannot be fairly and justly determined by the formulas listed in 85A O.S. §59(A) and (B), the Commission may determine the AWW by a method that is just and fair to all parties concerned	If, because of exceptional circumstances, the AWW cannot be fairly and justly determined by the formulas listed in 85A O.S. §59(A) and (B), the Commission may determine the AWW by a method that is just and fair to all parties concerned	N/A	N/A	85A O.S. Section 7 prohibits discrimination or retaliation against an employee under certain circumstances enumerated in that provision	85A O.S. Section 7 prohibits discrimination or retaliation against an employee under certain circumstances enumerated in that provision
Oregon	All jobs (23)	No	Yes (24)	No (25)	No	No (26)

Table 4B Calculation of Preinjury Wage for Temporary Total Disability Benefits Provided by Workers' Compensation Systems as of January 1, 2025						
Information on the basis for calculating a worker's temporary total disability (TTD) benefit in cases where, at the time of injury, the worker was concurrently employed elsewhere.						
Jurisdiction	Workers with Concurrent Employment at Time of Injury					
	AWW Calculation Includes Income From	AWW Includes Income from Jobs Not Covered by Workers' Compensation	Exceptions/Additions	TTD Benefit Payments Apportioned Among All Covered Employers	Job Protections for Worker at Other Jobs	Worker Injured at One Job May Be Terminated from Another Job for Reasons Related to Injury
Pennsylvania	AWW includes concurrent employment	Wages from all concurrent separate employments are used to determine the AWW	Wages from self-employment are not included	Yes	There is no protection of the job under workers' compensation. PA is an at-will state. However, there is case law which states that if you are terminated solely due to a workers' compensation injury, the employee can sue them civilly	There is no protection of the job under Workers' Compensation. PA is an at-will state. However, there is case law which states that if you are terminated solely due to a Workers' Compensation injury, the employee can sue them civilly
Rhode Island	All jobs	Yes	None	Yes	No	Yes
South Carolina	All jobs	Yes		Yes (27)	No	No
South Dakota	All jobs	No	See note (28)	No	No	N/A
Tennessee	Only the job where the injury occurred	No	N/A	N/A	N/A	N/A
Texas	All jobs (29)	Yes	Only wages that are reportable for federal income tax purposes may be considered in AWW calculation	No	Some	Injured employee may not be terminated or discriminated against because the employee has filed a workers' compensation claim in good faith; hired an attorney; requested dispute resolution for a workers' compensation claim; or testified in a dispute resolution proceeding regarding a workers' compensation claim
US Federal Programs - FECA	Only the federal job where the injury occurred	No	If a part-time employee has similar non-federal employment, earnings from the non-federal employment are combined with the earnings from federal employment to obtain average earnings	N/A	N/A	N/A
US Federal Programs - Longshore	From job where injury occurred, unless disabled from other jobs. In that case, all income is included	Possible in some circumstances	No	Credit is taken if payments are made concurrently for same injury	Wage loss protection, but not job protection	Yes, if the injured worker is disabled from performing the job
Utah	All jobs	Yes	Proof of wages must be provided to employer/insurer		No	Yes (30)
Vermont	All jobs in covered employment	No	No	No	Yes (31)	No (unless false claim) (31)
Virginia	Only job where injury occurred	If other job is similar in nature (32)	N/A	No	No	N/A
Washington	All jobs	Yes	N/A	Yes	No	Yes
West Virginia	All jobs (33)	Yes (33)	N/A	N/A	Yes (34)	Yes (35)
Wisconsin	Only job where injury occurred	No			Not under WC laws	
Wyoming	Calculation includes income from all jobs at time of injury	Yes		No	Not applicable (36)	Not applicable (36)
Canadian Jurisdictions Participating (stated in Canadian currency)						
British Columbia	All occupations, subject to statutory maximum. See (37)	(37)	(37)	(37)	(37)	(37)
New Brunswick	All jobs, provided earnings from the accident employer are covered under the <i>Workers' Compensation Act</i>	Yes, provided earnings from accident employer are covered under the <i>Workers' Compensation Act</i>	N/A	Loss of earnings benefits in excess of the earnings from the accident employer are allocated to the all assessed employers account	N/A	N/A
Nova Scotia as of January 1, 2022 (38)	All jobs	Yes	Injury must be preventing worker from earning income from concurrent job	No (39)	No	There are no protections under the Act for concurrent employment

Table 4B Calculation of Preinjury Wage for Temporary Total Disability Benefits Provided by Workers' Compensation Systems as of January 1, 2025						
Information on the basis for calculating a worker's temporary total disability (TTD) benefit in cases where, at the time of injury, the worker was concurrently employed elsewhere.						
Jurisdiction	Workers with Concurrent Employment at Time of Injury					
	AWW Calculation Includes Income From	AWW Includes Income from Jobs Not Covered by Workers' Compensation	Exceptions/Additions	TTD Benefit Payments Apportioned Among All Covered Employers	Job Protections for Worker at Other Jobs	Worker Injured at One Job May Be Terminated from Another Job for Reasons Related to Injury
Ontario	If the worker is injured with an employer covered by the WSIA, then earnings from all employment are generally considered (40)	It may, if the income is from employment that meets the WSIB's conditions for being considered concurrently employed	(41)	No, generally only the accident employer	No, under the WSIA only the accident employer	All of the return-to-work obligations under the WSIA pertain to the accident employer
Prince Edward Island	All jobs	We may consider it	N/A	N/A	No	This is not covered by our Act
Saskatchewan	All employment in industries covered under WCB Act	No	None	No; injury employer	Yes (42)	No (42)
Notes:	Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.					
1	Alabama - Alabama is a right-to-work state.					
2	California - The nondiscrimination policy in CA Labor Code section 132a relates to the employer with whom the employee has filed a workers' compensation claim.					
3	California - Other applicable state laws may prohibit discrimination in the workplace based on physical or mental disability.					
4	Connecticut - See Sec 31-310 regarding concurrent employment—the concurrent employment must be an employer under the Act's definition.					
5	Connecticut - Please refer to C.G.S. Sec 31-293 re: subrogation rights of the employer and C.G.S. Sec. 31-310 re: liability of Second Injury Fund.					
6	Connecticut - Sec 31-290a bars discrimination against one for exercising workers' compensation rights.					
7	Connecticut - An injured worker who cannot perform a job may be terminated but discharge cannot be in violation of the protections under Sec 31-290a.					
8	Hawaii - Chapter 386-142 titled "Employment rights of injured workers" states in part that it is unlawful for any employer to suspend or discharge any employee solely because the employee suffers any work injury which is compensable under this chapter.					
9	Louisiana - La. R.S. 23:1031. Employee's right of action; joint employers, extent of liability; borrowed employees. A. If an employee not otherwise eliminated from the benefits of this Chapter receives personal injury by accident arising out of and in the course of his employment, his employer shall pay compensation in the amounts, on the conditions, and to the person or persons hereinafter designated. B. In case any employee for whose injury or death payments are due is, at the time of the injury, employed and paid jointly by two or more employers subject to the provisions of this Chapter, such employers shall contribute to such payments in proportion to their several wage liabilities to the employee; but nothing in this Section shall prevent any arrangement between the employers for different distribution, as between themselves, of the ultimate burden of such payments. If one or more but not all the employers are subject to this Chapter, then the liability of such of them as are so subject shall be to pay that proportion of the entire payments which their proportionate wage liability bears to the entire wages of the employee; but such payment by the employers subject to this Chapter shall not bar the right of recovery against any other joint employer. C. In the case of any employee for whose injury or death payments are due and who is, at the time of the injury, employed by a borrowing employer in this Section referred to as a "special employer", and is under the control and direction of the special employer in the performance of the work, both the special employer and the immediate employer, referred to in this Section as a "general employer", shall be liable jointly and in solido to pay benefits as provided under this Chapter. As between the special and general employers, each shall have the right to seek contribution from the other for any payments made on behalf of the employee unless there is a contract between them expressing a different method of sharing the liability. Where compensation is claimed from, or proceedings are taken against, the special employer, then, in the application of this Chapter, reference to the special employer shall be substituted for reference to the employer, except that the amount of compensation shall be calculated with reference to the earnings of the employee under the general employer by whom he is immediately employed. The special and the general employers shall be entitled to the exclusive remedy protections provided in R.S. 23:1032. D. An injury by accident shall not be considered as having arisen out of the employment and is thereby not covered by the provisions of this Chapter if the injured employee was engaged in horseplay at the time of the injury. E. An injury by accident should not be considered as having arisen out of the employment and thereby not covered by the provisions of this Chapter if the employer can establish that the injury arose out of a dispute with another person or employee over matters unrelated to the injured employee's employment.					
10	Louisiana - Louisiana is an "at-will" employment state.					
11	Michigan - 418.372 explains that if a worker is employed by more than one employer at the time of injury, the earnings from both employers are added together to calculate the average weekly wage. If the job in which the worker was injured accounts for more than 80 percent of the worker's wages, that employer is responsible for all the benefits owing. If, however, that employer was responsible for less than 80 percent of the worker's wages, it pays the entire benefits but is reimbursed a proportional amount by the Second Injury Fund.					
12	Minnesota - If, at the time of the injury, the employee was regularly employed by two or more employers, the employee's days of work for all such employments shall be included in the computation of weekly wage.					
13	Missouri - 2019 responses. No 2025 data were provided.					
14	Missouri - Employees injured on or after August 28, 1993, but not later than August 27, 1996, or on or after August 28, 1998, but not later than December 31, 2013, may apply for Second Job Wage Loss Benefits from the Second Injury Fund. Mo. Rev. Stat. § 287.220.11 (formerly § 287.220.9). The Fund will pay the sum of the total of the average weekly wage computed separately for each employment, up to the maximum weekly benefit allowable by law on the date of injury, less those benefits paid by the employer in whose employment the employee sustained the injury. Id.; Mo. Rev. Stat. § 287.250.8.					
15	Montana - Does not include wages earned while under the Independent Contractor Exemption (waiver of coverage). See 39-71-123 (4) (c), MCA.					
16	Montana - However, an employer may not terminate worker for filing a workers' compensation claim. See 39-71-317, MCA.					
17	New York - If the injured employee is concurrently employed in more than one employment at the time of injury, the employee's average weekly wages are calculated upon the basis of wages earned from all concurrent employments covered under the New York Workers' Compensation Law.					
18	New York - Only employment covered by the New York Workers' Compensation Law is included in determining an injured worker's average weekly wage. Wages from non-covered employments, such as those from the federal government, are not included in determining the average weekly wage of an injured worker.					
19	New York - The employer in whose employment the worker was injured is liable for all benefits, indemnity and medical, paid to the worker. The employer that employed the claimant at the time of the injury cannot seek reimbursement or recover any of the benefits paid from the concurrent employer(s).					
20	New York - The Workers' Compensation Law prohibits employers from terminating, failing to reinstate, or discriminating against an employee because the employee has requested a claim form for injuries received in the course of employment, has filed or plans to file a workers' compensation claim, has testified in or plans to testify in a workers' compensation claim.					
21	New York - Yes, if the worker is not able to return to work or perform the job due to the work-related injuries or disability, then the employer may terminate the injured worker.					
22	North Carolina - See N.C. Gen Stat. §97-2(5).					
23	Oregon - All jobs subject to coverage by workers' compensation, and subject to the exceptions—see next footnote.					

Table 4B Calculation of Preinjury Wage for Temporary Total Disability Benefits Provided by Workers' Compensation Systems as of January 1, 2025						
Information on the basis for calculating a worker's temporary total disability (TTD) benefit in cases where, at the time of injury, the worker was concurrently employed elsewhere.						
Jurisdiction	Workers with Concurrent Employment at Time of Injury					
	AWW Calculation Includes Income From	AWW Includes Income from Jobs Not Covered by Workers' Compensation	Exceptions/Additions	TTD Benefit Payments Apportioned Among All Covered Employers	Job Protections for Worker at Other Jobs	Worker Injured at One Job May Be Terminated from Another Job for Reasons Related to Injury
24	Oregon - The claims processor must be notified of other subject employment within 30 days of receipt of the initial claim. The claims processor must receive verifiable documentation of wages from other employment within 60 days of mailing a request for documentation.					
25	Oregon - Supplemental disability benefits are either paid by the State of Oregon from the Workers' Benefit Fund, or, if the insurer or self-insured employer elects to pay, they are reimbursed from the Workers' Benefit Fund. Reimbursement from the Workers' Benefit Fund includes the benefit paid and an administrative fee.					
26	Oregon - Under ORS chapter 659A, discrimination with respect to employment due to a job injury or illness is an unlawful employment practice, regardless of where the worker is employed.					
27	South Carolina - S.C. Code Ann. § 42-9-430; Last Injurious Exposure Rule resolves a dispute between carriers. <i>Geathers v. 3V, Inc.</i> , 371 S.C. 570, 576-579 (2007).					
28	South Dakota - The claimant's earnings from concurrent employment are aggregate only if the injury occurred when the employee was actively working in the concurrent employment and when the injury prevents the employee from performing the employee's duties at the employee's concurrent employment.					
29	Texas - Insurance carriers may request reimbursement for any income benefits paid as a result of an injured employee's multiple employments from the Texas Workers' Compensation Subsequent Injury Fund.					
30	Utah - If an injured worker is no longer able to perform duties previous to their injury they may be terminated.					
31	Vermont - Vermont statute contains anti-retaliation/discrimination provision, enforced by Attorney General's office, civil rights unit.					
32	Virginia - AWW calculation can include earnings from other job only if both jobs are considered similar employment; job functions of both must be similar in nature.					
33	West Virginia - Pursuant to W. Va. Code § 23-4-14(b)(2), average weekly wage earnings are based on wages from the injured person, wherever earned, at the date of injury.					
34	West Virginia - W. Va. Code § 23-5A-1 directs that no employer shall discriminate in any manner against any of his present or former employees, because such employee is receiving or attempting to receive workers' compensation benefits.					
35	West Virginia - W. Va. Code § 23-5A-3(a) states that it is a discriminatory practice within the meaning of W. Va. Code § 23-5A-1, to terminate an injured employee while the injured employee is off work due to a compensable injury, and the employee is receiving or is eligible to receive temporary total disability benefits, unless the injured employee has committed a separate dischargeable offense.					
36	Wyoming - Wyoming workers' compensation statutes do not address this specific issue.					
37	British Columbia - If, prior to the injury, the worker was engaged in more than one occupation, but the injury only disables the worker from one, the preinjury earnings are calculated by adding the earnings in all occupations, subject to the statutory maximum. The post-injury earnings are calculated by combining the earnings in the job the worker continues to carry on, with the earnings (if any) which the worker is able to earn in some other suitable and available job in the time that would have otherwise been spent in performing the other preinjury job. [Policy item #35.22 of the RS&CM]					
38	Nova Scotia - 2022 responses. No 2025 data were provided.					
39	Nova Scotia - The workplace injury employer is only charged for the portion of earnings loss associated with their workplace. However, if the worker has income from other employers that is impacted by the workplace injury, that income is factored into the worker's earnings loss and is charged to the accident fund; the non-injury employer is not charged any costs.					
40	Ontario - Exceptions: self-employment for which optional insurance has not been sought; earnings from employment for which the individual has an executive officer/partner exemption from WSIB coverage.					
41	Ontario - For income from "concurrent employment" to be considered, the accident employer must have WSIB coverage, there must be contracts of employment with the other employer(s), evidence of more than one continuing contract of employment in the four-week period leading to the injury (or some lesser period), and earnings must have been received from all concurrent employers in any of the four weeks prior to the injury.					
42	Saskatchewan - Sections 2-40 and 2-41 of The Saskatchewan Employment Act states that no employer shall take discriminatory action against an employee because of absence due to the illness or injury of the employee if the employee has been in the employer's service for more than 13 consecutive weeks before the absence and the absence does not exceed a total of 12 days in a calendar year, in the case of illness or injury that is not serious or 12 weeks in a period of 52 weeks, in the case of serious illness or injury.					

Information on conditions under which a worker's temporary total disability (TTD) benefit payments can be discontinued.									
Jurisdiction	Circumstances Under Which TTD Can Be Discontinued (Y=Yes; N=No)								
	When a Worker Returns to Work	When a Worker Is Released by a Medical Provider to Return to Work	When the Worker Is Released by the Treating Provider to Return to Work	When a Medical Provider Determines That the Worker Has Reached MMI (or medical and stationary, maximum healing, etc.)	When the Treating Medical Provider Determines That the Worker Has Reached MMI (or medical and stationary, maximum healing, etc.)	Upon Written Notice to the Employee	Upon Written Notice to the Employee and the Employee Does Not Object Within a Specified Time Frame	After an Award or Discontinuation Notice by the WC Agency (WC Judge, WC commissioner, magistrate, hearing officer, etc.)	Other (see notes)
Alabama	Y	Y	Y	Y	Y	N	N	Y	N
Alaska	Y	Y	Y	Y	Y	N	N	N	(1)
Arizona	Y	Y	Y	Y	Y	N	N	Y	(2)
Arkansas	Y	Y	Y	Y	Y	N	N	Y	
California	Y	Y	Y	Y	Y	Y	Y	Y	N
Colorado	Y	N	Y (3)	N	Y	N	Y	Y	(4)
Connecticut	Y	Y	Y	On a case-by-case basis depending on the factual circumstances	Y	Y	Y	Y	N/A
Delaware	Y	Y	Y	N	N	N	N	Y	(5)
District of Columbia	Y	N	Y	N	Y	Y	N	Y	
Florida	Y	Y (6)	Y (6)	Y (6)	Y (6)	N	N	Y	N
Georgia	Y	Y (7)	Y (8)	N	N	N	N	Y	Y (9)
Hawaii	Y	N	Y	N	Y	N	N	Y	
Idaho	Y	Y	Y	Y	Y	N	N	Y	N
Illinois	Y	N	Y	N	Y	Y	N	Y	N
Indiana	Y	Y	Y	Y	Y	Y	Y	Y	N
Iowa	Y	N	Y	Y	Y	N	N	Y	N
Kansas	Y	N	Y	N	Y	N	N	N	N
Kentucky	Y	Y	Y	Y	Y	N	N	Y	N/A
Louisiana	See notes (10), (11), and (12)	Y	Y	Y	Y	N/A	N/A	Y	See notes (10), (11), and (12)
Maine	Y	Y	Y	N	N	Y	N	Y	N
Maryland	Y	Y	Y	Y	Y	Y	N	Y	N
Massachusetts	Y	N	N	(13)	N	(14)	N	Y	(15)
Michigan	Y	Y	Y	N	N	Y	N	N	(16)
Minnesota	Y	Y (17)	Y (but not limited to the treating provider)	Y (18)	Y (but not limited to the treating provider)	N	Y	Y (19)	(20)
Mississippi	Y	Y	Y	Y	Y	N	N	Y	N
Missouri as of January 1, 2019 (21)	Y	Y (22)	Y (22)	Y	Y	N (23)	N	Y	N/A
Montana	Y (24)	Y (24)	Y (24)	Y (25)	Y (24)	Y (26)	N	Y	Y (25)
Nebraska	Y	Y	Y	Y	Y	N	N	Y	N
Nevada	Y	Y	Y	Y	Y	N	N	N	N
New Hampshire	Y	N	Y	N	N	N	N	Y	
New Jersey	Y	Y	N	Y	N	N	N	N	
New Mexico	Y	Y	Y	Y	Y	N	N	v	(27)
New York	Y	N	Y	N	(28)	N	N	Y	N
North Carolina	Y	Y, if termination is approved under N.C. Gen. Stat. §97-18.1	Y, if termination is approved under N.C. Gen. Stat. §97-18.1	Y, if termination is approved under N.C. Gen. Stat. §97-18.1	Y, if termination is approved under N.C. Gen. Stat. §97-18.1	Y, if termination is approved under N.C. Gen. Stat. §97-18.1	Y, if termination is approved under N.C. Gen. Stat. §97-18.1	Y	Y (29)
North Dakota	Y	Y	Y	Y	Y	Y	Y	Y	N
Ohio	Y	Y	Y	Y	Y	N	N	Y	N/A
Oklahoma (30)	Y	Y	Y	Y	Y	Y	N/A	N	(30)
Oregon	Y	N	Y	N	Y (31)	N	N	Y	(32)
Pennsylvania	Y (subject to Section 413 of the Act)	N	N	N	N	N	N	Y	N

Table 4C Conditions Under Which Temporary Total Disability Benefits May Be Terminated for Benefits Provided by Workers' Compensation Systems as of January 1, 2025									
Information on conditions under which a worker's temporary total disability (TTD) benefit payments can be discontinued.									
Jurisdiction	Circumstances Under Which TTD Can Be Discontinued (Y=Yes; N=No)								
	When a Worker Returns to Work	When a Worker Is Released by a Medical Provider to Return to Work	When the Worker Is Released by the Treating Provider to Return to Work	When a Medical Provider Determines That the Worker Has Reached MMI (or medical and stationary, maximum healing, etc.)	When the Treating Medical Provider Determines That the Worker Has Reached MMI (or medical and stationary, maximum healing, etc.)	Upon Written Notice to the Employee	Upon Written Notice to the Employee and the Employee Does Not Object Within a Specified Time Frame	After an Award or Discontinuation Notice by the WC Agency (WC judge, WC commissioner, magistrate, hearing officer, etc.)	Other (see notes)
Rhode Island	Y	N	N	N	N	N	N	Y	N
South Carolina	Y	N	Y	N	Y	N	Y	Y	N
South Dakota	Y	Y	Y	Y	Y	Y	Y	Y	Y
Tennessee	Y	N	Y	N	Y	N	N	Y	(33) (34)
Texas	Y	(35)	(35)	Y	Y	N	N	Y	N
US Federal Programs - FECA	Y	N	N	N	N	N	Y	Y	(36)
US Federal Programs - Longshore	Y	Y	Y	Y	Y	Y	Y	Y	
Utah	Y	Y	Y	Y	Y	N	N	Y	N
Vermont	Y	Y (37)	Y (37)	Y (38)	Y (38)	N	Y (38)	Y	(39)
Virginia	Y	Y	Y	N	N	N	N	Y	(40)
Washington	Y	Y	Y	N	Y	N	N	Y	N
West Virginia	Y	Y	Y	Y	Y	N	(41)	N/A	N/A
Wisconsin	Y	Y	Y	Y	Y	N	N	Y	(42)
Wyoming	Y	Y	Y	Y	Y	Y	Y	Y	(43)
Canadian Jurisdictions Participating (stated in Canadian currency)									
British Columbia	Y	Y	Y	Y	Y	N/A	N/A	Y	(44)
New Brunswick	Y	N (45)	N (45)	N (45)	N (45)	N	N	N	(46)
Nova Scotia as of January 1, 2022 (47)	Y	N	N	Y (48)	Y (48)	N	N	Y (49)	(50)
Ontario	Yes	Yes	Yes	No	No	Yes	Yes	No	No
Prince Edward Island	Y	Y	Y	Y	Y	Y	Y	N/A	Y (51)
Saskatchewan	Y	Y	Y	Y	Y	N	N	Y	N
Notes:	Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.								
1	Alaska - When a physician declares an employee to be medically stable.								
2	Arizona - TTD can be terminated upon return to work if the employee is making an amount equal to his average monthly wage—if he is earning less money, and is not underemployed, then he continues to receive 66 2/3 percent of the difference between his average monthly wage and his current earnings.								
3	Colorado - Release must be full duty without any restrictions.								
4	Colorado - TTD benefits can also be discontinued when a letter to the worker or copy of a written offer is delivered to the worker by the employer/insurer with a signed certificate indicating service, containing both the offer of modified employment (setting forth duties, wages, and hours) and a statement from an authorized treating physician that the employment offered is within the worker's physical restrictions. The worker then has three business days to return to work in response to an offer of modified duty. TTD benefits can also be suspended for failure to appear at a rescheduled medical appointment with an authorized medical provider (provided certain criteria are met), failure to attend an independent medical examination (provided certain criteria are met), death, for documented incarceration of the worker for a criminal conviction, and also if the worker receives a third party settlement that offsets the benefits owed pursuant to Statute 8-41-203, CRS and case law.								
5	Delaware - Once disability ceases (Title 19 Del.C. §2324), pursuant to an award of the IAB or agreement/receipt signed by the injured worker.								
6	Florida - If authorized.								
7	Georgia - If the authorized treating physician approves suitable light-duty work, such work is offered to the employee, and the employee unjustifiably refuses such employment, benefits may be suspended under O.C.G.A. 34-9-240.								
8	Georgia - If release is without restrictions.								
9	Georgia - By order of the Board when employees fail to cooperate with medical.								
10	Louisiana - La. 23:1201.4 Forfeiture of benefits while incarcerated; exclusions; medical expenses A. Except as provided in Subsection B of this Section, the employee's right to compensation benefits, including medical expenses, is forfeited during any period of incarceration, unless a workers' compensation judge finds that an employee has dependents who rely on a compensation award for their support, in which case said compensation shall be made payable and transmitted to the legal guardian of the minor dependent or other person designated by the workers' compensation judge and such payments shall be considered as having been made to the employee. After release from incarceration, the employee's right to claim compensation benefits shall resume. An employee who is incarcerated but is later found to be not guilty of felony criminal charges or against whom all felony charges have been dismissed by the prosecutor shall have the prescriptive period for filing a claim for benefits under this Chapter extended by the number of days he was incarcerated. B. When an employee has been assigned to a work release or transitional work program and has been injured as a result of such assignment, the provisions of this Section shall not be construed to limit the obligation of the employer to pay medical expenses to a health care provider when such medical expenses would be otherwise compensable under the Workers' Compensation Act.								

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Information on conditions under which a worker's temporary total disability (TTD) benefit payments can be discontinued.									
Jurisdiction	Circumstances Under Which TTD Can Be Discontinued (Y=Yes; N=No)								
	When a Worker Returns to Work	When a Worker Is Released by a Medical Provider to Return to Work	When the Worker Is Released by the Treating Provider to Return to Work	When a Medical Provider Determines That the Worker Has Reached MMI (or medical and stationary, maximum healing, etc.)	When the Treating Medical Provider Determines That the Worker Has Reached MMI (or medical and stationary, maximum healing, etc.)	Upon Written Notice to the Employee	Upon Written Notice to the Employee and the Employer Does Not Object Within a Specified Time Frame	After an Award or Discontinuation Notice by the WC Agency (WC Judge, WC commissioner, magistrate, hearing officer, etc.)	Other (see notes)
11	<p>Louisiana - La. 23:1208. Misrepresentations concerning benefit payments; penalty. A. It shall be unlawful for any person, for the purpose of obtaining or defeating any benefit or payment under the provisions of this Chapter, either for himself or for any other person, to willfully make a false statement or representation. B. It shall be unlawful for any person, whether present or absent, directly or indirectly, to aid and abet an employer or claimant, or directly or indirectly, counsel an employer or claimant to willfully make a false statement or representation. C.(1) Whoever violates any provision of this Section, when the benefits claimed or payments obtained have a value of ten thousand dollars or more, shall be imprisoned, with or without hard labor, for not more than ten years, or fined not more than ten thousand dollars, or both. (2) Whoever violates any provision of this Section, when the benefits claimed or payments obtained have a value of two thousand five hundred dollars or more, but less than a value of ten thousand dollars shall be imprisoned, with or without hard labor, for not more than five years, or fined not more than five thousand dollars, or both. (3) Whoever violates any provision of this Section, when the benefits claimed or payments obtained have a value of less than two thousand five hundred dollars, shall be imprisoned for not more than six months or fined not more than five hundred dollars, or both. (4) Notwithstanding any provision of law to the contrary which defines "benefits claimed or payments obtained", for purposes of Subsection C of this Section, the definition of "benefits claimed or payments obtained" shall include the cost or value of indemnity benefits, and the cost or value of health care, medical case management, vocational rehabilitation, transportation expense, and the reasonable costs of investigation and litigation. D. In addition to the criminal penalties provided for in Subsection C of this Section, any person violating the provisions of this Section may be assessed civil penalties by the workers' compensation judge of not less than five hundred dollars nor more than five thousand dollars payable to the Kids Chance Scholarship Fund, Louisiana Bar Foundation, and may be ordered to make restitution. Restitution may only be ordered for benefits claimed or payments obtained through fraud and only up to the time the employer became aware of the fraudulent conduct. E. Any employee violating this Section shall, upon determination by workers' compensation judge, forfeit any right to compensation benefits under this Chapter. F. Whenever the employer reports an injury to the office pursuant to R.S. 23:1306, the employer and employee shall certify their compliance with this Chapter to the employer's payor on a form prescribed by the assistant secretary, which form shall include all of the following information: (1) A summary of the fines and penalties for workers' compensation fraud. (2) The names, addresses, phone numbers, and signatures of the employee and the employer. (3) The fine or penalty that may be imposed for failure to report to the payor as required by this Section. G. Whenever an employee receives benefits pursuant to this Chapter for more than thirty days, the employee shall upon reasonable request report his other earnings to his employer's payor on a form prescribed by the assistant secretary and signed by the employee. H.(1) Whenever an employee fails to report to his employer's payor as required by this Section within fourteen days of his receipt of the appropriate form, the employer or payor may suspend the employee's right to benefits as provided in this Chapter. If otherwise eligible for benefits, the employee shall be entitled to all of the suspended benefits after the form has been provided to the payor. Suspension of benefits by the employer or payor shall be made in accordance with the provisions of R.S. 23:1201.1(A) through (E). The employer or payor may move for an order to compel the employee to return the form. (2) Whenever an employer fails to report to its payor as required by this Section, the employer may be subject to a penalty of five hundred dollars, payable to the payor. (3) The payor may request an assessment of a penalty for the employer's failure to report as provided in this Subsection by filing a form LDOL-WC-1008 with the assistant secretary. I.(1) No person acting gratuitously and without malice, fraudulent intent, or bad faith, shall be subject to civil liability for libel, slander, or any other relevant tort, and no civil cause of action of any nature shall exist against such person or entity by virtue of the filing of reports or furnishing of other information, either orally or in writing, relative to a violation by any person of the provisions of this Section. (2) The grant of immunity provided by this Subsection shall not abrogate or modify in any way any statutory or other privilege or immunity otherwise enjoyed by such person or entity.</p>								
12	<p>Louisiana - La. 23:1221.(3) Supplemental earnings benefits. (a)(i) For injury resulting in the employee's inability to earn wages equal to ninety percent or more of wages at time of injury, supplemental earnings benefits, payable monthly, equal to sixty-six and two-thirds percent of the difference between the average monthly wages at time of injury and average monthly wages earned or average monthly wages the employee is able to earn in any month thereafter in any employment or self-employment, whether or not the same or a similar occupation as that in which the employee was customarily engaged when injured and whether or not an occupation for which the employee at the time of the injury was particularly fitted by reason of education, training, and experience, such comparison to be made on a monthly basis. Average monthly wages shall be computed by multiplying his wages by fifty-two and then dividing the product by twelve. (ii) When the employee is entitled to monthly supplemental earnings benefits pursuant to this Subsection, but is not receiving any income from employment or self-employment and the employer has not established earning capacity pursuant to R.S. 23:1226, payments of supplemental earnings benefits shall be made in the manner provided for in R.S. 23:1201(A)(1). (b) For purposes of Subparagraph (3)(a), of this Paragraph, the amount determined to be the wages the employee is able to earn in any month shall in no case be less than the sums actually received by the employee, including, but not limited to, earnings from odd-lot employment, sheltered employment, and employment while working in any pain. (c)(i) Notwithstanding the provisions of Subparagraph (b) of this Paragraph, for purposes of Subparagraph (a) of this Paragraph, if the employee is not engaged in any employment or self-employment, as described in Subparagraph (b) of this Paragraph, or is earning wages less than the employee is able to earn, the amount determined to be the wages the employee is able to earn in any month shall in no case be less than the sum the employee would have earned in any employment or self-employment, as described in Subparagraph (b) of this Paragraph, which he was physically able to perform, and (1) which he was offered or tendered by the employer or any other employer, or (2) which is proven available to the employee in the employee's or employer's community or reasonable geographic region. (ii) For purposes of Subparagraph (i) of this Subparagraph, if the employee establishes by clear and convincing evidence, unaided by any presumption of disability, that solely as a consequence of substantial pain, the employee cannot perform employment offered, tendered, or otherwise proven to be available to him, the employee shall be deemed incapable of performing such employment. (d) The right to supplemental earnings benefits pursuant to this Paragraph shall in no event exceed a maximum of five hundred twenty weeks, but shall terminate: (i) As of the end of any two-year period commencing after termination of temporary total disability, unless during such two-year period supplemental earnings benefits have been payable during at least thirteen consecutive weeks; or (ii) After receipt of a maximum of five hundred twenty weeks of benefits, provided that for any week during which the employee is paid any compensation under this Paragraph, the employer shall be entitled to a reduction of one full week of compensation against the maximum number of weeks for which compensation is payable under this Paragraph; however, for any week during which the employee is paid no supplemental earnings benefits, the employer shall not be entitled to a reduction against the maximum number of weeks payable under this Paragraph; or (iii) When the employee retires; however, the period during which supplemental earnings benefits may be payable shall not be less than one hundred four weeks. (e)(i) The fact that an employee has suffered previous disability, impairment, or disease, or received compensation therefor, shall not preclude him from receiving benefits for a subsequent injury or preclude benefits for death resulting therefrom. (ii) If an employee receiving supplemental earnings benefits suffers a subsequent injury causing the payment of temporary total disability, permanent total disability, or supplemental earnings benefits, the combined benefits payable shall not exceed the maximum compensation rate in effect for temporary total disability at the time of the subsequent injury. Any reduction in benefits due to such limit shall be applied first to the supplemental earnings benefits payable as a result of the prior injury. (f) Any compensable supplemental earnings benefits loss shall be reported by the employee to the insurer or self-insured employer within thirty days after the termination of the week for which such loss is claimed. The assistant secretary shall provide by rule for the reporting of supplemental earnings benefits loss by the injured worker and for the reporting of supplemental earnings benefits and payment of supplemental earnings benefits by the employer or insurer to the office and may prescribe forms for such reporting. The office, upon request by the employer or insurer, shall provide verification through unemployment compensation records under the Louisiana Employment Security Law of any claimed supplemental earnings benefits loss and shall obtain such verification from other states, if applicable. (g) When an injured employee has been released to return to work with or without restrictions, and the employer maintains an established written and promulgated substance abuse policy which requires employer-administered drug testing prior to employment or return to work, upon the employee's failure to meet the requirements of such employer's established policy and inability to qualify for the position for that reason, the obligation for all benefits pursuant to this Chapter, with the sole exception of the obligation to provide reasonable and necessary medical treatment, shall be terminated and the employee shall be subject to the terms and conditions established in the employer's promulgated drug testing policy and program. The provisions of this Subparagraph shall not apply to prescription medication prescribed for the employee in the dosages so prescribed by a physician.</p>								
13	<p>Massachusetts - The insurer may discontinue or terminate benefits during that time by notifying the claimant in writing. Discontinuance must be filed with the DIA and is adjudicated by the Industrial Accident Board in the same manner an employee's claim for benefits would. See M.G.L. c. 152 Sec. 8.</p>								
14	<p>Massachusetts - Yes (for PWOP). The insurer may pay compensation for 180 weeks "without prejudice" or accepting liability. The insurer may discontinue or terminate benefits during that time by notifying the claimant in writing.</p>								
15	<p>Massachusetts - Must file request to discontinue with DIA.</p>								
16	<p>Michigan - Additionally, Michigan is a voluntary pay state. TTD benefits may be discontinued/disputed for failure to cooperate with vocational rehabilitation after an order by the Agency, and failure to accept & perform work within restrictions.</p>								
17	<p>Minnesota - If there are no physical restrictions.</p>								
18	<p>Minnesota - TTD benefits cease 90 days after MMI notice; or 90 days after an approved retraining plan ends.</p>								

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19	Minnesota - If discontinuance of TTD is part of the award or judge's decision.								
20	Minnesota - (1) If the worker withdraws from labor market; (2) disability ends and the worker fails to search for appropriate work; (3) the worker refuses an offer of appropriate work.								
21	Missouri - 2019 responses. No 2025 data were provided.								
22	Missouri - Injured worker still may be entitled to temporary partial disability benefits.								
23	Missouri - Employer shall notify the employee of the termination of compensation and the reason for such termination.								
24	Montana - Notice must be provided to the injured worker.								
25	Montana - TTD may be terminated at MMI if a medical provider determines that the worker has no permanent impairment. If at MMI the worker has a permanent impairment, TTD may be terminated following three additional criteria: 1) a medical provider's determination of physical restrictions, 2) a medical provider's determination that the worker can return to work in jobs identified by a vocational rehabilitation provider, and 3) written notice to the worker.								
26	Montana - Subject to RTW, release to RTW, and/or MMI.								
27	New Mexico - Treating providers or IME providers may place worker at MMI. TTD benefits can also be discontinued when the employer offers work to the worker at the preinjury wage and the offered work is within any work restrictions imposed by the medical providers.								
28	New York - Only if the treating provider releases the worker to return to work when he or she has reached MMI.								
29	North Carolina - For claims arising on or after 6/24/11, TTD that is being paid under N.C. Gen. Stat. §97-29(b) can be terminated after 500 weeks from the date of first disability unless the employee qualifies for extended compensation under N.C. Gen. Stat. §97-29(c).								
30	Oklahoma - Temporary compensation may be terminated according to statute if there is no CC-Form-3 on file. If there is a CC-Form-3 on file, temporary compensation may only be terminated by Commission order, except under circumstances enumerated in OAC 810:10-1-6.								
31	Oregon - Payments may need to continue until claim closure, and may later be determined to be an overpayment subject to recovery by the claims processor.								
32	Oregon - In general, insurers or self-insured employers may not end TTD benefits until written notice has been mailed or delivered to the worker and their attorney. Depending on the circumstances, additional conditions need to be met to end TTD. TTD benefits may be ended when the worker receives a written job offer from the employer specifying the duties, wages, and hours, along with a release from the attending physician that the employment offered is within the worker's physical restrictions. TTD benefits can also be suspended because the worker has missed a regularly scheduled appointment with the attending physician or authorized nurse practitioner (provided certain criteria are met). TTD benefits are not payable for periods of time during which the worker is incarcerated for commission of a crime or with some settlements. Additionally, TTD benefits can be suspended, under certain conditions, when approved by the director.								
33	Tennessee - Noncompliance with medical care.								
34	Tennessee - TTD can be terminated for refusal to accept light duty assignments that accommodate restrictions.								
35	Texas - An insurance carrier may suspend or reduce TTD benefit payments based on a release to return to work by a DWC-assigned designated doctor. An insurance carrier may also suspend or reduce TTD benefit payments based on an employer's bona fide offer of employment that is consistent with a doctor's (treating doctor, referral doctor, consulting doctor, or required medical examination doctor) certification of the employee's work abilities.								
36	US Federal Programs - FECA - Due process is provided prior to termination of benefits, except when the claimant returns to work with no wage loss or is convicted of fraud in connection with the receipt of OWCP benefits.								
37	Vermont - Under some circumstances.								
38	Vermont - After giving seven days' notice to employee and administrator.								
39	Vermont - Reaches end medical result and written notice.								
40	Virginia - Employer/insurer must file an application with the Commission and comply with Commission Rule 1.4 in order to suspend benefits.								
41	Wisconsin - No indemnity benefits payable if employee violated employer's drug or alcohol policy and violation was causal to injury.								
42	West Virginia - 60 days if the employee fails to provide evidence of ongoing disability (W. Va. Code §23-5-1a(b)(1) and W.Va. Code R. §85-1-7.2)								
43	Wyoming - Failure to comply with medical treatments or failure to attend appointment.								
44	British Columbia - TTD benefits may be terminated once the worker's temporary total disability ceases. [Policy item #35.30 of the RS&CM]								
45	New Brunswick - TTD may be reduced as estimated capable earnings increase as the injured worker recovers.								
46	New Brunswick - Injured workers' wage loss benefits continue until the loss of earnings ceases, the end of the month in which the injured worker reaches age 65, the injured worker has received benefits for a period not exceeding two years following the commencement of benefits when the injured worker is 63 years of age or more at the time of injury or recurrence, the disability no longer exists, or the occurrence of a personal intervening or any circumstance not related to the injury by accident has become the dominant cause of the workers' inability to return to work or participate in rehabilitation, whichever comes first. When loss of earnings benefits are discontinued, the worker may continue to be eligible for medical aid for the compensable injury (Workers' Compensation Act - sections 38.101(6), 38.101(7), 38.11(14), 38.11(15), 38.2(5), 38.2(6)).								
47	Nova Scotia - 2022 responses. No 2025 data were provided.								
48	Nova Scotia - TTD can be discontinued if the worker has the functional ability to return to work and work is suitable and reasonably available.								
49	Nova Scotia - TTD can be discontinued although the worker can appeal the decision to a higher court within a certain time frame.								
50	Nova Scotia - TTD can be discontinued if the employee does not cooperate in medical aid or treatment, or if the worker is released to return to work but refuses.								
51	Prince Edward Island - Benefits may be terminated if an investigation results in a finding of abuse or fraud. Benefits may also be terminated if the worker is non-compliant with treatment, does not cooperate in a medical assessment, does not participate in return to work or vocational rehabilitation program or does not provide required information.								

Information on how permanent total disability (PTD) benefits are calculated, the maximum and minimum paid, whether there is a cost of living escalator paid, the length of entitlement, and which offsets are allowed.									
Jurisdiction	Basis of PTD Calculation	Permanent Total Disability		Basis of Weekly Maximum Calculation	PTD Benefits Subject to Cost of Living Escalator	Maximum Length of PTD Benefits	Subject to the Following Offsets	Limit to Total Monetary PTD Benefit	Jurisdiction Has PTD (or death and PTD) Fund
		Weekly Minimum	Weekly Maximum						
Alabama	66 2/3% of the worker's preinjury weekly wage	\$311.00	\$1,130.00	100% of the SAWW	No	None	Disability plan paid for by the employer	None	N/A
Alaska	80% of the worker's spendable, after-tax, or net weekly wages	\$342.00	\$1,556.00	120% of the AAWW	No	If found to no longer be permanently and totally disabled	(1)	Up to the maximum TTD weekly rate; benefits continue until no longer PTD or death	No
Arizona	66 2/3% of the worker's average monthly wage	None	\$908.82	66 2/3% of the average monthly wage	No	None	None	None	No
Arkansas	66 2/3% of the worker's preinjury weekly wage	\$20.00	\$903.00	85% of the SAWW	No	Benefits are for length of disability and may be paid for life	Unemployment compensation; group disability or loss of income policies unless the injured worker has paid for the policy	There is a limitation of the weekly amount but not on the total amount	There is a PTD Fund, however, all claims must be filed by June 30, 2019. The employer is responsible for all payments after that date
California	2/3 of AWW, subject to minimum/maximum rates	\$252.03	\$1,680.29	2/3 of AWW, not to exceed maximum rate	Yes, rate increase subject to yearly increase in state average weekly wage	Lifetime	None	None	No
Colorado	66 2/3% of the worker's preinjury weekly wage	None	\$1,338.96	91% of the SAWW	No	Benefits are for the length of the disability and may be paid for life	Social Security, unemployment, and other	None	No
Connecticut	75% of spendable earnings	\$330.80, not to exceed 75% of employee's average weekly wage	\$1,654.00	Based on SAWW	Yes	None	None (2)	None	No
Delaware	66 2/3% of the difference between the wages received by the injured employee before the injury and the earning power of the employee thereafter (3)	\$295.12	\$885.34	66 2/3% of the SAWW	No	None	None	None	N/A
District of Columbia	66 2/3% of the worker's preinjury weekly wage	\$452.17	\$1,808.66	Based on clmt's AWW	Yes, shall not exceed 5%	None	None	None	No
Florida	66 2/3% of the worker's preinjury weekly wage	\$20, unless wages are less than \$20, then full wages	\$1,295.00	100% of the SAWW for the year the benefits are paid	3% of the compensation rate multiplied by the number of years postinjury and calculated each January 1st	Benefits are payable to age 75 for injuries occurring on or after 10-1-2003; if the injury occurred after age 70, benefits are payable during the continuance of PTD, not to exceed 5 years from the date of PTD	Social Security and unemployment benefits	None	No
Georgia	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Hawaii	66 2/3% of the worker's preinjury weekly wage	\$298	\$1,192.00	100% of the SAWW	Adjusted to the maximum benefit rate on January 1st every tenth year after January 1, 1992	None	None	None	No
Idaho	67% of the worker's AWW	\$160.95	\$965.70	90% of 2025 average state wage of \$1,073.00; the average state wage is established every January 1st	Weekly rate may change on January 1st, and after the first 52 weeks of TTD; then each year thereafter on January 1st, based on the increase in the ASWW	None	None	Weekly rate may change after the first 52 weeks of TTD and each year thereafter on January 1st, based on the increase in the ASWW	No
Illinois	Calculate 66 2/3% of the worker's AWW, subject to max. and min. levels	\$711.72 through 1/14/2024, \$715.42 beginning 1/15/2025	\$1,897.92 before 1/15/2024, \$1,907.79 from 1/15/2025	133 1/3% of the SAWW	Yes; increases start in the July after the second July following the date the award was entered	None	None	None	No
Indiana	66 2/3% of average weekly wage	\$50.00	\$780.00	Legislative decision	No	500 weeks	None	500 weeks	No

Information on how permanent total disability (PTD) benefits are calculated, the maximum and minimum paid, whether there is a cost of living escalator paid, the length of entitlement, and which offsets are allowed.									
Jurisdiction	Basis of PTD Calculation	Permanent Total Disability		Basis of Weekly Maximum Calculation	PTD Benefits Subject to Cost of Living Escalator	Maximum Length of PTD Benefits	Subject to the Following Offsets	Limit to Total Monetary PTD Benefit	Jurisdiction Has PTD (or death and PTD) Fund
		Weekly Minimum	Weekly Maximum						
Iowa	80% of the worker's spendable, after-tax, or net weekly wages	Based on AWW of \$351.00 and the employee's marital status and number of entitled exemptions	\$2,005.00	200% of the SAWW	No	No maximum	None	None	None
Kansas	66 2/3% of the worker's AWW	\$25.00	\$835.00	75% of the SAWW	No	Benefits are for length of disability and may be paid for life or until maximum of \$400,000.00 is reached	Social Security retirement	\$400,000.00	No
Kentucky	66 2/3% of injured worker's AWW subject to 110% of the SAWW	\$223.86	\$1,231.22	110% of the SAWW	No	Age 70 or a minimum of four years	Unemployment and employer-funded disability plan	None	No
Louisiana	66 2/3% of the worker's preinjury weekly wage	\$225 or actual wage, whichever is less	\$845.00	75% of the SAWW	No	Benefits are for length of disability and may be paid for life	Social Security, private disability, and/or retirement funded by the employer	None	No
Maine	1/1/1993–12/31/2012: 80% of the worker's spendable, after-tax, or net wage; 1/1/2013 and after: 2/3 of average gross weekly wages	None	DOI 1/1/1993–12/31/2012: \$746.37; DOI on/after 1/1/2013: \$829.30; on/after 1/1/2020: \$1,230; 7/1/2024 to 6/30/2025 \$1430.84	DOI 1/1/1993–12/31/2012: 90% of the SAWW; DOI on/after 1/1/2013: 100% SAWW; the maximum rate is 125% of the SAWW for injuries on/after 1/1/2020 for total and partial benefits	No, maximum amount tied to changes in SAWW	Benefits are for length of disability and may be paid for life	Social Security, wage continuation and disability plans, and pension or retirement plans established or maintained by the employer	None	No
Maryland	66 2/3% of the worker's preinjury weekly wage	\$25 or the worker's average weekly wage	\$1,493.00	100% of the SAWW	Yes	None	Social Security; WC benefits reduced to avoid diminution of Social Security disability insurance benefits; disability retirement paid to an employee of a governmental unit or a quasi-public corporation	\$45,000, except that benefit shall be paid for the period that the covered employee is permanently totally disabled	No
Massachusetts	66 2/3% of the worker's preinjury weekly wage	\$365.83	\$1,829.13	100% of the SAWW	Increases annually based on the CPI for the Northeast Urban region	None	Social Security	None	No
Michigan	80% of the worker's spendable, after-tax, or net weekly wages	\$323.06	\$1,164.00	90% of the SAWW	Recalculated yearly based on new yearly maximum effective January 1st	800 weeks post-DOI conclusive presumption with a factual determination thereafter	TTD benefits paid counts toward the 800 weeks conclusive presumption and offsets are similar to TTD	Payments cease upon death of claimant	See notes (4)
Minnesota	66 2/3% of the worker's preinjury wage	65% of the SAWW	108% of the SAWW for the preceding calendar year (5)	108% of the SAWW for the preceding calendar year	Yes	PTD benefits cease at age 72, but if the injury occurred after age 67 PTD benefits are paid for five years	After a total of \$25,000 of weekly compensation has been paid, the weekly benefit can be reduced by any disability benefits being paid by any government disability benefit program if the disability is occasioned by the same injury as the workers' compensation injury; this also applies to Social Security old age and survivor's benefits	None	MN does not have anything called a PTD Fund, but for dates of injury before 10/1/95 supplementary benefits are add-on benefits to PTD and they are reimbursed by the Special Compensation Fund. MN Stat § 176.129 (6)
Mississippi	66 2/3% of worker's AWW	\$25.00	\$630.73	66.23% x SAWW	No	450 weeks or until total compensation paid equals \$283,828.50	Disability benefits paid 100% by the employer; wages paid in lieu of compensation; advance payments made or excess TTD paid, which is considered an advance toward PD	\$283,828.50	No
Missouri as of January 1, 2019 (7)	66 2/3% of the worker's preinjury average weekly wage, not to exceed 105% of the state average weekly wage (SAWW), but see (8)	\$40.00	\$974.64 but see (8)	105% of the SAWW, but see (8)	No	None	None	None	

Table 5 Benefits for Permanent Total Disability Provided by Workers' Compensation Systems as of January 1, 2025									
Information on how permanent total disability (PTD) benefits are calculated, the maximum and minimum paid, whether there is a cost of living escalator paid, the length of entitlement, and which offsets are allowed.									
Jurisdiction	Basis of PTD Calculation	Permanent Total Disability		Basis of Weekly Maximum Calculation	PTD Benefits Subject to Cost of Living Escalator	Maximum Length of PTD Benefits	Subject to the Following Offsets	Limit to Total Monetary PTD Benefit	Jurisdiction Has PTD (or death and PTD) Fund
		Weekly Minimum	Weekly Maximum						
Montana	66 2/3% of the worker's preinjury wage	None	May not exceed the state's average weekly wage at time of injury	100% of the SAWW	Yes, after 104 weeks paid benefits; increases each year the same % as the increase in the SAWW	Payable until retirement	SSDI can reduce PTD by up to 1/2 of the federal weekly benefit	None	No
Nebraska	66 2/3% of the worker's preinjury wage	\$49.00	\$1,130.00	100% of the SAWW	No	Payable for the length of disability and may be for life	None	None	No
Nevada	66 2/3% of the worker's preinjury average monthly wage	No minimum	Based on PPD, age, AWW	66 2/3% of the average monthly wage	Yes	Up to 70 years of age	Social Security	Per maximum compensation limit and formula	No
New Hampshire	60% of the worker's preinjury weekly wage	\$427.87	\$2,139.00	150% of the SAWW	After 3 years from the date of injury and if denial of SS benefits, benefits are increased each July 1st (9)	Payable for the length of the disability	None	None	No
New Jersey	70% of worker's actual wage at time of injury	\$309.00	\$1,159.00	75% of the SAWW	No	Payable for the length of disability and may be for life	Social Security disability and public disability pension	None	(10)
New Mexico	66 2/3% of the worker's preinjury weekly wage	\$36.00	\$1,093.83	100% of the SAWW	No	Payable for the length of disability and may be for life	Private disability insurance paid by the employer and unemployment benefits	None	No
New York	66 2/3% of the worker's average weekly wage which is based on the worker's earnings in the 52 weeks prior to the injury	\$325.00, unless the worker's wages are less than \$325.00, then the worker receives the amount of the actual wages (11)	\$1,171.46	Maximum weekly benefit is calculated as 2/3 of the New York SAWW	No	Benefits are payable for the length of the permanent total disability, which is usually for the life of the claimant	None	None	No
North Carolina	66 2/3% of the workers' preinjury average weekly wage	\$30.00	\$1,380.00	AWW for the calendar year 2023, as determined by the Division of Employment Security, multiplied by 1.10 and rounded to its nearest multiple of two dollars (\$2.00)	No	Benefits, including medical compensation, shall be paid during the lifetime of the injured employee	Unemployment compensation; full retirement benefits under section 202(a) of the Social Security Act	No	No
North Dakota	66 2/3% of the worker's preinjury wage	\$727.00 (12)	\$1,514.00	125% of the SAWW	Increases each July 1st based on percentage change of SAWW	Payable until retirement at which time benefits switch to ABP (13)	Social Security Disability (65-05-09.1)	None	No
Ohio	66 2/3% of preinjury wage (14)	\$615.50 (15)	\$1,231.00 (15)	The maximum benefit is equal to the statewide average weekly wage for the date of injury or date of disability in an occupational disease claim	(16)	None	(17)	None	No
Oklahoma	70% of worker's AWW	None	\$1,083.46	70% of worker's AWW, not to exceed 100% of the SAWW	No	15 years or upon reaching Social Security retirement age, whichever is longer	None	None	No
Oregon	66 2/3% of the worker's pre-injury weekly wage	33% of the state average weekly wage (SAWW), \$439.39	133% of the SAWW, \$1,770.87	ORS 656.206(2)	Yes (18)	Lifetime plus benefits to surviving spouse and children	PTD benefits may be reduced by the amount of any Social Security disability benefits received. Offsets are also permitted to recover an overpayment or a penalty imposed for failure to attend an independent medical examination, but not to exceed 25 percent of each PTD payment without the worker's prior authorization. Finally, payable PTD is subject to an order to enforce child support obligations, up to 50% of moneys paid	No	No (18)
Pennsylvania	N/A (19)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	No

Information on how permanent total disability (PTD) benefits are calculated, the maximum and minimum paid, whether there is a cost of living escalator paid, the length of entitlement, and which offsets are allowed.									
Jurisdiction	Basis of PTD Calculation	Permanent Total Disability		Basis of Weekly Maximum Calculation	PTD Benefits Subject to Cost of Living Escalator	Maximum Length of PTD Benefits	Subject to the Following Offsets	Limit to Total Monetary PTD Benefit	Jurisdiction Has PTD (or death and PTD) Fund
		Weekly Minimum	Weekly Maximum						
Rhode Island	62% of average weekly wage	None	\$1,573.00	125% of the SAWW	Increases by % increase of the CPI (U.S. city average for urban wage earners and clerical workers) each May 10 after 52 weeks of disability	Payable for the length of disability and may be for life	Retirement benefits	None	No
South Carolina	66 2/3% of the worker's preinjury wage	\$75.00	\$1,134.43	100% of the SAWW	No	500 weeks (20)	None	500 weeks	No
South Dakota	66 2/3% of the worker's preinjury wage (21)	\$467.00	\$934.00	100% of the SAWW	Increases annually based on the CPI for urban wage earners and clerical workers, not to exceed 3%	For length of disability and can be for life	Social Security retirement (PTD benefits are then 150% of TTD less SS retirement)	None	No
Tennessee	66 2/3% of the worker's preinjury wage	\$185.55	\$1,237.00	100% of SAWW	No	Until "Old Age" Social Security-eligible age (or 260 weeks, where the date of injury is on or after age 60)	50% due to employer's contribution to "Old Age" Social Security (if employee is receiving Old Age SS benefits)	None	No
Texas	75% of the employee's AWW	\$183.00	\$1,219.00	100% of the state AWW; entitlement is based on specific loss of body parts/injuries; entitled for life	Yes, 3% increase annually based on date of eligibility	None	None	None	No
US Federal Programs - FECA	75% of the worker's preinjury wage if worker has dependents; 66 2/3% of preinjury wage if not	GS-2, step 1	GS-15, step 10	Benefits are based on salary levels and are paid for length of disability and may be paid for life	Each March 1st, after 1 full year of disability and is based on the price index	None	Social Security retirement on federal earnings	None	N/A
US Federal Programs - Longshore	66 2/3% of employee's AWW	\$499.78	\$1,999.10	33 U.S.C. § 906(b)(1)	Increases each October 1st as the national average weekly wage of production workers increases	During disability or life of the claimant	Credits for amounts paid under workers' compensation systems or recoveries from third parties	Maximum per week limit	Yes, for insolvent/defunct employers or if certain conditions are met. See 33 U.S.C. § 944 for more details
Utah	66 2/3% of the worker's AWW at the time of the injury not to exceed 85% of the SAWW	\$45.00 for the first 312 weeks; 36% of SAWW after 312 weeks	\$1,091.00	The maximum PTD benefit is reset every July 1st at 85% of the SAWW; the maximum PTD benefit payable is 66 2/3% of the worker's AWW, up to the maximum PTD benefit	No; the minimum benefit, however, is adjusted annually at 36% of the SAWW	PTD benefits are awarded for life, but PTD status may be reexamined by submitting employee to reasonable medical evaluations, rehabilitation and retraining efforts, disclosure of federal income tax returns	No	None	\$ 340,392.00, 6-year maximum
Vermont	66 2/3% of the worker's preinjury wage	\$588.00	\$1,763.00	150% of the SAWW	Increases each July 1st based on SAWW increase	For duration of total disability and can be for life	Credit for recoveries from third parties	None	No
Virginia	66 2/3% of the worker's preinjury wage	\$352.50	\$1,410.00	Maximum compensation rate is based on 100% SAWW at the time of the work accident	Changes each October 1st based on average CPI for all items	Can be lifetime	None	Applicable compensation rate	No
Washington	Depends on the option chosen by employee	(22)	\$2,057.03	120% of the SAMW	July 1st each year	For the length of disability and can continue for life	Social Security and Third Party recoveries	There is a maximum payment for lump sums only, up to \$8,500	A PTD-Pension fund that includes coverage for deaths
West Virginia	66 2/3% of the worker's preinjury weekly wage, not to exceed 100% of the average weekly wage in West Virginia	Federal minimum wage	\$1,067.12	The SAWW	No	Payable until age 70, for all PTD awards granted on or after 07/1/2003	(23)	None	N/A
Wisconsin	66 2/3% of the worker's preinjury wage	\$20.00 (24)	\$1,326.00	110% of the SAWW	No (25)	For length of disability and can be for life	Social Security Disability	None	(26)
Wyoming	66 2/3% of the worker's actual monthly wage, unless he or she earns less than 73% of the SWAMW—then it is 92% of the worker's actual monthly wages	None	\$986 (27)	66 2/3% of the SAWW	Yes	Paid for 80 months, less the number of months previously paid PPI and/or PPD. Eligible for extended PTD following PTD, must apply annually	None	None	No

Table 5 Benefits for Permanent Total Disability Provided by Workers' Compensation Systems as of January 1, 2025									
Information on how permanent total disability (PTD) benefits are calculated, the maximum and minimum paid, whether there is a cost of living escalator paid, the length of entitlement, and which offsets are allowed.									
Jurisdiction	Basis of PTD Calculation	Permanent Total Disability		Basis of Weekly Maximum Calculation	PTD Benefits Subject to Cost of Living Escalator	Maximum Length of PTD Benefits	Subject to the Following Offsets	Limit to Total Monetary PTD Benefit	Jurisdiction Has PTD (or death or PTD) Fund
		Weekly Minimum	Weekly Maximum						
Canadian Jurisdictions Participating (stated in Canadian currency)									
British Columbia	90% of the worker's average net earnings (28)	\$491.83 (29)	\$1,500.61 (30)	Based in part on maximum wage rate (set at \$116,700 for 2024), which is used in calculating a worker's average earnings (30)	Based on CPI. Indexing factors are determined annually (31)	Payable to age 65, or later if the Board is satisfied worker would work past age 65 (32)	50% of Canada Pension Plan disability benefit if payable	None	Compensation upon personal injury or death of a worker is paid out of the Board's accident fund (section 134 of the Act) (33)
New Brunswick	90% of loss of earnings (average net earnings minus net estimated capable earnings) (34)	N/A	\$1,117.49 for single worker and \$1,176.44 for claiming spouse	Based on New Brunswick Industrial Aggregate Earnings multiplied by 1.6	New Brunswick Industrial Aggregate Earnings indexed annually by the change in the consumer price index (CPI)	Until loss of earnings ceases or disability no longer exists, or when injured worker reaches 65 (35)	Canada Pension Plan disability benefits (CPPD) (36); supplements to compensation (37)	90% of loss of earnings (average net earnings minus net estimated capable earnings) (34)	No (38)
Nova Scotia as of January 1, 2022 (39)	75% of the worker's earnings loss for first 26 weeks, 85% of earnings loss after 26 weeks	\$1.00	\$1,326.92	Based on yearly maximum benefit (75% of your net earnings loss for up to 26 weeks after your injury occurs; after 26 weeks the TERB increases to 85% of your net earnings loss)	Adjusted each January 1st based on increase in the CPI	Payable until age 65	50% of CPP disability benefits	75% of the worker's earnings loss for first 26 weeks, 85% of earnings loss after 26 weeks	N/A
Ontario	Non-economic loss (NEL) awards are calculated using a base amount that is adjusted for the worker's age and multiplied by % of impairment (40)	N/A	N/A	Depending on the worker's age, the worker may be entitled to the maximum NEL base amount, which is multiplied by % of impairment	Adjusted each January 1st	NEL benefits may be paid as a lump sum or as a periodic payment, depending upon the amount	None	Limit would be in accordance with the annually indexed maximum base amount	
Prince Edward Island	Wages are average wage indexed to current year, and then the worker's loss of earning capacity is calculated at 90% of net	N/A	Based on maximum annual earning for the year of accident (\$82,900 in 2025)	Maximum annual earnings	Adjusted each July 1st	Payable to age 65	Collateral benefits received by the worker	Maximum annual earnings	No
Saskatchewan	90% of the worker's net income	\$609.16	\$2,010.21	Based on a covered annual wage of \$104,531	Increases on the anniversary of date of claim by the provincial CPI	For length of disability or until age 65	50% of any federal government disability payment related to the same injury	None	(41)
Notes: Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.									
1	Alaska - PTD benefits may be offset by disability benefits received under the Alaska Teachers' Retirement System, the Alaska Public Employees' Retirement System, or other employer-funded union or group retirement system. In addition, PTD benefits may be offset by retirement, survivor's, or disability benefits being received from the Social Security Administration.								
2	Connecticut - Depending on the date of loss, claimants may still be subject to offsets pursuant to C.G.S. Sec. 31-307(e) (repealed).								
3	Delaware - Such compensation shall not be more than 66 2/3 percent of AWW. The rate is calculated the same as in Table 4A.								
4	Michigan - Death benefits are payable pursuant to section 418.321. If death is from silicosis or other dust disease or employment in the logging industry weekly death benefits are reimbursed by the Silicosis Dust Disease and Logging Industry Compensation Fund after the payment of \$25,000 or 104 weeks, whichever is greater, under Rule R408.31a. If the employee had more than one employment at the time of injury, the claim may fall under the Second Injury Fund/Dual Employment Provision, R408.46.								
5	Minnesota - Maximum PTD is equal to maximum TTD which was increased as of 10/1/2024 from 102% of the SAWW to 108% of the SAWW.								
6	Minnesota - Supplementary benefits are paid as an additional benefit to PTD, to bring the total weekly benefit to 65 percent of the statewide average weekly wage (SAWW). MN Stat § 176.132. Supplementary benefits were repealed in 1995, and the date of injury controls the timing and payment thresholds for their receipt. Supplementary benefits are available to workers whose compensation rate is less than 65 percent of the SAWW. Supplementary benefits are also available to workers whose work comp benefit rates fall below that level due to the offset of Social Security retirement or government disability benefits related to the same disability as the work comp claim. Supplementary benefits are paid by the insurer or self-insured employer, but are reimbursed by the Special Compensation Fund upon the filing of an Annual Claim by the payor.								
7	Missouri - 2019 responses. No 2025 data were provided.								
8	Missouri - Mo. Rev. Stat. § 287.010.11, effective 01/01/2014, defines "occupational diseases due to toxic exposure" as the following: mesothelioma, asbestosis, berylliosis, coal worker's pneumoconiosis, bronchiolitis obliterans, silicosis, silicotuberculosis, manganism, acute myelogenous leukemia, and myelodysplastic syndrome. Mo. Rev. Stat. § 287.200.4, effective 01/01/2014, provides enhanced benefits to employees with "occupational diseases due to toxic exposure" which result in a Permanent Total Disability or Death as follows: (a) For occupational diseases due to toxic exposure, but not including mesothelioma, an amount equal to 200% of the State's Average Weekly Wage (as of the date of diagnosis) shall be paid to the employee for 100 weeks. (b) If the employee is diagnosed with mesothelioma (and if the employer has accepted mesothelioma liability) an amount equal to 300% of the State's Average Weekly Wage shall be paid to the employee for 212 weeks—provided that any employee who obtains benefits for asbestosis and who later obtains an award for mesothelioma shall not receive more benefits than such employee would receive having only obtained benefits for mesothelioma. (c) The amounts due to the employee during his or her lifetime for an award of Permanent Total Disability due to any other compensable cause shall be paid to the employee after the enhanced benefits for "occupational diseases due to toxic exposure" have been exhausted. (d) Should the employee die before all of the enhanced benefits for "occupational diseases due to toxic exposure" have been paid, the remainder of the enhanced benefits are payable to the employee's spouse or children, natural or adopted, legitimate or illegitimate, in addition to the benefits provided for a death due to any other compensable cause. If there is no surviving spouse or children and the employee, in his or her lifetime, has not received all of the enhanced benefits for "occupational diseases due to toxic exposure," the remainder of such enhanced benefits shall be paid as a single payment to the estate of the employee.								
9	New Hampshire - The cost of living increase is calculated by finding the percentage of the employee's AWW to the SAWW at the time of injury and applying the same percentage to the SAWW at the time of the increase, then taking 60% of the increased AWW.								
10	New Jersey - The Second Injury Fund provides benefit payments to those injured workers who are already partially disabled who subsequently experience a work-related injury which together render them permanently and totally disabled. Due to amendments to the NJ WC law in 1980, provisions were made for cost of living increases for totally and permanently disabled workers, dependents of deceased workers, and Second Injury Fund beneficiaries whose date of injury or death occurred prior to January 1, 1980.								

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Jurisdiction	Basis of PTD Calculation	Permanent Total Disability		Basis of Weekly Maximum Calculation	PTD Benefits Subject to Cost of Living Escalator	Maximum Length of PTD Benefits	Subject to the Following Offsets	Limit to Total Monetary PTD Benefit	Jurisdiction Has PTD (or death and PTD) Fund
		Weekly Minimum	Weekly Maximum						
11	New York - The weekly minimum is determined based on the date of accident. For accidents occurring after May 1, 2013, through December 31, 2023, the minimum benefit amount is \$150.00 per week; for accidents occurring on or after January 1, 2024, the minimum benefit amount is \$275.00 per week; for accidents occurring on or after January 1, 2025, and before July 1, 2026, the minimum benefit amount is \$375.00 per week; and for accidents occurring on or after July 1, 2026, and on or after July 1st of each succeeding year shall be one-fifth of the New York Statewide Average Weekly Wage for the year in which it is reported.								
12	North Dakota - The minimum benefit is equal to 60 percent of the SAWW unless the amount exceeds the employee's net wages, in which case the employee receives net wages as a weekly compensation rate.								
13	North Dakota - ABP benefits are additional benefits payable. Benefit and amount are based on the duration of the disability prior to retirement (NDCC 65-05-9.4).								
14	Ohio - The basis of PTD calculation is 66 2/3 percent of the worker's preinjury weekly wage not to exceed the maximum for the date of injury or date of disability in occupational disease claims.								
15	Ohio - Minimum and maximum are determined based on date of injury or date of disability in occupational disease claims.								
16	Ohio - There is a separate Disabled Worker Relief Fund benefit that provides a cost of living escalator.								
17	Ohio - Social Security: in the event the weekly workers' compensation amount when combined with disability benefits received pursuant to the Social Security Act is less than the statewide average weekly wage as defined in division (C) of section 4123.62 of the Revised Code, then the maximum amount of weekly compensation shall be the statewide average weekly wage as defined in division (C) of section 4123.62 of the Revised Code. At any time that Social Security disability benefits terminate or are reduced, the workers' compensation award shall be recomputed to pay the maximum amount permitted under this division.								
18	Oregon - The Retroactive Program of the Workers' Benefit Fund provides increased benefits when the benefits paid under the laws in effect on the date of injury are lower than are currently being paid for like injuries.								
19	Pennsylvania - However, wage-loss benefits may continue for life.								
20	South Carolina - Claimants rendered a paraplegic, quadriplegic, or who sustain physical brain damage because of a compensable injury are not subject to the 500 week limitation. S.C. Code Ann. § 42-9-10(C).								
21	South Dakota - If the weekly wage is below 50 percent of the SAWW, the calculation is wages, less income tax and Social Security.								
22	Washington - The Washington State Legislature has increased the minimum workers' compensation benefits for claims with dates of injury (DOI) or date of manifestation (DOM) on or after July 2, 2008. -15 percent of the state average monthly wage (SAMW) + \$10.00 for spouse + \$10.00 for each dependent child up to five dependent children; -100 percent of the worker's gross monthly wage; and -Minimum time-loss rate in effect prior to July 2, 2008.								
23	West Virginia - PTD benefits may be partially offset by current wages if the employee is working.								
24	Wisconsin - PTD rate based on two-thirds of wage up to maximum TTD rate for year of injury. Minimum wage per s. 102.11 is \$30. Therefore, minimum PTD rate would be \$20. However, this is obsolete and would only come up in circumstances in which the employer was licensed to pay subminimum wage (e.g., sheltered workers).								
25	Wisconsin - Supplemental benefit payments may be due. Currently only paid on dates of injury prior to January 1, 2003. See s. 102.44(1), Wis. Stats.								
26	Wisconsin - Work Injury Supplemental Benefit Fund (WISBF) pays benefits to individuals or dependents under three different benefit programs: 1. Additional death benefits for children; 2. Pre-existing disability, indemnity benefits; and 3. Payment of certain barred claims. The WISBF is funded through statutory assessments against insurance carriers and employers for specified injuries, such as dismemberment and death claims. Sec. 102.65, Wis. Stats.								
27	Wyoming - Wyoming Workers' Compensation calculates all payments/wages based on a monthly rate, rather than a weekly rate. Each claimant's payment depends on their gross monthly wage on the date of injury and cannot exceed the statewide average monthly wage.								
28	British Columbia - To determine average weekly wage rate, start with calculated gross annual earnings based on earnings at the time of injury. The annual earnings are rounded up to the nearest hundred. Probable taxes (Fed/Prov/PPP/EI) are deducted to determine calculated net earnings. The compensable weekly amount is then 90% of the calculated net earnings.								
29	British Columbia - Calculated using the monthly minimum amount of \$2,131.27 for 2024 [See section 194(2), Act]. If the worker is permanently and totally disabled, they will receive the full weekly minimum of \$491.83 even if their earnings are less than this amount.								
30	British Columbia - The weekly maximum is based on the 2024 maximum annual wage rate of \$116,700 [90% x (\$116,700 - federal tax - provincial tax - Canada Pension Plan contributions - employment insurance premium)]. The actual amount would depend on the percentage of disability and taxation status, status for Canada Pension Plan Disability, and employment insurance used in the calculation of net. [Policy item #69.00 of the RS&CM]. See 2024 Net Compensation Table at WorkSafeBC.com. The maximum wage rate as of January 1, 2025 is \$121,500.								
31	British Columbia - The indexing factor is applied on January 1 of each year to periodic payments of compensation to be paid in the calendar year. See Policy item #51.00 of the RS&CM.								
32	British Columbia - See Item C6-41.00 of the RS&CM. The services, benefits and supports may be provided after age 65 if they are required due to the worker's permanent total disability (Item C18-116.30 of the RS&CM).								
33	British Columbia - Chapter 8 of the RS&CM sets out compensation entitlement on the death of a worker. Item C8-52.00 of the RS&CM provides that compensation is payable under section 134(1) and section 136(1) of the Act, where the death of a worker arises out of and in the course of employment or is caused by an occupational disease that is due to the nature of any employment in which the worker was employed. Compensation is paid out of the Board's accident fund. Compensation is payable to the worker's dependents or in some cases to non-dependent family members having a reasonable expectation of pecuniary benefit from the continuation of the life of the deceased worker. WorkSafeBC will also pay for funeral and other death expenses following the death of a worker. Maximum payment for funeral expenses for 2022 is \$10,189.22 and transportation costs are also provided to a maximum of \$1,609.83.								
34	New Brunswick - Earnings are adjusted by contributions under the Canada Pension Plan, premiums under the Employment Insurance Act, and income tax rates for the current year. There is a lump-sum permanent physical impairment award provided under sections 38.101(9), 38.11(17) and 38.2(8) of the Workers' Compensation Act and calculated in accordance to Regulation 82-165 - Permanent Physical Impairment Rating Schedule Regulation - Workers' Compensation Act.								
35	New Brunswick - Also ceases when injured worker has received benefits for a period not exceeding two years following the commencement of benefits when the injured worker is 63 years of age or more at the time of injury or recurrence.								
36	New Brunswick - Canada Pension Plan disability benefit (CPPD): worker's benefits reduced by CPPD amount attributable to the compensable injury.								
37	New Brunswick - Remuneration received during the worker's compensation period but earned prior to the compensation period shall not be deducted from loss of earning benefits. Examples include but are not limited to vacation pay, bonuses, sick leave benefits.								
38	New Brunswick - All monies collected are placed into the Accident Fund and funds all benefits.								
39	Nova Scotia - 2022 responses. No 2025 data were provided.								
40	Ontario - For the purpose of answering questions related to PTD benefits, the assumption is that it is a NEL benefit that is awarded as a result of a permanent impairment. This would be in addition to benefits for loss of earnings.								
41	Saskatchewan - In Saskatchewan, the WCB is legislated under The Workers' Compensation Act, 2013 to maintain an Injury Fund sufficient to finance injured worker claims including wage loss, lump sums to assist with the necessary expenses of the death of the worker, including burial, physical and vocational rehabilitation, prevention initiatives and other obligations under the Act. This includes benefits for PTD situations. The WCB may establish additional reserves to meet losses arising from a disaster or other circumstance which would, in the opinion of the WCB, unfairly burden employers. These reserves are maintained in addition to the Injury Fund.								

Information on the approach used for the payment and calculation for permanent partial disability (PPD) benefits, the maximum and minimum, any limitations placed on unscheduled injuries and, if a rating guide is used, which one.									
Jurisdiction	Types of PPD Benefits Offered	Basis of Weekly PPD Calculation	Basis of PPD Calculation (if not weekly)	PPD Disability Benefit		Basis of Weekly Maximum Calculation	Maximum PPD Benefits for Unscheduled Injuries	Statutory Requirements for Use of Specific Rating Guide	
				Weekly Minimum	Weekly Maximum			Yes/No	AMA Guide Required
Alabama	Statutory scheduled PPD benefits; benefits based on actual wage losses; benefits based on an estimated loss of wage-earning capacity; unscheduled PPD based on functional impairment alone; benefits are paid more like a percentage of PTD	66 2/3% AWW	N/A	None	\$220.00	Statutory cap of \$220	300 weeks	Yes	4th Edition
Alaska	Scheduled permanent partial impairment benefits (1)	N/A	% of impairment x \$273,000	(2)	(2)	120% of the state average weekly wage	No unscheduled PPD	Yes	6th Edition 2024
Arizona	Statutory scheduled PPD benefits; benefits based on functional impairment or total loss; unscheduled PPD benefits based on actual wage loss/loss of earning capacity plus other factors, such as age, education, occupation, work experience, limitations	N/A	Monthly	None	Scheduled injuries based upon the schedule, unscheduled injuries based upon the average monthly wage	Unscheduled injuries 55% of the difference between average monthly wage and earning capacity	None	If applicable	Latest edition
Arkansas	Statutory scheduled PPD benefits based on objective anatomical rating based on AMA Guides, 4th Edition; unscheduled PPD benefits; benefits based on objective anatomical rating based on AMA Guides, 4th Edition plus other wage-loss disability factors, such as age, education, and occupation	75% of TTD rate; 100% of TTD rate if below \$205.35 per week; 100% of TTD rate if total loss or amputation of scheduled injury	N/A	\$20.00	\$677.00	75% of 85% of the SAWW	450-week maximum for all disability (3)	Yes	4th Edition
California	Statutory scheduled PPD benefits; PD level translates to number of weeks as set by legislature	2/3 of AWW, subject to minimum and maximum rates	N/A	\$160.00	\$290.00	Set by legislature	N/A	Yes	5th Edition
Colorado	Statutory scheduled PPD benefits; unscheduled PPD benefits based on functional impairment plus age and TTD rate (4)	For statutory scheduled PPD benefits: % of PPD x number of weeks (based on body part injured) x rate (based on date of injury); for nonscheduled PPD benefits: % of PPD x age factor x TTD rate x 400 weeks (4)	For statutory scheduled PPD benefits: % of PPD x number of weeks (based on body part injured) x rate (based on date of injury); for nonscheduled PPD benefits: % of PPD x age factor x TTD rate x 400 weeks (4)	\$150.00	\$420.17 is the set weekly rate for all scheduled injuries; \$735.67 is the weekly maximum for nonscheduled injuries	Legislature set the scheduled maximum which increases each July 1st based on increase in the SAWW; unscheduled weekly maximum is paid at the TTD rate but not more than 50% of the SAWW at the time of injury and not less than \$150 (4)	400 weeks (5)	Yes	3rd Edition (revised)
Connecticut	Statutory scheduled PPD benefits	75% of spendable, after-tax, or net wages	N/A	\$50.00	\$1,191.00	100% of production wage	780 weeks (6)	No	Discretionary
Delaware	Statutory scheduled PPD benefits; benefits based on actual wage losses; unscheduled PPD based on functional impairment alone; injured worker can receive both TTD/TPD benefits while receiving PPD benefits	Number of weeks multiplied by 66 2/3% of the injured worker's AWW fixed at the date of the permanent impairment	N/A	\$295.12	\$885.34	66 2/3% of the SAWW	300 weeks	No	N/A
District of Columbia	Statutory scheduled PPD benefits; 32-1508 Compensation for disability	CR times the number of designated weeks for body part (7)	None	\$452.17	\$1,808.66		500-week limit for PPD disability; worker may petition for an additional 167 weeks	Yes	Most recent edition of the AMA guidelines
Florida	Statutory scheduled PPD benefits; benefits paid at 75% of the average TTD (reduced by 50% if return to work at same or higher preinjury wages)	75% of the average TTD rate, reduced by 50% if wages are equal to or higher than preinjury	N/A	\$20 or actual wages if AWW less than \$20	\$1,295.00	100% of the SAWW	2 weeks for each % of impairment from 1–10%; 3 weeks from 11–15%; 4 weeks from 16–20%; and 6 weeks for each rating over 21%	Yes, the Florida Uniform Permanent Impairment Rating Schedule	N/A
Georgia	Statutory scheduled PPD benefits	Paid at TTD rate	N/A	\$50.00	\$800.00	Set by the legislature	300 weeks	Yes	5th Edition

Table 6 Permanent Partial Disability Benefits Provided by Workers' Compensation Systems as of January 1, 2025									
Information on the approach used for the payment and calculation for permanent partial disability (PPD) benefits, the maximum and minimum, any limitations placed on unscheduled injuries and, if a rating guide is used, which one.									
Jurisdiction	Types of PPD Benefits Offered	Basis of Weekly PPD Calculation	Basis of PPD Calculation (if not weekly)	PPD Disability Benefit		Basis of Weekly Maximum Calculation	Maximum PPD Benefits for Unscheduled Injuries	Statutory Requirements for Use of Specific Rating Guide	
				Weekly Minimum	Weekly Maximum			Yes/No	AMA Guide Required
Hawaii	Statutory scheduled PPD benefits; unscheduled PPD based on functional impairment alone; unscheduled PPD benefits based on functional impairment plus other disability factors, such as age, education, and occupation	The payout is based on the average weekly wage multiplied by 66 2/3%	N/A	\$298.00	\$1,192.00	100% SAWW	312 weeks	Yes	5th Edition
Idaho	Statutory scheduled PPD benefits (55% of the average weekly state wage for the year of injury); benefits based on an estimated loss of wage-earning capacity (based on a % of loss of labor market); unscheduled PPD based on functional impairment plus other disability factors, such as age, education, and occupation (based on medical and non-medical factors)	55% of the SAWW for the year of injury	N/A	\$590.15	55% of the SAWW for the year of injury (8)	55% of the SAWW for the year of injury	500 weeks	No	N/A
Illinois	Statutory scheduled PPD benefits; benefits based on actual wage losses; benefits based on an estimated loss of wage-earning capacity; unscheduled PPD based on functional impairment plus other disability factors, such as age, education, and occupation	Multiply employee's AWW times 60%, subject to max. and min. levels	N/A	\$373.33	\$1,907.79	Multiply previous maximum times change in SAWW	500 weeks	Yes	Most recent
Indiana	None	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Iowa	Statutory scheduled PPD benefits; benefits based on an estimated loss of wage-earning capacity; unscheduled PPD based on functional impairment plus other disability factors, such as age, education, and occupation; unscheduled PPD benefits using a tiered approach, where the rating takes into account return-to-work status (whether release to work or actual return to work)	80% of the worker's spendable, after-tax, or net weekly wages	N/A	Lower of \$398 or Injured Employee's Spendable Earnings	\$2,092.00	184% of the SAWW	500 weeks	No (9)	
Kansas	66 2/3% of the worker's AWW	66 2/3% of preinjury AWW up to the maximum	N/A	\$25.00	\$835.00	75% of the SAWW	415 weeks	Yes	6th Edition as of 1/1/2019
Kentucky	Unscheduled PPD benefits based upon permanent impairment rating and statutory modifiers	66 2/3% worker's AWW subject to maximum of 82.5% of the SAWW x permanent impairment rating as determined by AMA Guides x statutory grid factor contained in KRS 342.730(1)(b) x other specific factors if applicable	N/A	None	\$923.41	82.5% of the SAWW	425 weeks if disability rating is 50% or less; 520 weeks if disability rating is over 50%; limited to age 70 or a minimum of four years	Yes	5th Edition
Louisiana	Statutory scheduled PPD benefits and/or Supplemental Earnings Benefits	Per La. R.S. 1221(3) and La. R.S. 1221(4)	Per La. R.S. 23:1221	\$225.00	\$845.00	75% of the SAWW	N/A	Yes	Yes, most recent edition of the American Medical Association's "Guides to the Evaluation of Permanent Impairment". Per La. R.S. 1221(4)(q)

Information on the approach used for the payment and calculation for permanent partial disability (PPD) benefits, the maximum and minimum, any limitations placed on unscheduled injuries and, if a rating guide is used, which one.									
Jurisdiction	Types of PPD Benefits Offered	Basis of Weekly PPD Calculation	Basis of PPD Calculation (if not weekly)	PPD Disability Benefit		Basis of Weekly Maximum Calculation	Maximum PPD Benefits for Unscheduled Injuries	Statutory Requirements for Use of Specific Rating Guide	
				Weekly Minimum	Weekly Maximum			Yes/No	AMA Guide Required
Maine	Statutory scheduled PPD benefits; benefits based on an estimated loss of wage-earning capacity (10)	1/1/1993–12/31/2012: 80% of the worker's spendable, after-tax, or net wage; 1/1/2013 and after: 2/3 of average gross weekly wages	N/A	None	DOI 1/1/1993–12/31/2012: \$746.37; DOI on/after 1/1/2013: \$829.30; on/after 1/1/2020: \$1,230	DOI 1/1/1993–12/31/2012: 90% of the SAWW; DOI on/after 1/1/2013: 100% SAWW; the maximum rate is 125% of the SAWW for injuries on/after 1/1/2020 for total and partial benefits	1/1/1993–12/31/2012: 520 weeks or for duration of disability if PI rating is greater than a threshold of approximately 13.4%; on/after 1/1/2013: 520 weeks; longer if PI > 18% & earning 65% or less of AWW & worked 12 months out of 24-month period before benefits end	Yes	4th Edition
Maryland	Three types: where award is less than 75 weeks, awards from 75 to less than 250 weeks, or "serious disability" (11)	Worker's AWW (11)			< 75 weeks: \$250 75 to < 250 weeks: \$498 Serious: \$1,120 (11)	(Minor) Under 75 weeks: 33½ times worker's AWW not to exceed 16.7% of SAWW 75 up to < 250 weeks: ½ of workers wage not to exceed ½ of SAWW Serious disability: ¾ of workers wage not to exceed 75% of SAWW (12)	\$1,120		
Massachusetts	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Michigan	None	No scheduled PPD paid	N/A	N/A	N/A	N/A	N/A	No	N/A
Minnesota	See two columns to right	See column to right	PPD benefits are determined by impairment rating (percentage of whole body) in conjunction with statutory payment table that indicates benefit per rating point depending on impairment rating	(13)	(13)	By statutory formula	Rated by analogy to similar scheduled injury	No (13)	
Mississippi	Statutory scheduled PPD benefits; benefits based on actual wage losses; benefits based on an estimated loss of wage-earning capacity	Wage difference or medical impairment rating if injury is scheduled	N/A	No minimum	\$630.73	66 2/3% x SAWW	450 weeks	Yes	Most current
Missouri as of January 1, 2019 (14)	PPD benefits are a lump sum based on the weekly statutory value assigned to the injured body part	66 2/3% of worker's preinjury average weekly wage, not to exceed 55% of the state average weekly wage (SAWW)	N/A	None	\$496.38 (15)	55% of the SAWW	400 weeks	No	N/A
Montana	Awards PPD benefits only to injured workers who suffer a whole person impairment rating greater than zero and a wage loss or to injured workers with a Class 2 or greater impairment rating converted to a whole person and no wage loss	66 2/3% of preinjury wage	N/A	None	\$542.00	50% of the SAWW	400 weeks	Yes	6th Edition

Information on the approach used for the payment and calculation for permanent partial disability (PPD) benefits, the maximum and minimum, any limitations placed on unscheduled injuries and, if a rating guide is used, which one.									
Jurisdiction	Types of PPD Benefits Offered	Basis of Weekly PPD Calculation	Basis of PPD Calculation (if not weekly)	PPD Disability Benefit		Basis of Weekly Maximum Calculation	Maximum PPD Benefits for Unscheduled Injuries	Statutory Requirements for Use of Specific Rating Guide	
				Weekly Minimum	Weekly Maximum			Yes/No	AMA Guide Required
Nebraska	Statutory scheduled PPD benefits; benefits based on actual wage losses; benefits based on an estimated loss of wage-earning capacity; unscheduled PPD based on functional impairment plus other disability factors, such as age, education, and occupation	66 2/3% of the worker's AWW	N/A	\$49.00	\$1,130.00	100% of the SAWW	300 weeks	No	
Nevada	Statutory scheduled PPD benefits; benefits based on actual wage losses (note maximum compensation limits); benefits are paid more like a percentage of PTD	66 2/3% of the worker's AWW	0.666% of the workers' average monthly wage is paid for each 1% of disability as rated under the AMA Guides	No minimum	Variable	150% of the SAWW	PPD benefits paid for 5 years or to age 70, whichever is later	Yes	5th Edition
New Hampshire	Statutory scheduled PPD benefits (16)	60% of AWW	N/A	\$427.87	\$2,139.00	150% of the SAWW	350 weeks for a whole-person award	Yes	5th Edition
New Jersey	Statutory scheduled PPD benefits	70% of the worker's preinjury weekly wage	N/A	\$35.00	\$1,159.00	75% of the SAWW	600 weeks	No	N/A
New Mexico	Statutory scheduled PPD benefits, plus other disability factors, such as age, education and physical capacity	66 2/3% of the worker's AWW	N/A	None	\$1,093.83	100% of the SAWW	500 weeks if the rating is less than 80%, 700 weeks if rating is greater	Yes	Most recent edition
New York	Statutory scheduled PPD benefits based on loss of use; and nonscheduled PPD benefits based on actual wage losses or based on an estimated loss of wage-earning capacity. Unscheduled PPD based on impairment, functional impairment, and vocational factors such as age, education, skills, English proficiency, and occupation	(17)	N/A	\$325.00 (18)	\$1,171.46	Weekly maximum benefit is 2/3 of the New York SAWW (19)	\$615,016.50 (20)	(21)	N/A
North Carolina	(22)	66 2/3% of the workers' preinjury average weekly wage	N/A	\$30.00	\$1,380.00	110% of SAWW	\$20,000	N/A- PPD is governed by N.C. Gen. Stat. §97-31, which, among other things, lists body parts that have been assigned values in the form of number of weeks of compensation that is payable for their loss. After an injured worker reaches maximum medical improvement, the physician often will be asked to assign an impairment rating to the injured body part(s).	North Carolina does not require use of any AMA Guide. North Carolina has its own guide, which is called the N.C. Industrial Commission Rating Guide and which was last updated February 15, 2000. A link to that guide can be found here: https://www.ic.nc.gov/ncic/pages/ratinggd.htm . It should be noted, as the guide states, that it is only a guide and that the final impairment rating should be entirely the examining doctor's independent opinion based on his or her own knowledge, experience and clinical examination
North Dakota	Statutory scheduled PPI benefits; unscheduled PPI based on whole body impairment	N/A	PPI rate (35% of SAWW) multiplied by the permanent impairment multiplier tied to the percentage of whole body impairment (23)	N/A	N/A	N/A	100% impairment based on lump-sum payment	Yes	6th Edition

Information on the approach used for the payment and calculation for permanent partial disability (PPD) benefits, the maximum and minimum, any limitations placed on unscheduled injuries and, if a rating guide is used, which one.									
Jurisdiction	Types of PPD Benefits Offered	Basis of Weekly PPD Calculation	Basis of PPD Calculation (if not weekly)	PPD Disability Benefit		Basis of Weekly Maximum Calculation	Maximum PPD Benefits for Unscheduled Injuries	Statutory Requirements for Use of Specific Rating Guide	
				Weekly Minimum	Weekly Maximum			Yes/No	AMA Guide Required
Ohio	Statutory scheduled PPD benefits; benefits based on actual wage losses; benefits based on an estimated loss of wage-earning capacity	33 1/3% of the AWW; two weeks of %PP for each percent of impairment	N/A	No minimum	\$410.33	33 1/3% of the SAWW	200 weeks	No	By policy, 5th Edition
Oklahoma	Scheduled and unscheduled losses	70% of the employee's AWW not to exceed \$360	N/A	None	\$360.00	Statutory	350 weeks	Yes	Most current
Oregon	Impairment is the loss of use or function of a body part or system; and Work disability, for workers who cannot return to regular work, is impairment modified by social-vocational factors: age, education, and adaptability to perform a given job	N/A	Impairment = % of whole person impairment x 100 x state AWW; Work disability = (% of whole person impairment + social-vocational factor) x 150 x worker's AWW (24)	N/A	N/A	N/A	\$510,343.31 (25)	No	Oregon has its own disability rating standards, established under Oregon Administrative Rules Chapter 436, Division 035
Pennsylvania	66 2/3% of the difference between the employee's pre-injury AWW and their post-injury AWW or earning power	The employee's earning power (26)	N/A	N/A	\$1,347.00	SAWW	500 weeks	Yes	6th edition of the AMA Guides (second printing April 2009)
Rhode Island	Loss of use and loss of hearing	Weekly payment based on 50% of the AWW	N/A	\$90.00	\$180.00	Per statute 28-33-19, 1/2 the average weekly earnings but no more than \$180 and no less than \$90	500 weeks	No	N/A
South Carolina	Statutory scheduled PPD benefits; benefits based on actual wage losses; unscheduled PPD based on functional impairment plus other disability factors, such as age, education, and occupation	66 2/3% of the difference between the pre-injury AWW and the post-injury AWW	N/A	N/A	Depends on scheduled body part	100% of the SAWW	340 weeks (27)	No	N/A
South Dakota	Statutory scheduled PPD benefits; unscheduled PPD based on functional impairment alone	66 2/3% of the worker's AWW	N/A	\$533.00	\$1,066.00	100% of the SAWW	312 weeks	Yes	6th Edition
Tennessee	Statutory PPD benefits	Percentage of the impairment multiplied by 450 weeks multiplied by 2/3 of AWW, up to the SAWW (additional multipliers may apply if no return to work)	N/A	\$185.55	\$1,237.00	100% of SAWW	450 weeks	Yes	6th edition AMA Guides
Texas	For Impairment Income Benefits (IIBs): unscheduled PPD based on functional impairment alone; for Supplemental Income Benefits (SIBs): unscheduled PPD after IIBs expire for each quarter of eligibility	For IIBs: 70% of AWW, subject to maximums and minimums	For SIBs: 80% of the difference between 80% of the injured employee's pre- and post-injury AWW, subject to maximums. SIBs are paid monthly	\$183.00	\$853.00	70% of the state AWW	For IIBs: 300 weeks; for SIBs: maximum duration for all income benefits is 401 weeks after the injured employee's date of injury	Yes	4th Edition (28)
US Federal Programs - FECA	Statutory scheduled PPD benefits; benefits based on actual wage losses; benefits based on an estimated loss of wage-earning capacity	Based on pay rate on date of injury, date disability began, or date disability recurred	N/A	GS-2, step 1	GS-15, step 10	Maximum and minimum are based on federal GS pay schedules	None	Yes	No (29)
US Federal Programs - Longshore	Statutory scheduled PPD benefits; benefits based on an estimated loss of wage-earning capacity	66 2/3% of the worker's AWW	2/3 of difference between the wage at injury and the post-injury wage	None	\$1,999.10	200% of the national AWW	None	Yes, for hearing loss or pulmonary cases only	Not specified

Information on the approach used for the payment and calculation for permanent partial disability (PPD) benefits, the maximum and minimum, any limitations placed on unscheduled injuries and, if a rating guide is used, which one.									
Jurisdiction	Types of PPD Benefits Offered	Basis of Weekly PPD Calculation	Basis of PPD Calculation (if not weekly)	PPD Disability Benefit		Basis of Weekly Maximum Calculation	Maximum PPD Benefits for Unscheduled Injuries	Statutory Requirements for Use of Specific Rating Guide	
				Weekly Minimum	Weekly Maximum			Yes/No	AMA Guide Required
Utah	Statutory scheduled PPD benefits for amputations, total loss of sight or hearing in one or both eyes or ears; other impairments paid in proportionate amounts based on medical evidence	Weekly PPD is 66 2/3% of the worker's AWW, not to exceed 66 2/3% of the SAWW	N/A	\$45.00	\$856.00	66 2/3% of the SAWW	312 weeks	Yes	Yes (30)
Vermont	Except for mental and behavioral disorders, the existence and degree of an injured worker's permanent partial impairment shall be determined in accordance with the whole person determinations as set out in the American Medical Association Guides to the Evaluation of Permanent Impairment, 5th edition (AMA Guides)	66 2/3% of AWW	N/A	\$588.00	\$1,763.00	150% of the SAWW	405 weeks for non-spinal; 550 weeks spinal	Yes	5th Edition
Virginia	Statutory scheduled PPD benefits (31)	66 2/3% of the worker's AWW	N/A	\$352.50	\$1,410.00	100% of the SAWW	None	No	N/A
Washington	Statutory scheduled PPD benefits; benefits based on an estimated loss of wage-earning capacity	N/A	When award exceeds three times the SAMW, down payment made in that amount; benefits are then paid monthly based on the TTD schedule	(32)	\$2,057.03	Set by statute	\$256,982.43	Yes	5th Edition
West Virginia	Statute sets forth a schedule of PPD awards for certain specific amputation/loss injuries	66 2/3% of the worker's AWW, not to exceed 70% of the average weekly wage in West Virginia	N/A	Federal minimum wage	\$746.98	70% of the SAWW	None	Yes	4th Edition
Wisconsin	Statutory scheduled PPD benefits; benefits based on actual wage loss; unscheduled PPD based on functional impairment alone	66 2/3% of the worker's AWW up to maximum	N/A	\$20.00 (33)	\$446.00	Set by the legislature	1,000 weeks	No	N/A
Wyoming	Benefits based on actual wage losses	Must be less than 95% of preinjury wage before eligible for PPD	(34)	Dependent on date of injury	\$986 (35)	SAWW on the date of injury	None	Yes	Most current
Canadian Jurisdictions Participating (stated in Canadian currency)									
British Columbia	Statutory schedule for non-traumatic hearing loss (36); benefits based on an estimated loss of wage-earning capacity (37); unscheduled PPD based on functional impairment plus other disability factors, such as age, education, and occupation (38); benefits are paid more like a percentage of PTD (in the majority of cases)	(39)	Monthly	\$491.75 (40)	\$1,500.61	(41)	No distinction made between scheduled and unscheduled	No (42)	N/A
New Brunswick	N/A (43)	N/A (43)	N/A (43)	N/A (43)	N/A (43)	N/A (43)	N/A (43)	N/A (43)	N/A (43)
Nova Scotia as of January 1, 2022 (44)	Benefits based on actual wage losses; benefits based on an estimated loss of wage-earning capacity; unscheduled PPD based on functional impairment alone	75% of the worker's earnings loss minus the permanent impairment benefit for first 26 weeks, 85% of earnings loss minus permanent impairment benefit for over 26 weeks (45)	N/A	\$1.00	\$1,326.92	137.5% of the average industrial wage for Nova Scotia	None	Yes	5th Edition for chronic pain impairment rating and 4th Edition for all other impairment ratings
Ontario	(46)	N/A	Base amount is adjusted for the worker's age and multiplied by % of impairment	N/A	N/A	Depending on the worker's age, the worker may be entitled to the maximum NEL base amount, which is multiplied by % of impairment	Limit would be in accordance with the annually indexed maximum base amount	Yes	3rd Edition (revised)

Information on the approach used for the payment and calculation for permanent partial disability (PPD) benefits, the maximum and minimum, any limitations placed on unscheduled injuries and, if a rating guide is used, which one.									
Jurisdiction	Types of PPD Benefits Offered	Basis of Weekly PPD Calculation	Basis of PPD Calculation (if not weekly)	PPD Disability Benefit		Basis of Weekly Maximum Calculation	Maximum PPD Benefits for Unscheduled Injuries	Statutory Requirements for Use of Specific Rating Guide	
				Weekly Minimum	Weekly Maximum			Yes/No	AMA Guide Required
Prince Edward Island	Wage-loss benefits	Wages are average wage indexed to current year and then the worker's loss of earning capacity is calculated at 90% of net	N/A	N/A	Based on maximum annual earning for the year of accident (\$82,900 in 2025)	Based on maximum annual earning for the year of accident (\$82,900 in 2025)	N/A	No	N/A
Saskatchewan	Benefits based on actual earnings loss and estimated earning capacity. Permanent Functional Impairment award (lump sum) (47)	Paid as the difference between earnings before injury and earnings after injury. PFI awards based on measurable permanent functional impairment or disfigurement resulting from compensable injury	Partial benefits are paid as the difference between earnings before injury and earnings after injury. PFI award based on measurable impairment	\$609.16	\$2,010.21	Based on a covered annual wage of \$104,531	None (47)	No	
Notes:									
Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.									
1	Alaska - These are based on the whole person impairment system utilized in the AMA <i>Guides to the Evaluation of Permanent Impairment, 6th Edition 2024</i> . The percentage of whole person impairment is multiplied by \$273,000 for benefit determination.								
2	Alaska - PPI is paid in a lump-sum amount unless the claimant is in a reemployment training program, in which case PPI benefits can be paid at the weekly TTD rate. In that case the TTD minimum (\$342) and maximum (\$1,556) rates apply.								
3	Arkansas - Except for PTD, which is payable for life at the TTD rate.								
4	Colorado - Scheduled PPD benefits are calculated based on the statutory number of weeks for that type of injury and are all paid at a statutory \$420.17 per week multiplied by the percentage increase in the SAWW from July 1, 2000, and each year until the date of injury. Unscheduled injuries are paid as medical impairment benefits and are calculated by taking the medical impairment rating and multiplying it by the statutory age factor and then by 400 weeks, and the TTD rate. These benefits are paid at the TTD rate but no less than \$150 a week and no more than 50 percent of the SAWW beginning on the date of maximum medical improvement.								
5	Colorado - Beginning January 1, 2012, the caps are adjusted each year. As of July 1, 2021, the caps are \$106,911.08 for nonscheduled impairments of 25 percent or less and \$213,819.45 for nonscheduled impairments of 26 percent or more.								
6	Connecticut - No unscheduled PPD since 1993.								
7	District of Columbia - 209.17 Pursuant to Section 9(c)(22) of the Act (D.C. Code §36-308 (3)(V)) for injuries occurring on or after April 16, 1999, the periods of compensation set forth in Section 9(c)(1) thru (19) of the Act (D.C. Code §36-308(3) (A) thru (S)) shall be as follows: (a) Arm lost, 234 weeks compensation; (b) Leg lost, 216 weeks compensation; (c) Hand lost, 183 weeks compensation; (d) Foot lost, 154 weeks compensation; (e) Eye lost, 120 weeks compensation; (f) Thumb lost, 57 weeks compensation; (g) First finger lost, 35 weeks compensation; (h) Great toe lost, 29 weeks compensation; (i) Second finger lost, 23 weeks compensation; (j) Third finger lost, 19 weeks compensation; (k) Toe other than great toe lost, 12 weeks compensation; (l) Fourth finger lost, 12 weeks compensation; (m) Compensation for loss of hearing of 1 ear 39 weeks compensation. Compensation for loss of hearing of both ears 150 weeks, provided that the Mayor may establish a waiting period, not to exceed 6 months, during which an employee may not file a claim for loss of hearing resulting from non-traumatic causes in the occupational environment until the employee has been away from such environment for such period, and provided further, that nothing in this sub-paragraph shall limit an employee's right to file a claim for temporary partial disability pursuant to section 9(e) of the Act (D.C. Code §36-308(5)); (n) Compensation for loss of more than 1 phalange of a digit shall be the same as for loss of the entire digit. Compensation for loss of the 1st phalange shall be one-half of the compensation for loss of the entire digit; (o) Compensation for an arm or a leg, if amputated at or above the elbow or the knee, shall be the same as for a loss of the arm or leg; but if amputated between the elbow and the wrist or the knee and the ankle, shall be the same as for loss of a hand or foot; (p) Compensation for loss of binocular vision or for 80% or more of the vision of an eye shall be the same as for loss of the eye; (q) Compensation for loss of 2 or more digits, or 1 or more phalanges of 2 or more digits, of a hand or foot, may be proportioned to the loss of use of the hand or foot occasioned thereby, but shall not exceed the compensation for loss of a hand or foot; (r) Compensation for permanent total loss of use of a member shall be the same as for loss of the member; (s) Compensation for permanent partial loss or loss of use of a member may be for proportionate loss or loss of use of the member. Benefits for partial loss of vision in 1 or both eyes, or partial loss of hearing in 1 or both ears shall be for a period proportionate to the period benefits are payable for total bilateral loss of vision or total binaural loss of hearing as such partial loss bears to total loss.								
8	Idaho - If the injury occurred in 2025 and PPD is a factor, it would be paid at \$590.15 per week.								
9	Iowa - AMA Guides are not required by statute, but the 5th Edition is adopted as a guide. Other medical opinions or guides, or other material evidence, may be presented.								
10	Maine - Maine is a wage-loss state; partial is a percentage of total.								
11	Maryland - For awards for a period of less than 75 weeks for events occurring on or after January 1, 2025 but before January 1, 2026, compensation is to be paid at the rate of thirty-three and one-third per centum of the employee's Average Weekly Wage, not to exceed 16.7% of the State Average Weekly Wage or \$250.00. The minor disability category does not apply to certain public safety employees. See LE 9-628(a)... For awards for a period equal to or greater than 75 weeks, but less than 250 weeks, for events occurring on or after January 1, 2025 but before January 1, 2026, the compensation is to be paid at two-thirds of the employee's Average Weekly Wage not to exceed one-third of the State Average Weekly Wage or \$498.00.								
12	Minnesota - PPD benefits are paid weekly at the TTD rate until the total PPD benefit amount is paid. The employee may elect to receive PPD benefits in a lump sum, in which case a discount rate of 5 percent per year is applied to the weekly benefits.								
13	Minnesota - Minnesota has developed by rule its own PPD schedule. Minn. Stat. 176.105 requires DLI, in establishing Minnesota's PPD schedule, to "study disability or permanent impairment schedules set up by other states, the American Medical Associations and other organizations." Additionally, the rules incorporate the AMA Guides to incorporate by reference some terminology, and incorporates a couple of ANSI measurement standards. See https://www.revisor.mn.gov/statutes/?id=176.105 ; https://www.revisor.mn.gov/rules/?id=5223.0300 . However, the statute does not require that the AMA ratings be used to determine the PPD rating for injured workers.								
14	Missouri - 2019 responses. No 2025 data were provided.								
15	Missouri - PPD benefits are a lump sum based on the weekly statutory value assigned to the injured body part.								
16	New Hampshire - New Hampshire allows for wage-loss benefits post-MML.								
17	New York - For scheduled PPD benefits the basis is 66 2/3 percent of the worker's preinjury average weekly wage multiplied by the appropriate number of weeks based on the percentage loss of use for the particular body part. For nonscheduled PPD benefits when the claimant is not working, the basis is 66 2/3 percent of the difference between the preinjury average weekly wage and the worker's wage-earning capacity as agreed to by the parties or as determined by the Workers' Compensation Board. However, if the worker is working, the worker will receive PPD benefits equal to 2/3 of the difference between the preinjury average weekly wage and the postinjury wages. Unless the worker earns less than \$325.00, then the worker receives the full wages.								
18	New York - The weekly minimum is determined based on the date of accident. For accidents occurring after May 1, 2013, through December 31, 2023, the minimum benefit amount is \$150.00 per week; for accidents occurring on or after January 1, 2024, the minimum benefit amount is \$275.00 per week; for accidents occurring on or after January 1, 2025, and before July 1, 2026, the minimum benefit amount is \$375.00 per week; and for accidents occurring on or after July 1, 2026, and on or after July 1st of each succeeding year shall be one-fifth of the New York Statewide Average Weekly Wage for the year in which it is reported. If the worker earns less than the minimum benefit amount, then the worker receives the full wages. However, if the worker who earns less than the minimum benefit amount is working, the worker will receive the difference between the preinjury average weekly wage and the postinjury wages.								

Table 6 Permanent Partial Disability Benefits Provided by Workers' Compensation Systems as of January 1, 2025									
Information on the approach used for the payment and calculation for permanent partial disability (PPD) benefits, the maximum and minimum, any limitations placed on unscheduled injuries and, if a rating guide is used, which one.									
Jurisdiction	Types of PPD Benefits Offered	Basis of Weekly PPD Calculation	Basis of PPD Calculation (if not weekly)	PPD Disability Benefit		Basis of Weekly Maximum Calculation	Maximum PPD Benefits for Unscheduled Injuries	Statutory Requirements for Use of Specific Rating Guide	
				Weekly Minimum	Weekly Maximum			Yes/No	AMA Guide Required
19	New York - New York State Average Weekly Wage is the average weekly wage of the state of New York for the previous calendar year as reported by the Commissioner of Labor to the Superintendent of Financial Services on March 31 of each year.								
20	New York - Calculated by multiplying 525 (maximum number of weeks) by the maximum weekly rate (\$1,171.46).								
21	New York - Pursuant to Workers' Compensation Law § 15(3)(x), the Chair adopted 12 NYCRR 325-1.6, which requires all evaluations after January 1, 2018, of permanent impairments for use in schedule loss of use determinations must use the Workers' Compensation Guidelines for Determining Impairment, First Edition, November 22, 2017. There is no statutory provision requiring the use of a specific rating guide for unscheduled injuries.								
22	North Carolina - See N.C. Gen. Stat. §97-31.								
23	North Dakota - PPI benefits are one-time lump-sum awards with no ties to wage loss. Schedule for impairment—NDCC 65-05-12.2(10).								
24	Oregon - Whole person impairment percentages are established under the Disability Rating Standards of Oregon Administrative Rules Chapter 436, Division 035. The worker's average weekly wage, as used in the calculation of work disability, may not exceed 133 percent of the state AWW and may not be less than 50 percent of the state AWW.								
25	Oregon - Oregon no longer has "scheduled" and "unscheduled" benefits. The maximum PPD award, for a worker qualifying for an award for impairment and work disability, is \$510,343.31.								
26	Pennsylvania - An employee's earning power, depending on the date of the injury, can be determined either by an impairment rating exam, labor market survey, or by comparing the employee's pre-injury AWW and post-injury AWW.								
27	South Carolina - See S.C. Code Ann § 42-9-20.								
28	Texas - The commissioner may adopt a subsequent edition of the AMA Guides by rule.								
29	US Federal Programs - FECA - 6th edition is currently being used.								
30	Utah - All impairment raters are to use the Utah Supplemental Impairment Guides (2006 edition); AMA 5th Edition is to be used in instances not covered by the Utah Supplemental Guides.								
31	Virginia - Or percentage thereof, if loss of use of scheduled body part is less than 100 percent.								
32	Washington - The Washington State Legislature has increased the minimum workers' compensation benefits for claims with dates of injury (DOI) or date of manifestation (DOM) on or after July 2, 2008. This change results in three different possible minimum rates: -15 percent of the state average monthly wage (SAMW) + \$10.00 for spouse + \$10.00 for each dependent child up to five dependent children; -100 percent of the worker's gross monthly wage; and -Minimum time-loss rate in effect prior to July 2, 2008.								
33	Wisconsin - The PPD rate is based on two-thirds of wages up to the maximum PPD rate for year of injury. The minimum wage is \$30. Therefore, the minimum PPD rate would be \$20. However, this is obsolete and would only come up in circumstances in which the employer were licensed to pay subminimum wage (e.g., sheltered workers).								
34	Wyoming - The calculation is based on a computer calculation that uses the disability factors (age, education, occupation, etc.) entered by the claims analyst. Injured workers can take an optional vocational training award instead of PPD.								
35	Wyoming - Wyoming Workers' Compensation calculates all payments/wages based on a monthly rate, rather than a weekly rate. Each claimant's payment depends on their gross monthly wage on the date of injury and cannot exceed the statewide average monthly wage.								
36	British Columbia - Schedule 2 of the Act sets out the statutory disability percentages for non traumatic hearing loss. RS&CM Vol.II, Item C4-31.00 addresses non-traumatic hearing loss that is greater than the minimum set out in the Act.								
37	British Columbia - Item C6-39.00 of the RS&CM Vol. II establishes a permanent disability evaluation schedule based on functional impairment, with disability factors such as age, and enhancement and devaluation for multiple disabilities taken into account. PPD can be based on comparison between a worker's preinjury earnings and the earnings the worker would have been capable of earning after the injury.								
38	British Columbia - Age of worker and disability factors such as enhancement and devaluation for multiple disabilities may be taken into account. [Item C6-39.00]								
39	British Columbia - All workers are entitled to have their benefits determined using both the loss of function (LOF) and loss of earnings (LOE) methods of assessment, and then to receive their benefits based on whichever method results in the greater amount of compensation. The LOF method estimates the worker's impairment of earning capacity based on nature and degree of injury. The LOE compares the worker's preinjury average earnings with either actual or potential post-injury earnings. [Sections 195 & 196, Act]								
40	British Columbia - This is the figure given for temporary total disability. Temporary partial disability is calculated using this figure but to the extent only of the permanent partial disability. If the worker's average earnings are less than this amount, the worker will receive an amount equal to his or her average earnings but only to the extent of the partial disability. [Sections 191 and 195, Act]								
41	British Columbia - The weekly maximum is based on the 2024 maximum annual wage rate of \$116,700 [90% x (\$116,700 - federal tax - provincial tax - Canada Pension Plan contributions - employment insurance premium)]. The actual amount would depend on the percentage of disability and taxation status, status for Canada Pension Plan Disability, and employment insurance used in the calculation of net. [Policy item #69.00 of the RS&CM]. The maximum wage rate as of January 1, 2025 is \$121,500.								
42	British Columbia - Under section 195(1) of the Act, permanent disability benefits may be calculated with reference to the Permanent Disability Evaluation Schedule (PDES). The PDES is a set of guide-rules, not a set of fixed rules set out in the RS&CM and is used to assess a worker's entitlement to PPD benefits granted under the LOF method.								
43	New Brunswick - WorkSafeNB pays loss of earnings benefits until age 65 (see Tables 4A and 4C).								
44	Nova Scotia - 2022 responses. No 2025 data were provided.								
45	Nova Scotia - Permanent impairment benefits are calculated as the permanent impairment rate multiplied by 30% multiplied by 85% of the net average weekly earnings.								
46	Ontario - For the purpose of answering questions related to PPD benefits, the assumption is that it is a non-economic loss (NEL) benefit that is awarded as a result of a permanent impairment. This would be in addition to benefits for loss of earnings.								
47	Saskatchewan - In addition to earnings loss benefits, worker may also receive a Permanent Functional Impairment (PFI) award for any measurable permanent functional impairment or disfigurement resulting from a compensable injury greater than 0.5 percent. This will be assessed in accordance with AMA Guides. This lump sum will be no less than \$2,200 and no greater than \$45,200.								

Table 7 Maximum Benefit Payments for Selected Permanent Partial Disabilities as of January 1, 2025

This table compares the maximum benefit due a hypothetical worker for a specific loss of permanent bodily function when it is considered a scheduled injury across jurisdictions with statutory PPD schedules. The worker in each example made \$2,000.00 a week, had four dependents, and was 50 years old at the time of injury. In some cases, the worker would also be eligible for TTD and/or PTD, which are not supposed to be included in these figures. If jurisdictions pay ongoing TTD, or would pay PTD (or pensions) in these cases and do not pay scheduled PPD benefits, this amount should not be included in this table. The reader should be cautious about using these comparisons for interstate comparisons unless they have a significant understanding of the different jurisdictional benefits structures. To better understand the different jurisdictional PPD structures for states in the U.S., the reader should refer to another WCRI report entitled *Permanent Partial Disability Benefits: Interstate Differences*. Users are also reminded that benefit levels in each jurisdiction are heavily affected by jurisdictional wage rates and varying maximum statutory benefit levels and the fact that these figures are undiscounted and not usually paid in a lump sum, but over time in biweekly or monthly amounts.

Jurisdiction	Amputation of Dominant Arm at the Shoulder	Amputation of Dominant Hand	Amputation of Left Leg at the Hip	Amputation of Left Foot	Loss of One Eye	Loss of Hearing in Both Ears	Loss of Hearing in One Ear	Maximum Payable for a Nonscheduled Loss
Alabama	\$48,840.00	\$37,400.00	\$44,000.00	\$30,580.00	\$27,280.00	\$35,860.00	\$11,600.00	\$66,000.00
Alaska	\$163,800.00	\$147,420.00	\$109,200.00	\$49,140.00	\$43,680 (1)	\$98,280.00	\$13,650.00	N/A
Arizona	\$265,794.75	\$221,487.50	\$221,487.50	\$177,196.49	\$265,795	\$88,598.20	\$88,598.20	None
Arkansas	\$220,332.00 (2)	\$165,249.00	\$166,152.00	\$118,293.00	\$94,815.00	\$142,674.00	\$37,926.00	N/A (3)
California (4)	\$199,882.50 (5)	\$167,402.50 (5)	\$101,862.50	\$56,260.00	\$74,530.00 (6)	\$85,622.50	\$7,830.00	No maximum
Colorado	\$87,395.36	\$43,697.68	\$87,395.36	\$43,697.68	\$43,697.68	\$58,403.63	\$14,705.95	\$247,021.05
Connecticut (7) (8)	\$247,728.00	\$200,088.00	\$184,605.00	\$148,875.00	\$186,987.00	\$123,864.00	\$41,685	780 weeks recommended for injuries to brain or heart prior to 7/1/1993 (9)
Delaware (10)	250 weeks x 66 2/3% of AWW (\$221,335.00)	220 weeks x 66 2/3 % of AWW (\$194,774.80)	250 weeks x 66 2/3% of AWW (\$221,335.00)	160 weeks x 66 2/3% of AWW (\$141,654.40)	200 weeks x 66 2/3% of AWW (\$177,068.00)	175 weeks x 66 2/3% of AWW (\$154,934.50)	75 weeks x 66 2/3% of AWW (\$66,400.50)	300 weeks x maximum compensation rate of \$885.34 (\$265,602.00)
District of Columbia	234 weeks X CR	183 weeks X CR	216 weeks X CR	154 weeks X CR	120 weeks X CR	150 weeks X CR	39 weeks X CR	500-week limit for all disability; worker may petition for an additional 167 weeks
Florida	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Georgia	225 weeks x TTD rate	160 weeks x TTD rate	225 weeks x TTD rate	135 weeks x TTD rate	150 weeks x TTD rate	150 weeks x TTD rate	75 weeks x TTD rate	Rating x 300 weeks x TTD rate
Hawaii	312 weeks or \$371,904	244 weeks or \$290,848	288 weeks or \$343,296	205 weeks or \$244,360	160 weeks or \$190,720	200 weeks or \$238,400	52 weeks or \$61,984	312 weeks or \$371,904
Idaho	\$177,045.00	\$159,340.50	\$118,030.00	\$82,621.00	\$103,276.55 (11)	\$103,276.25	(12)	\$590.15 (13)
Illinois	\$387,600.00	\$246,000.00	\$355,200.00	\$200,400.00	\$166,028.94 if 100% loss of vision; \$207,600.00 if enucleation of eye	\$220,347.05	\$55,342.98	N/A
Indiana	\$242,090.00	\$175,490.00	\$208,290.00	\$140,690.00	\$140,690.00	\$87,245.00	\$28,925.00	\$414,000.00
Iowa	\$174,070.00	\$132,293.20	\$153,181.60	\$104,442.00	\$97,479.20	\$121,849.00	\$34,814.00	\$348,140.00
Kansas	\$75,000.00 (14)	\$75,000.00 (14)	\$75,000.00 (14) (15)	\$75,000.00 (14)	\$70,440.00	\$64,570.00	\$17,610.00	\$75,000.00
Kentucky	N/A	N/A	N/A	N/A	N/A	N/A	N/A	\$923.41 per week for either 425 weeks or 520 weeks, depending on disability rating
Louisiana	\$169,000 credit can be taken for other indemnity benefits paid	\$126,750 subject to credit for other indemnity benefits paid	\$147,875.00 subject to credit for other indemnity benefits paid	\$105,625 subject to credit for other indemnity benefits paid	\$84,500 subject to credit for other indemnity benefits paid	\$84,500 subject to credit for other indemnity benefits paid	\$84,500 subject to credit for other indemnity benefits paid	N/A
Maine	\$345,333	\$286,667	\$286,667	\$216,000	\$216,000	\$266,667	\$66,667	This is not a "specific loss benefit" unlimited number of weeks for total incapacity
Maryland	\$436,800.00	\$364,000.00	\$436,800.00	\$364,000.00	\$364,000.00	\$364,000.00	\$62,500.00	\$672,000.00
Massachusetts	\$78,652.59 (16)	\$62,190.42	\$71,336.07 (16)	\$53,044.77 (16)	\$71,336.07 (16)	\$140,843.01 (16)	\$53,044.77 (16)	\$146,330.40 (16)
Michigan (17)	\$313,116.00	\$250,260.00	\$250,260.00	\$188,568.00	\$188,568.00	N/A	N/A	\$1,164.00/week
Minnesota (18)	\$125,685	\$98,261.10	\$65,520	\$38,220	\$33,532.80	\$52,552.50	\$7,308.00	\$567,840
Mississippi	\$126,146.00	\$94,609.50	\$110,377.75	\$78,841.25	\$63,073.00	\$94,609.50	\$25,229.20	\$283,828.50
Missouri as of January 1, 2019 (19) (20)	\$126,676.18	\$95,553.15	\$113,025.73	\$81,902.70	\$76,442.52	\$98,283.24	\$26,754.88	\$198,552.00
Montana	N/A (21)	N/A (21)	N/A (21)	N/A (21)	N/A (21)	N/A (21)	N/A (21)	N/A (21)
Nebraska	\$300,000.00	\$233,333.33	\$286,666.66	\$200,000.00	\$166,666.66	PTD	\$33,333.33	Benefits could be payable for life

Table 7 Maximum Benefit Payments for Selected Permanent Partial Disabilities as of January 1, 2025

This table compares the maximum benefit due a hypothetical worker for a specific loss of permanent bodily function when it is considered a scheduled injury across jurisdictions with statutory PPD schedules. The worker in each example made \$2,000.00 a week, had four dependents, and was 50 years old at the time of injury. In some cases, the worker would also be eligible for TTD and/or PTD, which are not supposed to be included in these figures. If jurisdictions pay ongoing TTD, or would pay PTD (or pensions) in these cases and do not pay scheduled PPD benefits, this amount should not be included in this table. The reader should be cautious about using these comparisons for interstate comparisons unless they have a significant understanding of the different jurisdictional benefits structures. To better understand the different jurisdictional PPD structures for states in the U.S., the reader should refer to another WCRI report entitled *Permanent Partial Disability Benefits: Interstate Differences*. Users are also reminded that benefit levels in each jurisdiction are heavily affected by jurisdictional wage rates and varying maximum statutory benefit levels and the fact that these figures are undiscounted and not usually paid in a lump sum, but over time in biweekly or monthly amounts.

Jurisdiction	Amputation of Dominant Arm at the Shoulder	Amputation of Dominant Hand	Amputation of Left Leg at the Hip	Amputation of Left Foot	Loss of One Eye	Loss of Hearing in Both Ears	Loss of Hearing in One Ear	Maximum Payable for a Nonscheduled Loss
Nevada (22)	Nevada does not have scheduled impairments	Nevada does not have scheduled impairments	Nevada does not have scheduled impairments	Nevada does not have scheduled impairments	Nevada does not have scheduled impairments	Nevada does not have scheduled impairments	Nevada does not have scheduled impairments	Nevada Maximum AMW for 7/1/24 – 6/30/25 = \$8,445.64 The PPD installment total would be \$1,279,146.52 for a 100% impairment. The PPD lump sum payout would be \$1,054,437.71 for a 100% impairment (23)
New Hampshire	\$252,000.00	\$226,800.00	\$168,000.00	\$117,600.00	\$100,800.00	\$147,600.00	\$36,000.00	\$420,000.00
New Jersey	\$280,500	\$231,900	\$315,000	\$220,305	\$220,305	\$108,200	\$18,540	\$695,400
New Mexico	\$218,766.00 (24)	\$136,728.75	\$218,766.00	\$125,790.45	\$131,259.60	\$164,074.50	\$43,753.20	\$765,681.00
New York	\$365,495.52 (25) (26)	\$285,836.24 (25) (26)	\$337,380.48 (25) (26)	\$240,149.30 (25) (26)	\$187,433.60 (25)	\$175,719 (25)	\$70,287.60 (25)	\$615,016.50 (27)
North Carolina	\$320,016 (\$1,333.40 x 240 weeks)	\$266,680 (\$1,333.40 x 200 weeks)	\$266,680 (\$1,333.40 x 200 weeks)	\$292,009.60 (\$1,333.40 x 144 weeks)	\$160,008 (\$1,333.40 x 120 weeks)	\$200,010 (\$1,333.40 x 150 weeks)	\$93,338 (\$1,333.40 x 70 weeks)	(28)
North Dakota	(29)	(29)	(29)	(29)	(29)	(29)	(29)	(29)
Ohio	\$276,975.00	\$215,425.00	\$246,200.00	\$184,650.00	\$153,875.00	\$153,875.00	\$30,775.00	\$82,066.00
Oklahoma	\$99,000.00	\$79,200.00	\$99,000.00	\$79,200.00	\$99,000.00	\$118,800.00	\$39,600.00	\$129,600.00
Oregon (30)	60% of whole person Impairment = \$79,888.8 Max. work disability (WD) = \$270,943.11 Total = \$350,831.91	47% of whole person Impairment = \$62,579.56 Max. WD = \$236,411.15 Total = \$298,990.71	47% of whole person Impairment = \$62,579.56 Max. WD = \$236,411.15 Total = \$298,990.71	42% of whole person Impairment = \$55,922.16 Max. WD = \$223,129.62 Total = \$279,051.78	31% of whole person Impairment = \$41,275.88 Max. WD = \$193,910.27 Total = \$235,186.15	60% of whole person Impairment = \$79,888.8 Max. WD = \$270,943.11 Total = \$350,831.91	19% of whole person Impairment = \$25,298.12 Max. WD = \$162,034.61 Total = \$187,332.73	100% of whole person Impairment = \$133,148 WD = \$377,195.31 Total = \$510,343.31
Pennsylvania (31)	410 weeks x \$1,333.33	335 weeks x \$1,333.33	410 weeks x \$1,333.33	250 weeks x \$1,333.33	275 weeks x \$1,333.33	The number of weeks of benefits to which an employee is entitled is determined based on the percent of hearing loss under the AMA Impairment Rating Guides multiplied by 260 weeks. That amount is then multiplied by the employee's TTD rate	The number of weeks of benefits to which an employee is entitled is determined based on the percent of hearing loss under the AMA Impairment Rating Guides multiplied by 60 weeks. That amount is then multiplied by the employee's TTD rate	N/A
Rhode Island	\$28,080.00	\$21,960.00	\$28,080.00	\$18,450.00	\$14,400.00	\$18,000 if traumatic; \$21,960 if an occupational disease	\$5,400 if due to trauma; \$6,750 if an occupational disease	\$275,184.00
South Carolina	\$249,574.60 (220 weeks)	\$209,869.55 (185 weeks)	\$221,213.85 (195 weeks)	\$158,820.20 (140 weeks)	\$158,820.20 (140 weeks)	\$187,180.95 (165 weeks)	\$90,574.40 (80 weeks)	\$567,215.00 (500 weeks)
South Dakota	\$213,200.00	\$159,900.00	\$170,560.00	\$133,250.00	\$159,900.00	\$159,900.00	\$53,300.00	\$332,592.00
Tennessee	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Texas (32)	Not scheduled	Not scheduled	Not scheduled	Not scheduled	Not scheduled	Not scheduled	Not scheduled	\$222,300.00
US Federal Programs- FECA	312 weeks of compensation at 75% of the weekly pay rate	244 weeks of compensation at 75% of the weekly pay rate	288 weeks of compensation at 75% of the weekly pay rate	205 weeks of compensation at 75% of the weekly pay rate	160 weeks of compensation at 75% of the weekly pay rate	200 weeks of compensation at 75% of the weekly pay rate	52 weeks of compensation at 75% of the weekly pay rate	N/A
US Federal Programs - Longshore (33)	\$415,998.96	\$271,999.32	\$383,999.04	\$273,332.65	\$213,332.80	\$266,666.00	\$69,333.16	2/3 of the difference between \$2,000 and post-accident wages for life

Table 7 Maximum Benefit Payments for Selected Permanent Partial Disabilities as of January 1, 2025

This table compares the maximum benefit due a hypothetical worker for a specific loss of permanent bodily function when it is considered a scheduled injury across jurisdictions with statutory PPD schedules. The worker in each example made \$2,000.00 a week, had four dependents, and was 50 years old at the time of injury. In some cases, the worker would also be eligible for TTD and/or PTD, which are not supposed to be included in these figures. If jurisdictions pay ongoing TTD, or would pay PTD (or pensions) in these cases and do not pay scheduled PPD benefits, this amount should not be included in this table. The reader should be cautious about using these comparisons for interstate comparisons unless they have a significant understanding of the different jurisdictional benefits structures. To better understand the different jurisdictional PPD structures for states in the U.S., the reader should refer to another WCRI report entitled *Permanent Partial Disability Benefits: Interstate Differences*. Users are also reminded that benefit levels in each jurisdiction are heavily affected by jurisdictional wage rates and varying maximum statutory benefit levels and the fact that these figures are undiscounted and not usually paid in a lump sum, but over time in biweekly or monthly amounts.

Jurisdiction	Amputation of Dominant Arm at the Shoulder	Amputation of Dominant Hand	Amputation of Left Leg at the Hip	Amputation of Left Foot	Loss of One Eye	Loss of Hearing in Both Ears	Loss of Hearing in One Ear	Maximum Payable for a Nonscheduled Loss
Utah	As provided in the Utah 2006 Supplemental Impairment Rating Guides and the AMA 5th Edition	As provided in the Utah 2006 Supplemental Impairment Rating Guides and the AMA 5th Edition	As provided in the Utah 2006 Supplemental Impairment Rating Guides and the AMA 5th Edition	As provided in the Utah 2006 Supplemental Impairment Rating Guides and the AMA 5th Edition	As provided in the Utah 2006 Supplemental Impairment Rating Guides and the AMA 5th Edition	As provided in the Utah 2006 Supplemental Impairment Rating Guides and the AMA 5th Edition	As provided in the Utah 2006 Supplemental Impairment Rating Guides and the AMA 5th Edition	As provided in the Utah 2006 Supplemental Impairment Rating Guides and the AMA 5th Edition
Vermont	Not scheduled	Not scheduled	Not scheduled	Not scheduled	Not scheduled	Not scheduled	Not scheduled	Theoretically before COLAs: 100% WPI x maximum CR rate \$1,763 x 550. However, a person with 100% WPI would likely be eligible for PTD instead
Virginia	\$266,800 (34)	\$200,100 (34)	\$233,450	\$166,750	\$133,400	\$133,400	\$66,700	None; only payable for scheduled body parts and losses, such as disfigurement
Washington	\$154,189.59 (35)	\$138,770.64 (35)	\$154,189.59	\$107,932.80	\$61,675.71	\$123,351.87	\$20,558.49	\$256,982.43
West Virginia	60 percent (60 months)	50 percent (50 months)	60 percent (60 months)	35 percent (35 months)	33 percent (33 months)	55 percent (55 months)	22.5 percent (22.5 months)	N/A
Wisconsin	\$278,750.00	\$223,000.00	\$223,000.00	\$111,500.00	\$122,650.00, if by enucleation/visceration (36)	Traumatic: \$147,180.00; Occupational hearing loss: \$96,336.00	Traumatic: \$24,530.00; Occupational hearing loss: \$16,056.00	\$446,000.00
Wyoming (37)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Canadian Jurisdictions Participating (stated in Canadian currency)

British Columbia (38) (39) (40)	\$828,852.99	\$639,400.88	\$769,649.21	\$296,018.93	\$189,452.11	\$355,222.71	\$35,522.27	Potential 100% of \$1,184,075.70
New Brunswick	\$58,940 (70% of the MAE for 2025) (41)	\$45,468 (54% of the MAE for 2025) (41)	\$54,730 (65% of the MAE for 2025) (41)	\$21,050 (25% of the MAE for 2025) (41)	\$15,156 (18% of the MAE for 2025) (41)	\$25,260 (30% of the MAE for 2025) (41) (42)	\$4,210 (5% of the MAE for 2025) (41)	Cannot exceed the maximum annual earnings for the year of the work-related accident (41)
Nova Scotia as of January 1, 2022 (43)	\$1,000.00 (44)	\$1,000.00	\$1,000.00	\$1,000.00	\$1,000.00	\$1,000.00	\$1,000.00	\$1,000.00
Ontario	Benefit determined based on worker's age and % of impairment	Benefit determined based on worker's age and % of impairment	Benefit determined based on worker's age and % of impairment	Benefit determined based on worker's age and % of impairment	Benefit determined based on worker's age and % of impairment	Benefit determined based on worker's age and % of impairment	Benefit determined based on worker's age and % of impairment	Maximum would be in accordance with the annually-indexed maximum base amount (45)
Prince Edward Island	The benefit would be based on the percentage of impairment using the AMA Guides and the maximum annual earnings in effect for the year of the accident	The benefit would be based on the percentage of impairment using the AMA Guides and the maximum annual earnings in effect for the year of the accident	The benefit would be based on the percentage of impairment using the AMA Guides and the maximum annual earnings in effect for the year of the accident	The benefit would be based on the percentage of impairment using the AMA Guides and the maximum annual earnings in effect for the year of the accident	The benefit would be based on the percentage of impairment using the AMA Guides and the maximum annual earnings in effect for the year of the accident	The benefit would be based on the percentage of impairment using the AMA Guides and the maximum annual earnings in effect for the year of the accident	The benefit would be based on the percentage of impairment using the AMA Guides and the maximum annual earnings in effect for the year of the accident	The benefit would be based on the percentage of impairment using the AMA Guides and the maximum annual earnings in effect for the year of the accident
Saskatchewan	Based on % of impairment (46)	Based on % of impairment (46)	Based on % of impairment (46)	Based on % of impairment (46)	Based on % of impairment (46)	Based on % of impairment (46)	Based on % of impairment (46)	Varies (47)

Notes: Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.

- 1 Alaska - Assumes the other eye is in good condition with mild vision loss.
- 2 Arkansas - TTD rate, not PPD rate, is used for total loss involving scheduled injury.
- 3 Arkansas - Claimant receives PTD benefits for life.
- 4 California - All amounts are calculated at level for maximum PD earnings, age 50, with no adjustment for occupation, which could cause the amount to either increase or decrease. Ratings of 70% or greater receive a lifetime, "life-pension" benefit that commences at the expiration of PD benefits.
- 5 California - There is an additional life pension due.

Table 7 Maximum Benefit Payments for Selected Permanent Partial Disabilities as of January 1, 2025

This table compares the maximum benefit due a hypothetical worker for a specific loss of permanent bodily function when it is considered a scheduled injury across jurisdictions with statutory PPD schedules. The worker in each example made \$2,000.00 a week, had four dependents, and was 50 years old at the time of injury. In some cases, the worker would also be eligible for TTD and/or PTD, which are not supposed to be included in these figures. If jurisdictions pay ongoing TTD, or would pay PTD (or pensions) in these cases and do not pay scheduled PPD benefits, this amount should not be included in this table. The reader should be cautious about using these comparisons for interstate comparisons unless they have a significant understanding of the different jurisdictional benefits structures. To better understand the different jurisdictional PPD structures for states in the U.S., the reader should refer to another WCRI report entitled *Permanent Partial Disability Benefits: Interstate Differences*. Users are also reminded that benefit levels in each jurisdiction are heavily affected by jurisdictional wage rates and varying maximum statutory benefit levels and the fact that these figures are undiscounted and not usually paid in a lump sum, but over time in biweekly or monthly amounts.

Jurisdiction	Amputation of Dominant Arm at the Shoulder	Amputation of Dominant Hand	Amputation of Left Leg at the Hip	Amputation of Left Foot	Loss of One Eye	Loss of Hearing in Both Ears	Loss of Hearing in One Ear	Maximum Payable for a Nonscheduled Loss
6	California - Includes cosmetic impairment of lost eye. Loss of vision alone = \$40,020. Also assumes opposite eye with normal 20/20 vision.							
7	Connecticut - All calculations based on married filing jointly with four exemptions.							
8	Connecticut - based on married filing jointly with 4 dependents							
9	Connecticut - No unscheduled PPD after 7/1/1993.							
10	Delaware - Percentages are statutorily mandated and will not fluctuate.							
11	Idaho - Loss of an eye by enucleation: \$103,276.25. Total loss of vision for one eye: \$88,522.50.							
12	Idaho - Only binaural hearing loss is addressed in the statutes.							
13	Idaho - All permanent partial impairment ratings are calculated based upon 55% of the average weekly state wage for the year of injury.							
14	Kansas - There is an additional allowance of 10 percent and not over 15 weeks for the healing period following an amputation.							
15	Kansas - Amputation of the left leg at the hip is a body as a whole injury—nonscheduled.							
16	Massachusetts - Based on the maximum benefit of \$1,829.13 as of Oct. 1, 2021 - See G.L. c. 152. Sec. 36. Such payments are made one-time and are above and beyond any indemnity or medical benefits. https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXXI/Chapter152/Section36 .							
17	Michigan - Our specific loss payments are for a fixed number of weeks specified for each injury (regardless of wage loss); however the worker can also receive wage-loss benefits for as long as there is wage loss or loss of wage-earning capacity. Benefits shown in the table are the maximum payable rates for a worker injured in 2025 times the scheduled number of weeks for that injury. They do not include adjustments for the worker's tax filing status or dependent counts. They each assume the worker has only the one injury. If there are two specific losses, such as both legs, the individual may qualify as "T&P" which does have a small annual rate adjustment. Otherwise, an individual's rate is frozen as of the date of injury. MI Comp L § 418.361.							
18	Minnesota - MN PPD benefits are determined by impairment rating (percentage of whole body) in conjunction with the statutory payment table that indicates benefit per rating point depending on impairment rating. For the injuries in this table, the impairment rating varies from 6 to 60 percent. The amount in the last column corresponds to a 100 percent full body impairment.							
19	Missouri - 2019 responses. No 2025 data were provided.							
20	Missouri - If the disability suffered in any of the items of the schedule of losses is total by reason of severance or complete loss of use thereof, the number of weeks of compensation allowed in the schedule for such disability shall be increased by 10 percent.							
21	Montana - Benefits are paid according to the degree of impairment and wage loss. If eligible, other factors of age, education, wage loss, and lifting restrictions may apply.							
22	Nevada - In Nevada, the only scheduled impairment is pertaining to teeth. Prior figures reported (2022) were likely based on unknown, assigned percentages.							
23	Nevada - Figure was calculated assuming 100% impairment at \$2,000 per week and 50 years old at time of injury.							
24	New Mexico - In cases of actual amputation of arm or leg, the WCA judge has discretion to double this award if certain criteria are met.							
25	New York - Per the assumptions, the claimant's AWW is \$2,000. The claimant's total weekly benefit rate is 2/3 x \$2000 = \$1,333.34, which is above the maximum weekly benefit for January 1, 2025, of \$1,171.46. As scheduled PPDs are paid at the permanent total rate, that is the rate used to calculate the benefit payable, unless it is above the maximum weekly benefit. When the total rate is above the statutory maximum weekly benefit, scheduled PPDs are paid at the maximum weekly benefit. For example, for 100% loss of the arm the claimant is entitled to 312 weeks of benefits at the maximum rate of \$1,171.46. For 100% loss of use of the hand 244 weeks, the leg 288 weeks, the left foot 205 weeks, one eye 160 weeks, loss of hearing in both ears 150 weeks, and loss of hearing in one ear 60 weeks. If requested by the claimant, scheduled PPDs are paid in a lump sum.							
26	New York - The worker may also be entitled to unscheduled PPD benefits, since there has been a loss of use greater than 50%, if the worker is unable to work solely due to the loss of the member.							
27	New York - If the claimant's AWW is \$2,000, two-thirds of the AWW would be \$1,333.34, which is greater than the statutory maximum weekly benefit of \$1,171.46, so the weekly benefit rate when the claimant is totally disabled is the statutory weekly maximum rate. For unscheduled PPD the claimant's wage earning capacity must be set to determine the weekly benefit rate. The maximum nonscheduled PPD is 99%. For this example, assume the claimant's wage earning capacity has been set at 1% and the claimant's loss of wage earning capacity set at 99%. The maximum number of benefit weeks for loss of wage-earning capacity greater than 95% but less than 100%, is 525 weeks (maximum number of weeks). If the claimant's wage earning capacity is 1%, the weekly benefit rate would be the statutory maximum of \$1,171.46, because the rate using the two-thirds of the claimant's AWW would be \$1,320.01, which is greater than the maximum weekly benefit. However, as the loss of wage-earning capacity is greater than 75%, in the last year of benefits, the worker can request to be reclassified as PTD or total industrial disabled due to factors reflecting extreme hardship. If the request is granted the claimant will received benefits at the statutory maximum weekly benefit rate of \$1,171.46, for as long as the claimant is permanently totally disabled, usually for the rest of the claimant's life.							
28	North Carolina - Loss or permanent injury to important external or internal organs or parts of the body for which no compensation is payable: \$20,000. Facial or head disfigurement: \$20,000. Serious bodily disfigurement: \$10,000.							
29	North Dakota - PPI benefit is 35% of SAWW multiplied by statutory permanent impairment multiplier. Impairments are paid as a lump sum and are not based on any disability of the injured worker. Impairment schedule—NDCC 65-05-12.2 (10). Statutory scheduled awards exist for certain amputations—NDCC 65-05-12.2(11).							
30	Oregon - Dominance of extremity and right/left do not affect award values. Whole person percentages on chart are listed in ORS 656.214; additional whole person percentages are listed in OAR 436-035. Impairment benefits are determined by multiplying the impairment value times 100 times the state average weekly wage. Work disability benefits are determined by multiplying the impairment value, as modified by social-vocational factors, times 150 times the worker's weekly wage at injury; this wage factor cannot be more than 133 percent nor less than 50 percent of the state average weekly wage.							
31	Pennsylvania - Pennsylvania refers to the losses identified in this table as specific loss injuries, not permanent partial disability. Under the specific loss classification employees are entitled to a set number of weeks of compensation benefits for the loss, or loss of use of, a particular body part. Employees are entitled to the scheduled number of weeks of benefits multiplied by the employee's compensation rate, which, as previously noted, is based on the employee's average weekly wage. In addition to the scheduled benefits, claimants may also be eligible for an additional number of weeks' benefits for a "healing period." The numbers in the above chart refer only to the base specific loss schedule and do not include any applicable healing period.							

Table 7 Maximum Benefit Payments for Selected Permanent Partial Disabilities as of January 1, 2025

This table compares the maximum benefit due a hypothetical worker for a specific loss of permanent bodily function when it is considered a scheduled injury across jurisdictions with statutory PPD schedules. The worker in each example made \$2,000.00 a week, had four dependents, and was 50 years old at the time of injury. In some cases, the worker would also be eligible for TTD and/or PTD, which are not supposed to be included in these figures. If jurisdictions pay ongoing TTD, or would pay PTD (or pensions) in these cases and do not pay scheduled PPD benefits, this amount should not be included in this table. The reader should be cautious about using these comparisons for interstate comparisons unless they have a significant understanding of the different jurisdictional benefits structures. To better understand the different jurisdictional PPD structures for states in the U.S., the reader should refer to another WCRI report entitled *Permanent Partial Disability Benefits: Interstate Differences*. Users are also reminded that benefit levels in each jurisdiction are heavily affected by jurisdictional wage rates and varying maximum statutory benefit levels and the fact that these figures are undiscounted and not usually paid in a lump sum, but over time in biweekly or monthly amounts.

Jurisdiction	Amputation of Dominant Arm at the Shoulder	Amputation of Dominant Hand	Amputation of Left Leg at the Hip	Amputation of Left Foot	Loss of One Eye	Loss of Hearing in Both Ears	Loss of Hearing in One Ear	Maximum Payable for a Nonscheduled Loss
32	<p>Texas - Under Texas law, these conditions are not listed for Lifetime Income Benefits, however these conditions could qualify for Supplemental Income Benefits based on the AMA impairment guides: Amputation Of Dominant Arm At The Shoulder 60% Amputation Of Dominant Hand 57% Amputation Of Left Leg At The Hip 40% Amputation Of Left Foot 28% Loss Of One Eye 24% Loss Of Hearing In Both Ears 35% Loss Of Hearing In One Ear 18% See §§408.142 & 408.144, Labor Code, for reference.</p>							
33	<p>US Federal Programs - Longshore - The figures have been rounded up to a compensation rate of \$1,333.33.</p>							
34	<p>Virginia - No distinction is made for dominant arm, age, number of dependents, etc. PPD and TTD are not payable simultaneously, and all are subject to the 500-week limitation.</p>							
35	<p>Washington - There is no difference in compensation between dominant/non-dominant or left/right.</p>							
36	<p>Wisconsin - \$111,500.00 for total impairment of one eye for industrial use.</p>							
37	<p>Wyoming - AMA Guide impairment ratings are used to calculate the benefit, which is determined by multiplying the AMA Guide whole-body impairment rating by 60 months, multiplied by 2/3 of the statewide average monthly wage for the quarter of injury.</p>							
38	<p>British Columbia - Calculation for reference: Treating weekly income of \$2,000 as annual income of \$104,000, net annual income would be \$78,938.38. (Calculation does not currently include tax claim for dependants). This benefit is then adjusted by the relevant disability rating percentage and calculated over the 15 years to age 65 for this hypothetical worker. The results of this calculation are an approximation of the benefit level that would be paid on a WCB claim 10 weeks or greater in duration. The results may not reflect the actual benefits paid on a particular claim. Individual benefit payments may be impacted by a number of additional factors that WorkSafeBC is required to consider. These may include, but are not limited to, adjustments of annual income, non-standard work weeks, existing WorkSafeBC pensions, overpayments on previous claims, statutory maximum and minimum payments, etc. Cost of living adjustments can be received in future years and are not factored into these figures. An age adaptability factor is used for workers over the age of 45 where the disability is calculated in accordance with the PDES. The disability rating is increased by 1% of the assessed disability for each year over 45 up to a maximum of 20% of the assessed disability. The worker's age at the effective date of the worker's PPD benefits is used, not the worker's age at the time of injury. This is not included in this calculation given there is no indication of effective date of PPD benefit. [RS&CM Vol.II Item C6-39.00 & Appendix 3 - Permanent Disability Evaluation Schedule & WorkSafeBC 2024 Net Compensation Table]</p>							
39	<p>British Columbia - These calculations are for LOF assessment only. Calculations exclude medical aid and medical costs, which are payable for life. Excludes additional allowances such as clothing allowance and independence and home maintenance allowances, as well as prosthetics, orthotics, hearing aids, and batteries, which are also provided for life. In applying the PDES, whether the PPD occurs on a worker's dominant side (e.g., the right hand of a worker who is right-handed) is not a factor considered in rating permanent disability. Compensation for loss of hearing can be either traumatic or non-traumatic. Calculations in this scenario are assumed to be traumatic.</p>							
40	<p>British Columbia - PDES percentages used as follows: arm amputated at shoulder (dominance is not a factor) - 70%; amputation of hand (dominance is not a factor) - 54% (four digits plus thumb); hip disarticulation or short stump - 65%; amputation at ankle - 25%; loss of one eye - 16%; full traumatic hearing loss - 30%; loss of hearing in one ear with no loss in the other ear - 3%; hypothetical maximum - 100%. [RS&CM Vol.II Appendix 3]</p>							
41	<p>New Brunswick - Permanent physical impairment award is a lump-sum payment provided to injured workers in addition to any loss of earnings. It is provided once per claim and is based on the percentage of impairment, multiplied by the maximum annual earnings (MAE) for the year in which the accident occurred. For 2025, the maximum annual earnings is \$84,200.</p>							
42	<p>New Brunswick - If there is complete deafness in both ears, occurring as a sudden and complete traumatic loss of hearing, the impairment percentage would be 60% of the MAE.</p>							
43	<p>Nova Scotia - 2022 responses. No 2025 data were provided.</p>							
44	<p>Nova Scotia - \$1,000.00 is the maximum payable, regardless of the injury. Permanent benefits reflect both the permanent impairment and the earnings loss; an increase in the impairment will only offset the earnings loss as the combination of the two cannot exceed the maximum of \$1,000.00.</p>							
45	<p>Ontario - The base amount for 2024 is \$72,112.47 and the adjustment factor amount is \$1603.10. The base age is 45 years old. The adjustment factor amount will be added or deducted for each year below or above 45 years old to a maximum of 20 years. It is then multiplied with the degree of permanent impairment.</p>							
46	<p>Saskatchewan - Saskatchewan WCB uses the most current edition of The American Medical Association Guides to the Evaluation of Permanent Impairment (AMA Guides).</p>							
47	<p>Saskatchewan - In the case of decisions made on or after January 1, 2025 and before January 1, 2026, be at least \$2,500 and not more than \$55,200; in the case of decisions made on or after January 1, 2026 and before January 1, 2027, be at least \$3,000 and not more than \$65,200; in the case of decisions made on or after January 1, 2027 and before January 1, 2028, be at least \$3,500 and not more than \$75,200; and in the case of decisions made on or after January 1, 2028, be at least \$4,000 and not more than \$82,200.</p>							

Table 8 Sequence of Disability Payments Made Within Workers' Compensation Systems as of January 1, 2025

Information on when permanent partial disability payments begin, if they are paid in addition to temporary disability and/or permanent total disability benefits, and if they are to be paid sequentially or can be paid concurrently with other benefits.

Jurisdiction	Both Temporary Disability and PPD Paid	Scheduled PPD Paid upon Termination of Temporary Benefits	PPD Benefits Reduced by Temporary Benefits Paid	PPD Benefits Paid in Addition to PTD	PPD and PTD Paid Concurrently
Alabama	Yes	Yes	Yes (1)	No	No
Alaska	Yes	Yes	No	No	No
Arizona	Yes	Yes	No	Yes	No
Arkansas	Yes	Yes	No	No (2)	No
California	Yes, but not at the same time	Yes	No	No	No
Colorado	Yes	Yes	Sometimes (3)	Sometimes (4)	No
Connecticut	Yes, for different dates of injury	Yes	No	Yes, for a different date of injury	No
Delaware	Yes	Yes	No	Yes	Yes
District of Columbia	No	Yes	No	No	No
Florida	Yes	Yes	No	Possibly (5)	No
Georgia	Yes, but not at the same time	Yes	No	N/A (6)	N/A (6)
Hawaii	Yes, but not at the same time	Yes	No	No	No
Idaho	Yes	Yes (PPI)	No	Yes (Supreme Court Decision)	No
Illinois	Yes, but not at the same time	Yes	No	Yes	No
Indiana	No	No	Only after 125 weeks paid	N/A	No
Iowa	Yes, but not at the same time	Yes	No	No	No
Kansas	Yes	Yes	Yes	No	No
Kentucky	May have overlap of TTD with PPD from prior injury so long as benefits do not exceed statutory maximum	N/A	No	Yes	Not for the same injury, may be an overlap from prior PPD award and new PTD award so long as benefits do not exceed statutory maximum
Louisiana	Yes, per La. R.S. 23:1221(1), (3), and (4)	Yes	Yes, per La. R.S. 23:1223	No	No
Maine	No (7)	N/A	N/A	N/A	N/A
Maryland	Yes	Yes	No	No	Not for a single injury
Massachusetts	No	No	N/A (8)	N/A (8)	N/A (8)
Michigan	No (9)	No	No	No	No
Minnesota	Yes	TTD and PPD are not paid concurrently, but TPD and PTD can be paid concurrently with PPD	No	Yes	Yes
Mississippi	Yes	Yes	No (10)	No	No
Missouri as of January 1, 2019 (11)	Yes, but not at the same time	Yes	No	No	No
Montana	Impairment PPD may be paid concurrently with TTD	N/A	No	Yes	Impairment PPD may be paid concurrently with PTD
Nebraska	Yes	Yes	No if scheduled PPD; yes, if nonscheduled PPD	Sometimes (12)	Yes (13)
Nevada	No	Yes	No	No	No
New Hampshire	Yes	No (14)	No	Yes	Yes
New Jersey	Yes	Yes	No	No	N/A
New Mexico	Yes, but not at the same time	Yes	No	No	No
New York	(15)	Yes	Yes (16)	No	No
North Carolina	Yes	Yes	No, unless credit allowed under Collins v. Speedway Motor Sports Corp., 165 N.C. App. 113, 598 S.E.2d 185 (2004)	No	No
North Dakota	N/A (17)	N/A (17)	N/A (17)	N/A (17)	N/A (17)
Ohio	Yes	Yes	No	No	No
Oklahoma	Yes	Yes	No unless credit for overpayment (18)	No	No
Oregon	Yes	N/A	No (19)	Not in the same claim. However, if a worker is receiving PTD and incurs a new compensable injury, the worker is eligible to receive additional PPD benefits	Not in the same claim. However, if a worker is receiving PTD and incurs a new compensable injury, the worker is eligible to receive additional PPD benefits

Table 8 Sequence of Disability Payments Made Within Workers' Compensation Systems as of January 1, 2025

Information on when permanent partial disability payments begin, if they are paid in addition to temporary disability and/or permanent total disability benefits, and if they are to be paid sequentially or can be paid concurrently with other benefits.					
Jurisdiction	Both Temporary Disability and PPD Paid	Scheduled PPD Paid upon Termination of Temporary Benefits	PPD Benefits Reduced by Temporary Benefits Paid	PPD Benefits Paid in Addition to PTD	PPD and PTD Paid Concurrently
Pennsylvania	No (20)	Yes (21)	N/A (22)	N/A (22)	Yes (23)
Rhode Island	Yes	No (24)	No	Yes	Yes
South Carolina	Yes	Yes	No (25)	Possible if change of condition for worse	No
South Dakota	Yes	Yes	No	No	No
Tennessee	Yes, but not at the same time	Yes	No	No	No
Texas	Yes, but not at the same time	N/A	N/A	No	No
US Federal Programs - FECA	Yes, but not at the same time	Yes	No	Yes	Not for the same part of the body/same injury
US Federal Programs - Longshore	Yes, but not at the same time	Yes	No	Yes, but not at the same time	No
Utah	Yes	Yes	No	No	No
Vermont	Yes, but not at the same time	Yes	No	No	No
Virginia	Yes, but not at the same time	Yes	No (26)	No	No
Washington	Yes	Yes	No	No (27)	No
West Virginia	Yes	Yes	No	Yes	No
Wisconsin	Yes, but not at the same time	Yes (28)	No	No	No
Wyoming	No	Yes	No	No	No
Canadian Jurisdictions Participating (stated in Canadian currency)					
British Columbia	No (29)	Yes	Yes (30)	No (31)	No
New Brunswick	N/A (32)	N/A (32)	N/A (32)	N/A (32)	N/A (32)
Nova Scotia as of January 1, 2022 (33)	No	Yes	No	No	No
Ontario	Yes	N/A	No	Depends on the circumstances	Depends on the circumstances
Prince Edward Island	No	Yes	N/A	N/A	N/A
Saskatchewan	N/A (34)	N/A	N/A	N/A	N/A
Notes:	Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.				
1	Alabama - The number of TTD weeks are subtracted from the 300-week, nonscheduled maximum.				
2	Arkansas - However, if the worker became PTD after already having received PPD, this could result in the worker receiving both.				
3	Colorado - A scheduled award may be modified by section 8-42-107.5 which limits combined temporary and permanent partial disability payment to \$123,512.08 for a whole body impairment equal to or less than 19% and \$247,021.05 for a whole body impairment that is greater than 20%. Also C.R.S. 8-42-301(2) limits mental impairment awards to 36 weeks, inclusive of any temporary disability benefits (with some exceptions).				
4	Colorado - If the worker becomes PTD after already having received PPD, this could result in the worker receiving both.				
5	Florida - If the worker becomes PTD after already having received PPD, this could result in the worker receiving both but not concurrently.				
6	Georgia - There is no PTD in Georgia, but PPD is not paid in addition to catastrophic benefits.				
7	Maine - Maine is a wage-loss state.				
8	Massachusetts - Massachusetts is a wage-loss state.				
9	Michigan - Michigan does not have PPD benefits. It is a wage-loss state, and disability is defined as a limitation of wage-earning capacity in work suitable to an employee's qualifications and training resulting from a personal injury or work-related disease. Partial benefits may be paid if the employee retains a wage-earning capacity at a pay level less than his/her maximum wages in suitable work.				
10	Mississippi - PPD can be reduced by any excess TB paid.				
11	Missouri - 2019 responses. No 2025 data were provided.				
12	Nebraska - If the worker became PTD after already having received PPD, this could result in the worker receiving both.				
13	Nebraska - Subject to the weekly maximum. Employee may receive benefits for separate injuries arising out of separate accidents so long as the combined payments do not exceed the maximum weekly rate allowed by statute.				
14	New Hampshire - They may be paid concurrently.				
15	New York - Workers usually cannot receive temporary disability and PPD benefits at the same time. Temporary disability benefits are paid until the worker either has no further causally related disability or reaches maximum medical improvement and is classified with a permanent disability. After being classified with a permanent disability, a claimant can be reclassified with a temporary disability or reclassified with a greater or less permanent disability.				
16	New York - Scheduled PPD benefits are reduced by all temporary benefits paid. For claims with a date of accident or disablement after April 9, 2017, where temporary disability benefits have been paid for 130 weeks from the date of accident or disablement, the carrier or self-insured employer receives a credit against the maximum benefits payable for non-schedule PPD benefits for any periods of temporary disability benefits paid beyond the 130 weeks, unless the Workers' Compensation Board determines the worker has not reached maximum medical improvement on that date.				
17	North Dakota - North Dakota does not have PPD. North Dakota has PPI awards which are lump-sum payments made in addition to disability benefits (NDCC65-05-12.2).				

Table 8 Sequence of Disability Payments Made Within Workers' Compensation Systems as of January 1, 2025					
Information on when permanent partial disability payments begin, if they are paid in addition to temporary disability and/or permanent total disability benefits, and if they are to be paid sequentially or can be paid concurrently with other benefits.					
Jurisdiction	Both Temporary Disability and PPD Paid	Scheduled PPD Paid upon Termination of Temporary Benefits	PPD Benefits Reduced by Temporary Benefits Paid	PPD Benefits Paid in Addition to PTD	PPD and PTD Paid Concurrently
18	Oklahoma - PPD benefits shall also be reduced by employer-paid wages in excess of statutory TTD amount.				
19	Oregon - Temporary disability and PPD benefits are separate. However, if temporary disability has been overpaid, that overpayment could be recovered from the PPD benefit. The insurer or self-insured employer may not recover an overpayment from a worker's PPD compensation in an amount that exceeds 50 percent of the total compensation awarded to the worker.				
20	Pennsylvania - Injured workers in Pennsylvania do not get TTD and specific-loss compensation for the specific-loss injury. However, if at the time of injury, the claimant sustains an injury "separate and apart" from the specific-loss injury, he or she can get TTD for "separate and apart" injuries and specific-loss compensation for the specific-loss injury.				
21	Pennsylvania - Specific loss gets paid after TTD period ends.				
22	Pennsylvania - Cannot get both TTD and specific loss for specific-loss injury.				
23	Pennsylvania - Can receive specific loss and PTD for "separate and apart" injuries at the same time.				
24	Rhode Island - They can be paid concurrently.				
25	South Carolina - PPD benefits are not reduced by temporary benefits unless more than 500 weeks.				
26	Virginia - The total paid for TTD and PPD is subject to the 500-week limitation.				
27	Washington - If the worker became PTD after already having received PPD, the amount of PPD paid is deducted from PTD benefits.				
28	Wisconsin - According to s.102.32(6)(e), Wis. Stats., payments for permanent partial disability "shall accrue and be payable between intermittent periods of temporary disability so long as the employer or insurer knows the nature of the permanent disability."				
29	British Columbia - Once the Board determines the worker's condition has reached medical plateau, and a percentage of disability is determined, it is applied to the worker's long term average net earnings, and the PPD benefits are 90% of the amount so determined. [RS&CM, Item C5-34.00]				
30	British Columbia - Any permanent disability benefits granted under the same claim are deducted from the amount of the wage-loss benefits payments. Permanent disability benefits that have been granted on another claim are deducted only to the extent that the combined total of wage-loss benefits and permanent disability periodic payments exceeds the current maximum. Cost of living adjustments are made if applicable. [Policy item #69.10 of the RS&CM]				
31	British Columbia - The worker will be maintained on wage-loss benefits where the worker's disability is temporary. If the worker's disability has stabilized as permanent, a permanent disability benefit is assessed. [RS&CM, Item C5-34.00]				
32	New Brunswick - Permanent physical impairment (PPI) award is a lump-sum payment provided to injured workers in addition to any loss of earnings. It is provided once per claim and is based on the percentage impairment which is multiplied by the maximum annual earnings for the year in which the accident occurred. For 2025, the maximum annual earnings is \$84,200.				
33	Nova Scotia - 2022 responses. No 2025 data were provided.				
34	Saskatchewan - Permanent Functional Impairment (PFI) award is a lump-sum payment provided to injured worker in addition to any earnings loss. It is a one-time lump sum based on percentage of impairment and is independent from any earnings loss benefits.				

Table 9 Coverage of Mental Stress, Cumulative Trauma, Hearing Loss, and Disfigurement as of January 1, 2025				
Information on breadth of coverage in each jurisdiction and on which jurisdictions' statutes cover mental stress, cumulative trauma, hearing loss, and disfigurement.				
Jurisdiction	Coverage of Mental Stress Claims When No Physical Injury	Coverage of Cumulative Trauma	Coverage of Occupational Hearing Loss	Coverage of Disfigurement
Alabama	No	Yes	Yes	Yes
Alaska	Yes	Yes	Yes	Yes
Arizona	Yes	Yes	Yes	Yes (1)
Arkansas	No (2)	Limited to rapid repetitive motion, back or neck, and hearing loss injuries	Yes	Yes (3)
California	Yes	Yes	Yes	Yes
Colorado	Yes (4)	Yes	Yes	Yes
Connecticut	For certain classes of employees with a PTSD diagnosis related to certain events (5)	Yes	Yes	Yes, on head, face or neck or any other area of the body which handicaps the employee in obtaining or continuing work
Delaware	Yes	Yes	Yes	Yes
District of Columbia	Yes	Yes	Yes	Yes
Florida	No—except first responders	No specific statute related to cumulative trauma exposure	Yes	No
Georgia	No	Yes	Yes	No
Hawaii	Yes	Yes (6)	Yes	Yes
Idaho	No (7)	Yes	Yes	Yes (8)
Illinois	Yes	Yes	Yes	Yes
Indiana	No	Yes	Yes	No
Iowa	Yes	Yes	Yes	Yes
Kansas	No	Yes	Yes	No
Kentucky	No	Yes	Yes	Not separately; covered if results in a permanent impairment
Louisiana	Yes	La. R.S. 23:1031.1 B Occupational disease (9)	Yes, per LA R.S. 1221(4)(p) (10)	Yes, per LA R.S. 1221(4)(p) (10)
Maine	Yes	Yes	Yes	No
Maryland	Yes (11)	Yes	Yes	Yes
Massachusetts	Yes	Yes	Yes	Yes
Michigan	Yes (12)	Yes	Yes (13)	Yes
Minnesota	PTSD according to DSM-V, for dates of injury on or after 10/1/2013	Yes	Yes	Yes
Mississippi	Yes	Yes	Yes	Yes
Missouri as of January 1, 2019 (14)	Yes	Yes	Yes	Yes (15)
Montana	No	Yes	Yes	Yes
Nebraska	Yes (16)	Yes	Yes	No
Nevada	Yes, Post Traumatic Stress Disorder and Acute Stress Disorder	Yes	Yes	Yes, if impairment included in PPD evaluation
New Hampshire	Yes (17)	Yes	Yes	Yes
New Jersey	Yes	Yes	Yes	Yes
New Mexico	Yes	Yes	Yes	Yes
New York	Yes	Yes	Yes	Yes
North Carolina	Yes	Yes	Yes	Yes
North Dakota	No (18)	Yes	Yes	Yes
Ohio	No	Yes	Yes	Yes
Oklahoma	No	Yes	Yes	Yes
Oregon	Yes (19)	Yes (20)	Yes (21)	Yes (22)
Pennsylvania	Yes	Yes	Yes	Yes
Rhode Island	Yes	Yes	Yes	Yes
South Carolina	Yes	Yes	Yes	Yes (23)
South Dakota	No	Yes	Yes	Yes
Tennessee	Yes	Yes (24)	Yes (24)	Not for injuries on or after 7/1/2014
Texas	No (25)	Yes	Yes	No
US Federal Programs - FECA	Yes	Yes	Yes	Yes
US Federal Programs - Longshore	Yes	Yes	Yes	Yes
Utah	Yes (26)	Yes	Yes	Yes
Vermont	Yes (27) (28)	Yes	Yes	Yes

Table 9 Coverage of Mental Stress, Cumulative Trauma, Hearing Loss, and Disfigurement as of January 1, 2025				
Information on breadth of coverage in each jurisdiction and on which jurisdictions' statutes cover mental stress, cumulative trauma, hearing loss, and disfigurement.				
Jurisdiction	Coverage of Mental Stress Claims When No Physical Injury	Coverage of Cumulative Trauma	Coverage of Occupational Hearing Loss	Coverage of Disfigurement
Virginia	Yes	Possibly (29)	Possibly (30)	Yes
Washington	Yes (31)	Yes (32)	Yes	No
West Virginia	Yes (33)	Yes	Yes (34)	Yes
Wisconsin	Yes (35)	Yes	Yes	Yes
Wyoming	Yes when experienced by a first responder	Yes	Yes	Yes
Canadian Jurisdictions Participating (stated in Canadian currency)				
British Columbia	Yes (36)	Yes	Yes (37)	Yes (38)
New Brunswick	Yes (39)	Yes (40)	Yes	No (41)
Nova Scotia as of January 1, 2022 (42)	Yes (43)	Yes	Yes	Yes
Ontario	Yes	Any trauma resulting from accidents in the course of employment is covered	Yes	Yes
Prince Edward Island	Yes, when stress is an acute reaction to a traumatic event (44)	Yes	Yes	Yes
Saskatchewan	Yes	Yes	Yes	Yes
Notes:				
<i>Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.</i>				
1	Arizona - Disfigurement covered only for head or face.			
2	Arkansas - There is an exception for victims of crimes of violence.			
3	Arkansas - Limited to facial or head.			
4	Colorado - A claim of mental impairment must be proven by evidence supported by the testimony of a licensed physician or psychologist. For purposes of this subsection (2), "mental impairment" means a recognized, permanent disability arising from an accidental injury arising out of and in the course of employment when the accidental injury involves no physical injury and consists of a psychologically traumatic event that is generally outside of a worker's usual experience and would evoke significant symptoms of distress in a worker in similar circumstances. A mental impairment shall not be considered to arise out of and in the course of employment if it results from a disciplinary action, work evaluation, job transfer, lay-off, demotion, promotion, termination, retirement, or similar action taken in good faith by the employer; and (2)(b)...the claimant shall be limited to twelve weeks of medical impairment benefits. A mental impairment may be within an employee's usual experience if they have been diagnosed with post-traumatic stress disorder after experiencing a psychologically traumatic event. This limitation shall not apply to any victim of a crime of violence...nor to the victim of a physical injury or occupational disease that causes neurological brain damage.			
5	Connecticut - See C.G.S. Sec. 31-294(k).			
6	Hawaii - Not in the statute, but these are handled just like any other claim.			
7	Idaho - Exception: Post-traumatic stress injuries suffered by a first responder are compensable under certain conditions per Idaho Code 72-451(4).			
8	Idaho - If it affects return to work and an impairment rating is given.			
9	Louisiana - La. R.S 23:1031.1 B. An occupational disease means only that disease or illness which is due to causes and conditions characteristic of and peculiar to the particular trade, occupation, process, or employment in which the employee is exposed to such disease. Occupational disease shall include injuries due to work-related carpal tunnel syndrome. Degenerative disc disease, spinal stenosis, arthritis of any type, mental illness, and heart-related or perivascular disease are specifically excluded from the classification of an occupational disease for the purpose of this Section.			
10	Louisiana - La. R.S 23:1221(4) Permanent partial disability (p) In cases not falling within any of the provisions already made, where the employee is seriously and permanently disfigured or suffers a permanent hearing loss solely due to a single traumatic accident, or where the usefulness of the physical function of the respiratory system, gastrointestinal system, or genito-urinary system, as contained within the thoracic or abdominal cavities, is seriously and permanently impaired, compensation not to exceed sixty-six and two-thirds percent of wages for a period not to exceed one hundred weeks may be awarded. In cases where compensation is so awarded, when the disability is susceptible to percentage determination, compensation shall be established in the proportions set forth in Subparagraph (o) of this Paragraph. In cases where compensation is so awarded, when the disability is not susceptible to percentage determination, compensation as is reasonable shall be established in proportion to the compensation hereinabove specifically provided in the cases of specific disability.			
11	Maryland - This is covered but under very limited circumstances.			
12	Michigan - If arising out of actual events of employment, not unfounded perceptions thereof, and if the employee's perception of the actual events is reasonably grounded in fact or reality.			
13	Michigan - 418.315 The employer shall also supply to the injured employee dental service, crutches, artificial limbs, eyes, teeth, eyeglasses, hearing apparatus, and other appliances necessary to cure, so far as reasonably possible, and relieve from the effects of the injury.			
14	Missouri - 2019 responses. No 2025 data were provided.			
15	Missouri - Disfigurement coverage is restricted to the head, neck, hands, and arms.			
16	Nebraska - Effective July 15, 2010, first responders may claim mental injury unaccompanied by physical injury if the mental injury was a result of extraordinary and unusual conditions as compared to the normal conditions of the employment. Mental injuries incidental to employee/employer relations are not compensable. Effective August 24, 2017, this section of the statutes extended coverage to frontline state employees, defined as an employee of the Department of Correctional Services or the Department of Health and Human Services whose duties involve regular and direct interaction with high risk individuals. Effective August 28, 2021, the definition of frontline employees includes county correctional officers.			
17	New Hampshire - There must be a physical manifestation of stress, with the exception of statutorily defined emergency response/public safety workers. Disfigurement must be caused by burns.			
18	North Dakota - NDCC 65-01-02. 11(6).			

Table 9 Coverage of Mental Stress, Cumulative Trauma, Hearing Loss, and Disfigurement as of January 1, 2025				
Information on breadth of coverage in each jurisdiction and on which jurisdictions' statutes cover mental stress, cumulative trauma, hearing loss, and disfigurement.				
Jurisdiction	Coverage of Mental Stress Claims When No Physical Injury	Coverage of Cumulative Trauma	Coverage of Occupational Hearing Loss	Coverage of Disfigurement
19	Oregon - A mental disorder, including any physical disorder caused or worsened by mental stress, may be compensable if the worker proves that employment conditions were the major contributing cause of the mental disorder. The worker must also prove the employment conditions producing the mental disorder exist in a real and objective sense; those employment conditions are conditions other than conditions generally inherent in every working situation or reasonable disciplinary, corrective or job performance evaluation actions by the employer, or cessation of employment or employment decisions attendant upon ordinary business or financial cycles; there is a diagnosis of a mental or emotional disorder which is generally recognized in the medical or psychological community; and there is clear and convincing evidence that the mental disorder arose out of and in the course of employment.			
20	Oregon - If categorized as an occupational disease, as a disease or infection caused by substances or activities to which an employee is not ordinarily subjected or exposed, the worker's claim is only compensable if the worker proves that employment conditions were the major contributing cause of the disease.			
21	Oregon - If categorized as an occupational disease, the worker's claim is only compensable if the worker proves that employment conditions were the major contributing cause of the occupational hearing loss. If the hearing loss is categorized as an injury, the worker's claim is only compensable if the worker proves the work injury was a material contributing cause of his/her disability or need for treatment.			
22	Oregon - May be limited. Resulting psychological treatment may be compensable.			
23	South Carolina - See S.C. Code Ann § 42-9-30(23).			
24	Tennessee - Workers' compensation claims are compensable only if the injury/condition primarily arises out of and in the scope of employment.			
25	Texas - Specific statutory provisions exist for first responders diagnosed with post-traumatic stress disorder (PTSD). PTSD is a compensable injury if it is based on a diagnosis that the disorder is caused by an event or events occurring in the course and scope of the first responder's employment and the preponderance of the evidence indicates that the event or events were a producing cause of the disorder. The definition of PTSD relies on the diagnostic criteria for PTSD specified by the American Psychiatric Association in the Diagnostic and Statistical Manual of Mental Disorders, fifth edition, or a later edition adopted by the commissioner of workers' compensation.			
26	Utah - Mental stress claims are allowed, without a physical injury, only when there is extraordinary mental stress from a sudden stimulus arising out of and in the course and scope of employment. Mental stress claims are not allowed if the basis for the claim is good faith employer personnel actions.			
27	Vermont - Effective July 2017, first responders receive a rebuttable presumption of causation for diagnosed PTSD claims under specified circumstances.			
28	Vermont - Also effective 2017, applicable standard for all "mental-mental" claims changed to contemplate the average employee across all occupations.			
29	Virginia - Cumulative trauma is generally not compensable, except for hearing loss and carpal tunnel syndrome but at the higher evidentiary standard.			
30	Virginia - It is covered upon clear and convincing evidence as an "ordinary disease of life" under Va. Code Section 65.2-401.			
31	Washington - A claim for mental stress can only be allowed if the stress resulted from a single, traumatic event.			
32	Washington - Exception: Occupational disease claims resulting from posttraumatic stress disorders of firefighters as defined in RCW 41.26.030(17) (a), (b), (c), and (h) and firefighters, including supervisors, employed on a full-time, fully compensated basis as a firefighter of a private sector employer's fire department that includes over fifty such firefighters, law enforcement officers as defined in RCW 41.26.090 (19) (b), (c), and (e) hired after June 7, 2018, public safety telecommunicators hired after June 11, 2020, and direct care registered nurses as defined in RCW 51.32.395 who are employed on a fully compensated basis, with claims that have dates of manifestation on or after January 1, 2024, don't apply to the exclusion of mental conditions caused by stress, so they can be covered. RCW 51.08.142.			
33	West Virginia - Effective April 10, 2021, WV Code 23-4-1f relating to psychiatric injuries is amended to permit employers of defined first responders to provide optional coverage for post-traumatic stress disorder (PTSD); these amendments expire on July 1, 2026 unless extended by the Legislature. https://code.wvlegislature.gov/23-4-1f/ .			
34	West Virginia - Effective June 4, 2019, WV Code 23-5-7 relating to compromise and settlement is amended to establish that the term "nonorthopedic occupational disease" does not include occupational hearing loss or hearing impairment; thus a claimant may negotiate a settlement of all components of such hearing loss claims on a pro se basis, while negotiation and settlement of "nonorthopedic occupational disease" otherwise requires representation by legal counsel in order to settle medical components of the claim(s). https://code.wvlegislature.gov/23-5-7/ .			
35	Wisconsin - For injuries reported on or after 10/1/2021, law enforcement officers and full-time firefighters may receive benefits based on PTSD diagnosis where no physical injury based on a preponderance of the evidence instead of the higher "unusual stress of greater dimensions" standard required for all other employees. Liability for disability and treatment under s. 102.17(9), Wis. Stats., is limited to no more than 32 weeks and officer/firefighter cannot make claim for PTSD more than three times during lifetime.			
36	British Columbia - Section 135 of the Act provides, in part, that the mental disorder must be presumed to be a reaction to the one or more traumatic events arising out of and in the course of the worker's employment, unless the contrary is proved. Stressors can be bullying or harassment, or a cumulative series of significant work-related stressors arising out of and in the course of employment, and not caused by a decision of the worker's employer relating to the worker's employment, a decision to change the work to be performed or the working conditions, or to discipline the worker or terminate the worker's employment. [Item C5-34.00 of the RS&CM]			
37	British Columbia - Section 145 of the Act covers hearing loss. A worker is entitled to compensation if (a) the worker has hearing loss of non-traumatic origin that arose out of and in the course of employment to which the compensation provisions apply and (b) the hearing loss (i) was sustained by exposure to causes of hearing loss in British Columbia, and (ii) is a greater loss than the minimum set out in Schedule 2 [Non-Traumatic Hearing Loss] of the Act. If the hearing loss is traumatic and work-related, compensation is paid as with any other injury under section 134(1) of the Act. [Item C4-31.00 of the RS&CM provides guidance in adjudicating hearing loss claims. Item C3-22.00 addresses cases where hearing loss is secondary to an employment injury.]			
38	British Columbia - Item C6-43.00 of the RS&CM and Section 199 of the Act provides that if a worker experiences serious and permanent disfigurement that the Board considers capable of impairing the worker's earning capacity, the Board may pay a lump sum in compensation and may even do so if the amount the worker was earning before the injury has not been reduced.			
39	New Brunswick - Under limited circumstances. The <i>Workers' Compensation Act</i> excludes mental stress as a compensable condition, except when the mental stress or disablement caused by mental stress is the result of an acute reaction to a traumatic event.			
40	New Brunswick - Yes, if proven to arise out of and in the course of employment.			
41	New Brunswick - Not specifically; however, if the disfigurement leads to increased impairment, then the higher impairment translates into a higher permanent physical impairment award. Otherwise, there is no specific award.			
42	Nova Scotia - 2022 responses. No 2025 data were provided.			
43	Nova Scotia - When stress is an acute reaction to a traumatic event(s).			
44	Prince Edward Island - Amendments to POL-01 Psychological and Psychiatric Conditions will come into effect on January 1, 2025 which will provide coverage for an acute reaction or the cumulative effects of multiple occurrences of workplace harassment.			

Table 10 Details on Disfigurement Claims as of January 1, 2025			
A listing of the disfigurement coverage in jurisdictions, the nature of the disfigurements covered, and the maximum compensation allowed.			
Jurisdiction	Disfigurement Covered	Types of Disfigurement Covered	Maximum Compensation Allowed
Alabama	Yes	Those that affect the employability of the claimant	100 weeks
Alaska	No	N/A	N/A
Arizona	Yes	Head or face	18 months of permanent compensation
Arkansas	Yes	Face or head	\$3,500.00
California	Yes	Per disability rater rating	Based on PD rate
Colorado	Yes	Any serious, permanent disfigurement about the head, face, or parts of the body normally exposed to public view	Director has the authority to allow up to \$7,088.24 and up to \$14,173.97 for extensive facial or body scars, burn scars, or stumps resulting from loss of limbs
Connecticut	Yes, on head, face or neck or any other area of the body which handicaps the employee in obtaining or continuing work	Any permanent significant disfigurement of, or permanent significant scar on, the face, head, or neck or on any other area of the body which handicaps the employee in obtaining or continuing to work	208 weeks times the APW max. \$247,728.00
Delaware	Yes	Pursuant to 19 Del. C. §2326(f), serious and permanent disfigurement, provided such disfigurement is visible and offensive when the body is clothed normally	The higher of either (1) the amount of compensation found to be due for disfigurement without regard to compensation for loss of or loss of use, or (2) the amount of compensation due for loss of or loss of use plus 20% thereof for disfigurement
District of Columbia	Yes	Serious disfigurement of the face, head, neck, or other normally exposed bodily areas	\$7,500
Florida	No	N/A	N/A
Georgia	No	N/A	N/A
Hawaii	Yes	Scarring and other disfiguring consequences caused by medical, surgical, and hospital treatment	\$30,000.00
Idaho	Yes, if caused by work-related accident or injury	All caused by work-related accidents	No maximum—benefits due are paid
Illinois	Yes, but not at the same time	Yes	No
Indiana	No	N/A	N/A
Iowa	Yes	Disfigurement of the face or head which shall impair the future usefulness and earnings of the employee in the employee's occupation at the time of injury	150 weeks
Kansas	Yes; limited	Same as other permanent disabilities	Same as other disabilities
Kentucky	Not separately covered	Those with a permanent impairment pursuant to the AMA Guides	Same as with all PPD/PTD
Louisiana	Yes	Determined by any Workers' Compensation Judge	66 2/3% of AWW (current weekly maximum is \$845) up to 100 weeks, so maximum is currently \$84,500
Maine	No	N/A	N/A
Maryland	Yes	See LE § 9-627(i)	156 weeks
Massachusetts	Yes	Scarring on face, neck, and hands only	\$15,000.00
Michigan	Yes	No specific loss but could result in wage loss benefits being owed	N/A
Minnesota	Yes	Various	Various
Mississippi	Yes	Serious facial or head disfigurement	\$5,000.00
Missouri as of January 1, 2019 (1)	Yes, but only disfigurement to the head, neck, hands, or arms	Seriously and permanently disfigured about the head, neck, hands, or arms	40 weeks of compensation at the applicable PPD rate
Montana	Yes	Injured workers who suffer serious face, head, or neck disfigurement (2)	\$2,500.00
Nebraska	No	N/A	N/A
Nevada	Yes	Per the AMA Guides, 5th edition	Variable
New Hampshire	Yes, if resulting from burns	Scarring, disfigurement, or other skin impairment resulting from burns	350 weeks at compensation rate
New Jersey	Yes	Significant permanent disfigurement	Based on extent of permanent disability
New Mexico	Yes	All	\$2,500 for disfigurement about the face or head
New York	Yes	Serious facial or head disfigurement, including a disfigurement continuous in length which is partially in the facial region area and extends into the neck region	\$20,000.00
North Carolina	Yes	Same as above	Same as above
North Dakota	Yes	Not specified	No set figure, but permanent impairment awards may include an award for disfigurement (3)
Ohio	Yes	Facial and head	\$10,000
Oklahoma	Yes	Serious and permanent disfigurement	\$50,000.00

Table 10 Details on Disfigurement Claims as of January 1, 2025			
A listing of the disfigurement coverage in jurisdictions, the nature of the disfigurements covered, and the maximum compensation allowed.			
Jurisdiction	Disfigurement Covered	Types of Disfigurement Covered	Maximum Compensation Allowed
Oregon	Yes, but very limited (4)	N/A	N/A
Pennsylvania	Yes	Serious and permanent disfigurement of the head, neck, or face; the disfigurement must produce an unsightly appearance and not usually be incidental to the employment	275 weeks
Rhode Island	Yes	Permanent disfigurement of body	500 weeks
South Carolina	Yes, if visible in employment or evidence of keloid	At discretion of Commissioner	50 weeks (5)
South Dakota	Yes	Not specified	\$332,592.00
Tennessee	No	N/A	N/A
Texas	No	N/A	N/A
US Federal Programs - FECA	Yes	Face, neck, or head	\$3,500.00
US Federal Programs - Longshore	Yes	Face, head, neck, or other normally exposed area likely to handicap employee in securing or maintaining employment	Not to exceed \$7,500.00 (6)
Utah	Yes	As provided in the Utah 2006 Supplemental Impairment Rating Guides and the AMA 5th Edition	Up to 312 weeks
Vermont	Yes	Not specified	Same as any other permanent partial disability
Virginia	Yes	Whole body	\$84,600 (7)
Washington	No	N/A	N/A
West Virginia	Yes	No specification	No maximum; impairment is calculated under the AMA Guides, 4th Edition
Wisconsin	Yes (8)	Consideration for disfigurement is confined to areas of the body that are exposed in the normal course of employment	Disfigurement cannot exceed the employee's average annual earnings
Wyoming	Yes	Any treatment deemed reasonable or necessary	N/A
Canadian Jurisdictions Participating (stated in Canadian currency)			
British Columbia	Yes (9)	Disfigurement to five areas of the body are recognized: head and neck, hand, arm, leg (including the foot), torso (10)	Lump-sum payments: Head and neck: maximum is \$83,801.87 Each hand: maximum is \$27,933.66 Each arm: maximum is \$20,898.03 Each leg (including foot): maximum is \$13,817.92 Torso: maximum is \$13,817.92 (10)
New Brunswick	It may be covered if it is part of a compensable claim	Physical injuries	Physical permanent impairment rating of 100%
Nova Scotia as of January 1, 2022 (11)	Yes	Case-by-case basis, evaluation based on Guides to the Evaluation of Permanent Impairment, 4th Edition	No set figure, but permanent impairment awards may include an award for disfigurement
Ontario	Yes	Any injury in the course of employment that necessitates health care or results in a loss of earnings is covered	No separate maximum for disfigurement (i.e., same maximums would apply as for all other injuries)
Prince Edward Island	Yes	Not specified	No set figure, but permanent impairment awards may include an award for disfigurement
Saskatchewan	Yes	Disfigurement means a conspicuous alteration or abnormal change in the features of the face, neck, hands, torso, and upper and lower extremities and/or substantial and permanent scarring of these areas. It is related to the cosmetic appearance of the body and not the loss of bodily function	Maximum award is the same for all permanent functional impairments and is based on whole person impairment.
Notes:	Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.		
1	Missouri - 2019 responses. No 2025 data were provided.		
2	Montana - 39-71-708, MCA.		
3	North Dakota - Permanent impairment means the loss of or loss of use of a member of the body existing after the date of MMI and includes disfigurement resulting from an injury.		
4	Oregon - No impairment value is assigned to disfigurement, but resulting psychological adjustment problems may be compensable.		
5	South Carolina - See S.C. Code Ann § 42-9-30(23).		
6	US Federal Programs - Longshore - Section 8(E)(20) of the Longshore and Harbor Workers' Compensation Act (LHWCA) provides the maximum compensation for disfigurement at \$7,500.		
7	Virginia - Maximum 60 weeks of benefits x maximum compensation rate in effect.		
8	Wisconsin - Compensation for disfigurement will not be permitted for an employee who returns to work for the employer at the time of injury or who is offered employment by that employer at the same or higher wage unless the employee suffers an actual wage loss due to the disfigurement. s. 102.56 (1) & (2), Wis. Stats.		
9	British Columbia - Statute requires that the disfigurement be permanent, serious, and capable of impairing the worker's earning capacity. [Section 199, Act]		

Table 10 Details on Disfigurement Claims as of January 1, 2025			
A listing of the disfigurement coverage in jurisdictions, the nature of the disfigurements covered, and the maximum compensation allowed.			
Jurisdiction	Disfigurement Covered	Types of Disfigurement Covered	Maximum Compensation Allowed
10	British Columbia - The factors used in assessing severity and determining compensation are (1) texture and thickening (2) keloid scarring, hardening (3) colour (4) visibility (5) loss of bodily form. These are assigned a points value based on proportion of the body part covered, and averaged. Figures are from 2024. [RS&CM, Item C6-43.00]		
11	Nova Scotia - 2022 responses. No 2025 data were provided.		

Table 11 Fatality Benefits Paid Under Workers' Compensation Systems as of January 1, 2025															
The burial allowance and weekly benefits allowed for one or more dependents in the case of a work-related fatality, the maximum and minimum payable, how the benefit is calculated, the maximum time period for benefits under different scenarios, and if offsets are allowed.															
Jurisdiction	Maximum Burial Allowance	Basis of Payment for Spouse and One Child	Statutory Limit for Dependency Benefits	Dependency Benefits			Spouses' Benefits End			Payment upon Remarriage	Children's Benefits End			Offsets Allowed on Dependency Benefits	Additional Benefits Available
				Weekly Minimum	Weekly Maximum	Basis of Weekly Maximum Calculation	When Statutory Limit Is Paid	Upon Death	Upon Remarriage		At Age	If a Student, at Age	If Child Is Disabled, at Age		
Alabama	\$6,500	66 2/3% of deceased worker's AWW	500 weeks	\$311.00	\$1,130.00	66 2/3% of AWW	Yes	Yes	Yes	None	18	No exception in statute	Until benefits are exhausted	No	\$7,500 paid to estate if no dependents
Alaska	\$12,000	90% of the worker's spendable, after-tax, or net weekly wages	12 years (1)	\$75 to spouse, \$25 to one child, \$50 to children	\$1,556.00	120% of the SAWW	Yes	Yes	Yes	2-year lump sum	23	23	N/A (2)	50% of the amount paid in Social Security retirement or survivor's benefits	One-time \$8,000 lump-sum death benefit; \$10,000 to Second Injury Fund if no qualifying dependents
Arizona	\$5,000	35% of the average monthly wage of the deceased to be paid to spouse and to surviving children an additional 31 2/3% of the average monthly wage to be divided equally among them	None	None	\$908.82	66 2/3% of the average monthly wage	N/A	Yes	Yes	2-year lump sum	18	22	None	None	None
Arkansas	\$6,000	50% of deceased worker's AWW	Remarriage of spouse, attainment of age 18 of dependent child or 25 if full-time student; 450-week limit for partial dependents (3)	\$20.00	\$903.00	Maximum TTD rate	N/A	Yes	Yes	104-week lump sum	18	25	No age limit	None	None
California	\$10,000	See CA Labor Code section 4702 and various death benefits	There is a maximum amount paid per Labor Code section 4702 but that amount can be higher based on CA Labor Code section 4703.5	\$224.00	\$1,680.29	Maximum death benefits are awarded at 2/3 of AWW with caps set by statute	Yes	Yes	No	N/A	18 (4)	18 (5)	No end; benefits continue for the life of the child	None	None
Colorado	\$13,617.97	66 2/3% of the deceased worker's AWW	None	\$334.74	\$1,338.96	91% of SAWW	N/A	Yes	Yes (6)	2-year lump sum (6)	18	21	Benefits can continue	Dependency benefits can be reduced up to 50% of any federal survivor's benefits received	Reasonable, necessary, and related medical expenses for the deceased prior to death and funeral and burial benefits of up to \$13,617.97
Connecticut	\$14,371.23 (7)	75% of the deceased worker's spendable earnings	None	Same as TTD minimum	\$1,446.00	SAWW	N/A	Yes	Yes	None	18	22	Benefits can continue	None	None
Delaware	\$3,500	66 2/3% of AWW	None (8)	\$295.12	\$885.34	66 2/3% of SAWW	No	Yes	No	N/A	18	25	N/A (9)	None	None
District of Columbia	\$5,000	50% (widow/widower) plus 16 2/3% for dependents	Yes	\$452.17	\$1,808.66		N/A	Yes	Yes	2-year lump sum	18	23	Life		
Florida	\$7,500	50% of deceased worker's AWW for spouse, 16 2/3% of AWW for child or children (10)	Maximum payable is \$150,000	\$20, unless wages are less than \$20, then full wages	\$1,295.00	SAWW	Yes	Yes	Yes	N/A	18	22	22	No	Spouse may receive payment for post-secondary educational student fees
Georgia	\$7,500	Workers' TTD rate applicable	\$320,000 for surviving spouse with no dependents	\$50.00	\$800.00	2/3 of the decedent's AWW	Yes (11)	Yes	Yes	None	18	22	Benefits can continue	No	None
Hawaii	\$5,960.00	66 2/3% of SAWW	312 weeks	\$298.00	\$1,192.00	SAWW	Yes	Yes	Yes	2-year lump sum	18	22	Can continue	No	If no dependent, then 25% of 312 weeks multiplied by \$899 to the non-dependent parents
Idaho	\$6,000	50% of current average state wage	500 weeks for spouse, age 18 for children or age 23 if enrolled in an accredited learning institution	5% per child with dependent widow or \$53.65	60% of current average state wage or \$643.80 weekly	60% of ASW per statute	Yes	Yes	Yes	100-week lump sum or remainder left of the 500 weeks, whichever is less	18	Until age 23 if enrolled in an accredited learning institution	Can continue past 18 if child has not received 500 weeks prior to reaching 18	No	N/A
Illinois	\$8,000	Calculate 66 2/3% of the worker's preinjury gross average weekly wage, subject to max. and min. levels	\$500,000 or 25 years	\$715.42	\$1,907.79	Increase in SAWW	Yes	Yes	Yes	2-year lump sum	18	25	N/A	No	No
Indiana	\$10,000	% of AWW	500 weeks	\$50.00	\$780.00	66 2/3% of AWW	Yes	Yes	Yes	125 weeks or remainder of 500 weeks, whichever is less	18	21	Can continue	No	None

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Jurisdiction	Maximum Burial Allowance	Basis of Payment for Spouse and One Child	Statutory Limit for Dependency Benefits	Dependency Benefits			Spouses' Benefits End			Payment upon Remarriage	Children's Benefits End			Offsets Allowed on Dependency Benefits	Additional Benefits Available
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Iowa	12 times the statewide AWW	80% of the worker's spendable, after-tax, or net weekly wages	None	Based on AWW of \$351.00 and the employee's marital status and number of entitled exemptions	\$2,274.00	200% of the SAWW	N/A	Yes	Yes	2 year's benefits paid in a lump sum if there are no children entitled to benefits	18	25	Benefits can continue	No	None
Kansas	\$10,000	66 2/3% of the deceased worker's AWW	\$500,000	\$556.67 (50% of SAWW per 44-510b(a))	\$835.00	66 2/3% of the deceased worker's AWW	Yes	Yes	No	N/A	18	23	23	No	None
Kentucky	\$109,944	40% of employee's AWW to widow and 15% of AWW to child subject to state maximum	18 or 22 if in school	None	All combined cannot exceed amount payable for total disability	110% SAWW	Yes	Yes	Yes	Lump sum of two years of benefits	18	22	None specifically identified except qualification for old age social security	No	No
Louisiana	\$8,500	46.25% of AWW, subject to minimum/maximum benefits	Per La. R.S. 23:1232 et. seq.	\$225 or actual wage, whichever is less	\$845.00	75% of the SAWW	N/A	Yes	Yes	2-year lump sum	18	23	Can continue	No	A lump-sum benefit to children over age of majority if no spouse or minor dependent children; or a lump-sum benefit to parent or parents if no spouse, minor dependent children or children over age of majority
Maine	\$4,000	1/1/93-12/31/12: 80% of the worker's spendable, after-tax, or net wage; 1/1/13 and after: 2/3 of average gross weekly wages	500 weeks or until age 18 for children	None	DOI 1/1/1993-12/31/2012: \$746.37; DOI on/after 1/1/2013: \$829.30	DOI 1/1/93-12/31/12: 90% of the SAWW; DOI on/after 1/1/13: 100% SAWW after 1/1/2020 125% SAWW	Yes	Yes	Yes	N/A	18	23	Over 18 if no surviving dependent parent	50% of the amount paid in Social Security old age benefits	\$3,000 in incidental compensation to the employee's estate
Maryland (12)	\$7,000	Deceased covered employee's AWW as a percentage of total household income	144 months or on the date of what would have been the 70th birthday of the deceased employee, provided that a minimum of 5 years of death benefits has been paid	\$25 or the AWW of the worker, whichever is less	\$1,493.00	SAWW	Yes	Yes	Continue payments to spouse for 2 years after remarriage if no dependent children	Continue payments to spouse for 2 years after remarriage if no dependent children	18	23	Continue for duration of dependent's disability	Disability retirement paid to employees of governmental units or quasi-public corporations	None
Massachusetts	\$14,633.04	66.67% of the AWW of the deceased worker plus six dollars more a week for each child not to exceed the SAWW	250 weeks	\$110.00	\$1,000.00	SAWW as of October 1st	Yes	Yes	No	N/A	18	18	Can continue	No	Burial costs (13)
Michigan	\$6,000	Using same formula for calculating TTD benefits: 80% of the worker's after-tax, or net weekly wages, taking into account 1 dependent	500 weeks	\$646.12	\$1,164.00	Using same formula for calculating TTD benefits: 80% of the worker's after-tax AWW	Yes	Yes	Yes	N/A	18	18 (14)	18 (14)	No	None
Minnesota	\$15,000	60% of deceased worker's daily wage	Benefit ends after 10 years or 10 years after the last child is no longer dependent; minimum payable is \$60,000	None	108% of SAWW for preceding year (15)	Set by statute, same as TTD	Yes	Yes	No	Benefits continue for the remaining period	18	25	Can continue	Federal government survivor benefits	If no dependents, \$60,000 is paid to the estate
Mississippi	\$5,000	Spouse gets 35% of deceased's AWW, child gets 10%; subject to maximum of \$630.73 combined	450 weeks; remarriage for spouse; age 18-23 for child	\$25.00	\$630.73	SAWW	Yes	Yes	Yes	None	18	23	450 weeks	No	An immediate payment of \$1,000 to the spouse
Missouri as of January 1, 2019 (16)	\$5,000	(17) and (18)	Refer to notes (17), (18), and (19)	\$40.00	\$947.64, but see (18)	105% of SAWW, but see (18)	N/A	Yes	Yes	2-year lump sum	(19)	(19)	Can continue for life	No	(18) and (20)
Montana	\$10,000 (21)	66 2/3% of preinjury wage, not to exceed SAWW and it must be divided equally between beneficiaries	If the beneficiary dies; after 500 weeks of benefits to the spouse; or until the spouse remarries (22)	50% of SAWW	May not exceed the state's average weekly wage at time of injury	100% of AWW	Yes	Yes	Yes	N/A	18	22	Can continue for life	N/A	For dependent parent or dependent brother or sister, if no other dependents exist, up to statutory maximums or, if no dependents, \$3,000 must be paid to dependent's surviving parent(s)

Jurisdiction	Maximum Burial Allowance	Basis of Payment for Spouse and One Child	Statutory Limit for Dependency Benefits	Dependency Benefits			Spouses' Benefits End				Children's Benefits End			Offsets Allowed on Dependency Benefits	Additional Benefits Available
				Weekly Minimum	Weekly Maximum	Basis of Weekly Maximum Calculation	When Statutory Limit Is Paid	Upon Death	Upon Remarriage	Payment upon Remarriage	At Age	If a Student, at Age	If Child Is Disabled, at Age		
Nebraska	\$11,600 (23)	75% of the deceased worker's AWW	None	\$49	\$1,130.00	75% of deceased worker's AWW	N/A	Yes	Yes	Two years indemnity in one lump sum	19 (24)	25	Can continue	No	None
Nevada	\$10,000	50/50	None	None	\$1,300.33	SAWW	N/A	Yes	Yes	N/A	18	22	18 (exception, incapable of supporting self)	No	None
New Hampshire	\$10,000	No set calculation	18 years of age, or 25 if full time student	\$427.87	\$2,139.00	150% of SAWW	N/A	Yes	Yes	Benefits terminate	18	25	As long as disability/incapacity continues	No	None
New Jersey	\$3,500	70% of wages	Lifetime with exceptions	\$309.00	\$1,159.00	Decedent's wages	Yes	Yes	Yes	450 weeks minus amount already paid	18	23	Can continue	No	None
New Mexico	\$7,500	66 2/3% of AWW	100% of the SAWW for 700 weeks	66 2/3% of SAWW	66 2/3% of AWW as stated in Statute 52-1-46	66 2/3% of AWW as stated in Statute 52-1-46	Yes	Yes	Yes	2-year lump sum	18	23	Benefit can continue if dependent incapable of self-support	No	None
New York	\$10,500 to \$12,500, depending on county (25)	Spouse gets 36 2/3% of deceased worker's AWW and child gets 30% of deceased worker's AWW	(26)	\$30.00	\$1,171.46	Weekly maximum benefit is 2/3 of the New York SAWW (27)	N/A	Yes	Yes	2-year lump sum	18	23	When blindness or physical disability ends	Spouse's benefit reduced by spouse's share of Social Security survivors insurance (28)	N/A
North Carolina	\$10,000	Same as above	500 weeks (29)	\$30.00	\$1,380.00	Same as above	Yes	Yes	Yes	N/A	Same as above	18	18	No	None
North Dakota	\$10,000	66 2/3% of the worker's preinjury wage, as well as \$15 per child per week	\$300,000 or death	\$727.00 (30)	\$1,514.00	125% of SAWW	Yes	Yes	Yes	Lump sum equal to 104 weeks' compensation (31)	18	22	Can continue, NDCC 65-01-02 (9)	None	A lump sum of \$2,500 to the decedent's spouse or guardian of the children and \$800 for each dependent child (32)
Ohio	\$7,500	Discretionary based on circumstances	None	\$615.50	\$1,231.00	66 2/3% of AWW, not to exceed the SAWW	N/A	Yes	Yes	1 payment = two years of benefits	18	25	Continue until death or disability ends	None	Dependents may receive funeral expenses up to the maximum and depending on the circumstance, may be eligible for other comp, such as scheduled loss that "accrued" prior to the injured worker's death
Oklahoma	\$10,000	85% of deceased worker's AWW, plus statutory lump sum (70% to spouse and 15% to child)	None	None	\$1,083.46	70% of the deceased worker's AWW up to a maximum of 100% of the SAWW	N/A	Yes	Yes	2-year lump sum	18	23	No age limitation: weekly income benefit continues as long as child is physically or mentally incapable of self-support	None	N/A
Oregon	\$26,629.60 (33)	Monthly benefit of 4.35 times 66 2/3% of the state AWW plus 4.35 times 25% of the state AWW for one child (34)	None	N/A	\$133.15 unless benefits per ORS 656.204(6) for secondary education (25)	Dependents: 10% of SAWW; Spouse: 66 2/3% of SAWW; Children <19: 133-1/3% of SAWW; Child 19-26 during education with a surviving parent: 25% of SAWW; Child 19-26 during education without a surviving parent: 66 2/3% of SAWW (34) (35)	N/A	Yes	Yes	3-year lump sum	19	27 (36)	Can continue for life	None	None
Pennsylvania	\$7,000	60% of deceased worker's AWW	60% of deceased worker's AWW	No less than 50% of SAWW	\$1,205.00	100% of SAWW	N/A	Yes	Yes	2-year lump sum	18	23	For duration of disability	None	None
Rhode Island	\$20,000	Spouse receives weekly rate for total incapacity of deceased and \$40 per week for each dependent child	None	None	\$1,573.00	Weekly rate for total incapacity payments of deceased	Until death	Yes	Yes	Payments go to remaining dependents	18	23	Can continue	None	None

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				Weekly Minimum	Weekly Maximum	Basis of Weekly Maximum Calculation	When Statutory Limit Is Paid	Upon Death	Upon Remarriage	Payment upon Remarriage	At Age	If a Student, at Age	If Child Is Disabled, at Age		
South Carolina	\$12,000 (37)	Spouse receives 50% of award, dependent children divide remaining 50% equally	500 weeks	\$75 if wages are > \$75; otherwise, comp rate is equal to wages	\$1,134.43	100% of SAWW	Yes	N/A	No	No	19	23 or if academic enrollment ends	Can receive benefits for maximum weeks	None	None
South Dakota	\$10,000	66 2/3% of the worker's preinjury wage (38)	None	\$533.00	\$1,066.00	100% of SAWW	N/A	Yes	Yes	2-year lump sum	18	22	Can receive benefits for life	None	Children receive \$50 per month until age 18 and can receive up to \$2,000 a year for up to 5 years for college expenses at a SD post-secondary school
Tennessee	\$10,000	(39)	\$477,000.00	\$185.55	\$1,237.00	450 X SAWW	Yes	Yes	Yes	None	18	22	Can continue but not to exceed the maximum total benefit	None	\$20,000 paid to estate if no dependents, excluding burial expenses
Texas	\$10,000	50/50	Minimum of 364 weeks	None	\$1,058.00	100% of SAWW	N/A	Yes	Yes (40)	2-year lump sum (40)	18	25	Until death or no longer has the disability	None	No additional benefits available; if dependency benefits are not paid for 364 weeks, any remainder to be paid to the Texas Workers' Compensation Subsequent Injury Fund
US Federal Programs - FECA	\$800	The surviving spouse receives 45%, and the child receives 15% of employee's monthly pay up to a total of 75%, if not children, spouse receives 50%	None	GS-2, step 1	GS-15, step 10	GS-15, step 10	N/A	Yes	Yes (if before age 55)	2-year lump sum	18	23	Can continue	FERS automatic death benefit cannot be received concurrently	\$200 administrative fee to the estate; death gratuity up to \$100,000 for employee for death due to service with an Armed Force in a contingency operation
US Federal Programs - Longshore	\$3,000	66 2/3 of AWW	Death or independence	\$499.78	\$1,999.10	200% of NAWW	N/A	Yes	Yes	2-year lump sum	18	23	Can continue	None	If no qualifying dependents, \$5,000 paid to the Special Fund (41)
Utah	\$12,500 for funeral and burial expenses	66 2/3% of AWW not to exceed 85% of SAWW; apportioned equally among all dependents	312 weeks; however may be extended when beneficiary remains wholly dependent	\$45.00	\$1,091.00	85% of SAWW at the time of injury	Yes; except when beneficiary remains wholly dependent	Yes	Yes	Up to one year of benefits	18	18	Benefits continue as long as child is dependent	Reduced by 50% of Social Security death benefits	None
Vermont	\$10,000	71 2/3% AWW	Varies with dependent	\$588.00	\$1,763.00	150% of SAWW	There is no statutory limit, but after minimum of 330 weeks, spousal benefits end at age 62, when eligible for Social Security, or with remarriage or with death of spouse	Yes	Yes	Balance of 330 weeks of benefits, if applicable	18	No age limit while enrolled in approved educational or vocational training institution	Can continue	None	None
Virginia	\$10,000	66 2/3% of AWW	500 weeks	\$352.50	\$1,410.00	100% of SAWW	Yes	Yes	Yes	No	18	23	Can continue	None	Reasonable transportation expenses for the deceased, not to exceed \$1,000
Washington	\$14,856	62% of worker's wage on date of injury, up to statutory maximum	N/A	(42)	\$2,057.03	120% of SAMW	N/A	Yes	Yes	2-year lump sum (3-year law enforcement officers and fire fighters)	18	23	Can possibly continue, for life	None	A surviving spouse or child or children of such working if there is no surviving spouse, or dependent parent or parents, if there is no surviving spouse or child or children of any such deceased worker shall be immediately paid a sum equal to 100% of SAMW as defined in RCW 51.08.018
West Virginia	\$10,000 (43)	The benefit received by the deceased worker		Federal minimum wage	\$1,067.12	The benefit received by the deceased worker	N/A	Yes	Yes	None	18	25	Can continue for life	None	Wholly dependent parent or other wholly dependent person may receive benefits for a period of six (6) years after the death of the worker (44)

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				Weekly Minimum	Weekly Maximum		When Statutory Limit Is Paid	Upon Death	Upon Remarriage		At Age	If a Student, at Age	If Child Is Disabled, at Age		
Wisconsin	\$10,000	Four multiplied by the annual wage up to a maximum of \$397,800.00	\$397,800.00	N/A	\$1,326.00	110% of the SAWW	Yes	Yes (45)	Yes (46)	N/A	18	Statute is silent on the child's status of student/non-student	Payments can continue beyond the child's 18th birthday but may not continue for more than a total of 15 years	None	(47)
Wyoming	\$10,000	(48)	None	2/3 of SAMW	\$986 (49)	(48)	N/A	Yes	Yes	No	21	25	Can continue	None	Spouse can apply to WC based upon need and receive an additional 12 months' award not to exceed 1/3 SAMW; this is renewable until the spouse dies or remarries
Canadian Jurisdictions Participating (stated in Canadian currency)															
British Columbia	\$11,230.10 (50)	85% of permanent total disability award rate - 50% of federal benefit (CPP) for dependents (51)	None	\$320.53 (52)	\$1,500.61 (53)	Permanent total disability award	Permanent total disability award	Yes (54)	N/A	N/A	19 (55)	25 (55)	Benefits can continue possibly for life (55)	Dependency benefits can be reduced up to 50% of any federal survivor's benefits received (56)	Yes (57)
New Brunswick	\$21,061.20 (58)	(59)	(60)	None	(61)	(62)	Yes	Yes	(63)	(63)	18	21	Can continue	(64)	None
Nova Scotia as of January 1, 2022 (65)	\$4,000 up to \$5,000 on certain conditions	For spouse, 85% of worker's net average earnings before the accident; for child, \$196 per month	When the spouse reaches 65 or the worker would have reached 65, whichever is later	None	\$1,326.92	137.5% of the average industrial wage for Nova Scotia	Until age 65 or until the deceased would have reached age 65, whichever is later	Yes	No	N/A	18	25	Can continue for life	CPP survivor benefits	In the absence of a surviving spouse, a monthly payment up to 85% of the worker's net average earnings before the accident is payable to the dependent child
Ontario	No maximum	Lump sum (base amount adjusted according to the spouse's age when worker died) plus periodic payments (85% of worker's net average earnings) to be paid until youngest child turns 19, at which point periodic payment is calculated as though no dependent children	N/A	Benefit amount varies depending on the date of injury, the number of dependents, and maximum net average earnings	Benefit amount varies depending on the date of injury, the number of dependents, and maximum net average earnings	In accordance with the legislation	No	Yes	No	N/A	19	30	Can continue for life	Offset if CPP paid to spouse in relation to death	Labour market re-entry assistance for the spouse is available if requested within one year of the worker's death
Prince Edward Island	\$16,413	Lump-sum amount of 100% of the maximum annual earnings in the year the death occurred plus monthly benefit as prescribed by regulation	Until age 65 or until the deceased would have reached age 65, whichever is later	N/A	An amount equal to 20% of the wage-loss benefits that would have been payable to the worker for each child under the age of 18 years but not to exceed 60% in total of the wage-loss benefits that would have been payable to the worker	Wage-loss benefits that would have been payable to the worker	Yes	Until age 65 or until the deceased would have reached age 65, whichever is later	N/A	N/A	18	22	For duration of disability	CPP survivor benefits	In the absence of a surviving spouse, a lump-sum payment equal to 100% of the maximum annual earnings in the year the death occurred for each child shall be paid into a fund under the management of the Board and established for the purposes of postsecondary education of all such children under a benefit program administered by the Board
Saskatchewan	\$15,896 (66)	90% of workers net earnings less probable deductions	5 years, to age 65, or until youngest child is 18	\$609.16	\$2,010.21	Earnings loss benefits that would have been payable to the worker	Yes	Yes	No	N/A	18	25	For duration of disability	Federal government survivor benefits at 50% (after 12 months); payments for children no offset	None
Notes:															
Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.															
1 Alaska - Spouse 52 years of age or older, or permanently disabled, is not subject to 12-year limitation.															
2 Alaska - There is no age limit for a child who is wholly dependent upon the deceased employee and incapable of self-support by reason of mental or physical disability.															
3 Arkansas - If total amount of weekly compensation is less than \$7.00 per week.															
4 California - Notwithstanding the maximum limitations specified in CA Labor Code sections 4702 and 4703, payment of death benefits continue until the youngest child attains 18 years of age. CA Labor Code section 4703.5.															
5 California - Some children of specified safety officers may be entitled to continued benefits until age 19 under CA Labor Code section 4703.5.															
6 Colorado - Upon remarriage, a lump sum is available only if there are no other dependents. There is no termination of benefits upon remarriage of widows of state workers in high risk employment.															
7 Connecticut - See PA 21-2 - amount will be adjusted yearly on January 1.															
8 Delaware - When minor dependents reach 18 years of age (or 25 if attending an accredited higher learning institution).															
9 Delaware - Compensation shall be payable under this section to or on account of any child beyond the age of 18 years if and while mentally or physically handicapped and actually dependent upon the deceased for at least 50 percent of their support at the time of the worker's death (19 Del. C. §2330(c)).															

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				Weekly Minimum	Weekly Maximum		When Statutory Limit Is Paid	Upon Death	Upon Remarriage			If a Student, at Age	If Child Is Disabled, at Age		
10	Florida	- If no spouse, 33 1/3% of deceased worker's AWW for each child, 25% to each parent, and 15% to brother, sister, or grandchild.													
11	Georgia	- Until age 65 or 400 weeks from the date of injury, whichever provides greater benefits.													
12	Maryland	- Effective October 1, 2011, Maryland's dependency benefits changed due to enactment of a new law. The information provided in this chart does not apply to certain public service officers of a municipal corporation or a county, unless the municipal corporation or county has made an election to be included in the new statutory provisions. Therefore, the benefits for certain public service officers have not changed from previous charts with the exception of the amount of the SAWW, which is \$1,338.00 for January 1, 2022. There are also more nuances to the statute than can be reflected in a chart of this nature. In accordance with Section 9-683.3(i) of the Labor and Employment Article, all dependents who are neither a dependent spouse nor a dependent child shall be entitled to no more than a total of \$90,125.00, collectively, as their portion of the total death benefits payable, effective January 1, 2022. Since January 1, 2012, this benefit limit has been adjusted annually by the same percent applicable to the adjustment of the State Average Weekly Wage.													
13	Massachusetts	- Maximum burial allowance under G.L. c. 152, §33 is eight (8) times the average weekly wage in the Commonwealth as determined by G.L. c. 151A, §29.													
14	Michigan	- See Sec. 418.312 If at the expiration of the 500-week period any such wholly or partially dependent person is less than 21 years of age, a workers' compensation magistrate may order the employer to continue to pay the weekly compensation or some portion thereof until the wholly or partially dependent person reaches the age of 21.													
15	Minnesota	- For Oct. 1, 2024-Sept. 30, 2025, this is \$1,372.00. See Table 4A.													
16	Missouri	- 2019 responses. No 2025 data were provided.													
17	Missouri	- So long as there is one "total dependent" (such as the spouse or a minor child), the weekly death benefit payment is 66 2/3% of the worker's preinjury weekly wage, not to exceed 105% of state average weekly wage. Additional total or partial dependents do not increase the payment amount.													
18	Missouri	- Mo. Rev. Stat. § 287.010.11, effective 01/01/2014, defines "occupational diseases due to toxic exposure" as the following: mesothelioma, asbestosis, berylliosis, coal worker's pneumoconiosis, bronchiolitis obliterans, silicosis, silicotuberculosis, manganism, acute myelogenous leukemia, and myelodysplastic syndrome. Mo. Rev. Stat. § 287.200.4, effective 01/01/2014, provides enhanced benefits to employees with "occupational diseases due to toxic exposure" which result in a Permanent Total Disability or Death as follows: (a) For occupational diseases due to toxic exposure, but not including mesothelioma, an amount equal to 200% of the State's Average Weekly Wage (as of the date of diagnosis) shall be paid to the employee for 100 weeks. (b) If the employee is diagnosed with mesothelioma (and if the employer has accepted mesothelioma liability) an amount equal to 300% of the State's Average Weekly Wage shall be paid to the employee for 212 weeks—provided that any employee who obtains benefits for asbestosis and who later obtains an award for mesothelioma shall not receive more benefits than such employee would receive having only obtained benefits for mesothelioma. (c) The amounts due to the employee during his or her lifetime for an award of Permanent Total Disability due to any other compensable cause shall be paid to the employee after the enhanced benefits for "occupational diseases due to toxic exposure" have been exhausted. (d) Should the employee die before all of the enhanced benefits for "occupational diseases due to toxic exposure" have been paid, the remainder of the enhanced benefits are payable to the employee's spouse or children, natural or adopted, legitimate or illegitimate, in addition to the benefits provided for a death due to any other compensable cause. If there is no surviving spouse or children and the employee, in his or her lifetime, has not received all of the enhanced benefits for "occupational diseases due to toxic exposure," the remainder of such enhanced benefits shall be paid as a single payment to the estate of the employee.													
19	Missouri	- Dependency benefits end at various times depending upon a determination made in the award: spouses—lifetime or until remarriage; children—until they reach age 18 (22 years if a full-time student); and other situations described in §287.240 (4)(b), R5Mo.													
20	Missouri	- Mo. Rev. Stat. § 287.243 allows for an additional, one-time payment of \$25,000.00 to the survivor(s) of an employee who was killed in the "line of duty" while serving as a "public safety officer," as defined in the statute.													
21	Montana	- 39-71-725, MCA.													
22	Montana	- 39-71-721, MCA.													
23	Nebraska	- Effective July 1, 2021, the burial benefit increased from \$10,000 to \$11,000. Beginning in the year 2023 such benefit will be adjusted annually by the Workers' Compensation Court. The adjusted dollar figure shall be equal to the then current limitation adjusted by the greater of one percent or the percentage change for the preceding year in the Consumer Price Index for All Urban Consumers, as prepared by the United States Department of Labor, Bureau of Labor Statistics. The adjustment shall not exceed two and three quarters percent per annum. If the amount so adjusted is not a multiple of one hundred dollars, the amount shall be rounded to the nearest multiple of one hundred dollars.													
24	Nebraska	- Benefits cease when a child dies, marries, or reaches the age of 19, or if enrolled as a full-time student and ceases to be so enrolled or reaches the age of 25. A child who originally qualified as a dependent by virtue of being less than 19 may, upon reaching age 19, continue to qualify if he or she is physically or mentally incapable of self-support, is actually dependent, or is enrolled in an educational institution.													
25	New York	- Reimbursement of funeral expenses or memorial services shall not exceed \$12,500 for the counties of Bronx, Kings, Nassau, New York, Queens, Richmond, Suffolk, and Westchester, and in all other counties the reimbursement shall not exceed \$10,500.													
26	New York	- Benefits end for spouse upon remarriage or upon death and end for children upon turning 18 or, if still in school, 23 (if not blind or physically disabled). If blind or physically disabled, then the benefits end when the blindness or physical disability ends, after age 18 or 23 as appropriate. If benefits are paid to dependent parents or grandparents, they end upon death. For brothers, sisters, or grandchildren, they end at age 18, or if in school, 23.													
27	New York	- New York State Average Weekly Wage is the average weekly wage of the state of New York for the previous calendar year as reported by the Commissioner of Labor to the Superintendent of Financial Services on March 31 of each year.													
28	New York	- Spouse's share of death benefit is reduced by 5% of the spouse's share of the survivors insurance benefits under the Social Security Act for each ten dollars of deceased's average weekly wage in excess of \$100, but the reduction shall not exceed 50% of the spouse's share of the survivors insurance benefits under the Social Security Act as set forth in Workers' Compensation Law §16.													
29	North Carolina	- However, a surviving spouse may receive payments beyond 500 weeks unless and until the surviving spouse remarries if the surviving spouse is unable to support him/herself because of physical or mental disability that existed as of the date of the employee's death, and a child will receive weekly payments beyond 500 weeks and until turning age 18 if the child is not yet age 18 at the expiration of the 500 weeks.													
30	North Dakota	- The minimum benefit is equal to 60% of the SAWW unless the amount exceeds the employee's net wages, in which case the employee receives net wages as a weekly compensation rate.													
31	North Dakota	- Marriage settlement exception—if a spouse has received a partial lump sum previously, that amount is deducted from the 104 weeks.													
32	North Dakota	- Also available are scholarships for spouse and children (up to age 26) of decedent; the award may not exceed \$10,000 per year per individual for no more than 5 years (NDC 65-05-20.1).													
33	Oregon	- The insurer must pay for final disposition of the body, including transportation, up to 20 multiplied by the state AWW. If after 60 days of claim acceptance there is remaining benefit, the insurer must pay the remainder to the estate of the worker.													
34	Oregon	- The maximum monthly benefit for all children when there is a surviving spouse is 4.35 times 133 and 1/3 percent of the state AWW. If the sum of individual benefits exceeds this maximum, the benefit for each child must be reduced proportionally. The monthly benefit for a child without a surviving parent, who is 19 to 26 years of age and attending secondary education, is 4.35 times 66 2/3 percent of the state AWW. Benefits payable under ORS 656.204(6) during secondary and post-secondary education are not subject to proportional reduction.													
35	Oregon	- "Dependent" means any of the following individuals who, at the time of the accident, depended in whole or in part on the earnings of the deceased worker for support: parent, parent's spouse or domestic partner, grandparent, grandparent's spouse or domestic partner, grandchild, grandchild's spouse or domestic partner, sibling or step sibling, sibling's spouse or domestic partner, or any individual related by blood or affinity whose close association with a worker is the equivalent of a family relationship. A dependent benefit is 50 percent of the average monthly support the dependent actually received from the worker during the 12 months preceding the injury. The maximum monthly benefit for all dependents may not exceed 4.35 times 10 percent of the state AWW. If the sum of the individual benefits exceeds this maximum, the benefit for each dependent must be reduced proportionally. However, the monthly benefit for a dependent without a surviving parent, who is 19 to 26 years of age and attending secondary or post-secondary education, is 4.35 times 66 2/3 percent of the state AWW, and this benefit is not subject to proportional reduction.													
36	Oregon	- Benefits are paid for up to 48 months while the child is completing secondary education, obtaining a GED certificate, or attending a program of higher education.													
37	South Carolina	- See SC Code Ann. § 42-9-290(A).													
38	South Dakota	- If the weekly wage is below 50% of the SAWW, the calculation is wages, less income tax and Social Security.													
39	Tennessee	- Directed by TN Code Annotated 50-6-209, 210.													
40	Texas	- If deceased employee was a first responder, then spouse receives death benefits for life, regardless of remarriage.													
41	US Federal Programs - Longshore	- Section 44(c)(1) of the Longshore and Harbor Workers' Compensation Act (LHWCA) provides that if no qualifying dependents, \$5,000 paid to the Special Fund.													
42	Washington	- The Washington State Legislature has increased the minimum workers' compensation benefits for claims with dates of injury (DOI) or dates of manifestation (DOM) on or after July 2, 2008. This change results in three different possible minimum rates: - 15% of the state average monthly wage (SAMW) + \$10.00 for spouse + \$10.00 for each dependent child up to five dependent children; - 100% of the worker's gross monthly wage; and - Minimum time-loss rate in effect prior to July 2, 2008.													
43	West Virginia	- WV Insurance Bulletin 22-05 increased the maximum funeral benefit from \$7,000 to \$10,000. https://www.wvinsurance.gov/Portals/0/pdf/pol_leg/IB_22-05.pdf													
44	West Virginia	- Additional dependents may receive benefits - https://code.wvlegislature.gov/23-4-10/													
45	Wisconsin	- Upon a spouse's death any unpaid balance goes to the spouse's estate.													
46	Wisconsin	- The department will reassign the death benefits to children unless a showing is made that reassignment results in an undue hardship for the spouse.													
47	Wisconsin	- Special lump-sum payment equal to 75 percent of the primary death benefit, but not less than \$50,000, if deceased employee is law enforcement officer, correctional officer, fire fighter, rescue squad member, diving team member, national or state guard member or emergency management personnel.													
48	Wyoming	- If the actual monthly earnings is less than 73% of the SAMW, 92% of actual wage will be the monthly payment; if the actual monthly earnings are less than 73% of the SAMW, the monthly payment would be 2/3 of the SAMW; if the actual monthly earnings are greater than the SAMW, the monthly payment would be 2/3 of the actual monthly wage; spouse benefits pay 100 months; children's benefits are calculated on the months until the child reaches the age of majority.													
49	Wyoming	- Wyoming Workers' Compensation calculates all payments/wages based on a monthly rate, rather than a weekly rate. Each claimant's payment depends on their gross monthly wage on the date of injury and cannot exceed the statewide average monthly wage.													
50	British Columbia	- RS&CM, Item C8-54.00.													
51	British Columbia	- RS&CM, Item C8-56.00.													
52	British Columbia	- This figure assumes the benefits apply to a surviving spouse with no children. The weekly amount is based on the 2024 minimum monthly payment of \$1,392.79, which is calculated by multiplying this figure by 12 months, dividing by 365 days, and multiplying by 7 days. The minimum is the actual minimum paid by the Board. Federal benefits are not deducted from this minimum amount.													

Table 11 Fatality Benefits Paid Under Workers' Compensation Systems as of January 1, 2025															
The burial allowance and weekly benefits allowed for one or more dependents in the case of a work-related fatality, the maximum and minimum payable, how the benefit is calculated, the maximum time period for benefits under different scenarios, and if offsets are allowed.															
Jurisdiction	Maximum Burial Allowance	Basis of Payment for Spouse and One Child	Statutory Limit for Dependency Benefits	Dependency Benefits		Basis of Weekly Maximum Calculation	Spouses' Benefits End			Payment upon Remarriage	Children's Benefits End			Offsets Allowed on Dependency Benefits	Additional Benefits Available
				Weekly Minimum	Weekly Maximum		When Statutory Limit Is Paid	Upon Death	Upon Remarriage		At Age	If a Student, at Age	If Child Is Disabled, at Age		
53	British Columbia	This figure assumes there is a surviving spouse with two dependent children using the 2024 maximum wage rate of \$116,700. In such a case the entire monthly compensation that would have been payable if the worker had sustained a permanent total disability at date of death is payable. If there are additional children, a benefit of \$430.99 per child would be added to the monthly maximum. An amount equal to 50% of federal benefits for dependent spouse and child(ren) dependents would then be deducted from this figure. [RS&CM Vol.II Item C8-56.00 & WorkSafeBC 2024 Net Compensation Table]. The maximum wage rate as of January 1, 2025 is \$121,500.													
54	British Columbia	RS&CM, Item C8-56.10.													
55	British Columbia	RS&CM, Item C8-56.00.													
56	British Columbia	Note that dependency means a member of the worker's family (a spouse, parent, grandparent, stepparent, child, grandchild, stepchild, sibling or half sibling, and a person who stood in the place of a parent to the worker or to whom the worker stood in place of a parent, whether related to the worker by blood or not) who was wholly or partly dependent on the worker's earnings at the time of the worker's death, or who, but for the incapacity due to the accident, would have been so dependent. [RS&CM, Item C8-53.00]													
57	British Columbia	The following funeral/burial benefits are available (figures are from 2024): lump sum to spouse of \$3,316.80 [Item C8-55.00 of the RS&CM]; up to \$1,744.28 for transportation of the body [Item C8-54.00 of the RS&CM]; grief counseling for dependents [Item C11-91.00 of the RS&CM]; and vocational rehabilitation under section 155 of the Act [Item C11-91.00 of the RS&CM].													
58	New Brunswick	Provides a burial amount equal to 40% of the New Brunswick Industrial Aggregate Earnings (NBIAE) and an additional amount equal to 50% of the NBIAE for additional death benefits; in 2025 the NBIAE is \$52,653.													
59	New Brunswick	A surviving spouse must select between two options within a one-year time frame. The spouse will receive 80% of the NBIAE for one year until the option is made. After which, the option of 85% or 60% plus lump sum must be chosen. An annuity would also be received according to section 38.54 of the WC Act. Dependent children also receive a percentage of the NBIAE on a scale determined by the child's age.													
60	New Brunswick	At age 65, or, where a worker is 63 or more as of the date of the accident, for 2 years. In the case of an invalid child, ongoing; other dependent children up to age 21, if still in school.													
61	New Brunswick	The benefits cannot exceed the compensation that would have been payable to the worker had that worker survived and been unable to work, assuming that estimated capable earnings are zero. When benefits are paid to multiple recipients, benefits are prorated in proportion to the dependency level to ensure benefits do not exceed the maximum benefits payable. The survivor receives a portion of the deceased salary and increases it annually by the percentage increase in the NBIAE.													
62	New Brunswick	The amount must not exceed the amount that would be received by the injured worker had he or she survived, which is NBIAE multiplied by 1.6. \$52,653 (2025) x 1.6 for a maximum of \$84,200.													
63	New Brunswick	Benefits payable under the 85% option are subject to a family-means test. This means that should the surviving spouse remarry or live with a new spouse, and the net earnings of the new spouse plus the benefits paid to the surviving spouse exceed 85% of the net family income, then only the portion that does not exceed 85% is payable to the dependent surviving spouse.													
64	New Brunswick	If a surviving spouse remarries or increases his/her earnings, or receives a new benefit, the new income would be calculated in the annual review. Does not apply to dependent children benefits.													
65	Nova Scotia	2022 responses. No 2025 data were provided.													
66	Saskatchewan	2024 amount.													

Table 12 Initial Payments, Waiting Periods, Retroactive Payments, and Time Frames for Temporary Total Disability as of January 1, 2025							
The number of days workers must be disabled before they are eligible for workers' compensation temporary disability benefits, the number of days they must be disabled before those waiting period days are paid to them, and circumstances under which the waiting period can be waived, as well as when and how the initial payment is to begin.							
Jurisdiction	Waiting Period Before Worker Can Receive Indemnity Benefits	Retroactive Period	Circumstances Under Which Waiting Period Can Be Waived	Payment Begins Upon	Payment or Denial to Be Made Within	Timeliness of Payment to Worker with Injury	
						Jurisdiction Publishes Information on Compliance with Timeliness-of-First-Payment Regulations	Penalties for Late Initial Payment
Alabama	3 days	21 days	None	Payment to the worker by the employer/insurer	Statute requires report to agency in 15 days and then at 30 days must explain why no payment	New adjusters are provided the information during continuing education seminars	N/A
Alaska	3 days	28 days	None	Payment is due on the 14th day	Statute requires initial payment to be made within 14 days or controversion filed within 21 days	No	Yes, 25% of unpaid installment
Arizona	7 calendar days	14 days	None	Day 8	21 days of notification	No	No, unless a bad faith or unfair claims practices claim is filed
Arkansas	7 days	14 days	None	8th day not including date of injury	15 days of notice of disability A.C.A. 11-9-802	No, these statistics on carriers' timeliness are not published. However, if the carrier fails to maintain standards for 2 or more quarters, they are fined	Yes, if the carrier fails to maintain standards for 2 or more quarters, they are fined. Also, by statute, the carrier must include interest in the worker's late payment (1)
California	3 days	14 days	If employee is hospitalized	With a direct payment to the worker by the insurer/employer	14 days of notice of disability	Division of Workers' Compensation Audit Unit issues annual report on results of audits of claims administrators conducted in prior year; report summarizes penalties including late first TD payment	TD indemnity not paid timely shall be increased by 10% and paid, without application, to the injured worker; administrative penalty for late payment may be assessed by the DWC Audit Unit if the claims administrator fails to meet a specified audit standard
Colorado	3 scheduled days	14 calendar days	If it is presumed that the worker will be disabled for more than two weeks, the waiting period may be waived	With a direct payment to the worker by the employer/insurer	20 days of notice of claim	Yes, Rule 5 indicates initial payment is due 3 business days after the date of admission	Yes, from \$100 - \$600 depending on compliance level and the number of deficiencies identified (2)
Connecticut	3 days	7 days	None	With a direct payment to the worker by the employer/insurer within 20 days of a voluntary agreement	Within 28 days of the receipt by the employer of the claim for compensation, unless the employer has contested the claim prior to the end of that 28-day period	Yes - information is included in information packets sent to injured workers and on our website	C.G.S. Secs. 31-288 and 31-300 allow for penalties for undue delay
Delaware	3 days	7 calendar days	If amputation or hospitalization	Agreement necessary	14 days of notice of disability	No	19 Del.C.2362e after a Board Award
District of Columbia	3 days	If out for more than 14 days then the first 3 days are paid.	If out for more than 14 days then the first 3 days are paid.	With a direct payment to the worker by the employer/insurer	14 Working days	No	10%
Florida	7 days	More than 21 days	None	A direct payment to the worker by the employer/insurer	14th calendar day after employer receives notification or injury or death (disability immediate and continuous for 8 calendar days or more) or 6th day after first 8 calendar days of disability (if first 7 days of disability are nonconsecutive or delayed)	Yes. Multiple reports include this figure, including the Division's Annual Accomplishments Report	Yes (3)
Georgia	7 days	21 days	None	With a direct payment to the worker by the employer/insurer	21 days of notice of disability	No	15% late-payment penalties & assessed attorney fees
Hawaii	3 days	None	None	With a direct payment to the worker by the employer/insurer	TTD must be paid by the 10th day after notification to the employer	Ch. 386-31(b), HRS	Ch. 386-31(b) & 386-92, HRS
Idaho	5 days	Disability extends over 14 days	Inpatient hospitalization	With a direct payment to the worker by the employer/insurer	Payment due within 28 days from the date of disability; denial due within 30 days of claim administrator knowledge of injury	No	May result in an audit finding
Illinois	3 days	14 calendar days	None	15th day after injury	14 days of notice of disability	No	Yes, see Section 19(l) - \$30 a day, not to exceed \$10,000
Indiana	7 days	21 days	None	With a direct payment to the worker by the employer/insurer	30 days from notice	No	No
Iowa	3 days	14 days	None	The first payment is to be made on the 11th day after the injury	No time frame is required by statute (4)	Question and Answer Brochure published per FY on website	Reasonable delay in commencement can result in a penalty up to 50% of the amount that was delayed
Kansas	7 days	21 consecutive days	None	With a direct payment to the worker by the employer/insurer	No time frame is required by statute	N/A	N/A
Kentucky	7 days	Two weeks (statutory language) determined by courts to mean 14 days	Employer can pay voluntarily	The regular payday of the employee with first payment at time of first payday after qualifies	Within a "reasonable" time	No	Employee entitled to interest; see KRS 342.990
Louisiana	7 days	2 weeks	None	Per notice to employer/insurer per La. R.S. 23:1201.B. C. D. (5)	14 days of notice of disability	No, but OWCA emails Score Cards privately to carriers	Yes (6)

Table 12 Initial Payments, Waiting Periods, Retroactive Payments, and Time Frames for Temporary Total Disability as of January 1, 2025							
The number of days workers must be disabled before they are eligible for workers' compensation temporary disability benefits, the number of days they must be disabled before those waiting period days are paid to them, and circumstances under which the waiting period can be waived, as well as when and how the initial payment is to begin.							
Jurisdiction	Waiting Period Before Worker Can Receive Indemnity Benefits	Retroactive Period	Circumstances Under Which Waiting Period Can Be Waived	Payment Begins Upon	Payment or Denial to Be Made Within	Timeliness of Payment to Worker with Injury	
						Jurisdiction Publishes Information on Compliance with Timeliness-of-First-Payment Regulations	Penalties for Late Initial Payment
Maine	7 days (7)	14 calendar days	None	Notice of claim and when waiting period met	14 days of notice of disability	Yes, ME publishes a Quarterly Compliance Report that names carriers and also shows aggregate statistics. Report link is at https://www.maine.gov/wcb/Departments/mae/compliancereports.html	Penalty for a payment > 30 days late is \$50/day payable to the worker
Maryland	3 days	14 days	None	With a direct payment to the worker by the employer/insurer	21 days of the mailing of the notice of the filing of a claim	No	MD. Labor and Employment Code Ann. § 9-713 Failure to pay TD within 30 days of filing claim may result in commission assessing a penalty not exceeding 40% of the amount due, to be paid to the worker. §9-728 Failure to pay an award within 15 days may result in a penalty not exceeding 20% of the award paid to the worker. Failure to pay within 30 days may result in a penalty not exceeding 40% of the award
Massachusetts	5 days	21 days	None	With a direct payment to the worker by the employer/insurer	14 days of the mailing of the notice of the filing of a claim	Yes, in the Employer's Guide to Workers' Compensation published by the Dept. of Industrial Accidents	Yes, \$200 per G.L. c. 152, Sec. 7(2)
Michigan	7 calendar days	14 calendar days	None	8th day of consecutive wage loss	14 days of notice of disability	Yes. The Agency publishes a "Pay Lag" report on its website which can be found here: https://www.michigan.gov/leo/bureau-agencies/wdca/resources-and-reports/2020-pay-lag-report	Yes, as provided for in Sec. 418.801 (8)
Minnesota	3 days	10 days	None	With a direct payment to the worker by the employer/insurer	Within 14 days of notice to or knowledge by the employer of a compensable injury	Yes (9)	Yes. Late first payment penalties on an accepted claim for failing to commence wage loss payments within 14 days of the latter of either the first day of lost time or the date the employer knew of the lost time
Mississippi	5 days (10)	14 days	None	Direct payment to the worker by the employer/insurer	14 days of notice of disability	No	Yes. Any installment of compensation not paid within 14 days after it becomes due a 10% penalty is added. Miss. Code Ann. Section 71-3-37(4)
Missouri as of January 1, 2019 (11)	3 days in which the employer is open for business	14 days	None	The obligation to pay temporary total disability benefits begins upon the fourth day of the employee's disability. The compensation shall be payable as the employee's wages were paid prior to the injury, but at least once every two weeks	No particular time limit set by statute		
Montana	32 hours or 4 days, whichever is less	21 days	If the worker is totally disabled and unable to work in any capacity for 21 days or longer, compensation must be paid retroactively to the first day of total wage loss unless the worker waives the retroactive payment and receives a sick leave benefit from the employer instead	The fifth day of disability after acceptance of a claim or under reservation of rights. Medical benefits are compensated from the date of injury	30 days of receipt of the claim, the employer/insurer must accept, deny, or pay the claim under a reservation of rights	No	No
Nebraska	7 days	6 weeks	None	Direct payment to the worker by the employer/insurer	No time frame is required by statute	No	Yes. 50% penalty after thirty days' notice has been given of disability (12)
Nevada	5 days	5 consecutive days or 5 cumulative days within a 20-day period	None	With direct payment to the worker by the employer/insurer	14 working days of insurer's receipt of disability certification or within 30 working days from notice of an occupational disease	No	Yes
New Hampshire	3 days	14 days	If an injured worker returns to temporary alternative duty within 5 days of the date of injury	Direct payment to the injured worker by the employer/insurance carrier	Within 21 days of notice of disability	Information about applicable timeframes of indemnity payment is provided on the Department of Labor's website and on Memo of Payments (Form 9WCA)	Yes. Late initial payment is subject to penalty in an amount of up to \$2,500

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						Jurisdiction Publishes Information on Compliance with Timeliness-of-First-Payment Regulations	Penalties for Late Initial Payment
New Jersey	7 days	7 calendar days	None	After waiting period, with a direct payment to the worker by the employer/insurer	30 days of notice of disability	No	Only if said payment is ordered by a Judge of Compensation and employer/carrier fails to pay same within 60 days of the order. See N.J.S.A. 34:15-28.1, 28.2
New Mexico	7 days	4 weeks	None	With a direct payment to the worker by the employer/insurer	14 days of notice of disability	Information is published quarterly in the Carrier and Self-insurer Scorecard ("Quarterly Scorecard")	§52-1-61, Penalties, NMSA 1978 allows for penalties of not less than \$25 and not more than \$1,000 for each violation of the NM Workers' Compensation Act
New York	7 days	More than 14 days	None	When the employee is totally or partially disabled and unable to work due to a work-related injury/illness and lost time exceeds the waiting period	Accepted claim must be paid by the 18th day after disability or 10 days of knowledge, whichever is greater; denial must be filed on or before the 18th day after disability or 10 days of knowledge of the injury, whichever is greater, or within 25 days of notice of indexing by the Board	No, the Workers' Compensation Board does not publish information on compliance with timeliness-of-first-payment regulations, but each claim administrator is provided with information on its performance	Yes. A penalty of \$300.00, payable to the claimant, is assessed on the claim administrator if the initial payment is not paid within 18 days of the date disability began or ten days from the date the employer had knowledge, whichever period is greater
North Carolina	7 days	21 days	None	The 8th day of disability	Same as above	Same as above	Same as above
North Dakota	5 days	5 days	None	With direct payment to the worker after a determination of claim compensability	No time frame is required by statute	No time frame is required by statute	No time frame is required by statute
Ohio	7 days	14 calendar days	None	A determination of claim compensability and approval of the period of temporary disability	No time frame is required by statute	No	No
Oklahoma	3 days	None	None	Elapse of the 3-day waiting period	Payment is due on the 15th day after notice of the injury, unless a controversy of claim is timely filed	B. 1. Within thirty (30) days after the final payment of compensation has been made, the employer shall notify the Commission with a form prescribed by the Commission. This form shall state that the final payment has been made, the total amount of compensation paid, the name of the employee and of any other person to whom compensation has been paid, and the date of the injury or death	2. If the employer fails to notify the Commission within thirty (30) days, the Commission may assess against the employer a civil penalty in an amount not to exceed One Hundred Dollars (\$100.00). No penalty shall be assessed without notice to the employer and giving the employer an opportunity to be heard by the Commission
Oregon	3 days	14 days	If the worker is totally disabled and the total disability continues for 14 consecutive days; or if the worker is admitted as an inpatient to a hospital within 14 days of the onset of total disability	14th day after the employer's notice or knowledge of a claim and the worker's disability, if claim has not yet been denied and if the attending physician authorizes payment	Payment to begin within 14 days of the employer's notice or knowledge of a claim and the worker's disability, if claim has not yet been denied and attending physician has authorized disability compensation. Notice of denial must be provided within 60 days after the employer has notice or knowledge of the claim	Yes, audit results of insurer performance, including timeliness of first payment, are published to the agency's website	The agency may issue a civil penalty under ORS 656.745. If an insurer unreasonably delays or refuses to pay compensation, the agency may issue a penalty, payable to the worker for up to 25% of the amount due, plus attorney fees, under ORS 656.262(11)
Pennsylvania	7 days	14 calendar days	None	With a direct payment to the worker by the employer/insurer	21 days of notice of disability	No	No
Rhode Island	3 days	No payment for waiting period days	None	Agreement is necessary	No time frame is required by statute	No	Yes, see 28-35-42 and 28-35-43 (13)
South Carolina	7 days	More than 14 days	None	With a direct payment to the worker by the employer/insurer	No time frame is required by statute	N/A	N/A
South Dakota	7 days	7 calendar days	None	With a direct payment to the worker by the employer/insurer	20 days after receipt of the report of injury (this can be extended to 50 days with agency approval)	No	Failure to pay within 10 days of when the payment is due results in a penalty of 10 percent of the unpaid amount

Table 12 Initial Payments, Waiting Periods, Retroactive Payments, and Time Frames for Temporary Total Disability as of January 1, 2025							
The number of days workers must be disabled before they are eligible for workers' compensation temporary disability benefits, the number of days they must be disabled before those waiting period days are paid to them, and circumstances under which the waiting period can be waived, as well as when and how the initial payment is to begin.							
Jurisdiction	Waiting Period Before Worker Can Receive Indemnity Benefits	Retroactive Period	Circumstances Under Which Waiting Period Can Be Waived	Payment Begins Upon	Payment or Denial to Be Made Within	Timeliness of Payment to Worker with Injury	
						Jurisdiction Publishes Information on Compliance with Timeliness-of-First-Payment Regulations	Penalties for Late Initial Payment
Tennessee	7 days	14 days	None	8th day of disability	Payment or denial to be made within 15 days after employer had knowledge of the injury or death	No	Yes. Court can order 25% penalty if an employer, trust or pool or an employer's insurer fails to pay, or untimely pays, temporary disability benefits within twenty (20) days after the employer has knowledge of any disability that would qualify for benefits; a workers' compensation judge shall have the authority to assess against the employer, trust or pool or the employer's insurer a civil penalty in addition to the temporary disability benefits that are due to the employee. The penalty, if assessed, shall be in an amount equal to twenty-five percent (25%) of the temporary disability benefits that were not paid
Texas	7 days	14 days	None	A direct payment to the injured employee by the employer/insurance carrier	Not later than the 15th day after the date on which an insurance carrier received written notice of an injury	DWC is required to conduct Performance Based Oversight (PBO) of insurance carriers and health care providers in the workers' compensation system. Every other year insurance carriers are assessed on a specific set of weighted criteria including timely initial payment of temporary income benefits (14)	Insurance carriers may be subject to penalties based on failure to timely pay benefits (15)
US Federal Programs - FECA	3 days	14 days	None	Continuation of pay by employer, after the waiting period, up to the first 45 days	No time frame is required by statute	N/A	N/A
US Federal Programs - Longshore	3 days	14 days	None	With a direct payment to the worker by the employer/insurer	14 days if paid voluntarily; within 10 days if pursuant to WC agency order	Yes	Yes, 10% of any overdue installment not paid within 14 days of becoming due. See 33 U.S.C. § 914(e) for more details. And, see note below (16)
Utah	3 days	14 calendar days	None	Establishment of compensability	21 days from notice of disability, with up to 45 days if an extension of time is needed	No	No
Vermont	3 days	10 days	None	With a direct payment to the worker by the employer/insurer	21 days of notice of disability	No	The Commissioner may assess administrative penalties of not more than \$5,000 for refusal or neglect to adjust or pay compensation. 21 V.S.A. § 688
Virginia	7 days	3 weeks	None	With a direct payment to the worker by the employer/insurer	No time frame is required by statute (17)	No	20% penalty - failure to pay compensation within two weeks after it becomes due (Code of Va. Sec. 65.2-524)
Washington	The 3 days immediately following the date of injury (DOI)	7 calendar days immediately following the DOI	None	Notice of disability	14 calendar days of notice of disability	Yes. RCW 51.32.210	Yes, for self-insured employers. The worker can request a penalty for a delay in: time loss compensation, including the initial payment, loss of earning power benefits, or permanent partial disability award payments, and the department will consider and may assess a penalty. Or, through an audit, the department may determine the self-insured employer didn't make the initial time loss payment timely and penalize them
West Virginia	More than 3 days	More than 7 consecutive days	None	Upon conditional approval of claim compensability	15 working days	N/A	N/A

Table 12 Initial Payments, Waiting Periods, Retroactive Payments, and Time Frames for Temporary Total Disability as of January 1, 2025

The number of days workers must be disabled before they are eligible for workers' compensation temporary disability benefits, the number of days they must be disabled before those waiting period days are paid to them, and circumstances under which the waiting period can be waived, as well as when and how the initial payment is to begin.

Jurisdiction	Waiting Period Before Worker Can Receive Indemnity Benefits	Retroactive Period	Circumstances Under Which Waiting Period Can Be Waived	Payment Begins Upon	Payment or Denial to Be Made Within	Timeliness of Payment to Worker with Injury	
						Jurisdiction Publishes Information on Compliance with Timeliness-of-First-Payment Regulations	Penalties for Late Initial Payment
Wisconsin	3 days, not including day of injury	Waiting period paid if disability exists after 7 calendar days	When PPD exists	A direct payment to the worker by the employer/insurer	80% of a carrier's first payments are to be made within 14 days. If not making payment, notice must be sent to employee within 14 days that still investigating claim or denying it. Penalty may be assessed in cases where it is determined that the initial payment was unreasonably delayed	Yes. Quarterly summary (snapshot in time) reports as of the 14th day of every new quarter broken down by large, medium, and small-sized insurers. Available at: https://dwd.wisconsin.gov/wc/insurance/indicators/indicator2.htm	Payment to employee may be increased by 10 percent for inexcusable delay. See s. 102.22, Wis. Stats. Also may be assessed surcharge under s. 102.35 (1), Wis. Stats.
Wyoming	3 days	8 days	None	Certification by health care provider	14 days of notice of disability	N/A	N/A
Canadian Jurisdictions Participating (stated in Canadian currency)							
British Columbia	Eligibility begins on the first working day following the day of the injury (18)	N/A	N/A	Acceptance of claim (19)	No time frame is required by statute	N/A (20)	N/A
New Brunswick	N/A (21)	N/A	N/A	The day immediately after the injury	No time frame is required by statute	N/A	N/A
Nova Scotia as of January 1, 2022 (22)	2 days	5 weeks	None	With direct payment to the worker	No time frame is required by statute	No	No
Ontario	None	N/A	N/A	Agreement necessary (agency must allow the claim) - Payment begins immediately to the exception of the first day paid by the employer as provided by legislation	No time frame is required by legislation	No	No
Prince Edward Island	N/A (23)	N/A (23)	N/A (23)	With direct payment to the worker	No time frame is required by statute	We do not have first payment regulations. In our Annual Report, we note the average calendar days to first payment	N/A
Saskatchewan	None; eligibility begins if loss of earnings beyond the day of injury	N/A	N/A	Acceptance of claim	No time frame is required by statute	No required timelines. Annual reports that are published include data on days from registration to first payment and days from injury to first payment (24)	N/A

- Notes:** Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.
- Arkansas - "For any installment payable without an award not paid within fifteen days after it became due, there shall be added an amount equal to eighteen percent, payable at the same time as installment." A.C.A. 11-9-802.
 - Colorado - All carriers are subject to compliance audits. One of the categories audited is timeliness of compensation payments, including initial payment. If compliance levels fall below 90 percent on two consecutive audits, a fine is imposed in that category.
 - Florida - Pursuant to Section 440.20(6), F.S., if any installment of compensation for death or dependency benefits, or compensation for disability benefits payable without an award is not paid within 7 days after it becomes due, there shall be added to such unpaid installment a penalty of an amount equal to 20 percent of the unpaid installment, which shall be paid at the same time as, and in addition to, such installment of compensation. Pursuant to Section 440.20(8), F.S., if any installment of compensation is not paid when it becomes due, the employer, insurance company or servicing agent shall pay interest at the rate of 12 percent per year from the date the installment becomes due until it is paid, whether such installment is payable without an order or under the terms of an order. The interest payment shall be the greater of the amount of interest due or \$5.
 - Iowa - However, interest begins to accrue on late payments beginning on the 11th day after the injury. If there is a delay in commencement without reasonable or probable cause or excuse, the Commissioner may award a penalty up to 50 percent of the amount of benefits that were unreasonably delayed or denied.
 - Louisiana - La. R.S. 23:1201.B, C, and D: B. The first installment of compensation payable for temporary total disability, permanent total disability, or death shall become due on the fourteenth day after the employer or insurer has knowledge of the injury or death, on which date all such compensation then due shall be paid. C. Installment benefits payable pursuant to R.S. 23:1221(3) shall become due on the fourteenth day after the employer or insurer has knowledge of the compensable supplemental earnings benefits on which date all such compensation then due shall be paid. D. Installment benefits payable pursuant to R.S. 23:1221(4) shall become due on the thirtieth day after the employer or insurer receives a medical report giving notice of the permanent partial disability on which date all such compensation then due shall be paid.
 - Louisiana - La. 23:1201.F. Except as otherwise provided in this Chapter, failure to provide payment in accordance with this Section or failure to consent to the employee's request to select a treating physician or change physicians when such consent is required by R.S. 23:1121 shall result in the assessment of a penalty in an amount up to the greater of twelve percent of any unpaid compensation or medical benefits, or fifty dollars per calendar day for each day in which any and all compensation or medical benefits remain unpaid or such consent is withheld, together with reasonable attorney fees for each disputed claim; however, the fifty dollars per calendar day penalty shall not exceed a maximum of two thousand dollars in the aggregate for any claim. The maximum amount of penalties which may be imposed at a hearing on the merits regardless of the number of penalties which might be imposed under this Section is eight thousand dollars.
 - Maine - Does not apply to firefighters.
 - Michigan - If weekly compensation benefits or accrued weekly benefits are not paid within 30 days after becoming due and payable and there is not an ongoing dispute, \$50.00 per day shall be added and paid to the worker for each day over 30 days in which the benefits are not paid. Not more than \$1,500.00 in total may be added pursuant to this subsection.
 - Minnesota - Under Minn. Stat. § 176.223, the Department of Labor and Industry publishes a report on the data for each insurer on total number of claims, and the number and percentage of the insurer's claims with prompt first action.
 - Mississippi - Any day on which a worker earns less than full wage because of injury is considered a day of disability for the waiting period, and neither the 5-day nor the 14-day period have to consist of consecutive calendar days.
 - Missouri - 2019 responses. No 2025 data were provided.
 - Nebraska - Neb. Rev.Stat. § 48-125(3). Reasonable attorney fees may also be applicable in Neb. Rev. Stat. § 48-125(4).
 - Rhode Island - Late penalties 10% if not paid within 14 days under voluntary agreement or 20% if 14 days late on an order or decree.
 - Texas - DWC places these insurance carriers into three tiers, high, average, and poor, and publishes the results on our website: <https://www.tdi.texas.gov/wc/pbo/index.html>. Additionally, workers' compensation system and individual insurance carrier performance scorecards are on our website with year-to-date information related to complaints, initial temporary income benefit (TIBs) payments paid and reported timely, as well as, medical bills and reconsideration medical bills processed and reported timely.
 - Texas - Insurance carriers in average and poor tiers in the PBO assessment are subject to audits which include compliance with timeliness of initial payment of temporary income benefits. If a failure to timely pay benefits is confirmed in a complaint or DWC audit, the penalty can range from a warning letter to a monetary administrative penalty, dependent upon several statutory factors such as severity, violation history, and PBO tier.
 - US Federal Programs - Longshore - Section 14(e) of the Longshore and Harbor Workers' Compensation Act (LHWCA) provides for 10% additional compensation if compensation is not paid timely.
 - Virginia - Unless payment is due pursuant to an award from the Commission, in which case the payment must be made within 2 weeks of when due or is subject to 20 percent penalty.
 - British Columbia - Section 134(4), Act provides that if an injury disables a worker from earning full wages at the work at which the worker was employed, compensation other than a health care benefit is payable under Part 4 of the Act from the first working day following the day of the injury.
 - British Columbia - Once the claim is accepted, a worker is paid wage-loss benefits from the first day of wage-loss entitlement (namely, the first working day following the day of the injury). [Item C5-33.00 of the RS&CM]
 - British Columbia - Statistics are maintained and published with regards to average time between the first date the worker was eligible for wage-loss benefits and day of first payment, but are not held to regulation requirements. In 2023, an initial payment was issued an average of 19.1 days after the first date the worker was eligible for wage-loss benefits (see www.worksafebc.com/en/about-us/shared-data).
 - New Brunswick - The waiting period was eliminated on July 1, 2021.
 - Nova Scotia - 2022 responses. No 2025 data were provided.

Table 12 Initial Payments, Waiting Periods, Retroactive Payments, and Time Frames for Temporary Total Disability as of January 1, 2025							
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Jurisdiction	Waiting Period Before Worker Can Receive Indemnity Benefits	Retroactive Period	Circumstances Under Which Waiting Period Can Be Waived	Payment Begins Upon	Payment or Denial to Be Made Within	Timeliness of Payment to Worker with Injury	
						Jurisdiction Publishes Information on Compliance with Timeliness-of-First-Payment Regulations	Penalties for Late Initial Payment
23	Saskatchewan - Section 175 of The Workers' Compensation Act, 2013 requires that the WCB submit an annual report to the Lieutenant Governor, giving information about performance against our strategic and operational plan and financial statements.						
24	Prince Edward Island - Wait period was removed for injuries occurring on or after January 1, 2016.						

Table 13 Rehabilitation Benefits Allowed Under Workers' Compensation Systems as of January 1, 2025

Statutory citations for the following rehabilitation provisions within workers' compensation statutes, whether the agency has staff and their responsibilities, which benefits are provided, who can make referrals, whether there is a maximum amount of benefits allowed for rehabilitation services, whether there is a penalty to the worker if he or she does not cooperate, and who pays for the services.										
Jurisdiction	Statutory Cite for Rehabilitation Benefits	This Statutory Section Addresses		Agency Has Staff Assigned to Rehabilitation Responsibilities	Agency Staff Responsibilities	Benefits Provided During Vocational Rehabilitation	Referrals Can Be Initiated By	Maximum Vocational Rehab. Benefits	Penalty for Employee's Failure to Cooperate	Funding for Services
		Vocational Rehab.	Physical Rehab.							
Alabama	25-5-57(i)	Yes	Yes	No	N/A	Continue weekly TTD and PPD benefit entitlement; mileage and travel reimbursement	Order by judge, commissioner, or magistrate	None	Benefits can be suspended	Employer/insurer
Alaska	AS 23.30.041	Yes	No	Yes	Make referrals; monitor rehabilitation plans; approve qualified providers; are involved in the resolution of rehabilitation disputes	Continue weekly benefit entitlement; mileage and travel reimbursement; tuition, room and board, books and other expenses up to \$22,150; may also pay a separate benefit if weekly TTD and PPI are exhausted	Treating physician; referral by employer; referral by agency	Plan cost limited to \$22,150 exclusive of rehabilitation consultant's fees or 2 years	Benefits may be terminated	Employer/insurer
Arizona	A.R.S. § 23-1065 (A)	Yes	No	Yes	Make referrals to rehabilitation consultants through state agency; monitor rehabilitation plans; approve qualified providers; are involved in resolving rehabilitation disputes	Separate retraining benefit; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Request from employee; referred by insurance carrier	None	None	Agency through a fund created for this purpose
Arkansas	11-9-505	Yes	No	No	N/A	Mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Treating physician; request from employee; referral by employer; order by judge or commissioner	Up to 72 weeks of additional benefits	No PPD in excess of the percentage of PPD impairment established by objective physical findings	Employer/insurer
California	CA Labor Code section 4658.7 (1)	Yes (1)	No	No	N/A	Voucher for education-related retraining or skill enhancement including payment of tuition, fees, books, equipment, occupational licensing or professional certification fees, related examination fees, and examination preparation course fees at state-approved school; counseling services limited to 10% of voucher	If worker has permanent partial disability and employer does not offer regular, modified, or alternative work, employer must send the Supplemental Job Displacement Benefit (SJDB) voucher to the worker; optional for worker to accept the voucher and pursue retraining	\$6,000	None	Employer/insurer
Colorado	8-43-407; 8-43-404(1)&(3); 8-42-111(3); and 8-42-105(1)	Yes	No	No	N/A	Since rehabilitation is voluntary, it would be whatever the parties agree to provide	Insurer	None	May not be eligible for PTD benefits	Employer/insurer
Connecticut	Section 31-283a, Connecticut General Statutes	Yes	No	Transferred to new Bureau of Rehabilitative Services	Monitor rehab plans; approve qualified providers	Tuition, room and board if necessary, books and other expenses if part of an agreed plan; provide general information	Request from employee; referral by employer; referral by agency	None	None	Bureau of Rehabilitative Services through a fund created for this purpose
Delaware	Title 19, Chapter 23	No	Yes	No	N/A	N/A	Referral by employer; order by Hearing Officer or Board	None	May have to defend against a petition to terminate benefits	Employer/insurer
District of Columbia	32-1507(a),(c), and (d)	Yes	Yes 32-1507	Yes	Mayor has responsibility to monitor rehabilitation	Continue weekly entitlement and up to an additional \$50 per week	Request from employee; referral by employer; mayor	None	Benefits may be suspended	Employer/insurer or Mayor may fund out of the Special Fund with reimbursement from employer/insurer

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Jurisdiction	Statutory Cite for Rehabilitation Benefits	This Statutory Section Addresses		Agency Has Staff Assigned to Rehabilitation Responsibilities	Agency Staff Responsibilities	Benefits Provided During Vocational Rehabilitation	Referrals Can Be Initiated By	Maximum Vocational Rehab. Benefits	Penalty for Employee's Failure to Cooperate	Funding for Services
		Vocational Rehab.	Physical Rehab.							
Florida	Florida Statute 440.491	Yes	No	DWC provides Reemployment Services along with Training & Education	Screen cases for eligibility for services; make referrals to rehabilitation providers; pay for sponsorship of training and education; monitor injured employees enrolled in training and education programs	TTD benefits up to 52 weeks	Requests from employee; referral by employer; referral by agency; order by judge, commissioner, or magistrate; attorneys, carriers, treating physician, and other governmental agencies	N/A	Persons who refuse to accept training and education that is recommended by the vocational evaluator and considered necessary by the department will forfeit any additional training and education benefits and any additional payment for wages	For the department, fees are paid from the Florida Workers' Compensation Administrative Trust Fund; voluntary for employers
Georgia	OCGA 34-9-200.1 & Board Rule 200.1	Yes	Yes	Yes	Monitor rehabilitation plans; approve qualified providers; are involved in resolving rehabilitation disputes	Depends on the case	Vocational rehabilitation mandatory in catastrophic claims and available by agreement of parties in other claims (2)	None	Suspension of benefits	Employer/insurer
Hawaii	Section 386-25, Hawaii Revised Statutes	Yes	No	Yes	Approve qualified providers	Continue weekly TTD and PPD benefit entitlement; separate retraining benefit; mileage and travel reimbursement; tuition, room and board, books and other expenses if part of an agreed plan	Referral agency; referral by employee	None	None	Employer/insurer
Idaho	Idaho Code 72-450 and 72-501A	Yes	No	Yes	Direct services to injured worker; make referrals to rehabilitation consultants (rehabilitation consultants on staff with IC); monitor rehabilitation plans; are involved in resolving rehabilitation disputes	Continue weekly TTD and PPD benefit entitlement; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Treating physician; request from employee; referral by employer; referral by agency	2 years for formal retraining plan	Benefits may be suspended during the period of refusal to cooperate	No fees; rehabilitation is a part of IC and funded by IC
Illinois	820 ILCS 305/8(a)	Yes	Yes	No	N/A	Mileage and travel reimbursement; tuition, room, board, books, etc., and a separate maintenance benefit that cannot be less than the employee's TTD rate	Order by arbitrator or commissioner, or by agreement	None	Loss of benefits	Employer/insurer
Indiana	Indiana Code 22-3-12-5	Yes	No	No	N/A	None	Employee	Unknown	No	Unknown
Iowa	Iowa Code section 85.70	Yes	No	No	N/A	Continued weekly TTD and PPD benefit entitlement; a separate retraining benefit	Request from employee	Additional benefit amount for 13 weeks, may request an additional 13 weeks	None	State vocational rehabilitation service
Kansas	K.S.A 44-510g	Yes	No	Yes	Make referrals to rehabilitation consultants; approve qualified providers	Continuation of TTD or PPD benefits; a separate retraining benefit; mileage and travel reimbursement; tuition, room and board, books <i>only</i> if agreed to by the parties (judges have no authority to order)	Employer/insurer	None	None	Employer/insurer

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Statutory citations for the following rehabilitation provisions within workers' compensation statutes, whether the agency has staff and their responsibilities, which benefits are provided, who can make referrals, whether there is a maximum amount of benefits allowed for rehabilitation services, whether there is a penalty to the worker if he or she does not cooperate, and who pays for the services.

Jurisdiction	Statutory Cite for Rehabilitation Benefits	This Statutory Section Addresses		Agency Has Staff Assigned to Rehabilitation Responsibilities	Agency Staff Responsibilities	Benefits Provided During Vocational Rehabilitation	Referrals Can Be Initiated By	Maximum Vocational Rehab. Benefits	Penalty for Employee's Failure to Cooperate	Funding for Services
		Vocational Rehab.	Physical Rehab.							
Kentucky	KRS 342.710	Yes	Yes	Yes	Make referrals to rehabilitation consultants	Accelerated PPD benefits; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Upon order of an administrative law judge or voluntarily	52 weeks and under certain circumstances an additional 52 weeks	50% reduction of benefits	Employer/insurer
Louisiana	La. R.S. 23:1226	Yes	No	No	N/A	Continuation of TTD or PPD benefits; mileage and travel reimbursement; tuition, room and board, books if part of an agreed plan	Employer/insurer	52 weeks	Reduction of benefits during period of refusal	Employer/insurer
Maine	Section 217 of Title 39	Yes	No	Yes	Make referrals to rehabilitation consultants	Continuation of TTD or PPD benefits (presumption employee cannot work if in approved plan); mileage and travel reimbursement; tuition, room and board, books if part of an agreed plan	Employee; employer; WC agency; by order of a judge	52 weeks; can be extended for up to 52 weeks	Reduction of benefits during period of refusal	Employer/insurer or the agency from a fund created for this purpose
Maryland	Labor and Employment Article, Title 9, subtitles 6 and 6A, Annotated Code of Maryland	Yes	Yes	Yes	Make referrals to rehabilitation consultants; monitor rehabilitation plans; approve qualified providers; are involved in resolving rehabilitation disputes	Continue weekly TTD and PPD benefit entitlement; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Request from employee; referral by employer; order by judge, commissioner, or magistrate	2 years retraining	Termination of benefits	Employer/insurer
Massachusetts	M.G.L.c. 152, 30(4), 30E, 30F, 30G, 30H, 35D, (5), 45,48 (2), 48 (3), 65(2)(d) and Title 452 CMR Sec. 4.01 to 4.11	Yes	No	Yes	Monitor rehabilitation plans; approve qualified providers; are involved in resolving rehabilitation disputes; partial approval to lump sums	Continue weekly TTD and PPD benefit entitlement; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Request from employee; referral by agency; order by judge, commissioner, or magistrate; insurer	VR plan not to exceed 104 weeks	Temporary reduction of weekly benefits by 15% and cessation of weekly benefits if claimant fails to meet with DIA for mandatory meeting	Employer/insurer
Michigan	MCL 418.319 of the Michigan Workers' Disability Compensation Act	Yes	No	Yes	Approve qualified providers; monitor rehabilitation services; are involved in rehabilitation dispute hearings; make referrals to rehabilitation consultants in hearing process as needed	All benefits due an injured worker per statute	Employee; employer; WC agency; by order of a hearing officer or Agency Director	52 weeks with another 52 upon order for total of 104 weeks	Loss of benefits during period of refusal	Employer/insurer
Minnesota	Minnesota Statutes 176.102	Yes	No	Yes	Provide direct services to some workers; monitor rehabilitation plans; approve qualified providers; are involved in resolving rehabilitation disputes; monitor provider professional conduct	Continue weekly TTD, TPD, and PPD benefit entitlement, plus additional compensation up to 25% of comp otherwise payable if employee is in retraining; employee is also entitled to mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Request from employee; referral by employer or insurer; referral by agency; order by judge or commissioner	Job development services by a QRC or vendor limited to 20 hours per month or 26 weeks; formal retraining plans limited to 156 weeks	Benefits may be discontinued or suspended after order from commissioner or compensation judge	Employer/insurer
Mississippi	Miss. Code Ann. 71-3-19	Yes	Yes	Yes	Provide direct services to injured workers; make referrals to rehabilitation consultants; monitor rehabilitation plans; are involved in resolving rehabilitation disputes	Continue weekly TTD and PPD benefit entitlement plus additional \$25 per week for up to 52 weeks; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Treating physician; request from employee; referral by employer; referral by agency; order by judge, commissioner, or magistrate	An additional \$25 per week for up to 52 weeks	Benefits may be suspended	Employer/insurer

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Jurisdiction	Statutory Cite for Rehabilitation Benefits	This Statutory Section Addresses		Agency Has Staff Assigned to Rehabilitation Responsibilities	Agency Staff Responsibilities	Benefits Provided During Vocational Rehabilitation	Referrals Can Be Initiated By	Maximum Vocational Rehab. Benefits	Penalty for Employee's Failure to Cooperate	Funding for Services
		Vocational Rehab.	Physical Rehab.							
Missouri as of January 1, 2019 (3)	Mo. Rev. Stat. §§ 287.146 (vocational rehab); 287.140-.141 (physical rehab)	Yes (4)	Yes	Yes	Monitor physical rehabilitation plans; approve qualified providers; assist in resolving rehabilitation disputes	Continue weekly TTD and/or TPD benefit entitlement; mileage and travel reimbursement; tuition room and board if necessary, books and other expenses if part of an agreed plan (not to exceed \$5,000 without Division approval)	Treating physician; request from employee; referral by employer	None	50% reduction in all disability payments to the employee for each week in which the employee refuses to cooperate, <i>see also</i> (5)	Employer/insurer. Additional compensation for physical rehabilitation may be available from the Second Injury Fund
Montana	39-71-1006, MCA	Yes	No	Yes	Are involved in resolving rehabilitation disputes; provide information about the rehabilitation statutes and rules	Rehab benefits are paid biweekly at the TTD rate, not to exceed 104 weeks. A lump-sum rehab benefit may be paid for job placement services. Additional benefits include payment for tuition, fees, books, and other reasonable and necessary retraining expenses excluding travel and living expenses	N/A	N/A	Benefits may terminate, except medical benefits and the impairment award	Employer/insurer
Nebraska	Neb.Rev.Stat. §§ 48-121; 48-162.01; 48-162.02	Yes	Yes	Yes	Review and approve vocational rehabilitation plans; monitor approved vocational rehabilitation plans; certify vocational rehabilitation counselors; appoint vocational rehabilitation counselors from list of certified counselors; determine what plan expenses may be reimbursed by the Workers' Compensation Trust Fund	Vocational rehabilitation TTD and PPD benefits are paid; mileage; tuition; room and board if necessary; books and other costs as part of an approved plan	Request from any employee; employer can refer; by Court Order	None	Reduction or suspension of benefits or termination of vocational rehabilitation services including termination of vocational rehabilitation plan	Workers' Compensation Trust Fund; Employer
Nevada	NRS 616C.530	Yes	No	No	N/A	There is a separate retraining benefit; mileage and travel reimbursement; tuition, room and board, books and other expenses if part of an agreed plan	Treating physician	Benefits may be provided for up to 2 1/2 years	Compensation may be reduced or suspended	Employer/insurer
New Hampshire	RSA 281-A:25	Yes	No	Yes	Monitor referrals and closures, review/approve rehabilitation work plans, approve qualified vocational providers, assist in resolution of rehabilitation disputes	Indemnity payments may continue, PPD benefit entitlement, mileage and travel reimbursement, tuition, room and board if necessary/agreed on, books and other expenses if part of agreed on and approved plan	Employer, Order of the Department, or voluntary referral by insurance carrier	1 year; extended in unusual cases as deemed necessary and with Department approval	Suspension of indemnity benefits	Employer/insurance carrier
New Jersey	None	N/A	N/A	No	N/A	N/A	Request from employee; referral by employer; referral by agency; order by a judge	N/A	Benefits can be terminated	Employer/insurer or the state vocational rehabilitation services
New Mexico	None	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

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Jurisdiction	Statutory Cite for Rehabilitation Benefits	This Statutory Section Addresses		Agency Has Staff Assigned to Rehabilitation Responsibilities	Agency Staff Responsibilities	Benefits Provided During Vocational Rehabilitation	Referrals Can Be Initiated By	Maximum Vocational Rehab. Benefits	Penalty for Employee's Failure to Cooperate	Funding for Services
		Vocational Rehab.	Physical Rehab.							
New York	Workers' Compensation Law § 15(9)	Yes	No	Yes	To coordinate job/vocational training by providing referrals that assist the injured worker with job training, education, and career development; to offer referrals to other programs such as ACCES-VR; provide general assistance with returning to work, which may include outreach and engagement, determining reasonable accommodations, and monitoring progress	Continue weekly TPD and PPD benefit entitlement; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	By administrative law judge, Board member, advocate, or other agency employee; referral by employer; request from employee; or treating physician	\$30.00 per week (6)	None	Employer/insurer if agree; state vocational rehabilitation service
North Carolina	N.C. Gen. Stat. §97-25, §97-59, §97-2(19), and §97-32.2	Yes	Yes	Yes	Same as above	None by the agency; employer/insurer may provide private rehabilitation services	Same as above	No limit	Suspension of benefits	Employer/insurer
North Dakota	Rehabilitation Services 65-05.1 & Vocational Training and Work Evaluation programs 65-07.1	Yes	No	Yes	Direct services to injured worker; monitor rehabilitation plans; are involved in resolving rehabilitation disputes	Continue weekly TTD benefit entitlement; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Referral by agency	For claims filed on or after January 1, 2006, the maximum TTD is 104 weeks, maximum rehabilitation allowance is 104 weeks, and the maximum TPD is up to 5 years	Disability and vocational rehabilitation benefits shall be discontinued	Agency fund created for this purpose
Ohio	Ohio R.C. 4121.61 et seq.	Yes	No	Yes	Approve qualified providers; monitor rehabilitation plans; are involved in rehabilitation disputes; and make referrals to rehabilitation consultants in hearing process at times	Living maintenance benefits, similar to TTD benefits	Any person	None	No penalty per se, but can affect whether or not employee is granted PTD benefits	Surplus fund
Oklahoma	85A O.S. Section 45	Yes	Yes	Yes	Assist the Commission in determining if it is appropriate for claimant to receive vocational rehabilitation	Tuition, board, lodging, travel, books and necessary equipment in training, if rehabilitation requires residence at or near the facility, or institution which is away from employee's customary residence	Request from employee, referral by employer, Commission order	52 weeks	If vocational evaluation or services are unreasonably refused, costs of training or rehabilitation may be deducted from benefits	Employer/insurer
Oregon	ORS 656.258, 656.340	Yes	No	Yes	Certification of vocational assistance counselors, interns, and return-to-work specialists; registration of vocational providers; and resolution of disputes regarding vocational services	Direct employment services may include employment counseling, job search skills instruction, job development, and job analysis. Training services may include plan development, training, progress monitoring, and job placement. Under an authorized training plan, benefits may include temporary disability; mileage and travel reimbursement; tuition, books, and other expenses	Insurers or self-insured employers; workers	Temporary disability payments for up to 16 months, subject to extension to 21 months for good cause; vocational fee schedule maximums are set by OAR 436-120-0720 and are indexed to the state AWW	Possible end of direct employment services or training program; end of eligibility for vocational assistance	Insurer or self-insured employer

Table 13 Rehabilitation Benefits Allowed Under Workers' Compensation Systems as of January 1, 2025

Statutory citations for the following rehabilitation provisions within workers' compensation statutes, whether the agency has staff and their responsibilities, which benefits are provided, who can make referrals, whether there is a maximum amount of benefits allowed for rehabilitation services, whether there is a penalty to the worker if he or she does not cooperate, and who pays for the services.

Jurisdiction	Statutory Cite for Rehabilitation Benefits	This Statutory Section Addresses		Agency Has Staff Assigned to Rehabilitation Responsibilities	Agency Staff Responsibilities	Benefits Provided During Vocational Rehabilitation	Referrals Can Be Initiated By	Maximum Vocational Rehab. Benefits	Penalty for Employee's Failure to Cooperate	Funding for Services
		Vocational Rehab.	Physical Rehab.							
Pennsylvania	Sec 306(f.1)(1) - 77 P.S. § 531	Sec 306(f.1)(1) - 77 P.S. § 531	Yes (7)	No	N/A	N/A	N/A	N/A	N/A	Employer/insurer
Rhode Island	28-33-41 and 28-33-41.1	Yes	Yes	Yes	Provide direct services to injured workers; are involved in resolving rehabilitation disputes	Continue weekly TTD or PPD; mileage and travel reimbursement; tuition, room and board and books if part of an agreed plan	Request from employee; referral by employer; order by a judge; referral by physicians or attorneys	None	Petition can be submitted to suspend benefits	Employer/insurer
South Carolina	None	N/A	N/A	No	N/A	N/A	Treating physician; request from employee; order by judge, commissioner, or magistrate	None	Possible suspension of benefits	Employer/insurer
South Dakota	SDCL 62-4-5.1	Yes	No	No	N/A	At the employer's discretion, either 66 2/3% of the employee's AWW, or 66 2/3% of the AWW x 1.2, less weekly wages earned	Treating physician; request from the employee; referral by employer; order by judge, commissioner, or magistrate	None	None	None
Tennessee	T.C.A. 50-6-208	Yes	No	Yes	Administering tuition payments from Subsequent Injury and Vocational Recovery Fund	Educational benefits not to exceed \$5,000 per year per student, \$20,000 max per student	Employer, Carrier, Attorney, Mediator, Judge, Ombudsman, any Bureau employee	\$5,000 per year per worker, \$20,000 per worker maximum	None, it's a voluntary program	Subsequent Injury Fund
Texas	Texas Labor Code Chapter 408, Sections 408.150 and 409.012	Yes	No	Yes	Make referrals to Texas Workforce Commission for vocational rehabilitation services	Weekly TTD or PPD benefit entitlement	Treating doctor, request from injured employee; referral by employer or insurance carrier; referral by agency	None	Possible suspension of income benefits	Employer/insurance carrier or state vocational rehabilitation services agency
US Federal Programs - FECA	5 U.S.C. section 8104	Yes	No	Yes	Make referrals to rehabilitation consultants; monitor rehabilitation plans; approve qualified providers; are involved in resolving disputes	Continue weekly TTD or PPD benefits; pay for mileage and travel expenses; tuition, books if part of an agreed upon plan (8)	Treating physician; request from employee; referral by agency; referral by field nurses; claims examiners	None	Insurer discontinues wage-loss payments	Employer/insurer
US Federal Programs - Longshore	Sec. 39(c) of the Act. Codified at 33 USC 939(c)	Yes	No	Yes	Direct services to injured workers; make referrals to rehabilitation consultants; monitor rehabilitation plans; approve qualified providers	Continue weekly TTD and PPD benefit entitlement; mileage and travel reimbursement; tuition, books and other expenses if part of an agreed plan	Request from employee; referral by employer; referral by agency (OWCP)	None	None	Agency through a fund created for this purpose
Utah	34A-2-413.5 (elective for employer/insurer)	Yes	No	No	N/A	None	Referral by employer/insurer or by order of an ALJ	None	May be disqualified from receiving indemnity benefits	May be disqualified from receiving indemnity benefits
Vermont	21 V.S.A. Sec. 641	Yes	No	Yes	Monitor rehabilitation plans; approve qualified providers; are involved in resolving rehabilitation disputes	Continue weekly TTD and PPD benefit entitlement if injured worker is not at maximum medical improvement; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Request from employee; referral by employer	None	Refusal of VR services ordered by the Commissioner may result in loss of compensation for each week of refusal	Employer/insurer
Virginia	Va. Code Sec. 65.2-603 and Commission's Vocational Rehabilitation Guidelines	Yes	Yes	No	N/A	Continue weekly TTD and PPD benefit entitlement; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan	Treating physician; request from employee; referral by employer (vocational rehabilitation not physical rehabilitation); order of Commission	None	Possible suspension of compensation benefits if the refusal or failure to cooperate is unreasonable	Employer/insurer

Table 13 Rehabilitation Benefits Allowed Under Workers' Compensation Systems as of January 1, 2025										
Statutory citations for the following rehabilitation provisions within workers' compensation statutes, whether the agency has staff and their responsibilities, which benefits are provided, who can make referrals, whether there is a maximum amount of benefits allowed for rehabilitation services, whether there is a penalty to the worker if he or she does not cooperate, and who pays for the services.										
Jurisdiction	Statutory Cite for Rehabilitation Benefits	This Statutory Section Addresses		Agency Has Staff Assigned to Rehabilitation Responsibilities	Agency Staff Responsibilities	Benefits Provided During Vocational Rehabilitation	Referrals Can Be Initiated By	Maximum Vocational Rehab. Benefits	Penalty for Employee's Failure to Cooperate	Funding for Services
		Vocational Rehab.	Physical Rehab.							
Washington	RCW 51.32.095, 51.32.096	Yes	No	Yes	Vocational Service Specialists are department employees. They are a resource to claims staff as well as a resource to Vocational Rehabilitation Counselors. They don't meet directly with workers	Continue bi-weekly TTD and PPD benefit entitlement; mileage and travel reimbursement; retraining, books, tuition, fees, supplies, equipment, child or dependent care, training fees for on-the-job training, the cost of furnishing tools and other equipment necessary for self-employment or reemployment, and other necessary expenses if part of an agreed plan; utilizing option 2 benefits which provides an award equivalent to 9 months of TTD paid out in biweekly payments, as well as access to training funds for a period of 5 years following the date of the department's order confirming the worker's Option 2 election	Self-insured employer or department staff	\$20,602.66 (9)	Possible termination of TTD and vocational rehabilitation	The agency through a fund created for this purpose; or a self-insured employer
West Virginia	W. Va. Code § 23-4-9 and W. Va. Code R. §85-15-1	Yes	Yes	No	N/A	Temporary total disability rehabilitation benefits or temporary partial rehabilitation benefits; physical and vocational rehabilitation assistance; tuition, room and board and books if part of an agreed upon plan	Treating physician; request from employee; referral by employer; decision issued by private carrier or self-insured employer; order from Workers' Compensation Board of Review, West Virginia Intermediate Court of Appeals, or West Virginia Supreme Court of Appeals	\$20,000	Can be denied benefits or suffer a reduction in benefits	Employer/insurer
Wisconsin	Sections 102.43(5) and 102.61, Wis. Stats.	Yes	No	Yes	Make referrals to rehabilitation consultants; approve qualified providers; are involved in resolving rehabilitation disputes	Continuation of TTD or PPD benefits; mileage and travel reimbursement; tuition, room and board, books if part of an agreed upon plan	Request from employee; referral by employer	80 weeks (10)	None	Employer/Insurer
Wyoming	27-14-408	Yes	No	No	N/A	Monthly stipend for a separate retraining benefit	Treating physician; request from employee; referral by agency	\$30,000	Rehabilitation benefits may be modified, suspended, or terminated	The agency through a fund created for this purpose
Canadian Jurisdictions Participating (stated in Canadian currency)										
British Columbia	Section 155 of the Workers Compensation Act (11)	Yes	No	Yes (12)	Direct services to injured workers; make referrals to rehabilitation consultants; develop and monitor rehabilitation plans; approve qualified providers; are involved in resolving rehabilitation disputes	May include: wage-loss equivalency payments; mileage and travel reimbursement; formal training or tuition, room and board, books and other expenses; relocation	Internal Board referrals; physicians; hospitals; union representatives; employers and other agencies; request from worker (13)	There is a maximum wage-loss equivalency but not for vocational rehabilitation services	Vocational rehabilitation benefits may be suspended or withdrawn	Agency (WorkSafeBC) funds vocational rehabilitation services through a fund (14)

Table 13 Rehabilitation Benefits Allowed Under Workers' Compensation Systems as of January 1, 2025

Statutory citations for the following rehabilitation provisions within workers' compensation statutes, whether the agency has staff and their responsibilities, which benefits are provided, who can make referrals, whether there is a maximum amount of benefits allowed for rehabilitation services, whether there is a penalty to the worker if he or she does not cooperate, and who pays for the services.

Jurisdiction	Statutory Cite for Rehabilitation Benefits	This Statutory Section Addresses		Agency Has Staff Assigned to Rehabilitation Responsibilities	Agency Staff Responsibilities	Benefits Provided During Vocational Rehabilitation	Referrals Can Be Initiated By	Maximum Vocational Rehab. Benefits	Penalty for Employee's Failure to Cooperate	Funding for Services
		Vocational Rehab.	Physical Rehab.							
New Brunswick	Workers' Compensation Act - section 43	Yes	Yes	Yes	Direct services to injured workers; make referrals to rehabilitation consultants; monitor rehabilitation plans; approve qualified providers; are involved in resolving rehabilitation disputes	New Brunswick - Weekly loss of earnings benefits are continued based on the vocational rehabilitation program, looking at the injured worker as a whole and evaluating the possible rehabilitation plans. Consideration is given to skills, etc. Mileage and travel reimbursement are offered in some instances; tuition, room, board, books, etc. are offered if part of an agreed upon plan where appropriate	Request from employee or a vocational institution	None, but subject to a cost-benefit analysis	Reduction or suspension of benefits	WorkSafeNB
Nova Scotia as of January 1, 2022 (15)	Sections 112 & 113 of the Nova Scotia Workers' Compensation Act	Yes	Yes	Yes	Make referrals to rehabilitation consultants; monitor rehabilitation plans; approve qualified providers; are involved in resolving rehabilitation disputes	Continue weekly TTD and PPD benefit entitlement; a separate retraining benefit; mileage and travel reimbursement; tuition, room and board if necessary, books and other expenses if part of an agreed plan; resume writing; job-search skills training	Treating physician for physical rehabilitation; order by judge, commissioner, or magistrate	None	The Board may suspend, reduce, or terminate any compensation made to the worker where worker fails to cooperate	Employer/insurer
Ontario	Sections 32-33 (health care) and 40-42 (return to work) of the Ontario Workplace Safety and Insurance Act	Yes	Yes	Yes	Provide direct services to injured workers; make referrals to rehabilitation consultants; monitor rehabilitation plans; approve qualified providers; are involved in resolving disputes	Continuation of loss of earnings and non-economic loss benefits as appropriate; mileage and travel reimbursement depending on the case; tuition, room and board if necessary, books and other expenses if part of an agreed plan, depending on the case	Worker's Compensation Board (WSIB)	None	Benefits may be reduced or suspended	Workers Compensation Board from its Insurance Fund
Prince Edward Island	Workers Compensation Act, R.S.P.E.I., 1988, Cap. W-7.1, Section(s) 18(3), 18(12-14), 41(1), 86, 86.1 - 86.12	Yes	Yes	Yes	Develop and monitor rehabilitation plans; make referrals to rehabilitation consultants	Continue weekly TWL benefits; expenses may be covered, including mileage, tuition, books and room and board	Workers Compensation Board	The maximum is based on TWL	Benefits may be reduced, suspended or terminated for non-compliance	Workers Compensation Board
Saskatchewan	111 (16)	Yes	Yes	Yes	Provide direct services to injured workers; make referrals to rehabilitation consultants; monitor rehabilitation plans; approve qualified providers; are involved in resolving disputes	Continue weekly TTD or PPD; separate retraining benefit; pay for mileage and travel expenses, and tuition, room and board and books if part of an agreed upon plan	Treating physician; request from employee; referral by employer; referral by agency	None	Wage-loss benefits may be reduced or terminated	Yes

Notes: Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.

- 1 **California** - The Supplemental Job Displacement Benefit (SJD) voucher program replaced the previous vocational rehabilitation program, which was repealed by Assembly Bill 227 (Statutes of 2003, Chapter 635) and sunset on January 1, 2009.
- 2 **Georgia** - The employer designates provider.
- 3 **Missouri** - 2019 responses. No 2025 data were provided.
- 4 **Missouri** - The employer is not required to offer vocational rehabilitation to a severely injured employee but may choose to provide it voluntarily.
- 5 **Missouri** - No compensation shall be payable for the death or disability of an employee, if and insofar as the death or disability may be caused, continued or aggravated by any unreasonable refusal to submit to any medical or surgical treatment or operation, the risk of which is, in the opinion of the division or the commission, inconsiderable in view of the seriousness of the injury. Mo. Rev. Stat. § 287.140.5.
- 6 **New York** - A claimant who, under the direction of the New York State Education Department, is being rendered fit to engage in a remunerative occupation may receive additional compensation up to \$30.00 per week. This additional remuneration is rarely awarded.
- 7 **Pennsylvania** - Yes, to the extent that it pertains to reasonable and necessary medical treatment.
- 8 **US Federal Programs - FECA** - Room and board not included.
- 9 **Washington** - Instead of undergoing retraining while the claim is open, the worker may choose a vocational award that is equal to nine months of the TTD rate and the claim is closed with any indicated PPD. The worker then has five years to access the rehabilitation benefit.

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Jurisdiction	Statutory Cite for Rehabilitation Benefits	This Statutory Section Addresses		Agency Has Staff Assigned to Rehabilitation Responsibilities	Agency Staff Responsibilities	Benefits Provided During Vocational Rehabilitation	Referrals Can Be Initiated By	Maximum Vocational Rehab. Benefits	Penalty for Employee's Failure to Cooperate	Funding for Services
		Vocational Rehab.	Physical Rehab.							
10	Wisconsin	Additional training can be authorized through determination of department or through litigation process.								
11	British Columbia	Section 155(1), Act provides: "to aid in getting an injured worker back to work or to assist in lessening or removing a resulting disability, the Board may take the measures and make the expenditures that the Board considers necessary or expedient, regardless of the date on which the worker first became entitled to compensation". Therefore, access to WorkSafeBC's vocational rehabilitation services and benefits is discretionary; workers are not automatically eligible. A vocational rehabilitation consultant will decide if a worker is eligible by considering a worker's individual circumstances, and, if so, the type and amount of assistance to provide.								
12	British Columbia	Vocational Rehabilitation Services helps injured workers return to suitable employment with either their injury employer or a new employer. Vocational rehabilitation consultants work in offices throughout the province and become involved as early as reasonable and necessary to assist in the return-to-work process. Programs and services for injured workers may include vocational counseling, return-to-work planning, worker/employer mediation, work assessment, work site/job modification, graduated return to work, job-search assistance, job placement, on-the-job training, or formal training sponsorship. [See Chapter 11 of the RS&CM and www.worksafebc.com/en/claims/benefits-services/vocational-rehabilitation]								
13	British Columbia	Referral guidelines for vocational rehabilitation services are outlined in policy in Item C11-86.10 of the RS&CM.								
14	British Columbia	The Accident Fund provides for the payment of compensation, outlays and expenses referred to in section 239, Act. Total vocational rehabilitation benefit payments made by WorkSafeBC each year are listed in the organization's Annual Report which can be found at www.worksafebc.com/en/about-us/what-we-do/our-annual-report .								
15	Nova Scotia	2022 responses. No 2025 data were provided.								
16	Saskatchewan	The Board may take any measures that it considers necessary or expedient (a) to assist an injured worker in returning to work, (b) to assist in lessening or removing any handicap resulting from his injury, or (c) to encourage a dependent spouse of a deceased worker to become self-sufficient.								

Table 14 Advocate and Attorney Fee Provisions Under Workers' Compensation Statutes as of January 1, 2025

Information on whether the agency provides ombudspersons or other worker and/or employer advocates, the basis of attorney fee calculations, who determines attorney fees, whether there are additional fees allowed and under what circumstances, whether laypersons can represent claimants, what the source of payment to a worker attorney is, and whether defense attorney fees are regulated.								
Jurisdiction	Laypersons Can Represent Workers	Public Advocates or Ombudspersons Provided by Agency		Fees for Worker Attorney Established By	Worker Attorney Fee Formula	Formula for Medical-Only Disputes	Source of Payments to Worker Attorney	Worker Attorney Fee Must Be Approved By
		For Employee	For Employer					
Alabama	No	(1)	(1)	Statutory formula	15% of award	No	15% of award	None
Alaska	Yes	No	No	Statutory & administrative rule; fees must be approved by adjudicative body	25% of first \$1,000 and 10% of remainder; or actual fees are awarded if requested by attorney	No	Employer/insurer	Alaska Workers' Compensation Board
Arizona	No	Ombudsman	Ombudsman	Contract - but fee dispute handled by Commission	If attorney fees are awarded under A.R.S. §23-1071, the fees shall not be more than 25% up to 10 years from the date of the award; in cases involving solely loss of earning capacity, the maximum shall be 25% up to 5 years from the date of the final award; when the payment of the award to the claimant is made in installments, or in other than a lump sum manner, in no event may an amount in excess of 25% of any one such installment payment be withheld for the attorney's fees	No	Directly from employee's benefits	None
Arkansas	Yes	No (2)	No	Statutory formula; determined in each case by the judge or commissioner	25% of indemnity awarded	No fee is allowed for only medical benefits	1/2 comes from award, 1/2 from carrier	Arkansas Workers' Compensation Commission
California	Yes, as long as he or she is not a disbarred attorney	Neutral Information & Assistance officers at each office	Neutral Information & Assistance officers at each office	CA Labor Code sections 4906 and 5710; title 8, CA Code of Regulations section 10844	Based upon consideration of: responsibility assumed by the attorney, care exercised in representation, time involved, and results obtained	No	Fees for representation come out of an award to the injured worker and are paid to attorneys only; lay representatives are not entitled to attorney fees; if employer/insurer takes deposition of worker, the Workers' Compensation Appeals Board may allow a reasonable attorney's fee to be paid by employer/insurer	Workers' Compensation Appeal Board
Colorado	Yes	No	No	Statutory up to 25%, excess at the Director's discretion	A fee in excess of 25% of the benefits awarded is to be presumed unreasonable, but the Director can make exceptions for cases that have been appealed	Reasonable fees calculated on a per hour basis; contingent fee if approved by Director	Paid out of the worker's benefits	None
Connecticut	Yes, during informal hearings	No	No	Administrative rule	25% of total award in most cases (3)	No	Paid out of worker's benefits	Workers' compensation administrative law judge hearing the case if there is a dispute
Delaware	No	No	No	Statutory formula; determined in each case by the Hearing Officer or Board; by agreement of the parties	The Board can award attorneys' fee an amount not to exceed 30% of the award or 10 times the SAWW	No	Employer/carrier and employee benefits	The Industrial Accident Board; fees must be approved only as part of an award for commutation
District of Columbia	Yes	No	No	Statute	Not to exceed 20% of benefits secured	No	Paid out of the worker's benefits, but there are exceptions	Yes, by the tribunal in which the work was performed.
Florida	No, but Ombudsman can intervene on injured worker's behalf but cannot represent the injured worker before the judge	Ombudsman	No	Statutory formula	20% of first \$5,000 of the amount of the benefits secured; 15% of the next \$5,000 of the amount of the benefits secured; 10% of the remaining amount of the benefits secured to be provided during first 10 years after the date the claim is filed; 5% of the benefits secured after 10 years. A Judge of Compensation Claims can approve an alternative fee amount should the statutory formula result in an unreasonable fee amount	\$1,500 once per accident based on hourly rate of \$150	Employer, in addition to employee's benefits/the employee, unless the employee prevails before a judge, then it would be the employer/carrier. In addition the injured worker may contract directly with their attorney for additional fees	The Office of Judges of Compensation Claims

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Information on whether the agency provides ombudspersons or other worker and/or employer advocates, the basis of attorney fee calculations, who determines attorney fees, whether there are additional fees allowed and under what circumstances, whether laypersons can represent claimants, what the source of payment to a worker attorney is, and whether defense attorney fees are regulated.								
Jurisdiction	Laypersons Can Represent Workers	Public Advocates or Ombudspersons Provided by Agency		Fees for Worker Attorney Established By	Worker Attorney Fee Formula	Formula for Medical-Only Disputes	Source of Payments to Worker Attorney	Worker Attorney Fee Must Be Approved By
		For Employee	For Employer					
Georgia	Yes	No	No	Statute - OCGA §34-9-108; Board Rule 108	Contingent fee of 25% of the employee's weekly benefits	N/A	Either employee's weekly benefits or the employer/insurer if determined to be unreasonable	ALJ or the Board
Hawaii	Yes	No	No	Administrative rule	None	No	Is a lien upon compensation to be paid to employee	Director of Labor and Industrial Relations
Idaho	No	No	No	Administrative rule	25% of benefits secured by the attorney without hearing, 30% with hearing. In the case of a permanent total disability claim, fifteen percent (15%) of benefits after ten (10) years from date such total permanent disability payments commenced	No	A set percentage of the benefits paid to the employee that were secured by the attorney, or if employer/surety actions are found unreasonable, employee's attorney fees are paid by employer/surety as awarded by the Commission	Subject to approval by the Commission
Illinois	No (4)	No	No	Statutory formula; additional fees by order of Commission	20% of disputed amount up to 364 weeks of benefits at permanent total disability rate	No	Out of award; employer may be ordered to pay fee as penalty	IWCC
Indiana	No	No	No	Statutory formula	20% of first \$50,000; 15% of in excess of \$50,000	No	Comes out of employee's recovery	None
Iowa	No	No	No	Agreement of parties	None	No	From award of benefits or percentage of settlement	None
Kansas	No	Yes	Yes	Statutory formula	25% of the amount of compensation recovered and paid	No	Comes out of the employee's award	Department of Labor, Division of Workers Compensation administrative law judge
Kentucky	No	No	No	Statutory	20% of the first \$25,000 of the income benefits recovered in an award or settlement; 15% of the next \$25,000; 10% of the remainder with \$18,000 maximum fee	N/A	Income benefits recovered on behalf of the worker by way of award or settlement	Administrative Law Judge in Department of Workers' Claims
Louisiana	No	Yes (very limited)	Yes (very limited)	Statutory formula	Up to 20% of award	N/A	Paid from award	Paid from award
Maine	Yes	Yes	No	Agreement of parties and subject to limits and appealable to an administrative law judge	May not exceed 30% of award after deducting expenses	No	Deducted from employee's award	None
Maryland	No	No	No	Administrative rule; determined in each case by the judge, commissioner, magistrates	For PPD, up to 20% of the first 75 weeks awarded, up to 15% of the amount due for the next 120 weeks, and up to 10% of the amount due in excess of 195 weeks (see COMAR 14.09.04.03)	Absent exceptional circumstances, no fee allowed	Injured worker's weekly benefit is reduced by the amount of the fee	Workers' Compensation Commission
Massachusetts	Yes	No	No	Statutory formula, percentage of lump-sum agreement	20% of lump-sum settlement or award ordered by administrative judge	N/A	Attorneys are entitled to fees if an administrative judge awards benefits in a conference order or a hearing decision; a percentage is taken out of any lump-sum settlement (20% if liability is established, 15% if not)	Department of Industrial Accidents, but rates are set by statute (see M.G.L. c. 152, Secs. 12A and 13A)
Michigan	No	No	No	Statutory formula and by Michigan Workers' Disability Compensation administrative rule	Cases alleging dates of injury after the effective date of this amendment may be subject to attorney fees of all of the following: (i) 20% of the first \$100,000, (ii) 15% of any amount more than \$100,000 (see sec. 408.44 for details)	No	Paid on contingency out of benefits awarded to employee	Approved by workers' disability compensation magistrate under Michigan Administrative Rules

Table 14 Advocate and Attorney Fee Provisions Under Workers' Compensation Statutes as of January 1, 2025

Information on whether the agency provides ombudspeople or other worker and/or employer advocates, the basis of attorney fee calculations, who determines attorney fees, whether there are additional fees allowed and under what circumstances, whether laypersons can represent claimants, what the source of payment to a worker attorney is, and whether defense attorney fees are regulated.								
Jurisdiction	Laypersons Can Represent Workers	Public Advocates or Ombudspeople Provided by Agency		Fees for Worker Attorney Established By	Worker Attorney Fee Formula	Formula for Medical-Only Disputes	Source of Payments to Worker Attorney	Worker Attorney Fee Must Be Approved By
		For Employee	For Employer					
Minnesota	No	Yes	Yes	Statutory formula; by agreement of the parties with judge's approval; attorney may petition for additional fees	20% of the first \$275,000 is presumed adequate; attorney may petition court for additional fees (5)	Same formula applies to the dollar amount of disputed medical benefit awarded; where no dollar value is ascertainable, the amount is hourly or \$500, whichever is less	Employee's awarded benefits, unless contingency fee is inadequate to reasonably compensate the attorney in medical and rehabilitation cases, in which case the employer or insurer is liable for the attorney fees (6)	A compensation judge at the Office of Administrative Hearings
Mississippi	Claimants can proceed pro se, a non-attorney may not represent another person	No	No	Statutory rule: 25%	25% of total award	No	Only from the award	Mississippi Workers' Compensation Commission
Missouri as of January 1, 2019 (7)	No	Yes, limited (8)	Yes, limited (8)	Determined in each case by the ALJ or the Labor and Industrial Relations Commission (LIRC) (9)	No statutory formula	No	Generally, the employee's attorney's fee is paid out of the sum paid to the employee by settlement or award, subject to the approval of the ALJ or LIRC, but see (10)	Missouri Division of Workers' Compensation or the Labor and Industrial Relations Commission of Missouri
Montana	Yes (11)	No	No	Determined in each case by the judge or by agreement of the parties (39-71-613, MCA)	20% of benefits gained through attorney's efforts; 25% if prevails in court	N/A	Paid out of worker's benefits, unless court assesses fee against the insurer	Employment Standards Division or the Workers' Compensation Court, whichever is applicable
Nebraska	No	No	No	Established between employee and attorney by fee agreement; ordered by a judge	Local customary fee agreement; reasonableness (13)	None (12)	Paid out of benefits; may be awarded in addition to benefits	Judge in a lump-sum settlement; when enforcement of lien is requested; and to award a penalty (12)
Nevada	Yes (14)	Yes	No	By agreement of both parties	None	No	Paid by the state if represented by the Nevada Attorney for Injured Workers	None
New Hampshire	Yes	Yes (15)	No	Statute and Administrative Regulation	20% of retroactive indemnity benefits	Yes (16)	Award comes from employee award (17)	Department of Labor
New Jersey	No	No	No	Statutory formula but determined in each case by the Judge of Compensation	Statutory formula up to 20% of award, but determined in each case by the Judge of Compensation	No	From award and/or paid all or in part by respondent	Division of Workers' Compensation
New Mexico	Yes (18)	Yes	Yes	Determined in each case by the judge or by agreement of the parties	None	No	Fees are usually split between worker and employer/insurer, but offers of judgment can shift fees all to worker or all to employer	Workers' Compensation Judge

Table 14 Advocate and Attorney Fee Provisions Under Workers' Compensation Statutes as of January 1, 2025

Information on whether the agency provides ombudspeople or other worker and/or employer advocates, the basis of attorney fee calculations, who determines attorney fees, whether there are additional fees allowed and under what circumstances, whether laypersons can represent claimants, what the source of payment to a worker attorney is, and whether defense attorney fees are regulated.								
Jurisdiction	Laypersons Can Represent Workers	Public Advocates or Ombudspeople Provided by Agency		Fees for Worker Attorney Established By	Worker Attorney Fee Formula	Formula for Medical-Only Disputes	Source of Payments to Worker Attorney	Worker Attorney Fee Must Be Approved By
		For Employee	For Employer					
New York	Yes (19)	Yes (20)	Yes (21)	As of January 1, 2023, attorney fees are set based on a percentage of awards pursuant to the schedule in Workers' Compensation Law § 24 (22)	WCL § 24(2)(a-f) sets forth the type of awards from which attorney fees are paid and the formula to determine the amount of the fees as: 1) 1/3 of one week's compensation when weekly benefits are directed at the temporary total or temporary partial rate; 2) 15% of any increase in awards for a previous period of temporary total or temporary partial disability; 3) 15% of the compensation due in excess of the previous compensation payments for schedule loss of use or permanent facial disfigurement cases; 4) 15% of the compensation due in excess of previous payments for permanent total or permanent partial disabilities, plus a sum equal to 15 weeks of compensation at the rate fixed by the Board; 5) 15% of the compensation due in excess of the previous payments for death benefits, plus a sum equivalent to 15 weeks of compensation at the rate fixed by the Board; and 6) 15% of the settlement amount in a WCL § 32 waiver agreement minus any amount allocated for future medical expenses	There is no formula for medical-only disputes as fees are based on the monetary awards made to the claimant	The worker's attorney's fee is a lien on the compensation awarded to the worker	NYS Workers' Compensation Board
North Carolina	No	No (23)	No (23)	Statute permits contract between worker and worker attorney subject to approval of the Industrial Commission	Contract between worker and worker attorney subject to the approval of the Industrial Commission based upon "not... unreasonable" standard (24)	No (25)	The employee's compensation (25)	NC Industrial Commission
North Dakota	No	Yes (26)	No	Administrative rule (92-01-02-11.1)	Subject to maximum fee set by administrative rule (92-01-02-11.1). Paid only when injured worker prevails	No	Workers' Compensation Administrator	Workers' Compensation Administrator
Ohio	No (27)	Yes (28)	Yes (28)	Individual contract between injured worker and attorney	No statutory formula	No	Paid out of the benefits awarded to the employee	None
Oklahoma	No	Yes (29)	Yes (29)	Statutory formula	10% of contested TTD, 20% of PPD, PTD, death compensation	Attorney fees shall not be awarded on medical benefits or services	Attorney fee deducted from employee's award	By Commission approval
Oregon	No	Yes	Yes	Statute and administrative rule	Varies according to the type of dispute, but generally the forum adjudicating the dispute will either: 1) Assess a "reasonable" fee, considering factors set by rule. Some fees are capped by statute. 2) Award a fee based on a percentage (set by rule) of the increased compensation awarded or of the amount of settlement proceeds. 3) Determine the fee based on a matrix in rule (capped by statute).	Varies depending on the issues: 1) A "reasonable" fee may be assessed, considering factors set by rule. 2) Fees in medical service disputes are determined based on a matrix in rule and capped by statute. 3) Fees for obtaining an order reclassifying the claim as disabling are based on an hourly rate or "reasonable."	Approved fees are paid out of the award and are a lien on the worker's compensation. Assessed fees are paid by the insurer or self-insured employer	Administrative Law Judge, Workers' Compensation Board, Workers' Compensation Division, Court of Appeals, or Supreme Court depending on type and level of dispute

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		For Employee	For Employer					
Pennsylvania	No	No	No	No	Up to 20% of compensation awarded	Up to 20% of medical payments	For indemnity payments, fees are paid out of claimant's awarded benefits. For medical payments, the fee is paid out of the amount due to the provider	Fee must be approved by either the workers' compensation Judge or, in certain cases, the Workers' Compensation Appeal Board
Rhode Island	No	No	No	Determined in each case by the judge or by agreement of the parties	No statutory formula	No	Usually paid in addition to the benefits paid to the worker; for a settlement, fees are generally paid out of worker's award and are not to exceed 20%	Workers' Compensation Court
South Carolina	No	Yes	Yes	Regulatory formula	33% for claimant attorney	None	Deducted from award	SC Workers' Compensation Commission
South Dakota	No, unless a medical-only dispute of \$8,000 or less	No	No	Statutory rule	Maximum of 25% of disputed benefits if settled, 30% if hearing, 35% if appealed to courts	No	Out of employee's award unless insurer's conduct unreasonable/vexatious	DLR
Tennessee	No	Yes	Yes (but rarely used)	Statutory formula; approved in each case by the judge	The attorney's fees to be charged employees shall not be in excess of 20% of the amount of the recovery or award	No, but worker's attorney can recover a fee not in excess of 20% of the amount of the recovery or award for disputed medical bills	Worker's attorney fees come from the award	Court of WC Claims
Texas	Yes (30)	Yes, provided by a separate state agency—Office of Injured Employee Counsel	No	By administrative rule and are determined in each case by the judge, commissioner, or magistrates	Number of hours multiplied by hourly fee; number of hours and maximum hourly fee (\$200/hr) established by rule	No	Paid from injured employee's weekly income benefits; amount may not exceed 25% of weekly benefit amount	
US Federal Programs- FECA	Yes	Yes	Yes	Claimant and representative agree on fees, OWCP approves them—no contingency fees allowed	N/A	N/A	N/A	The Office of Workers' Compensation Programs
US Federal Programs - Longshore	Yes	No	No	Market rates; determined in each case by the tribunal before whom earned	None	No	Employee (though fees may shift to employer/carrier in most circumstances). See 33 U.S.C. § 928 for more details	DOL - District Director, Office of Administrative Law Judge, or Benefit Review Board
Utah	No	No	No	N/A	N/A	N/A	N/A	N/A
Vermont	No	No	No	Administrative rule and determined in each case by the judge, commissioner	Up to \$255 per hour	No	If awarded by commissioner/judge, fee paid by the employer/carrier in addition to employee's benefits	None
Virginia	No	Yes	Yes	Determined in each case by the Commission	None	No	Payable by worker directly or paid out of comp award unless bad-faith defense on part of employer/insurer, in which case all or part can be assessed against employer/insurer	Agency - Virginia Workers' Compensation Commission
Washington	Yes	Yes	Yes	Fixed by director or the director's designee; for self-insurance, attorney fees are fixed by the court	Attorney fees limited to 30% of increase in award or benefits secured by the attorney; for claim resolution settlement agreements, attorney fees are limited to 15% of the total amount to be paid to the worker after the agreement becomes final	No	Paid out of the benefits awarded to the worker	N/A

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West Virginia	No	No	No	Statute	20% of indemnity benefits to a maximum of 20% of 208 weeks of benefits (31)	Hourly rate and reasonable costs (32)	Paid from employee's benefits; however, in certain cases, attorney fees and costs will be paid by a private carrier or self-insured employer	It varies depending on protested action (33)
Wisconsin	Yes (34)	Yes, Limited (35)	No	Statutory formula; administrative rule	20% of the disputed amount; if no dispute, 10% of the amount awarded up to a maximum of \$250	No	Paid out of employee's award	An administrative law judge
Wyoming	No	Yes	Yes	Administrative rule	None	No	Always paid in addition to the worker's benefits whether the worker wins or loses	Hearing Officer or Attorney General's office
Canadian Jurisdictions Participating (stated in Canadian currency)								
British Columbia	Yes	Yes (36)	Yes (37)	WorkSafeBC does not pay expenses for legal advice or advocacy (38)	N/A	N/A	N/A	N/A
New Brunswick	No	No (39)	No (39)	Worker and employer advocates are a free service provided by the provincial government and funded by WorkSafeNB	N/A	N/A	N/A	N/A
Nova Scotia as of January 1, 2022 (40)	Yes	Yes	No	N/A (41)	No fees	N/A	N/A	N/A
Ontario	Yes	WSIB funds the Office of the Worker Advisor	WSIB funds the Office of the Employer Advisor	Arrangement between the worker and their attorney	None	No	Arrangement between the worker and their attorney	N/A
Prince Edward Island	Yes	Yes	Yes	Legal fees are not covered	N/A	N/A	N/A	N/A
Saskatchewan	Yes	Yes (42)	Yes (43)	N/A	N/A	N/A	N/A	N/A
Notes: Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.								
1	Alabama - There is an ombudsman program; however, in Alabama the ombudsmen are not advocates for either side. They are mediators that help settle the claim outside of the court system.							
2	Arkansas - Legal advisors are available to both parties and the public but are not advocates.							
3	Connecticut - see Chairperson's Memorandum 2023-09.							
4	Illinois - Except a legal guardian.							
5	Minnesota - For dates of injury on or after 10/1/2024.							
6	Minnesota - A portion of fees are reimbursed to the employee by the employer/insurer if the worker's attorney successfully procures payments from a denial of liability, notice of discontinuance of benefits, or failure to make a payment of compensation or medical expenses within the statutory period after notice of injury or occupational disease, or otherwise unsuccessfully resists the payment of rehabilitation benefits or other aspects of a rehabilitation plan. Reimbursement is not available if the employee's attorney fees were paid by the employer/insurer.							
7	Missouri - 2019 responses. No 2025 data were provided.							
8	Missouri - The Missouri Division of Workers' Compensation has a voluntary alternative dispute resolution process to mediate disputes that arise over issues such as medical treatment and lost wages soon after an injury occurs.							
9	Missouri - Fee arrangements can be made between the employee and his or her attorney. The fee must be reasonable and must be approved by the ALJ or LIRC. In practice, the usual and customary attorney's fee is 25 percent.							
10	Missouri - Mo. Rev. Stat. § 287.560 has been interpreted to provide that if an ALJ or the LIRC determines that any proceedings have been defended without reasonable ground, the ALJ or the LIRC may order the employer/insurer to pay the whole cost of the proceedings, including the employee's attorney's fees.							
11	Montana - If they are not paid for representation.							
12	Nebraska - Attorney fees may not be assessed against any medical fees recovered. Neb.Rev.Stat. § 48-108.							
13	Nebraska - May be subject to approval by a judge of the workers' compensation court. See Neb. Rev. Stat. § 48-108.							
14	Nevada - Laypersons can only represent workers at the first hearing officer level of appeal.							
15	New Hampshire - pro se dispute resolution coordinator position established under RSA 281-A:42-c.							
16	New Hampshire - Reasonable fees if bills are ordered after a hearing.							
17	New Hampshire - Unless after an appeal to the Compensation Appeals Board.							
18	New Mexico - A non-attorney cannot be compensated.							
19	New York - If they are licensed by the Workers' Compensation Board for this purpose.							

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20	New York - The Ombudsman for Injured Workers acts as an advocate for injured workers by accepting, investigating and trying to resolve complaints relating to workers' compensation, and providing information to injured workers about their rights and the workers' compensation system. The Ombudsman does not give legal advice or represent claimants at proceedings.							
21	New York - The Ombudsman for Business acts as an advocate for business and provides information and assistance with regards to workers' compensation insurance and claim processing matters. The Ombudsman does not give legal advice or represent employers at proceedings.							
22	New York - Prior to January 1, 2023, attorney fees were determined in each case by the administrative law judge or members of the Board based upon the provisions of Workers' Compensation Law § 24 and 12 NYCRR 300.17. Such fees were commensurate with the services rendered, having due regard for the financial status of the worker, whether the attorney engaged in dilatory tactics or failed to comply with Board rules in a timely manner, and were not based on the amount of the award.							
23	North Carolina - Information specialists assist claimants who are not represented by an attorney, employers, or other parties in protecting their rights, but they do not give legal advice or appear at proceedings. Information specialists answer questions pertaining to all aspects of workers' compensation.							
24	North Carolina - The Industrial Commission also can tax attorney fees as costs for appeals in a limited class of cases. The attorney fee is determined by multiplying the number of hours reasonably expended on the case by a reasonable hourly rate.							
25	North Carolina - The Industrial Commission may, in its discretion, also tax attorney fees if any hearing has been brought, prosecuted, or defended without reasonable ground; it may assess the whole cost of the proceedings, including reasonable fees for the defendant's attorney or the plaintiff's attorney upon the party who has brought or defended.							
26	North Dakota - Decision Review Office Statute 65-02-27 and Admin Rule 92-01-03.							
27	Ohio - With one exception. Non-attorney Union Representatives can represent injured workers at the administrative level of the workers compensation system as long as they do not charge a fee and comply with Industrial Commission Resolution R18-1-05.							
28	Ohio - Ombudsperson appointed by and operates under the direction of the Industrial Commission Nominating Council, and is funded out of the Bureau of Workers' Compensation budget. See R.C. 4121.45.							
29	Oklahoma - Oklahoma provides counselors or ombudsmen to assist all stakeholders, including injured workers and employers. Counselors are not advocates and cannot provide legal advice.							
30	Texas - The lay representative must register with DWC. A lay representative may not receive a fee or remuneration, directly or indirectly, for the representation.							
31	West Virginia - In the case where a claim is settled, the fee may not exceed 20% of the total value of the medical and indemnity benefits. However, this fee, when combined with any fees previously charged or received by the attorney for PPD or PTD benefits, may not exceed 20% of the award of benefits to be paid during a period of 208 weeks.							
32	West Virginia - W. Va. Code § 23-5-16(c)(2) directs that for a denial of medical benefits, attorney fees may not exceed \$125 per hour, and the reasonable costs to the claimant may be awarded. However, in no event may an award of the claimant's attorney fees exceed \$500 per litigated medical issue, not to exceed \$2,500 in a claim.							
33	West Virginia - For most actions, the fee will be paid from the employee's benefits and there is no need for approval. However, pursuant to W. Va. Code § 23-2C-21(c), the Workers' Compensation Board of Review can award reasonable attorney's fees and costs if it finds that a denial of compensability, a denial of an award of TTD benefits or a denial of an authorization for medical benefits was unreasonable. The fees and costs will be paid either by the carrier or self-insured employer. In addition, pursuant to W. Va. Code § 23-5-16(c)(1), an attorney's fees (and costs) may be awarded to an attorney, and paid by a private carrier or self-insured employer, if the claimant is successful in reversing a denial of medical benefits. Such action could be brought before an arbitrator or mediator, but normally will be brought before the Workers' Compensation Board of Review, West Virginia Intermediate Court of Appeals, or the West Virginia Supreme Court of Appeals (entity depends on where denial was reversed).							
34	Wisconsin - The lay representative must be approved by the Office of Worker's Compensation Hearings if he or she has had three or fewer appearances in formal hearings. If the lay person has had more than three appearances, he or she must be a licensed representative in order to appear.							
35	Wisconsin - The DWD has a voluntary alternative dispute resolution process for cases involving pro se applicants to resolve disputes informally without the necessity of a hearing.							
36	British Columbia - The statute provides for the Workers' Advisers Office [see sections 350, 351 and 353, Act]. The Workers' Advisers Office is a branch of the Ministry of Labour and independent from WorkSafeBC that advises and assists workers on claims matters they have with WorkSafeBC. It provides services at no cost to workers, such as advice, assistance, representation educational seminars to employers, potential employers and associations concerning workers' compensation issues. See Policy item #109.10 of the RS&CM. In addition, the statute provides for the Fair Practices Commissioner. [Sections 355 to 357, Act] The Fair Practices Commissioner provides an independent review of complaints made by workers, employers, and workers' dependents relating to issues that have not been satisfactorily resolved by the Issue Resolution Office at WorkSafeBC. For more information see www.worksafebc.com/en/about-us/fairness-privacy/fair-practices-commissioner .							
37	British Columbia - The statute provides for the Employers' Advisers Office [see sections 350, 352, and 353, Act]. The Employers' Advisers Office is a branch of the Ministry of Labour and independent from WorkSafeBC. It is a resource for employers in British Columbia, providing complimentary advice, assistance, representation educational seminars to employers, potential employers and associations concerning workers' compensation issues. See Policy item #109.20, of the RS&CM. In addition, the statute provides for the Fair Practices Commissioner [see sections 355 to 357, Act]. The Fair Practices Commissioner provides an independent review of complaints made by workers, employers, and workers' dependents relating to issues that have not been satisfactorily resolved by the Issue Resolution Office at WorkSafeBC. For more information see www.worksafebc.com/en/about-us/fairness-privacy/fair-practices-commissioner .							
38	British Columbia - See Policy item #100.40 of the RS&CM.							
39	New Brunswick - Public advocates are available for both employees and employers as a free service; however, they are provided by the Provincial government.							
40	Nova Scotia - 2022 responses. No 2025 data were provided.							
41	Nova Scotia - Workers do not pay fees for attorneys. The WCB has a legislated obligation to pay for a separate body, the Workers' Advisors Program, which provides legal representation for workers at no cost.							
42	Saskatchewan - Injured Worker Appeal Services							
43	Saskatchewan - Employer Advisory Centre							

Table 15 Workers' Compensation Boards, Advisory Committees, and Other Commissions Within Jurisdictions as of January 1, 2025								
A listing of boards, committees, or commissions involved in the administration of the workers' compensation statutes, their purpose, the appointing authority, membership make up and their terms, and a listing of any reports or products they are directed to publish.								
Jurisdiction	Name of Board or Committee or Commission	Authorized By		Appointing Authority	Membership	Length of Appointment	Purpose	Products Produced
		Statute	Executive Branch					
Alabama	Medical Services Board	Yes	No	Secretary of Department of Labor	5 physicians licensed to practice in Alabama	5 years	Exercise general supervision in all matters related to the provision of medical services provided by physicians	None
	Legal Advisory Committee	Yes	No	Secretary of Department of Labor	Attorneys	Not in statute	To guide and assist the Director in creating and promulgating rules and regulations for the efficient administration of the Ombudsman Program	None
Alaska	Alaska Workers' Compensation Board	Yes	No	Governor	18 members; chairperson Director, 9 labor representatives, and 9 industry representatives	3 years	Author and adopt regulations, staff hearing panels, approve decisions and agreed settlements, and set medical reimbursement rates	Decisions and orders; memorandum decisions; annual reports
	Alaska Workers' Compensation Appeals Commission	Yes	No	Governor	5 members; chairperson who is an admitted attorney, 2 labor representatives, and 2 industry representatives	5 years	The Commission to hear appeals of decisions and orders of the Alaska Workers' Compensation Board	Decisions and orders; memorandum decisions; annual reports
Arizona	Industrial Commission	Yes	No	Governor with confirmation by the Senate	5 members	5 years	To efficiently administer and effectively enforce all applicable laws and regulations not specifically delegated to others, relative to the protection of life, health, safety, and welfare of employees within the state	None required, however numerous publications are produced; additionally rules are reviewed every 5 years
Arkansas	Arkansas Workers' Compensation Commission	Yes	No	Governor	Three members: one representative of employers, one representative of employees, and one who is an attorney and serves as Chair	6 years	To pay timely temporary total and permanent disability benefits to all legitimately injured workers who suffer an injury or disease arising out of and in the course of their employment; to pay reasonable and necessary medical expenses resulting there from, and then to return the worker to the work force	Biennial report to the Governor and the General Assembly and quarterly reports from the Health and Safety Division and Medical Cost Containment Divisions (1)
California	Workers' Compensation Appeals Board	Yes	No	Governor, Senate	7 total: 5 attorneys, 2 do not need to be attorneys	6 years	Oversees judicial branch of Division of Workers' Compensation; reviews appeals from trial judges' decisions; issues decisions and orders	Decisions can be found on their website at http://www.dir.ca.gov/wcab/wcab.htm
	Workers' Compensation Ethics Advisory Committee	No	Yes	Administrative Director	9 members, each representing a different sector of the workers' compensation community	4 years	Reviews ethics complaints made against workers' compensation administrative law judges	Annual report can be found at http://www.dir.ca.gov/dwc/dwcrep.htm
	Pharmacy and Therapeutics Committee	Yes	No	Administrative Director	Executive Medical Director of the Division of Workers' Compensation plus 6 additional members, 3 pharmacists and 3 physicians (medical doctors or doctors of osteopathy) who meet the criteria set forth in Labor Code section 5307.29	2 years	Review and consult with the Administrative Director on available evidence of the relative safety, efficacy, and effectiveness of drugs within a class of drugs for purposes of updating the Medical Treatment Utilization Schedule (MTUS) Drug List	Summaries of meetings and recommendations can be found at https://www.dir.ca.gov/dwc/MTUS/MTUS-Pharmacy-and-Therapeutics-Committee.html
	Medical Evidence Evaluation Advisory Committee	No	Yes	Executive Medical Director	Executive Medical Director of the Division of Workers' Compensation plus 19 additional members, each representing a different medical specialty or field	2 years	Make advisory recommendations to the Medical Director to revise, update, or supplement the MTUS	Advisory recommendations to the Administrative Director through the Executive Medical Director
	Commission on Health and Safety and Workers' Compensation	Yes	No	Governor, Senate, and Assembly	8 total: 4 representing employers and 4 representing labor	4 years	Conducts a continuing examination of the workers' compensation system and of the state's activities to prevent industrial injuries and occupational illnesses and to examine those programs in other states. Also administers the Worker Occupational Safety and Health Training and Education Program, which sponsors workplace health and safety training programs and distributes educational materials on job safety	Recommend administrative or legislative modifications based on findings
Colorado (2)	Premium Cost Containment Board	Yes	No	Governor with confirmation by the Senate	Seven members: the Commissioner of Insurance, Chief Executive Officer of Pinnacle Assurance, and five other members; the five members are chosen from employers or their designated representatives engaged in businesses having workers' compensation insurance rates in the upper 5 percent of the rate schedule, actuaries or executives with risk management experience in the insurance industry, or employers who have demonstrated good risk management experience with respect to their workers' compensation insurance	The Commissioner of Insurance and Chief Executive Officer of Pinnacle Assurance's terms are served continuously; the remaining five members serve three-year terms	Certification status is granted by the Premium Cost Containment Board to employers who can document that they have had a loss-prevention/loss-control program in effect for at least one year that meets minimum requirements; certified employers are reviewed by the Board to ensure the program requirements are continually met	

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Jurisdiction	Name of Board or Committee or Commission	Authorized By		Appointing Authority	Membership	Length of Appointment	Purpose	Products Produced
		Statute	Executive Branch					
Connecticut	Workers' Compensation Advisory Board	Yes	No	Governor	8 members with advisory board choosing one more as a chair (4 employer reps including one from a major hospital and 4 employee reps including one with an extensive work-related disability)	4 years	General recommendations and advice on re-appointment of Administrative Law Judges	Reports on Administrative Law Judge re-appointments
	Medical Advisory Board	No	Yes	Chairperson of Commission	Currently, 39 physicians and medical providers from a variety of specialties that treat within the workers' compensation system	No set term	Any medical matters related to workers' compensation	Advice and reports as needed
	Legal Advisory Board	No	Yes	Chairperson of Commission	Currently, 22 attorneys	No set term	Any legal matters related to workers' compensation	Advice and reports as needed
Delaware	Workers' Compensation Oversight Panel	Yes	No	Governor	24 members, including legal, medical, business, labor, and insurance	3 years	Makes recommendations regarding law, rules, and regulations as well as medical cost containment initiatives	Advice and reports as needed (3)
District of Columbia	None							
Florida	Three-Member Panel (440.13(12))	Yes	Yes	Governor (two of the three members)	3-member panel: Florida CFO or designee and 2 representatives appointed by Governor and confirmed by Senate (1 representative of employers and 1 representative of employees)	Indefinite	To establish the uniform schedule of maximum reimbursement allowances; to evaluate the adequacy of these fee schedules; to determine the estimated impact of fee schedule changes on carrier costs and WC rates; to determine availability and accessibility of WC health care delivery systems to injured workers; to establish a uniform permanent impairment rating schedule; and to submit recommendations to the Legislature to improve the WC health care delivery system	Produces 2 fee schedules: hospitals and ambulatory surgical centers; establishes a uniform permanent impairment rating schedule
	Statewide nominating commission (440.45(2)(b))	Yes	No	Board of Governors of the Florida Bar and the Governor	10 members: 5 members of the Florida Bar appointed by the Board of Governors of the Florida Bar, plus 5 electors appointed by the Governor	4 years	To nominate 3 choices when a JCC position becomes vacant	Produces 3 nominations for any vacant JCC position
Georgia	Workers' Compensation Advisory Council	No	Yes	WC Board	Physicians, employers, labor, insurers, self insurers, rehabilitation providers, and attorneys	Indefinite	To foster better communications between the Board and the various participants in the system	Subcommittees continually make recommendations to improve system
Hawaii	Labor and Industrial Relations Appeals Board	Yes	No	Governor	3 members, including a chairperson of the Board who shall be an attorney-at-law, licensed to practice in all of the courts in this state	10 years	Decide appeals from decisions and orders of the Director of Labor and Industrial Relations issued under the workers' compensation law	Appeal decisions
Idaho	Idaho Industrial Commission	72-501	Yes	Governor, approved by the Senate	Consisting of (3) Commissioners, (1) Representing Employers, (1) Representing Workers, (1) Licensed Attorney	6 years	Administer the Idaho Worker's Compensation Act	
Illinois	Workers' Compensation Advisory Board	Yes	No	Appointed by the Governor with the advice and consent of the Senate	12 members: 6 members represent employees, and 6 represent employers. The IWCC chairman serves as the ex officio chairman of the Board	4 years	The Board assists the IWCC in formulating policies, setting priorities, and developing administrative goals. The Board makes recommendations to the governor regarding Commission appointments	N/A
	Medical Fee Advisory Board	Yes	No	Appointed by the Governor, with the advice and consent of the Senate	9 members: 3 members represent employees, 3 represent employers, and 3 represent medical providers	4 years	The Board advises the IWCC on the establishment of fees for medical services and the accessibility of medical treatment	N/A
	Self Insured Advisory Board	Yes	No	Commission Chairman	Chairman of the Commission and 6 other members appointed by the Chairman who are experts in workers' compensation self insurance; 1 of the 6 members shall represent the general public	4 years	The Board reviews applications from private companies for the self-insurance privilege and makes recommendations to the Chairman of the Commission and ensures the continued payment of benefits to workers of bankrupt self insurers	N/A
Indiana	Worker's Compensation Board	Yes	Yes	Governor	6 hearing judges and chairman	4 years	Adjudicate disputed cases	N/A
Iowa	Workers' Compensation Advisory Committee	No	No	They are a non-profit corporation	N/A	N/A	N/A	N/A
Kansas	Per Senate Bill 187: Workers Compensation Judges and Board Nominating Committee; Fee Schedule Advisory Council	Yes	N/A	N/A	N/A	2 years	Judges and Board Nominating Committee—for selection of Board member or administrative law judge; Fee Schedule Advisory makes recommendations on fee schedule changes	N/A
Kentucky	Workers' Compensation Board	Yes	No	Governor	3 members with staggered terms; must be attorneys with at least 8 years of legal practice	4-year terms	First step in appellate process; issue opinions and orders on matters appealed from administrative law judge decisions	Opinions and orders
Louisiana	Workers' Compensation Advisory Council	Yes	Yes	Governor	17 members: 2 labor, 2 business, 1 self insurer, 1 attorney/employer, 1 attorney/claimant, 1 state medical society, 5 general public, 1 orthopaedic assoc., 1 OWC asst. sec., 1 chiropractic assoc., 1 psychological assoc.	At the pleasure of the governor	To monitor the administration of the workers' compensation law	Law & policy recommendations
Maine	Board of Directors	Yes	No	Governor	7 members: 3 labor, 3 management, and the Chair	Appointments are for 4-year terms	To administer the Act	(4)

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Jurisdiction	Name of Board or Committee or Commission	Authorized By		Appointing Authority	Membership	Length of Appointment	Purpose	Products Produced
		Statute	Executive Branch					
Maryland	Workers' Compensation Benefit and Insurance Oversight Committee	Yes	No	Senate President and House Speaker	15 members: 2 from the Senate, 2 House delegates, 1 business, 1 representative of MD labor organization, 1 representative of MD building and construction labor organization, 2 public members, 1 member of the insurance industry, 1 member of the medical and surgical faculty of MD, 1 plaintiff attorney, 1 defense attorney, and 1 rehabilitation provider	Members serve at the pleasure of their appointing authority	To evaluate and examine the structure for workers' compensation and benefits in Maryland	Annual report to the Governor and Legislature due each December 31
Massachusetts	Workers' Compensation Advisory Council	Yes	No	Governor	11 members: 3 labor representatives, 5 business, 1 insurer, 1 claimants' attorney, 1 vocational rehabilitation representative	2-year terms	Advises the Commissioner on budgetary and policy matters	Produces an annual statistical and financial report
	Health Care Services Board	Yes (5)	Yes	Director of the DIA	14 members: Commissioner or his or her designee is ex officio member and Chairman, 1 employer representative, 1 employee representative, 1 public representative, 1 chiropractic representative, 1 dental representative, 1 hospital administrator, 1 physical therapist, and 6 physicians representing different health care specialties most frequently utilized by injured employees	2-year terms	Sets treatment guidelines, investigates complaints against impartial medical examiners, and advises the Commissioner on medical issues	Produces treatment guidelines
	Judicial Nominating Committee	No	Yes	Governor	13 members (6)	1-year term	Screens candidates for appointment as administrative law judges	Recommendations for appointment of hearing officers
Michigan	Director's Advisory Committee	No	Yes	Agency Director	Members represent labor, business, and the public	3 total; 2 trustees appointed by governor; 1 represents the insurance industry, and 1 represents self-insured employers; 3rd member is agency director	To provide input on the workers' compensation system	Products are not statutorily required, but reports may be generated
	Health Care Services Advisory Committee	Yes	Yes	Agency Director	15 members: 5 business, 5 medical industry, 5 employees	No specific term limits	Assists in establishing the schedules of maximum charges or fees payable under the Workers' Disability Compensation Act	HCS Fee Schedule produced annually (7)
	Board of Magistrates	Yes	Yes	Governor	17 impartial magistrates	4 years (12 years maximum)	To hear and decide workers' compensation disputes	Magistrate decisions on individual cases
	Michigan Compensation Appellate Commission	Yes	Yes	Governor	Up to 3 members	4 years	Reviews decisions appealed from the Board of Magistrates	Appeal decisions
	Funds Administration Board	Yes	Yes	Governor	3 total; 2 trustees appointed by governor: 1 represents the insurance industry, and 1 represents self-insured employers; 3rd member is agency director	Agency Director is permanent appointee, others have 4-year terms	Makes rules, maintains records, and institutes systems and procedures to carry out Chapter 5 of the Workers' Disability Compensation Act	Rules, records, and procedures
Minnesota	Workers' Compensation Advisory Council	M.S. 175.007	No	Governor, majority and minority leaders of state house and senate	16 members: 6 business, 6 labor, 2 Senate members, 2 House members	Five years; may be reappointed	Advises the Commissioner of the Department of Labor and Industry about matters of workers' compensation and submits its recommendations for proposed statutory changes to the appropriate legislative committees	Minutes of meetings; recommendations to the legislature on statutory amendments must be supported by a majority of the employer members and a majority of the labor members
	Medical Services Review Board	Yes	No	Commissioner of Labor and Industry	14 members: 2 chiropractic, 1 hospital, 1 physical therapist, 1 occupational therapist, 1 registered nurse, 6 physicians of different specialties, 1 labor, 1 employer or insurer, and the Commissioner or his or her designee	4 years	Advises the Department about WC medical issues; is the liaison between the Department and the medical provider community; supports and engages the provider community in WC education and has authority to sanction providers violating statute or rules	Minutes; reports may be generated; orders related to authorized determinations
	Rehabilitation Review Panel	Yes	No	Commissioner of Labor and Industry	14 members: 2 employers, 2 insurers, 2 rehabilitation providers, 2 medical providers, 1 chiropractor, 4 labor, and the Commissioner or his or her designee	4 years	Reviews and makes determinations on appeals from orders of the Commissioner regarding certification of rehabilitation consultants and vendors; advises the Department on rehabilitation matters; assists in education efforts; has the authority to sanction rehabilitation providers if there has been a violation of the statutes or rules	Minutes; reports may be generated; orders related to authorized determinations
Mississippi	Workers' Compensation Advisory Committee	Yes	No	Workers' Compensation Commissioners	25 members representing employers, carriers, attorneys, and employees	No set terms	Make a recommendation on changes needed to the law, rules, or medical fee schedule	No written reports are publicly available
	Medical Advisory Committee	Yes	No	Workers' Compensation Commissioners	5 members representing medical providers	No set terms	Make a recommendation on changes needed to the law, rules, or medical fee schedule	No written reports are publicly available
Missouri as of January 1, 2019 (8)	Labor and Industrial Relations Commission	Yes	No	Commissioners are appointed by the Governor, subject to the advice and consent of the Senate	1 member represents business; 1 member represents labor; and 1 member represents the public	6 years	To hear appeals of workers' compensation and employment security cases and have original jurisdiction over prevailing wage law cases	(9)
Montana					None			

Table 15 Workers' Compensation Boards, Advisory Committees, and Other Commissions Within Jurisdictions as of January 1, 2025								
A listing of boards, committees, or commissions involved in the administration of the workers' compensation statutes, their purpose, the appointing authority, membership make up and their terms, and a listing of any reports or products they are directed to publish.								
Jurisdiction	Name of Board or Committee or Commission	Authorized By		Appointing Authority	Membership	Length of Appointment	Purpose	Products Produced
		Statute	Executive Branch					
Nebraska	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Nevada	Advisory Council	Yes	No	Governor	7 members: 3 labor, 3 management, and 1 public member (10)	3-year term	Advise the Administrator, conduct studies or investigations concerning the organization and administration for the Department of Industrial Relations and make recommendations	Recommendations and advice
New Hampshire	Workers' Compensation Advisory Council	Yes	No	Governor	9 members: Insurance Commissioner or designee, Labor Commissioner or designee, 1 member of the House, 1 member of the Senate, 1 management, 1 labor, 1 insurance carrier, 1 self insured, and 1 health care provider	3 years	Approve managed care programs and make recommendations to the Commissioner for improvement in the system	Annual Report
New Jersey	N/A	No	N/A	N/A	N/A	N/A	N/A	N/A
New Mexico	Workers' Compensation Advisory Committee	Yes	No	Governor	6 voting members: 3 employers and 3 workers and Director sits ex officio	4-year terms	Reviews workers' compensation and occupational disease information in NM and reports findings to the Governor and superintendent of insurance; also makes recommendations on statutory changes, regulations, methods, and forms of statistical data collection	Report of findings and conclusions
	Medical Advisory Committee	Yes	No	Agency Director	Undetermined number representing provider and carrier communities	At the pleasure of the Director	Advise the agency Director on physician fee schedules	Advisory only
New York	Medical Advisory Committee	No	No	Chair, Workers' Compensation Board	The Board's Medical Director is the chair, 5 physicians (Labor and Business each recommend 2, Agency recommends 1), 1 representative of AFL-CIO, and 1 representative of Business Council of New York State. The physician members may vary according to the condition under discussion	Unspecified	Develop medical treatment guidelines in addition to existing guidelines for mid and low back, neck, shoulder, knee, carpal tunnel, and non-acute pain, and update existing guidelines	Recommend medical treatment guidelines for adoption by the Chair
North Carolina	Industrial Commission	Yes	No	Governor	6 members	6 years	To effectively administer and efficiently enforce the Workers' Compensation Act	Judicial decisions, administrative regulations, and other reports may be required by statute or administrative direction
	Advisory Medical Committee (11)	Yes	No	Industrial Commission with approval by Governor	3 members	6-year terms	To provide medical advice to the agency; review treatment guidelines, RTW protocols; assist with education of providers; review standards of care and make recommendations	Advice and reports consistent with the purpose of the body
North Dakota	Board of Directors	Yes	No	Governor	11 members	Up to two 4-year terms	Advisory	Recommendations on rates, dividends, investment allocation, and legislation
Ohio	Board of Directors	Yes	No	Governor	11 members	3 year terms	Establishes the overall administrative policy for the bureau; monitors investment policy; and approves all rules	Annual Report
	Stakeholder Health Care Quality Assurance Advisory Committee	No	Yes	BWC Administrator	Not more than 13 per OAC 4123-6-22	1-year term; may be reappointed	To provide medical advice to the agency; review treatment guidelines; RTW protocols; assist with education of providers; review standards of care and make recommendations	Advisory only; submits annual report
	Pharmacy and Therapeutics Committee	No	Yes	BWC Administrator	Not more than 13 per OAC 4123-6-21.2	1-year term; may be reappointed	To advise the agency on medication issues, including formulary, prior authorization criteria, medication treatment guidelines, and drug utilization review	Advisory only; submits annual report
Oklahoma	Advisory Council on Workers' Compensation	Yes	No	Governor, Speaker of the House, President Pro Tem of the Senate	9 members: 3 employer, 3 employee, 3 attorney	3 years	Analyze and review the workers' compensation system reports of the Commission, and trends in the field of workers' compensation; recommend improvements and proper responses to developing trends	Reports annually
	Physician Advisory Committee	Yes	No	Governor, Speaker of the House, President Pro Tem of the Senate	9 physician members	3 years	Assist and advise the Workers' Compensation Commission regarding utilization review, review and make findings and recommendations to the Commission with respect to charges of inappropriate or unnecessary treatment or procedures, abusive practices, or excessive billing disclosed through utilization review	Reports annually
Oregon	Workers' Compensation Management-Labor Advisory Committee	Yes	No	Governor, State Senate confirmation required	5 labor and 5 management; Director of DCBS serves as ex officio member	3 years and may be reappointed	Provides a forum for business and labor to explore and resolve issues involving workers' compensation and to provide advice to the agency	Director of DCBS or Legislature may request specific study or review; statute also requires review of PPD benefits (every two years), significant appellate cases, adequacy of benefits, medical and legal system costs, adequacy of assessments for reserves, operation of programs funded by Workers' Benefit Fund
	Advisory Committee on Medical Care	Yes	No	Director of DCBS	Health care providers, 1 insurer, 1 employer, 1 worker, and 1 managed care organization	No term specified	Advises the director in matters relating to the provision of medical care to workers	Advice on whether a type of medical treatment is unscientific, unproven as to its effectiveness, outmoded, or experimental
	Workers' Compensation Board	Yes	No	Governor, State Senate confirmation required	5 members, no more than 3 from one political party, 2 with background and understanding of employers, 2 with background and understanding of employees, and 1 who represents the interests of the public (serves as chair)	4 years and may be reappointed. Serve at pleasure of Governor	Reviews appealed orders of administrative law judges on matters concerning a claim, and resolves disputes arising under Oregon Workers' Compensation Law and the Oregon Safe Employment Act	Orders on Review, appealable to the Court of Appeals

Table 15 Workers' Compensation Boards, Advisory Committees, and Other Commissions Within Jurisdictions as of January 1, 2025								
A listing of boards, committees, or commissions involved in the administration of the workers' compensation statutes, their purpose, the appointing authority, membership make up and their terms, and a listing of any reports or products they are directed to publish.								
Jurisdiction	Name of Board or Committee or Commission	Authorized By		Appointing Authority	Membership	Length of Appointment	Purpose	Products Produced
		Statute	Executive Branch					
Pennsylvania	Workers' Compensation Advisory Committee	Yes	No	The President pro tem of the Senate, the Speaker of the House, the minority leader of the Senate, and the minority leader of the House each appoint an employee and an employer member, with the Secretary of Labor and Industry serving as an ex officio member	9 members: 4 employer, 4 employee, and the Secretary of Labor and Industry serving as an ex officio member	2-year terms	To make recommendations to the Governor, Secretary, and Legislature for improving aspects of the WC system	Produce a report no later than May 1st each year
Rhode Island	Governor's Workers' Compensation Advisory Council	Yes	Yes	Governor	17 members: 3 WC Court, 1 WC Insurance Fund, 3 State Department directors, 3 labor, 3 business, 1 public, 1 House member, and 1 Senate member	Indefinite	To advise the Governor and general assembly on the administration of the workers' compensation system	Annual report and recommendations on proposed legislation
South Carolina	Workers' Compensation Commission	Yes	No	Governor with advice and consent by the Senate	7 Commissioners	6 years	To hear and issue decisions in WC disputes	Decisions in individual workers' compensation cases; annual reports
	Advisory Committee for Improvement of WC Laws of SC	Yes	No	Governor	5 members	5 years	Meets quarterly to consider improvements in WC laws and monitor effectiveness of existing laws	Recommendations annually to General Assembly
South Dakota	Workers' Compensation Advisory Council	Yes	No	Governor	9 members: 4 representing employers, and 4 representing labor (with 2 of those from the AFL)	3 years	To aid in reviewing the workers' compensation program as to its content, adequacy, and effectiveness and to make recommendations for improvement	Annual report
Tennessee	Workers' Compensation Advisory Council	Yes	No	Speaker of the House, Speaker of the Senate, and the Governor	7 voting members: 3 employers, 3 employees, and the State Treasurer or his or her designee as Chair	4-year term	To meet at least twice a year to annually review workers' compensation in TN	Annual report
	Medical Advisory Committee	Yes	No	Administrator of Bureau of Workers' Compensation	Comprised of practitioners in the medical community having experience in the treatment of workers' compensation injuries, representatives of the insurance industry, employer representatives, and employee representatives	Staggered terms initially, then can be reappointed for 4-year term and serve until a successor is appointed	Assist the Administrator in the development of treatment guidelines and advise the administrator on issues relating to medical care in the workers' compensation system	Minutes, recommendations to the Administrator regarding treatment guidelines and drug formulary
	Medical Payment Committee	Yes	No	Administrator of Bureau of Workers' Compensation	7 voting members: (3) representative of the medical provider industry; (3) members representative of the workers' compensation industry; and the medical director who shall cast a vote only in the event of a tie	4-year term	Hear disputes on medical bill payments between providers and insurers and advise the administrator on issues relating to the medical fee schedule and medical care cost containment in workers' compensation	Minutes, decisions on appealed cases, recommendations for medical fee schedule changes
	Joint Government Operations Committee	Yes	No	Speakers of the House and Senate	20 members: 11 from Senate and 9 from House	Serve at will	To review proposed rules of state departments/agencies	None required
Texas	Stakeholder groups	No	Yes	Commissioner of Insurance and Commissioner of Workers' Compensation	Undetermined number representing all industry groups	Informal groups with no official terms	Used as resource group(s) to address legislation, rules, and policy development issues	None required
	Medical Quality Review Panel (MQRP)	Yes	No	Under contract with DWC	54 members representing all areas of health care practice	10-year appointment with ability to reapply	Conduct clinical reviews of medical case files to assess the medical necessity and appropriateness of the medical care provided to injured employees; MQRP members also perform reviews of utilization and peer review decisions, independent review organization medical dispute decisions, as well as reviews of doctors who perform designated doctor and required medical examinations; MQRP members provide recommendations to the DWC medical advisor	None required
US Federal Programs - FECA	Medical Advisory Committee	No	Yes	Program Management	National Medical Director consults with several other physicians	Career employees	Provide medical direction related to FECA procedures and policies	None required
	Legal Advisory Committee or Panel	No	Yes	Program Management	Department of Labor's Office of the Solicitor	Career employees	Provide legal counsel to the agency on all matters involving FECA	None required
US Federal Programs - Longshore	Benefits Review Board	Yes	No	Secretary of Labor	5 members	Pleasure of Secretary	Appellate Review	Appellate opinions
Utah	Workers Compensation Advisory Council	Yes	No	Labor Commissioner	10 voting members: 5 from labor and 5 from business; other non-voting members are the Labor Commissioner, the Workers Compensation Fund Executive Director, a private insurance carrier representative, a health care provider representative, and the State Insurance Department Commissioner	4 years	Consider and make recommendations on all workers' compensation legislation and rules	None required

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Jurisdiction	Name of Board or Committee or Commission	Authorized By		Appointing Authority	Membership	Length of Appointment	Purpose	Products Produced
		Statute	Executive Branch					
Vermont	Labor Advisory Council	Yes	No	Governor	4 employer representatives and 4 employee representatives	4-year, staggered terms	Advise Commissioner on policy formation	Council is frequently named as a participant in legislatively mandated studies assigned to the Department of Labor
Virginia	Virginia Workers' Compensation Commission	Yes	No	State Legislature	3 commissioners, one representing employers and one representing employees	6-year terms	To administer the Workers' Compensation Act and to adjudicate issues and controversies relating thereto, and to operate the agency and its related functions	(12)
Washington	Workers' Compensation Advisory Committee	Yes	No	Labor and Industries Director	10 members representing workers, employers, self-insurers, and the Department	3-year terms	Conducts continuing study of workers' compensation and assist in the identification of priorities for safety and health investment projects. They report their findings to the Department or Board of Industrial Appeals as appropriate	Reports
	Medical Advisory Committee	Yes	No	Labor and Industries Director	14 members	No term limit	Advise the Department on safe, effective, and cost-effective treatment for workers; may assist in the development of treatment guidelines, coverage technology, and health care rules	Advise
	Chiropractic Advisory Committee	Yes	No	Labor and Industries Director	9 members	3-year terms	Advise the department with respect to the provision of provision of safe, effective, and cost-effective health care for injured workers, including but not limited to, policy development regarding chiropractic care for injured workers, the development of practice guidelines and coverage criteria, review of coverage decisions and technology assessments, review of chiropractic programs, and review of rules pertaining to health care issues	Advise
	Board of Industrial Insurance Appeals	Yes	No	Governor	3 members representing employers, employees, and the public	6-year terms	Hears appeals from parties aggrieved by department decisions	Appeal decisions
West Virginia	Industrial Council	Yes	No	Governor	5 voting members: 1 CPA with financial, pension, or insurance auditing expertise; 1 attorney with financial experience; 1 academician with an advanced degree in business, finance, insurance or economics; and 1 representing organized labor	4 years with a limit of two terms	In consultation with the Insurance Commissioner, the Council establishes guidelines and policies designed to ensure effective administration of the WC insurance market; reviews and approves rules and regulations; establishes and monitors performance standards	Conduct an overview of the safety initiatives currently utilized in the WC insurance market and report to the Joint Committee on Government and Finance
Wisconsin	Worker's Compensation Advisory Council	Yes	No	Secretary of the Department of Workforce Development appoints representatives	5 voting representatives from organized labor, 5 voting representatives from management, 3 non-voting representatives from the insurance industry, 1 representative from the WC Division and liaison representatives from the medical community	5-year terms and may be reappointed	Advise the Department, the Division of Hearings and Appeals, and the Legislature on policy matters concerning the development and administration of the worker's compensation law	The Worker's Compensation Advisory Council recommends changes in the worker's compensation law to the Legislature
	Worker's Compensation Self-Insurers Council	Yes	No	Secretary of the Department of Workforce Development appoints representatives	5 members that are representatives of employers that are currently self-insured in Wisconsin	3-year terms and may be reappointed	Advise the Department about matters related to companies that are self-insured	Advises the Department on self-insurance matters and makes its recommendations to the Department on the approval or denial of self-insurance applications
	Health Care Provider Advisory Committee	Yes	No	Secretary of the Department of Workforce Development appoints representatives	14 members including 6 medical doctors of different specialties, 2 chiropractors, 2 hospital representatives, one registered nurse, one physical therapist, and 2 at-large members, all of whom are licensed in and practicing in Wisconsin	5-year terms and may be reappointed	Advise the Department and the Worker's Compensation Advisory Council about guidelines used as part of the necessity of treatment dispute resolution process	Recommends changes in the worker's compensation law to the Worker's Compensation Advisory Council
Wyoming	Chiropractic Panel (13)	No	Yes	Division administrator	3 members who are chiropractors licensed to practice in Wyoming	Rotating terms of 1-, 2-, and 3-year terms	Establish guidelines and review for utilization compliance	Establish guidelines and review for utilization compliance
	Rehabilitation Panel (13)	No	Yes	Division administrator	4 members: practicing therapists or occupational therapists licensed in Wyoming or members of the Wyoming Speech-Language-Hearing Association	No limits	Establish guidelines and review for utilization compliance	Establish guidelines and review for utilization compliance

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Jurisdiction	Name of Board or Committee or Commission	Authorized By		Appointing Authority	Membership	Length of Appointment	Purpose	Products Produced
		Statute	Executive Branch					
Canadian Jurisdictions Participating (stated in Canadian currency)								
British Columbia	WorkSafeBC Board of Directors	Yes	No	Lieutenant Governor in Council	The Board of Directors consists of 9 voting directors: 1 director, representative of the public interest, who is chair; 2 additional directors, representative of the public interest; 1 director, representative of workers; 1 director, representative of employers; 1 director who is or was a professional in the area of occupational health and safety; 1 director who is or was a professional in the area of law or law enforcement; 1 director who at the time of appointment is a professional providing health care or rehabilitation services to persons with disabilities; 1 director who at the time of appointment is an actuary (14)	Voting directors, other than the chair, hold office for a term of up to 3 years. A voting director, other than the chair, must not be appointed for a continuous period of more than 6 years. The chair holds office for a term of up to 5 years. The chair may not be appointed for a continuous period of more than 10 years (15)	To set and revise as necessary the policies of the Board of Directors, including policies respecting compensation, assessment, rehabilitation, and occupational health and safety; set and supervise the direction of WorkSafeBC (16)	Annual Report and Service Plan, Occupational Health and Safety Regulation, Rehabilitation Services and Claims Manual (published policy), Assessments Manual (published policy), Prevention Manual (published policy), Classification and Rate Lists (17)
	Workers' Compensation Appeal Tribunal ("WCAT")	Yes	No	Lieutenant Governor in Council	WCAT's members include: the chair appointed by the Lieutenant Governor in Council; one or more vice chairs appointed by the chair, after consultation with the minister; any extraordinary members appointed by the chair, after consultation with the minister, with representation from individuals with experience in employers' interests and from individuals with experience in workers' interests (18)	The chair holds office for an initial term of 3 to 5 years and may be reappointed for one or more successive terms of up to 5 years each. Vice chairs hold office for an initial term of 2 to 4 years and may be reappointed for additional terms of up to 5 years. An extraordinary member holds office for the period required to discharge the person's duties as a member of a panel appointed by the chair (18)	WCAT is an independent appeal tribunal external to WorkSafeBC. It is the final level of appeal on most matters in British Columbia's workers' compensation system. WCAT's mandate is to decide appeals and applications brought by workers, employers, and dependants of deceased workers from decisions of WorkSafeBC using the Board of Directors' policies. WCAT receives compensation, assessment, and prevention appeals from decisions of WorkSafeBC's internal appeal body named the Review Division. WCAT also receives direct appeals from WorkSafeBC decisions regarding applications for reopening of compensation claims and complaints regarding prohibited actions. In addition, it receives applications for certificates for court actions regarding the workplace status of workplace parties at the time of an injury, death, or occupational disease (19)	Decisions of the appeal tribunal, annual reports, regulations, Manual of Rules of Practice and Procedure (20)
New Brunswick	Board of Directors	Yes	No	Lieutenant Governor in Council	Chairperson, vice-chairperson, 4 or more worker representatives, 4 or more employer representatives, and the President and CEO (21)	Chairperson up to five years. Vice-Chairperson and board members is for five years	Overall responsibility for ensuring that the organization fulfills the purposes for which it was created in statute	Annual report to the legislative assembly. See www.worksafenb.ca
	Committees of the Board: (1) Finance and Investment Committee; (2) Human Resources and Compensation Committee; (3) Audit Committee; (4) Governance, People and Culture Committee	No	No	Board of Directors or Chairperson on Board's behalf	The following sit on all committees: Voting board member who serves as chair but does not have voting authority at the committee President and CEO as a non-voting member Board member who is a voting representative of workers as the primary member Board member who is a voting representative of workers as an alternative member Board member who is a voting representative of employers as the primary member Board member who is a voting representative of employers as an alternative member In the case of the Financial Services and Investment Committee a representative of WCB of Prince Edward Island who votes on investment matters	2 years and are renewable	(1) Finance and Investment Committee enables the Board of Directors to fulfill its governance responsibilities regarding the financial services policies, activities, and reporting under the <i>Workplace Health, Safety and Compensation Commission and Workers' Compensation Appeals Tribunal Act</i> , the <i>Workers' Compensation Act</i> , the <i>Occupational Health and Safety Act</i> and the <i>Firefighters' Compensation Act</i> . (2) Human Resources & Compensation Committee is to enable the Board of Directors to fulfill its governance responsibilities related to ensuring that WorkSafeNB has human resources strategies and policies in place that create high performance teams that are competent, engaged and empowered to achieve WorkSafeNB's strategic goals, meet applicable requirements set by government and stakeholders, and meet the test of public scrutiny. (3) Audit Committee assists the Board of Directors in fulfilling its oversight responsibilities. The Audit Committee is appointed to provide oversight in four areas: Financial reporting and disclosure; External audit activities; Risk management and control; and Other oversight activities as determined by the Board. (4) People, Culture and Governance Committee assists the Board of Directors in the continuous improvement of the effectiveness and efficiency of the performance of the Board of Directors through the adoption of progressive governance practices	Recommendations and advice to Board of Directors regarding matters pertaining to each committee's purpose

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Jurisdiction	Name of Board or Committee or Commission	Authorized By		Appointing Authority	Membership	Length of Appointment	Purpose	Products Produced
		Statute	Executive Branch					
Nova Scotia as of January 1, 2022 [22]	Board of Directors	Yes	No	Governor in Council	10 members	4 years	Establishes the overall administrative policy for the bureau; monitors investment policy; and approves all rules	Advisory only
Ontario	Board of Directors	Yes	No	Lieutenant Governor in Council	Chair, president, and 7-9 board members representing various interest groups and areas of expertise	Terms of appointments vary	Manages and administers the affairs of the Board	Annual report
Prince Edward Island	Board of Directors	Yes	No	Lieutenant Governor in Council	The Board is composed of a chairperson and as many members, equal in number, representative of employers and workers as the Lieutenant Governor in Council may determine. Currently, there are 3 employer and 3 worker representatives	For a term not exceeding 3 years and are eligible for appointment	Establish policies and programs, approve budgets, periodically review the Act and regulations, set and monitor the direction of the Board	Annual report
Saskatchewan	Board of Directors	Yes	No	Lieutenant Governor in Council	7 members: a full-time chairperson; two full-time members; an even number of part-time members, half of whom represent employers and half of whom represent workers[23]	Chair - 5-year term; Board Members - 4-year term; may be reappointed	Governance oversight; strategic direction; approve policies; approve budget; oversee financial integrity and audit matters; Board Appeal Tribunal	Annual report to the Provincial Government
Notes:	Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.							
1	Arkansas - Reports are available at www.awcc.state.ar.us .							
2	Colorado - The Special Funds Board for Workers' Compensation Self-Insurers was eliminated by the Colorado legislature effective August 10, 2022.							
3	Delaware - Drafted initial regulations and makes recommendations to update all the pieces (fee schedule guidelines and data, utilization review, provider certification, forms, and practice guidelines) in the Delaware Workers' Compensation Health Care Payment System; see the annual report at www.delawareworks.com .							
4	Maine - See www.maine.gov/wcb/ .							
5	Massachusetts - M.G.L. c. 152, Sec. 13(3).							
6	Massachusetts - Commissioner (Chair), Sr. Judge, Secretary of Labor and Workforce Development, Gov.'s Chief Legal Counsel, Director of Economic Development (or designee), two of whom shall be representatives of business, two of whom shall be representatives of organized labor, one health care provider, one attorney who represents claimants in workers' compensation matters, one attorney who represents employers or insurers in workers' compensation matters, one attorney who does not practice workers' compensation law; one of the representatives of business shall be the president of the Associated Industries of Massachusetts, or his or her designee, and one of the representatives of organized labor shall be the president of the Massachusetts AFL-CIO, or his or her designee. Per M.G.L. c. 23E Sec. 9.							
7	Michigan - Found at https://www.michigan.gov/leo/0,5863,7-336-94422_95508_26922-110009--,00.html .							
8	Missouri - 2019 responses. No 2025 data were provided.							
9	Missouri - Additional information is available at http://www.labor.mo.gov .							
10	Nevada - No term limit. Three from labor (organized labor), three from management (at least two must represent employers who employ at least 250 persons). One from general public knowledgeable in field of industrial relations. Administrator's AA IV serves as Secretary to the Board. Quorum consists of at least four members.							
11	North Carolina - See N.C. Gen. Stat. § 97-72. Currently there are no appointed members to this Committee.							
12	Virginia - Written decisions in cases on appeal and annual statistics can be found at www.workcomp.virginia.gov .							
13	Wyoming - Advisory only.							
14	British Columbia - The appointment of voting directors is discussed in section 317, Act.							
15	British Columbia - The term of office for voting directors is discussed in section 318, Act.							
16	British Columbia - See sections 319 and 320, Act and Policy item #2.00 of the RS&CM.							
17	British Columbia - All required published policies and the regulations are available at www.WorkSafeBC.com .							
18	British Columbia - WCAT membership is discussed in section 278, Act.							
19	British Columbia - See the Workers' Compensation Appeal Tribunal's Annual Report for further information on WCAT's role within the workers' compensation system at www.wcat.bc.ca/home/about/#reports							
20	British Columbia - WCAT's decisions, annual reports and Manual of Rules of Practice and Procedure can be found at https://www.wcat.bc.ca .							
21	New Brunswick - The President/CEO of the Commission is a non-voting member of the Board.							
22	Nova Scotia - 2022 responses. No 2025 data were provided.							
23	Saskatchewan - Statute allows a maximum of 7 members.							

Table 16 Workers' Compensation Second Injury Funds as of January 1, 2025											
Various jurisdictions' statutory cites and titles of <i>second</i> or <i>subsequent</i> injury funds; when they were created; whether they are still open and, if not, the date after which no additional claims will be honored; the funding method; and the most recent count of claims and outstanding liabilities.											
Jurisdiction	Statutory Cite for Second Injury Fund	Official Name for Second Injury Fund	Date of Creation	Still Open and Active	If Eliminated, Date After Which No Additional Claims Will Be Honored	Current Method of Revenue Collection	Revenue Collected During Most Recent Fiscal Year	Number of Claims Paid During Most Recent Fiscal Year	Total Expenditures for Claim Payments During Most Recent Fiscal Year	Fiscal Year of Total Expenditures and Number of Claims in Prior Columns	Estimated Outstanding Liabilities
Alabama	25-5-70	Second Injury Trust Fund	N/A	No	5/19/1992	Assessment	Included in assessment, not specific	11	\$98,519	10/1/23–9/30/24	Unknown
Alaska	AS 23.30.205	Second Injury Fund	1959	Not open; legacy claims only	9/1/2018	Employer and carrier assessment of up to 6% of all time loss and impairment compensation paid	\$1,999,079.00	58	\$1,650,008	7/1/23–6/30/24	Unknown
Arizona	ARS 23-1065	Special Fund	1969	Yes	N/A	Tax on premiums	\$0.00	Not available at time of publication	\$10.7 million	7/1/20023-6/30/2024	Not available at time of publication
Arkansas	A.C.A. 11-9-301, 11-9-502, 11-9-525	Second Injury Trust Fund	1973	Yes, for injuries occurring on or before 12/31/2007	12/31/2007	Investment income	\$0.00	0	\$0.00	7/1/23–6/30/24	\$15,000.00
California	Labor Code section 4751	Subsequent Injury Benefit Trust Fund	1945	Yes	N/A	Annual employer assessment and other sources	\$366,067,549.75	4,001	\$325,921,444	7/1/23–6/30/24	Unknown
Colorado	C.R.S. 8-46-101	Subsequent Injury Fund (SIF), Major Medical Insurance Fund (MMIF), and Medical Disaster Fund (MDF)	1945	(1)	7/1/93 (2), 4/1/94 (3)	Surcharge on premium and premium equivalents from insurers and self-insured employers	Revenue for this fund comes from a surcharge that covers both this fund and the Major Medical Insurance Fund; accordingly, the amount of revenue for this specific fund is not available	SIF 124; MMIF 99; MDF 0	SIF - \$811,884; MMIF - \$1,444,510	7/01/2023–06/30/2024	\$33,586,979 (4)
Connecticut (5)	31-349 to 31-355b	Second Injury Fund	1945	Yes, but not for new 31-349 claims	N/A	Assessments on all CT employers	\$28,400,000.00	221 full and final settlements paid	\$23,000,000	7/17/20–6/30/21	\$210,400,000.00
Delaware	19 Del.C. §2327	Workers' Compensation Fund	1915	Yes	N/A	Employers insured through commercial insurance	Not available	Not available	\$522,934.86	7/1/23–6/30/24	\$34,274.95
District of Columbia	32-1507(e); 32-1508(6); 32-1519(b); and 32-1540	Special Fund	DC WC Act of 1979	After 4/16/99 covers only default judgment cases	Closed to new second-injury injuries occurring on or after 4/16/1999.	Payment of \$5,000.00 for each fatality claim with no dependents; amounts collected as fines and penalties under 32-1540; and assessments on self-insured employers and insurers as necessary based on paid losses	Unknown	Unknown	Unknown	Unknown	Unknown
Florida	Section 440.49, Florida Statutes	Special Disability Trust Fund	1955	Yes, for injuries occurring on or before 12/31/1997	N/A	Assessment on the carriers' written workers' compensation premium and self-insured premium as calculated by the Division	\$19,295,225.00	461	\$25,642,455	7/1/23–6/30/24	\$229,661,178 undiscounted liabilities as of June 30, 2024
Georgia	34-9-350 through 34-9-368	Subsequent Injury Trust Fund (SITF)	1977	Yes, but not for injuries occurring after 6/30/2006	6/30/2006	Assessments against insurers and self-insured employers	Please visit the Subsequent Injury Trust Fund's website for their annual report data: https://siftr.georgia.gov/				
Hawaii	386-151 to 386-155, Hawaii Revised Statutes	Special Compensation Fund	1947	Yes	N/A	Assessments against insurers and self-insured employers	Not available	Not available	Not available	Not available	Not available
Idaho	72-323 to 72-334	Industrial Special Indemnity Fund	1927	Yes	N/A	Annual assessments	FY 2024 \$4,668,456	155	\$4,087,861.00	7/1/2023–6/30/2024	Not determined
Illinois	820 ILCS 305/7(f), 8(e)18-19, 8(f)	Second Injury Fund	1950s	Yes	N/A	Assessments on employers	\$901,835.59	546	\$785,367	Fiscal Year 2024	N/A
Indiana	Indiana Code 22-3-3-13	Second Injury Fund	1949	Yes	N/A	Annual assessments	\$6,772,073	284 PTD, 84 prosthetics	\$7,705,426.00	2023	None
Iowa	Sections 85.63 to 85.69	Second Injury Fund	1945	Yes	N/A	Surcharge on employers and death claim assessments	\$9,051,737.53	Unknown	\$9,545,840	7/1/20–6/30/21	Unknown
Kansas	44-566a(a)	Workers' Compensation Fund	Late 1940s	No, except for old medical cases	Accidents after 7/1/94	Assessment of insurance	Not available	Not available	Not available	Not available	Not available
Kentucky	KRS 342.120	Special Fund	1946	No	12/12/1996	Insurance premium assessment	\$41,326,400.00	3,840	\$30,317,200	6/30/2024	\$322.6 million (discounted @ 3%)
Louisiana	La. R.S. 23:1371-1379	Louisiana Workers' Compensation Second Injury Fund	1974	Yes	N/A	Annual assessments	N/A	N/A	N/A	N/A	N/A
Maine	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Table 16 Workers' Compensation Second Injury Funds as of January 1, 2025

Various jurisdictions' statutory cites and titles of *second* or *subsequent* injury funds; when they were created; whether they are still open and, if not, the date after which no additional claims will be honored; the funding method; and the most recent count of claims and outstanding liabilities.

Jurisdiction	Statutory Cite for Second Injury Fund	Official Name for Second Injury Fund	Date of Creation	Still Open and Active	If Eliminated, Date After Which No Additional Claims Will Be Honored	Current Method of Revenue Collection	Revenue Collected During Most Recent Fiscal Year	Number of Claims Paid During Most Recent Fiscal Year	Total Expenditures for Claim Payments During Most Recent Fiscal Year	Fiscal Year of Total Expenditures and Number of Claims in Prior Columns	Estimated Outstanding Liabilities
Maryland	Annotated Code of Maryland, Labor and Employment Article, Sections 10-204 to 10-219	Subsequent Injury Fund	1945	Yes	N/A	6.5% assessment on each award for permanent disability or death and amounts payable pursuant to settlements	Unknown	Unknown	Unknown	Unknown	Unknown
Massachusetts	M.G.L. c. 152, Sec. 37	Compensation for disability subsequent to physical impairment reimbursement	1986	Yes	N/A	Assessments on employers	\$31,000,000	275	\$27,136,542	7/01/2023–6/30/2024	Unknown
Michigan	MCL 418.351, 418.361(3), 418.521, 418.901-941(Chapter 9), 418.862(1), 418.372, 418.356(1)	Second Injury Fund	7/30/1943	Yes	N/A	Assessments on insurance carriers and self-insured employers	\$5,455,537	Not available	Not available	Not available	Not available
Minnesota	Repealed	Second Injury Fund	1921 (6)	No, except for previous injuries	Dates of injury on or after July 1, 1992	Employer/insurer assessment	Funds collected as part of overall assessment	90	\$3,333,579	7/1/2023–6/30/2024	\$35,768,600.46
Mississippi	Miss. Code Ann. 71-3-73	Second Injury Fund	1948	Yes	N/A	Death claim assessments; WC budget transfers	\$11,400.00	0	\$0	2024, calendar year	Unknown
Missouri as of January 1, 2019 (7)	Mo. Rev. Stat. § 287.220	Second Injury Fund	1943	Yes	N/A, but see (8)	Surcharge assessed on policyholders and self-insurers' net deposits, net premiums, or net assessments	\$105,791,758.25	6,183	\$100,650,819.28	7/1/17–6/30/18	\$1,346,000,000.00 (9)
Montana	39-71-901 to 39-71-915, MCA	Subsequent Injury Fund	1973	Yes	N/A	Surcharge to Montana employers through WC policy or direct assessment if self-insured	\$1,894,426.41	42	\$710,225.87	7/1/23–6/30/24	(10)
Nebraska	Neb.Rev.Stat. §48-128	Workers' Compensation Trust Fund f/k/a Second Injury Fund (11)	1947	No	12/1/1997	Insurers, governmental risk management pools, and self-insured employers pay each March 1, to the Director of Insurance, 2% of the workers' compensation benefits paid by it during the preceding calendar year	Cannot be identified; assessments are now paid to the Workers' Compensation Trust Fund, which also supports vocational rehabilitation payments (11)	20	\$183,559.20	7/1/2020–6/30/2021	Unknown
Nevada	NRS 616B.545, NRS 616B.569, NRS 616B.584	Subsequent Injury Account	1981	Yes	N/A	Assessments of Insurers	\$1,557,473.68	38	\$1,557,473.68	FY 2024	Unavailable
New Hampshire	RSA 281-A:55	Special Funds for Second Injuries	1975	Yes	N/A	Assessments	\$14,181,732.72	960 (12)	\$16,357,283.98	FY 2022 (13)	\$0.00
New Jersey	NJSA 34:15-95	Second Injury Fund	1923	Yes	N/A	Assessment on policyholders and self-insurers	\$238,600,000.00	7,710	\$177,000,000	07/01/23-06/30/24	\$0.00
New Mexico	52-2-4 (Repealed)	Subsequent Injury Fund	1961	No	1996	None	None	None	None	N/A	None
New York	NYS Workers' Compensation Law § 15(8)	Special Disability Fund	1945	No	7/1/2010 (dates of accident or disablement must be before 7/1/2007)	Assessments on insurance carriers, self-insured employers, and the State Insurance Fund	\$380,000,000	70,919 (14)	\$365,729,600 (15)	4/1/2023–3/31/2024	\$5,053,000,000 (16)
North Carolina	N.C. Gen. Stat. §97-33, §97-35, §97-29, §97-40.1	Second Injury Fund	(17)	Yes	N/A	Assessments on employers and carriers for each case where permanent partial disability that meets statutory threshold is awarded	\$0.00	2 claimants; 2 payments for workers' compensation claims and 2 legal services payments (17)	\$1,437.56 per month (18)	7/1/23–6/30/24	\$0 (18)
North Dakota	NDCC Section 65-04-18 (19)	N/A	N/A	Yes	N/A	Part of premium structure	No special revenue provisions	N/A	N/A	N/A	N/A
Ohio	R.C. 4123.343	Disability Relief	1955	Yes	N/A	N/A	N/A	Not available	Not available	N/A	Unknown
Oklahoma	85A O.S. Section 31	Multiple Injury Trust Fund	1943	Yes	N/A	Assessment	N/A	N/A	N/A	N/A	N/A
Oregon (20)	ORS 656.605	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Pennsylvania	Sections 306.1 & 306.2 of the PA Workers' Compensation Act, 77 P.S. §§ 516 & 517	Subsequent Injury Fund	1945	Yes	N/A	Assessment	\$143,198 (21)	9	\$153,330	2023	Unknown
Rhode Island	RIGL Chapter 28-37	Workers' Compensation Administrative Fund	1938	Limited to existing claims for all sections except RIGL 28-35-20(f)	Varies by section	Annual assessment on premiums	\$19,346,555.00	77	\$839,796	7/1/2023–6/30/2024	Unknown

Table 16 Workers' Compensation Second Injury Funds as of January 1, 2025

Various jurisdictions' statutory cites and titles of *second* or *subsequent* injury funds; when they were created; whether they are still open and, if not, the date after which no additional claims will be honored; the funding method; and the most recent count of claims and outstanding liabilities.

Jurisdiction	Statutory Cite for Second Injury Fund	Official Name for Second Injury Fund	Date of Creation	Still Open and Active	If Eliminated, Date After Which No Additional Claims Will Be Honored	Current Method of Revenue Collection	Revenue Collected During Most Recent Fiscal Year	Number of Claims Paid During Most Recent Fiscal Year	Total Expenditures for Claim Payments During Most Recent Fiscal Year	Fiscal Year of Total Expenditures and Number of Claims in Prior Columns	Estimated Outstanding Liabilities
South Carolina	S.C. Code Ann. § 42-7-310	Second Injury Fund	1962	No	7/1/2008	N/A	N/A	N/A	N/A	N/A	N/A
South Dakota	SDCL 62-4-34.7	Subsequent Injury Fund	Not available	Yes	N/A	Assessment of insurers and self insurers	\$0.00	37	\$426,575.15	7/1/2023 to 6/30/2024	Unknown
Tennessee	Tennessee Code Annotated 50-6-208	Subsequent Injury and Vocational Recovery Fund	1945	Yes	N/A	Percentage of taxes collected on workers' compensation premiums	Not available	70	\$2,034,304.39	7/1/2023-6/30/2024	\$4,804,303.55
Texas	Texas Labor Code, Section 403.006	Texas Workers' Compensation Subsequent Injury Fund (SIF)	1947	Yes	N/A	Insurance carriers make payment of benefits to SIF when there are no legal beneficiaries for death benefits	\$10,067,324.00	23 lifetime income benefit (LIBs) claims; 400 requests for reimbursement	\$587,877.13 for lifetime claims; \$7,060,466.57 for reimbursements	9/1/2020-8/31/2021	\$5,334
US Federal Programs - FECA	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
US Federal Programs - Longshore	Yes (22)	The Special Fund	1927	Yes	N/A	Annual assessments	\$93,327,038.00	2,082	\$91,341,394.00	10/1/23-9/30/24	N/A
Utah	34A-2-702, Utah Code Annotated	Employers' Reinsurance Fund	7/1/1917	Open exclusively for claims incurred prior to 7/1/1994	7/1/1994	Annual Assessment	Not available	1,000 approximately	N/A	N/A	N/A
Vermont (23)	N/A	None	No	Never	N/A	N/A	N/A	None	None	0	\$0.00
Virginia	Va. Code Sec. 65.2-1100	Second Injury Fund	1975	Open	N/A	Tax of 1/4 of 1% of premiums; currently not collected because no claims against the fund	\$0.00	0	\$0.00	2020-2021	\$0.00
Washington	RCW 51.44.040	Second injury fund	1945	Yes	N/A	Transfer of funds from Accident Fund to Reserve Fund for State Fund employers and Assessment on self-insured employers as described in RCW 51.44.040 and WAC 296-15-225	\$23,186,194.00	N/A	\$14,949,111.00	2024	\$648,000,000.00
West Virginia	W. Va Code 23-3-1(d)	Second Injury Reserve Fund	1947	No	July 1, 2003	N/A	N/A	N/A	N/A	N/A	N/A
Wisconsin	Section 102.59, Wis. Stats.	Work Injury Supplemental Benefit Fund (24)	1919	Yes	N/A	Payments by insurance companies (25)	\$8,836,253 (26)	Not available	\$1,118,938	7/1/23-6/30/24	Not available
Wyoming	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Canadian Jurisdictions Participating (stated in Canadian currency)											
British Columbia	Section 240(1)(d) of the <i>Workers Compensation Act</i> (27)	No official name for cost relief fund	1978	Yes	N/A	Collected as part of employers' base rate (28)	Not available (29)	Not available	\$475,305,501 (30)	1/1/22-12/31/22	N/A
New Brunswick	<i>Workers' Compensation Act</i> - section 66	Special Fund	1974	Yes	N/A	Assessments on payroll	Not available	Not available	Not available	Not available	Not available
Nova Scotia as of January 1, 2022 (31)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Ontario	Section 98(1) of the <i>Workplace Safety and Insurance Act</i>	Secondary Injury and Enhancement Fund (SIEF)	1925	Yes	N/A	SIEF is funded by the premiums paid by employers	N/A	N/A	N/A	N/A	N/A
Prince Edward Island	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Saskatchewan	The <i>Workers' Compensation Act</i> , 2013, W-17.11, s.144 (32)	Second Injury and Re-Employment Reserve	1970	Yes	N/A	Included in annual premium rates (33)	\$47,249,000	Not available	\$46,517,000	1/1/2023-12/31/2023	N/A
Notes:											
Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.											
1 Colorado - Closed to new claims after a certain date; ongoing payment of claims with established entitlement. MDF Fund no longer active as of 11/1/24.											
2 Colorado - The fund closed to trauma injuries occurring after July 1, 1993.											
3 Colorado - The fund closed to occupational disease injuries occurring after April 1, 1994.											
4 Colorado - SIF \$4,559,476; MMIF \$29,027,503; MDF \$0.											
5 Connecticut - All of the Second Injury Fund data has been discerned from existing web-based publications of the Treasurer's Office, State of Connecticut. The Connecticut Workers' Compensation Commission does not have administration or oversight authority of the Second Injury Fund. For a better sampling and likely more accurate data pertaining to Second Injury Fund and its operations, contact the Second Injury Fund.											
6 Minnesota - Perhaps earlier.											
7 Missouri - 2019 responses. No 2025 data were provided.											

Table 16 Workers' Compensation Second Injury Funds as of January 1, 2025											
Various jurisdictions' statutory cites and titles of second or subsequent injury funds; when they were created; whether they are still open and, if not, the date after which no additional claims will be honored; the funding method; and the most recent count of claims and outstanding liabilities.											
Jurisdiction	Statutory Cite for Second Injury Fund	Official Name for Second Injury Fund	Date of Creation	Still Open and Active	If Eliminated, Date After Which No Additional Claims Will Be Honored	Current Method of Revenue Collection	Revenue Collected During Most Recent Fiscal Year	Number of Claims Paid During Most Recent Fiscal Year	Total Expenditures for Claim Payments During Most Recent Fiscal Year	Fiscal Year of Total Expenditures and Number of Claims in Prior Columns	Estimated Outstanding Liabilities
8	Missouri	In cases where the most recent compensable injury occurred on or after January 1, 2014, benefits from the SIF are payable only for "physical rehabilitation," pursuant to Mo. Rev. Stat. § 287.141 and/or if the "combination" of the permanent effects of the most recent compensable injury with the employee's "pre-existing condition" renders the employee permanently, totally disabled. Benefits for permanent partial disability, second job lost wages, uninsured medical expenses, and uninsured death benefits are not available in cases where the most recent compensable injury occurred on or after January 1, 2014. The information in this footnote is subject to change based on a case currently pending in the Supreme Court of Missouri, which is challenging the validity and interpretation of these statutory amendments.									
9	Missouri	As of December 31, 2017, per the most recent actuarial study.									
10	Montana	The Subsequent Injury Fund (SIF) is based on reimbursement to insurers and therefore it is unknown what insurers reserve on these claims. Outstanding liability is limited to what is available in the fund and the anticipated assessment in the next fiscal year.									
11	Nebraska	The Second Injury Fund was eliminated with the Creation of the Workers' Compensation Trust Fund on July 1, 2000. In order to receive benefits under the Second Injury Fund, work injury must have occurred before December 1, 1997.									
12	New Hampshire	The Second Injury Fund also reimburses for combined earnings and job modifications, as well as Second Injury Fund claims.									
13	New Hampshire	Payments are based on calendar year.									
14	New York	70,919 indemnity and medical reimbursement requests were paid for 26,420 workers' compensation claims.									
15	New York	\$51,130,439 of total expenditures included claims closed by Wholesale Waiver Agreements.									
16	New York	This number is an approximation.									
17	North Carolina	1929 for specified provisions and 1953 for the creation of the fund.									
18	North Carolina	Total monthly expenditures is approximately \$1,437.56 per month. The two claimants are authorized to receive payments until they die.									
19	North Dakota	When a previous injury or pre-existing condition is worsened or aggravated by employment, employer will be charged with only that percent attributable to the employment. The remaining loss will be applied to the subsequent injury fund.									
20	Oregon	Oregon does not have a second injury fund, but the Workers' Benefit Fund (WBF) funds some programs comparable to those of a second injury fund (ORS 656.605). The Employer-at-Injury Program provides assistance to employers to encourage early return-to-work of their injured workers before claim closure. Benefits offered are a wage subsidy of 50% and not to exceed 66 workdays as well as purchases such as tools or clothing needed for the job and work-site modifications in an amount up to \$5,000 for purchases and modifications combined. In the Preferred Worker Program, employers hiring preferred workers are exempt from paying premiums and premium assessments on the worker for three years. The WBF reimburses all claim costs incurred by the worker for any compensable injury within the 3-year premium exemption period. Other return-to-work incentives include work-site modification up to \$50,000 with each use limited to \$35,000, wage subsidy of 50% up to 183 calendar days, and necessary purchases for a worker to find, accept, or retain employment. The Retroactive Program provides increased benefits, primarily for fatal injuries and permanent total disability, to claimants or beneficiaries, when the amount of compensation received under the law in effect at the time of injury is lower than currently being paid for like injuries. The WBF also funds claims re-opened by the Workers' Compensation Board under own motion jurisdiction (ORS 656.278).									
21	Pennsylvania	These figures are based on calendar year 2023.									
22	US Federal Programs - Longshore	The Special Fund established by 33 U.S.C. 944 includes, but is not limited to, the second injury provisions of 33 U.S.C. 908(f).									
23	Vermont	Fund was created in 1947 but never activated. Only source of funding was to be \$500 paid to fund by insurer if worker died with no dependents. That seldom happened. In 1999, the Legislature dissolved the fund and repealed the statute. No claims ever filed, accepted, or paid.									
24	Wisconsin	The WISBF, s.102.65, Wis. Stats., is a state fund that pays benefits to individuals or dependents under three different benefit programs. The Second Injury Fund is one of those three programs. All financial data is current as of December 12, 2024 and is for State Fiscal Year 2024.									
25	Wisconsin	The WISBF is funded via statutory assessments against insurance carriers, self-insured employers and/or employers related to reporting requirement surcharges (and interest thereon if applicable), death claims, illegal employment of minors, interest on late assessment payments, and certain specified injuries (i.e., dismemberments).									
26	Wisconsin	This amount is for all three benefit programs less the annual WISBF Assessment.									
27	British Columbia	Section 240(1)(d) of the Act states WorkSafeBC must "provide and maintain a reserve for payment of that portion of the disability enhanced by reason of a pre-existing disease, condition or disability". This provision allows WorkSafeBC to relieve an employer from costs that would otherwise impact an employer's experience rating (see Policy item # 114.40 of the RS&CM). The cost relief fund discussed in section 240(1)(d) is similar to the second injury fund in the U.S., but it is not exactly the same.									
28	British Columbia	Employers' base assessment rate is expressed as a dollar amount per one hundred dollars of payroll. Complete details of how the assessment rate is calculated is described in policy in Item AP5-240/241-1 of the Assessment Manual.									
29	British Columbia	Costs relieved under section 240(1)(d) of the Act are redirected from an employer's experience rating and rate group to the section 240(1)(d) reserve. The value of all relieved costs are allocated among all employers in the accident fund; the revenue necessary to cover these enhanced disability costs are built into the premium rate for all rate groups.									
30	British Columbia	Figure reflects 2022 fiscal year. This includes amounts paid for health care costs, short-term disability claims costs (including health care and vocational rehabilitation costs), long-term disability claims costs (including health care and vocational rehabilitation costs), and work-related death benefits (including health care costs and vocational rehabilitation costs). This figure is reported in WorkSafeBC's statistical reports found on www.worksafebc.com/en/about-us/shared-data .									
31	Nova Scotia	2022 responses. No 2025 data were provided.									
32	Saskatchewan	This section provides the WCB the ability to create reserves to set aside amounts to protect against adverse events that would create an unfair burden on employers.									
33	Saskatchewan	These reserves are maintained in addition to the injury fund.									

Table 17 "Presumption" Regulations: When an Injury or Illness Is Presumed to Have Been Acquired Through Workplace as of January 1, 2025									
Regulations regarding "Presumption of Causation" where specific medical conditions are presumed to have been caused by the worker's job, acquired in the workplace, and thus covered by workers' compensation. Generally this applies to specific illnesses and occupations where they are common, and where there is a well-understood causal mechanism. Some examples are firefighters and certain cancers commonly caused by burning chemicals, or first responders and post-traumatic stress disorder (PTSD) following particular incidents. In 2020, some jurisdictions considered adding presumptions for first responders and/or "essential workers" and COVID-19.									
Jurisdiction	Statutory Cite for Presumed Causation	Any Presumed Causation Rules in Jurisdiction	Limited to Specific Occupations and/or Conditions		Is Presumption Rebuttable? How?	Other Limits to Presumption	Rules Prompted by and/or Specific to COVID-19 Pandemic		
			Yes/No	Presumption Rule(s) and Limits			Yes/No	Details	Expiry or Sunset Date
Alabama	§25-5-120	No	N/A	N/A	N/A	N/A	No	N/A	N/A
Alaska	AS 23.30.121	Yes	Yes	Coverage for disability from disease, certain firefighters	Yes - Annual medical exams administered or use of tobacco	Within employment or up to three years after retirement	Yes	Emergency Declaration by Governor and Statute (1)	15-Nov-20
Arizona	A.R.S. 23-1105; A.R.S. 23-901.09	Yes	Yes	(2)	(3)	(4)	No		None
Arkansas	N/A	No	No	N/A	N/A	N/A	yes	(5)	5/1/2023
California	CA Labor Code §§3212 through 3213.2 (miscellaneous conditions)	Yes - statutory rules; no regulations	Yes	Various presumptions for a variety of conditions for specified public sector occupations (cancer, heart trouble, pneumonia, hernia, tuberculosis, MRSA skin infection, blood-borne infectious disease, meningitis, Lyme disease, lower back impairment, PTSD) (Law enforcement/safety/peace officers and related specified occupations, firefighters, lifeguards, conservation corps employees)	Yes, may be rebutted by evidence of non-industrial causation	See statutes for specific limitations, including time frame during which condition must manifest	No		\$3212.15 1/1/2025 (PTSD)
	CA Labor Code §§3212.86, 3212.87, 3212.88 (COVID-19)	Yes - statutory rules; no regulations	Yes	COVID-19 presumptions: §3212.86 EE worked 3/19/2020 - 7/5/2020, diagnosed within 14 days; §3212.87 EE is specified public peace officer, firefighter, or specified EE of health facility, EMT, RN, home health provider, providing direct patient care in contact with COVID-19 patients on or after 7/6/2020, tested COVID-19 positive within 14 days of work; §3212.88 EE who tests COVID-19 positive during an "outbreak" as defined, at an employer with 5 or more employees	Yes, may be rebutted by evidence of non-industrial causation	See statutes for specific limitations, including time frame during which condition must manifest	Yes		\$3212.86 1/1/2023 (COVID-19) \$3212.87 1/1/2023 (COVID-19) \$3212.88 1/1/2023 (COVID-19)
Colorado	C.R.S. 8-41-205-8	Yes	Yes	Hepatitis C, limited to firefighters, emergency services and peace officers	Yes, by a preponderance of evidence	Yes (6)	No		
	C.R.S. 8-42-209	Yes	Yes	Cancer - limited to firefighters (6)	Yes, by a preponderance of evidence	No	No		
Connecticut	C.G.S. 7-433 (c)	Yes	Yes	Some rebuttable presumptions for some heart and hypertension claims and some COVID-19 claims	Yes	Any presumptions are rebuttable	Some	EO 7JJJ created a rebuttable presumption for workers who contracted COVID-19 between March 10, 2020 and May 20, 2020	N/A
Delaware		No	N/A	N/A	N/A	N/A	N/A	N/A	N/A
District of Columbia					N/A				
Florida	112.81	Yes	Yes - Firefighters, law enforcement, or correctional officers	(7)	See Presumption Rule(s) and Limits	See Presumption Rule(s) and Limits	No	N/A	N/A
Georgia	No statutory presumptions	Case law establishes a presumption in unexplained death claims	No	N/A	Unexplained death presumption is rebuttable	No	No	N/A	N/A
Hawaii	§386-21.9, HRS	Yes	Yes	Presumption rules apply to firefighters diagnosed with work-related cancer	Substantial evidence	N/A	No		
Idaho	Idaho Code 72-438(14)(b)	Yes	Yes	Firefighter must be diagnosed with a qualifying cancer condition [as indicated in subparagraphs (i) through (xi)], the disease was not revealed during initial employment screening examination, and must be diagnosed not more than ten (10) years following the last date firefighter actually worked as a firefighter	Yes, by substantial evidence to the contrary	Presumption does not apply if the firefighter or firefighter's cohabitant has regularly and habitually used tobacco products for ten (10) years or more prior to diagnosis	No	N/A	N/A
Illinois	820ILCS310/1(d)	Yes	Yes	Firefighters, EMTs, paramedics, and coal miners	Yes. The employer can present evidence to rebut claim		Yes	See The Illinois Worker's Occupational Diseases Act 820IL310/1(g)(1)	Diagnosis of COVID-19 before June 30, 2021
Indiana	None	No	No	None	N/A	N/A	N/A	N/A	N/A
Iowa	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Kansas	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Kentucky					No presumption statutes				

Table 17 "Presumption" Regulations: When an Injury or Illness Is Presumed to Have Been Acquired Through Workplace as of January 1, 2025									
Regulations regarding "Presumption of Causation" where specific medical conditions are presumed to have been caused by the worker's job, acquired in the workplace, and thus covered by workers' compensation. Generally this applies to specific illnesses and occupations where they are common, and where there is a well-understood causal mechanism. Some examples are firefighters and certain cancers commonly caused by burning chemicals, or first responders and post-traumatic stress disorder (PTSD) following particular incidents. In 2020, some jurisdictions considered adding presumptions for first responders and/or "essential workers" and COVID-19.									
Jurisdiction	Statutory Cite for Presumed Causation	Any Presumed Causation Rules in Jurisdiction	Limited to Specific Occupations and/or Conditions		Is Presumption Rebuttable? How?	Other Limits to Presumption	Rules Prompted by and/or Specific to COVID-19 Pandemic		
			Yes/No	Presumption Rule(s) and Limits			Yes/No	Details	Expiry or Sunset Date
Louisiana	La. R.S. 40:1374	Post-traumatic stress injury	Yes	Every employee of the division of state police, except the head thereof	No	A post-traumatic stress injury that arises solely from a legitimate personnel action...is not a compensable injury	No	N/A	No
	La. R.S. 33:2011	Municipalities and Parishes: Development of cancer during employment in fire service; occupational disease	Yes	...when a firefighter in the classified service who has completed ten or more years of service has developed cancer, the cancer shall be classified as an occupational disease or infirmity connected with the duties of a firefighter...The cancer...shall be limited to the types of cancer which may be caused by exposure to heat, smoke, radiation, or a known or suspected carcinogen as defined by the International Agency for Research on Cancer. The cancer shall also be limited to a cancer originating in the bladder, brain, colon, liver, pancreas, skin, kidney, or gastrointestinal or reproductive tract, and leukemia, lymphoma, multiple myeloma, prostate cancer, and testicular cancer, or any other type of cancer, due to occupational exposure, for which firefighters are determined to have a statistically significant increased risk over that of the general population	Yes	...by evidence meeting judicial standards, and shall be extended to a member following termination of service for a period of 3 mos. for each full yr. of service not to exceed 60 mos. commencing with the last actual date of service	No	N/A	No
	La. R.S. 33:2581	Municipalities and Parishes: Development of heart and lung disease during employment in classified fire service; occupational disease	Yes	Any disease or infirmity of the heart or lungs which develops during a period of employment in the classified fire service in the state of Louisiana shall be classified as a disease or infirmity connected with employment	No	...manifested at any time after the first five years of employment	No	N/A	No
	La. R.S. 33:2581.1	Municipalities and Parishes: Development of hearing loss during employment in the classified fire service; occupational disease	Yes	Any loss of hearing which is 10 percent greater than that of the affected employee's comparable age group in the general population and which develops during employment in the classified fire service in the state of Louisiana shall, for the purposes of this Section only, be classified as a disease or infirmity connected with employment	Yes	... by evidence meeting judicial standards and shall be extended to an employee following termination of service for a period of 24 months	No	N/A	No
Maine	39-A ME Rev Stat §328, §328A, §328B	Yes	Yes/No	§328. Cardiovascular injury or disease and pulmonary disease suffered by a firefighter or resulting in a firefighter's death §328-A. Communicable disease contracted by emergency rescue or public safety worker §328-B. Cancer suffered by a firefighter (8) 39-A MRSA §201 (3-A) (B) PTSD suffered by emergency first responders (9) 39-A §328-C. Heart disease or hypertension suffered by certain employees 39-A §328-D. Cardiovascular injury or disease and pulmonary disease suffered by a law enforcement officer or resulting in a law enforcement officer's death	Yes	(10)	No	Rules date to 1991, 2007, 2009 – before COVID-19 pandemic	No
Maryland	LE 9-506 (general) LE 9-503 (law enforcement and public safety officers)	See LE 9-503 and LE 9-506	Yes	See LE 9-503 and LE 9-506	Yes, at hearing after filing issues with the Commission	See LE 9-503 and LE 9-506	No	No COVID-19-specific presumptions	N/A
Massachusetts	G.L. c. 152, Sec. 7A	Yes (11)	Yes	See note (11) below	Yes	See below	No	None	None
Michigan	Sec. 418.405 (1) & (2) & (6) of the Michigan Statute	Yes	Yes	The Christopher R. Slezak First Responder Presumed Coverage Fund, members of fully paid fire or police departments (12)	(13)		No		N/A

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			Yes/No	Presumption Rule(s) and Limits			Yes/No	Details	Expiry or Sunset Date
Minnesota	176.011, subd. 15 (b)	Yes	Yes	Enumerated list of policing and firefighting occupations and coronary diseases; list of emergency responder occupations and infectious diseases following exposure to that disease	Rebuttable by substantial factors brought by the employer or insurer		No		
	176.011, subd. 15 (c)	Yes	Yes	Firefighters and "disabling cancer of a type . . . defined by the International Agency for Research on Cancer"	Rebuttable by substantial factors brought by the employer or insurer	If cancer detected in pre-employment examination and "unless a subsequent medical determination is made that the firefighter no longer has the cancer"	No		
	176.011, subd. 15 (d) (e)	Yes	Yes	Enumerated list of emergency responders and mental impairment (PTSD) diagnosed by licensed psychiatrist or psychologist	Rebuttable by substantial factors brought by the employer or insurer	If not related to disciplinary action or workplace process	No		
	176.011, subd. 15 (f)	Yes	Yes	Enumerated list of emergency responder and health care occupations and COVID-19 illness	May only be rebutted if the employer or insurer shows the employment was not the direct cause of the disease		Yes	Addition of new presumption for specific listed employees who contract COVID-19. See (14) below for employee list and (15) for other details	The presumption was initially sunset at 11:59 pm on Dec. 31, 2021, revived and reenacted effective Feb. 3, 2022, and sunset again at 11:59 pm on Jan. 13, 2023
Mississippi	None	None	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Missouri	Jurisdiction did not provide responses for this table								
Montana	39-71-1401 and 1402, MCA	Yes	Yes	A covered firefighter that meets the requirements of 39-71-1402 and is diagnosed with one or more of the diseases listed in 39-71-1401 with the period listed	Yes, by establishing a preponderance of the evidence that the firefighter is not suffering from a compensable presumptive occupational disease or the firefighter was not exposed during the course and scope of the firefighter's duties to smoke or particles in a quantity sufficient to have reasonably caused the disease claimed	N/A	No	N/A	N/A
Nebraska	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Nevada	NRS 617	Yes	Yes	Occupational Disease Act NRS 617 regarding for police and fire personnel	Yes, medical report	No	No	N/A	N/A
New Hampshire	NH RSA 281-A:17 and 17-c	Yes	Yes	Firefighters and emergency responders as defined by statute	Burden shifts to insurance carrier	N/A	No	N/A	N/A
New Jersey	N.J.S.A. 34:15-31.11-31.14 (16)	Yes	Yes	Limited to essential employees contracting COVID-19	Yes. May be rebutted by a preponderance of the evidence showing that the worker was not exposed to COVID-19 while working in place of employment other than the individual's own residence	None	Yes	See N.J.S.A. 34:15-31.11 - 31.14 (16)	
New Mexico	NMSA 52-3-32.1	Yes	Yes	Worker is a non-volunteer firefighter employed by a government entity. Presumptions include certain cancers, some contagious diseases, post-traumatic stress disorder, heart injury, and stroke. Some limitations apply. §NMSA 52-3-32.1	Yes. Rebuttable by a preponderance of evidence showing worker engaged in conduct/activities outside of employment that posed a significant risk of contracting or developing a described condition	No	No	N/A	None
New York	Workers' Compensation Law § 47	Yes	Yes	(17)	Yes. The presumptions are rebuttable by substantial evidence to the contrary	No	No	N/A	No
North Carolina	None	No	N/A	N/A	N/A	N/A	N/A	N/A	N/A
North Dakota	65-01-15.1	Yes	Yes	Full-time paid firefighters and law enforcement for lung, respiratory, hypertension, heart disease, and occupational cancers only in full-time paid firefighters	Yes	No	No		

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Jurisdiction	Statutory Cite for Presumed Causation	Any Presumed Causation Rules in Jurisdiction	Limited to Specific Occupations and/or Conditions		Is Presumption Rebuttable? How?	Other Limits to Presumption	Rules Prompted by and/or Specific to COVID-19 Pandemic		
			Yes/No	Presumption Rule(s) and Limits			Yes/No	Details	Expiry or Sunset Date
Ohio	R.C. 4123.68(X)	Ohio has no administrative rule for the firefighter presumption, only the statute	Yes	Cancer contracted by a firefighter who has been assigned to at least six years of hazardous duty as a firefighter constitutes a presumption that the cancer was contracted in the course of and arising out of the firefighter's employment if the firefighter was exposed to an agent classified by the international agency for research on cancer or its successor organization as a group 1 or 2A carcinogen	(18)		No		
Oklahoma	85O.S. Sec 74	Yes	Yes	In any proceeding for the enforcement of a claim for compensation, there shall be a rebuttable presumption that: 1. The Commission has jurisdiction; 2. Sufficient notice was given; and 3. The injury was not occasioned by the willful intention of the injured employee to bring about the injury to himself or herself or another	(19)	No	No	N/A	N/A
Oregon	ORS 656.802	No	Yes	Heart and lung conditions - Firefighters of any political division. Includes disease of the lungs or respiratory tract, hypertension or cardiovascular-renal disease. Specified cancers - Nonvolunteer firefighter employed by a political division or subdivision. Includes brain cancer, colon cancer, stomach cancer, testicular cancer, prostate cancer, multiple myeloma, non-Hodgkin's lymphoma, cancer of the throat or mouth, rectal cancer, breast cancer, leukemia, bladder cancer, or gynecologic cancer of the uterus, fallopian tubes, ovaries, cervix, vagina or vulva. Post-traumatic stress and acute stress - Full-time paid: firefighter, emergency medical services provider, police officer, corrections officer, youth correction officer, parole and probation officer, emergency dispatcher, or 9-1-1 emergency operator.	Yes - clear and convincing evidence	Heart and lung conditions - Requires a physical examination upon becoming a firefighter, or subsequently thereto, that does not show any evidence of such condition or impairment preexisting employment. Specified cancers - May be rebutted with clear and convincing evidence that tobacco use is the major contributing cause of the cancer. Presumption does not apply to prostate cancer if firefighter has reached the age of 55; or to claims filed more than 84 months after end of nonvolunteer firefighter's employment. PTSD and acute stress - Presumption may apply if worker experienced a single traumatic event. Worker must remain employed or ended employment no more than 7 years prior. All - In general, employment for a minimum amount of time required.	No (20)	N/A	N/A
Pennsylvania	77 P.S. 27.1	Yes	Yes	(21)	(21)	None	No	N/A	N/A
Rhode Island	N/A (22)	N/A (22)	N/A	N/A	N/A	N/A	N/A	N/A	N/A
South Carolina	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
South Dakota	SDCL 9-16-45	No	Yes	Fire Dept employees only	Yes, by competent evidence of no connection	Results in at least partial disability; medical examination at beginning of employment showed no evidence of disabling condition	No		
Tennessee	T.C.A. 7-51-209	Yes	Yes	An emergency rescue worker who suffers a condition or impairment of health that is caused by an infectious disease, and that results in total or partial disability or death is presumed to have a disability suffered in the line of duty, unless the contrary is shown by a preponderance of the evidence. "Infectious disease" means: HIV, Hepatitis C, or a virus or other communicable disease for which: (i) A pandemic has been declared by the World Health Organization or the federal centers for disease control and prevention; and (ii) The governor has declared a state of emergency	Yes, by a preponderance of the evidence	(23)	No	N/A	N/A

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			Yes/No	Presumption Rule(s) and Limits			Yes/No	Details	Expiry or Sunset Date
Texas	Government Code Chapter 607	Yes. 28 TAC 124.2 and 124.3	Yes	Defines the terms "emergency medical technician," "peace officer," and "firefighter," and creates a rebuttable presumption that certain diseases are work-related for firefighters or emergency medical technicians, such as smallpox, tuberculosis or other respiratory illnesses, and acute myocardial infarction or stroke. A list of 11 cancers is included in the presumption statute as well as a presumption for COVID-19 for first responders and certain detention officers	Yes. Preponderance of the evidence	Certain additional criteria exists to have the various presumptions apply such as not using tobacco, a clean physical at the start of employment, and work for certain periods of time	Yes	A presumption was put in place for COVID-19 for first responders and certain detention officers (24)	September 1, 2023
US Federal Programs - FECA	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
US Federal Programs - Longshore	33 U.S.C. § 920	Yes	No	First the claimant must prove that he suffered a physical injury or harm. Second, he must show that working conditions existed or a work accident occurred which could have caused, aggravated, or accelerated the injury	The presumption may be rebutted by negative evidence if it is specific and comprehensive enough to sever the potential connection between the particular injury and a job-related accident. The employer must adduce substantial evidence to the contrary. However, they are not required to unequivocally or affirmatively rule out, the possibility that an injury is work-related	No	No	N/A	N/A
Utah	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Vermont	21 V.S.A. § 601(11)(I)	Yes	Yes	Limited to police officers, rescue or ambulance workers, State employees, or firefighters; post-traumatic stress disorder that is diagnosed by a mental health professional shall be presumed to have been incurred during service in the line of duty and shall be compensable	Preponderance of the evidence	Must be diagnosed with post-traumatic stress disorder within three years of the last active date of employment	No		
	21 V.S.A. § 601(11)(A)	Yes	Yes	Limited to constables, chiefs of police, police officers, rescue or ambulance workers, and volunteer reserve police officers in any city, town, or incorporated village; disability or death from a heart injury or heart disease incurred or aggravated and proximately caused by service in the line of duty and that becomes symptomatic within 72 hours from the date of last service in the line of duty shall be presumed to be incurred in the line of duty	Preponderance of the evidence	Line of duty	No		
	21 V.S.A. § 601(11)(B)	Yes	Yes	In the case of firefighters, as defined in 20 V.S.A. § 3151(3) and (4), disability or death from heart injury or heart disease that becomes symptomatic within 72 hours of service in the line of duty shall be presumed to be compensable	Preponderance of the evidence	Line of duty	No		
	21 V.S.A. § 601(11)(E)	Yes	Yes	In the case of a firefighter, as defined in 20 V.S.A. § 3151(3) and (4), who dies or has a disability from a cancer listed in subdivision (iii) of this subdivision (E) within 10 years of last active date of employment, the firefighter shall be presumed to have had the cancer as a result of exposure to conditions in the line of duty	Preponderance of the evidence	Required factors	No		
	21 V.S.A. § 601(11)(H)(i)	Yes	Yes	In the case of firefighters and members of a rescue or an ambulance squad, disability or death resulting from lung disease or an infectious disease either one of which is caused by aerosolized airborne infectious agents or blood-borne pathogens and acquired after a documented occupational exposure in the line of duty to a person with an illness shall be presumed to be compensable	Preponderance of the evidence	The presumption of compensability shall not be available if the employer offers a vaccine; required factors	No		
	21 V.S.A. § 601(11)(J)	Yes	Yes	A mental condition resulting from a work-related event or work-related stress shall be considered a personal injury by accident arising out of and in the course of employment and be compensable	Preponderance of the evidence	Extraordinary and unusual in comparison to pressures and tensions experienced by the average employee across all occupations; required factors	No		

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			Yes/No	Presumption Rule(s) and Limits			Yes/No	Details	Expiry or Sunset Date
Virginia	65.2-105	Yes	Yes	Presumption that accident arose out of and in the course of employment where employee is physically or mentally unable to testify, dies without regaining consciousness or dies at the scene	Yes, by preponderance of competent evidence to the contrary	No	No		
	65.2-402	Yes	Yes	Presumptions as to death or disability from respiratory disease, hypertension, heart disease and certain cancers. Limited to certain occupations such as firefighters and police officers	Yes, by preponderance of competent evidence to the contrary	Yes, certain qualifications must be met for availability of presumptions, such as pre-employment physicals	No		
	65.2-402.1	Yes	Yes	Presumptions as to death or disability from certain infectious diseases, such as hepatitis, HIV and COVID-19	Yes, by preponderance of competent evidence to the contrary		In part (presumption for non-COVID-19 diseases existed prior to the pandemic)	Provision covering COVID-19 in certain occupations, such as in health care providers treating or diagnosing COVID-19, firefighters and law enforcement officers	Covers death or disability occurring between March 12, 2020 and December 31, 2021
Washington		WAC 296-14-310 WAC 296-14-325 WAC 296-14-330	Yes	(25)	Yes. See RCW 51.32.185, 51.32.390, and 51.32.395.	(26)	Yes WAC 296-14-340 and WAC 296-14-341	WAC 296-14-340 and 296-14-341 are a result of RCW 51.32.390 and 51.32.181 respectively, and apply to public health emergencies	N/A
West Virginia	W. Va. Code 23-4-1(h)(1)	Yes	Yes	Rebuttable presumption that a professional firefighter who has developed a cardiovascular or pulmonary disease or sustained a cardiovascular injury or who has developed leukemia, lymphoma, multiple myeloma, bladder cancer, mesothelioma, or testicular cancer arising out of, and in the course of, employment (27)	(28)		(29)	(29)	(29)
Wisconsin	Section 102.03 (6), Wis. Stats.	Yes, but not for new injuries after 6/10/2020	Yes	Where an injury to a first responder is found to be caused by COVID-19 during the public health emergency declared by the governor on March 12, 2020, and ending 30 days after the termination of the order (June 10, 2020), the injury is presumed work-related. Must have specific diagnosis by physician or positive COVID-19 test	Yes—by specific evidence that injury caused by exposure outside first responder's work for employer	(30)	Yes	See 2019 Wisconsin Act 185	Presumption does not apply to injuries before 3/12/2020 or after 06/10/2020
Wyoming	27-14-102(a)(xi)(A)	Yes	Yes	Any covered employee infected with COVID-19	No	Only applies to covered employees	Yes	Any covered employee infected with COVID-19	March 31, 2022 unless otherwise extended by the legislature
	27-15-102	Yes	Yes	Presumption that paid and volunteer firefighters developed certain diseases or conditions that resulted from their employment unless the contrary is proven	Yes. Through a showing by a preponderance of the evidence that a risk factor, accident, hazard or other cause not associated with the firefighter's service was the dominant cause of the listed disease	Only applies to firefighters employed for not less than the minimum period of employment who seek presumption within a set time period	No	N/A	N/A

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Canadian Jurisdictions Participating (stated in Canadian currency)									
British Columbia (31)	Section 135(2) of the <i>Workers Compensation Act</i>	Yes	Yes	A mental disorder is presumed to be work-related where a worker in an eligible occupation is exposed to one or more traumatic events in their work and are diagnosed with a mental disorder which may arise from trauma. Eligible occupations, as defined in the <i>Act</i> or prescribed by the <i>Mental Disorder Presumption Regulation</i> , include correctional officer, emergency medical assistant, firefighter, police officer, sheriff, emergency response dispatcher, health care assistant, nurse, community integration specialist, coroner, harm reduction worker, parole officer, probation officer, respiratory therapist, shelter worker, social worker, transition house worker, victim service worker, and withdrawal management worker (32)	Yes. Presumption is rebutted if the contrary is proved.	N/A	No	N/A	N/A
	Section 137 of the <i>Workers Compensation Act</i> Schedule 1 of the <i>Workers Compensation Act</i> (33)	Yes	Yes	If, on or immediately before the date of the disablement, the worker was employed in a process or industry described in column 2 of Schedule 1 opposite the occupational disease that has resulted in the disablement, the occupational disease must be presumed to have been due to the nature of the worker's employment unless the contrary is proved	Yes. Presumption is rebutted if the contrary is proved	N/A	In part. Presumption for non-COVID-19 conditions existed prior to pandemic	The COVID-19 pandemic prompted inclusion of communicable viral pathogens (such as COVID-19) in Schedule 1 of the Act	N/A for most conditions. For a communicable viral pathogen (COVID-19), it applies only during the applicable public health notice or emergency declaration
	Section 139 and 140 of the <i>Workers Compensation Act</i>	Yes	Yes	Certain heart conditions, cancers and diseases will be presumed to be due to the nature of the worker's employment as a firefighter unless the contrary is proved. Section 139 addresses the firefighters' occupational disease or personal injury presumption respecting heart injury and heart disease. Section 140 addresses the firefighters' occupational disease presumption respecting lung cancer or a disease prescribed by the <i>Firefighters' Occupational Disease Regulation</i>	Yes. Presumption is rebutted if the contrary is proved	N/A	No	N/A	N/A
New Brunswick	<i>Workers' Compensation Act</i> Section 7.1	Yes	Yes	Limited to emergency response worker diagnosed with post-traumatic stress disorder	Yes, if evidence to the contrary is shown	No	No	N/A	N/A
	<i>Firefighters' Compensation Act</i>	Yes	Yes	Limited to a firefighter who is disabled or dies from a heart attack within 24 hours after attendance at an emergency response scene, or from a prescribed disease in regulation with the requirement of minimum period of service and regular exposure to hazards of a fire scene in their capacity as a firefighter (34)	No	Yes, length of service	No	N/A	N/A
Nova Scotia as of January 1, 2022 (35)	35A(2)	Firefighter cancer	Yes	Firefighter (36)	Yes (36)	Yes (36)	No	N/A	N/A
	12A(1)	PTSD	Yes	See footnote (37)	Yes (37)	Yes (37)	No	N/A	N/A
Ontario	Workplace Safety and Insurance Act, 1997, S.O. 1997, c. 16, Sched. A	Yes (38)	Yes	Section 13(2): If the accident arises out of the worker's employment, it is presumed to have occurred in the course of the employment unless the contrary is shown. If it occurs in the course of the worker's employment, it is presumed to have arisen out of the employment unless the contrary is shown. Section 15(3):15 (3) If, before the date of the impairment, the worker was employed in a process set out in Schedule 3 and if he/she contracts the disease specified in the Schedule, the disease is presumed to have occurred due to the nature of the worker's employment unless the contrary is shown	Yes. Provide evidence to the contrary	No	No	N/A	N/A
Prince Edward Island	<i>Workers Compensation Act</i> , R.S.P.E.I., 1988, Cap. W-7.1, Sections 6(4.1) and 6(4.5)	Yes	Yes	Section 6(4.1) is limited to trauma and stressor-related disorders. Section 6(4.5) is limited to fire inspectors or firefighters	Yes, if the contrary is shown	N/A	No	N/A	N/A

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Regulations regarding "Presumption of Causation" where specific medical conditions are presumed to have been caused by the worker's job, acquired in the workplace, and thus covered by workers' compensation. Generally this applies to specific illnesses and occupations where they are common, and where there is a well-understood causal mechanism. Some examples are firefighters and certain cancers commonly caused by burning chemicals, or first responders and post-traumatic stress disorder (PTSD) following particular incidents. In 2020, some jurisdictions considered adding presumptions for first responders and/or "essential workers" and COVID-19.

Jurisdiction	Statutory Cite for Presumed Causation	Any Presumed Causation Rules in Jurisdiction	Limited to Specific Occupations and/or Conditions		Is Presumption Rebuttable? How?	Other Limits to Presumption	Rules Prompted by and/or Specific to COVID-19 Pandemic		
			Yes/No	Presumption Rule(s) and Limits			Yes/No	Details	Expiry or Sunset Date
Saskatchewan	The Workers' Compensation Act, 2013, c.W-17.11, s.27	27(1) Unless the contrary is proven, if an injury to a worker arises out of the worker's employment, it is presumed that it occurred in the course of his or her employment. (2) Unless the contrary is proven, if an injury to a worker occurred in the course of his or her employment, it is presumed that it arose out of the worker's employment	No	The WCB will presume an injury that occurred during employment is work-related unless there is sufficient information to determine an injury did not arise out of or in the course of employment	Unless the contrary is proven. WCB will determine whether an injury is work-related by considering all available and relevant information, including any evidence suggesting the injury is not the result of employment	N/A	No	N/A	N/A
	The Workers' Compensation Act, 2013, c.W-17.11, s.28	Unless the contrary is proven, if a worker who is or has been a firefighter suffers a listed disease, that disease is presumed to be an occupational disease, the dominant cause of which is the employment as a firefighter	Yes	Must have been a volunteer or full-time member of a fire department for the minimum period of employment prescribed in the regulations; and has been regularly exposed to the hazards of a fire scene, other than a forest fire scene, throughout the period mentioned in subclause (i); and in the case of primary site lung cancer, only to a worker who has been a non-smoker before the date of injury for the minimum period prescribed in the regulations	Unless the contrary is proven	N/A	No	N/A	N/A
	The Workers' Compensation Act, 2013, c.W-17.11, s.28.1	Unless the contrary is proven, if a worker or former worker is diagnosed with a psychological injury by a psychiatrist or psychologist, that injury is presumed to be an injury that arose out of and in the course of the worker's employment	No	"Psychological injury" means a psychological injury, including post-traumatic stress disorder, as described in the edition of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association that is prescribed in the regulations; (b) "worker" means a person who works and: (i) is exposed to a traumatic event; or (ii) is in an occupation that is prescribed in the regulations	Unless the contrary is proven	N/A	No	N/A	N/A
	The Workers' Compensation Act, 2013, c.W-17.11, s.29	Unless the contrary is proven, if a worker is found dead at a place where the worker had a right to be in the course of his or her employment, it is presumed that the worker's death was the result of injury arising out of and in the course of his or her employment	No	"Found dead" refers to the situation where there are no witnesses to the occurrence or circumstances of a death. Finding a person a few minutes after being seen alive would normally not constitute being "found"	Unless the contrary is proven	N/A	No	N/A	N/A

Notes: Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.

- Alaska - COVID-19 presumptions were put in place by emergency action and are completely separate from the firefighter presumption action.
- Arizona - A heart-related, perivascular or pulmonary injury, illness or death of a firefighter is presumed to be an occupational disease as defined in section 23-901, paragraph 13, subdivision (c), compensable pursuant to section 23-1043.01 and deemed to arise out of employment if all of the following apply: 1. The firefighter passed a physical examination before employment and the examination did not indicate evidence of heart-related, perivascular or pulmonary injury or illness. 2. The firefighter received a physical examination that is reasonably aligned with the national fire protection association standard on comprehensive occupational medical program for fire departments (NFPA 1582). 3. The firefighter was exposed to a known event and the heart-related, perivascular or pulmonary injury, illness or death occurred within twenty-four hours after the exposure and was reasonably related to the exposure.
1. Any disease, infirmity or impairment of a firefighter's or fire investigator's health that is caused by brain, bladder, rectal or colon cancer, lymphoma, leukemia or adenocarcinoma of the respiratory tract and that results in disability or death is presumed to be an occupational disease as defined in section 23-901, paragraph 13, subdivision (c) and is deemed to arise out of employment.
2. Any disease, infirmity or impairment of a firefighter's or fire investigator's health that is caused by buccal cavity, pharynx, esophagus, large intestine, lung, kidney, prostate, skin, stomach, ovarian, breast or testicular cancer or non-Hodgkin's lymphoma, multiple myeloma or malignant melanoma and that results in disability or death is presumed to be an occupational disease as defined in section 23-901, paragraph 13, subdivision (c) and is deemed to arise out of employment. The presumptions provided in this section are granted if all of the following apply: 1. The firefighter or fire investigator passed a physical examination before employment and the examination did not indicate evidence of cancer. 2. The firefighter or fire investigator was assigned to hazardous duty for at least five years. 3. For the presumption provided in subsection A, paragraph 2 of this section and for firefighters only, the firefighter received a physical examination that is reasonably aligned with the national fire protection association standard on comprehensive occupational medical program for fire departments (NFPA 1582).
- Arizona - Yes, by a preponderance of the evidence that there is a specific cause of the heart-related, perivascular or pulmonary injury, illness or death other than the employment. The presumption may be rebutted by clear and convincing evidence that there is a specific cause of the cancer other than an occupational exposure to a carcinogen as defined by the international agency for research on cancer.
- Arizona - The section does not apply if there is evidence that the firefighter's exposure to cigarettes or tobacco products outside the scope of the firefighter's official duties is a substantial contributing cause in the development of the heart-related, perivascular or pulmonary injury, illness or death. It does not apply to cancers of the respiratory tract if there is evidence that the firefighter's or fire investigator's exposure to cigarettes or tobacco products outside of the scope of the firefighter's or fire investigator's official duties is a substantial contributing cause in the development of the cancer.
- Arkansas - Coverage for COVID-19 was allowed from March 11, 2020 until May 1, 2023 by Act 353 of the 93rd General Assembly.
- Colorado - The firefighter cancer presumption is not applicable for any employer who participates in a voluntary firefighter cancer benefits program.
- Florida - Any condition or impairment of health of any Florida state, municipal, county, port authority, special tax district, or fire control district firefighter or any law enforcement officer, correctional officer, or correctional probation officer as defined in s. 943.10(1), (2), or (3) caused by tuberculosis, heart disease, or hypertension resulting in total or partial disability or death shall be presumed to have been accidental and to have been suffered in the line of duty unless the contrary be shown by competent evidence. However, any such firefighter or law enforcement officer must have successfully passed a physical examination upon entering into any such service as a firefighter or law enforcement officer, which examination failed to reveal any evidence of any such condition. Such presumption does not apply to benefits payable under or granted in a policy of life insurance or disability insurance, unless the insurer and insured have negotiated for such additional benefits to be included in the policy contract.
- Maine - MRSA §328-B (1) (A) In 2021, to eliminate gender imbalance, Maine added gynecological cancers to the list of firefighter cancers in §328-B that are presumed to be work-related.
- Maine - MRSA § 201 (3-A) (B) creates a rebuttable presumption that PTSD suffered by law enforcement officers, firefighters, emergency medical personnel, E-9-1-1 dispatchers and corrections officers is work-related provided certain conditions are met. The last two categories were added in 2021.
- Maine - §328. Length of employment as firefighter, injury/death happens within 6 months of active duty or training as firefighter.
§328-A. Various medical testing, immunization, record of exposures, liability attaches to multiple employers if more than one.
§328-B. Cancers include these: kidney cancer, non-Hodgkin's lymphoma, colon cancer, leukemia, brain cancer, bladder cancer, multiple myeloma, prostate cancer, testicular cancer or breast cancer. Various medical testing, immunization, record of exposures, liability attaches to multiple employers if more than one.

Table 17 "Presumption" Regulations: When an Injury or Illness Is Presumed to Have Been Acquired Through Workplace as of January 1, 2025									
Regulations regarding "Presumption of Causation" where specific medical conditions are presumed to have been caused by the worker's job, acquired in the workplace, and thus covered by workers' compensation. Generally this applies to specific illnesses and occupations where they are common, and where there is a well-understood causal mechanism. Some examples are firefighters and certain cancers commonly caused by burning chemicals, or first responders and post-traumatic stress disorder (PTSD) following particular incidents. In 2020, some jurisdictions considered adding presumptions for first responders and/or "essential workers" and COVID-19.									
Jurisdiction	Statutory Cite for Presumed Causation	Any Presumed Causation Rules in Jurisdiction	Limited to Specific Occupations and/or Conditions		Is Presumption Rebuttable? How?	Other Limits to Presumption	Rules Prompted by and/or Specific to COVID-19 Pandemic		
			Yes/No	Presumption Rule(s) and Limits			Yes/No	Details	Expiry or Sunset Date
11	Massachusetts - Section 7A. In any claim for compensation where the employee has been killed or found dead at his place of employment or, in the absence of death, is physically or mentally unable to testify, and such testimonial incapacity is causally related to the injury, it shall be prima facie evidence that the employee was performing his regular duties on the day of injury or death and that the claim comes within the provisions of this chapter, that sufficient notice of the injury has been given and that the injury or death was not occasioned by the willful intention of the employee to injure or kill himself or another.								
12	Michigan - Michigan is a wage-loss state; given that, however, the establishment of disability does not create a presumption of wage loss. See Sec. 418.405(1) & (2) of the Michigan Statute.								
13	Michigan - 405(1): "Personal injury" includes respiratory and heart diseases, or illnesses resulting therefrom, that develop or manifest themselves during a period while the member of the fully paid fire department of an airport operated by a county, public airport authority, or state university or college; a is in the active service of a fully paid fire or police department of a city, township, or incorporated village employed or compensated upon a full-time basis; a member of a fully paid public fire authority employed and compensated upon a full-time basis; a county sheriff and the deputies of the county sheriff; a member of the state police, "personal injury": includes respiratory and heart diseases or illnesses resulting therefrom that develop or manifest themselves during a period while the member of the department is in active service of the department and that result from the performance of duties for the department are presumed to arise out of and in the course of employment in the absence of evidence to the contrary. 405(2): The Christopher R. Slezak First Responder Presumed Coverage Fund (the fund) was created by the legislature and is administered by the Director of the Workers' Disability Compensation Agency. The fund provides workers' disability compensation benefits to certain first responders as provided in statute, MCL 418.405(2). In order to qualify for benefits from the fund, the first responder at the time of filing must meet ONE of the following criteria: 1. Be a full time member of a fire department or public fire authority; or For a diagnosis on or after January 1, 2022, 2. Be a former full-time member of a fire department or public fire authority; or 3. Be a current or former part-time, paid on-call, or volunteer member of a fire department or public fire authority; or 4. Be a former forest fire officer/crash rescue officer. In addition, the first responder must also meet ALL of the following criteria: 1. Must have or have had 60 months or more active service in the department or public fire authority 2. Been diagnosed with any respiratory tract, bladder, skin, brain, kidney, lood, thyroid, testicular, prostate, lymphatic cancer, ovarian, breast or non-HPV cervical cancer 3. If diagnosed with ovarian, breast or non-HPV cervical cancer, the diagnosis must have been made on or after January 1, 2022. 4. Been exposed to the hazards incidental to fire suppression, rescue, or emergency medical services in the performance of his or her work-related duties with the department or authority. 5. Have applied for and done all things necessary to qualify for any pension benefits to which he or she may be entitled. The cancers described in the statute are presumed to arise out of and in the course of employment only with respect to a claim against the fund and in the absence of non-work-related causation or specific incidents that establish a cause independent of the employment. Neither mere evidence that the condition was preexisting, nor an abstract medical opinion that the employment was not the cause of the disease or condition, is sufficient to overcome the presumption for purposes of a claim against the fund. The presumption under this subsection may be rebutted by scientific evidence that the member or former member of the fire department or public fire authority was a substantial and consistent user of cigarettes or other tobacco products within the 10 years immediately preceding the date of injury, and that this use was a significant factor in the cause, aggravation, or progression of the cancer.								
14	Minnesota -The occupations which are eligible for each presumption listed are as follows: for the myocarditis, coronary sclerosis, pneumonia or its sequel presumption in 176.011, subd. 15(b), an employee employed on active duty with an organized fire or police department of any municipality, as a member of the Minnesota State Patrol, conservation officer service, state crime bureau, as a forest officer by the Department of Natural Resources, correctional officer or security counselor employed by the state or a political subdivision at a corrections, detention, or secure treatment facility, or sheriff or full-time deputy sheriff of any county; for the infectious or communicable disease to which the employee was exposed in the course of employment outside of a hospital, any individual who by nature of their position provides emergency medical care, or an employee who was employed as a licensed police officer under Minn. Stat. § 626.84, subd. 1; firefighter; paramedic; correctional officer or security counselor employed by the state or a political subdivision at a corrections, detention, or secure treatment facility; emergency medical technician; or licensed nurse providing emergency medical care in 15(c), a firefighter on active duty with an organized fire department who is unable to perform duties in the department; in 15(e), an employee who was employed on active duty as: a licensed police officer; a firefighter; a paramedic; an emergency medical technician; a licensed nurse employed to provide emergency medical services outside of a medical facility; a public safety dispatcher; a correctional officer or security counselor employed by the state or a political subdivision at a corrections, detention, or secure treatment facility; a sheriff or full-time deputy sheriff of any county; or a member of the Minnesota State Patrol; and in 15(f), an employee employed as a licensed peace officer under Minn. Stat. § 626.84, subd. 1; firefighter; paramedic; nurse or health care worker, correctional officer, or security counselor employed by the state or a political subdivision at a corrections, detention, or secure treatment facility; emergency medical technician; a health care provider, nurse, or assistive employee employed in a health care, home care, or long-term care setting, with direct COVID-19 patient care or ancillary work in COVID-19 patient units; and workers required to provide child care to first responders and health care workers under Executive Order 20-02 and Executive Order 20-19.								
15	Minnesota - The employee's contraction of COVID-19 must be confirmed by a positive laboratory test, or, if a laboratory test was not available to the employee, as diagnosed and documented by the employee's licensed physician, licensed PA, or licensed APRN, based on the employee's symptoms. A copy of the positive test or written documentation of the diagnosis must be provided to the employer or insurer. The date of injury for an employee who contracted COVID-19 under 176.011, subd. 15 (f) is the date that the employee was unable to work due to a diagnosis of COVID-19, or due to symptoms that were later diagnosed as COVID-19, whichever occurred first.								
16	New Jersey - Regulations regarding this statute are in review and have not been published at this time.								
17	New York - Workers' Compensation Law § 47 contains special presumptions for occupational diseases: 1) permits the presumption that a worker's disease, if identified in Column One of WCL § 3(2), was due to the nature of the employment if the work process listed in Column Two of WCL § 3(2) for the disease, was the kind of work the employee did immediately before the disability; 2) permits the presumption that if a worker has been exposed to harmful dust in New York for 60 days or more, it is an injurious exposure; 3) permits the presumption that exposure to compressed air, within or without New York, is an injurious exposure; and 4) permits the presumption that when any state or local correction officer as defined in Criminal Procedure Law § 2.10(25), safety and security officer employed by the Office of Mental Health, security hospital treatment assistant employed by the Office of Mental Health, any uniformed court officer or court clerk of the Unified Court System having the powers of peace officer, court reporter or court interpreter is exposed to the blood or bodily fluid of an individual, incarcerated, confined or otherwise, during the course of his or her employment, and the exposure was reported in writing to the employer within 24 hours of the exposure, that exposure is an injurious exposure if, subsequent to such exposure, the employee is diagnosed with a blood-borne disease.								
18	Ohio - Yes. Evidence that the firefighter's exposure, outside the scope of the firefighter's official duties, to cigarettes, tobacco products, or other conditions presenting an extremely high risk for the development of the cancer alleged, was probably a significant factor in the cause or progression of the cancer. Evidence that shows, by a preponderance of competent scientific evidence, that exposure to the type of carcinogen alleged did not or could not have caused the cancer being alleged. Evidence that the firefighter was not exposed to an agent classified by the international agency for research on cancer as a group 1 or 2A carcinogen. Evidence that the firefighter incurred the type of cancer alleged before becoming a member of the fire department. The firefighter is 70 years of age or older.								
19	Oklahoma - Yes. A. Unless an employee gives oral or written notice to the employer within thirty (30) days of the date an injury occurs, the rebuttable presumption shall be that the injury was not work-related. Such presumption must be overcome by a preponderance of the evidence. B. Unless an employee gives oral or written notice to the employer within thirty (30) days of the employee's separation from employment, there shall be a rebuttable presumption that an occupational disease or cumulative trauma injury did not arise out of and in the course of employment. Such presumption must be overcome by a preponderance of the evidence.								
20	Oregon - OAR 436-060-0141, "Claims for COVID-19 or Exposure to SARS-CoV-2," requires that insurers conduct reasonable claim investigations in COVID-19 claims, but does not establish a compensability presumption.								
21	Pennsylvania - Pennsylvania has 19 presumptions of causation covering a variety of occupations and illnesses. See the statute for a complete listing which includes when presumptions are rebuttable. 77 P.S. 27.1.								
22	Rhode Island - Firefighters, police, and other rescue crews do have some rules about presumed cause of injury, but are not regulated by the Division of Workers' Compensation. Their benefits are regulated under RI Gen L § 45-19 and the presumption is described in § 45-19-16.								
23	Tennessee - Emergency rescue worker means any person employed full-time by the state or any political subdivision of the state, including any county having a metropolitan form of government as a firefighter, paramedic, emergency medical technician or emergency medical technician advanced; emergency rescue worker does not include any person employed by a public hospital or any person employed by a subsidiary thereof.								
24	Texas - Presumption is retroactive and provides a process to allow certain first responders or their beneficiaries, who previously filed a SARS-CoV-2 or COVID-19 claim for benefits and whose claim was denied by the insurance carrier, to request in writing that the insurance carrier reprocess the claim. Insurance carriers must apply the changes in law made under SB 22 to those reprocessed claims. Insurance carriers must reprocess a claim within 60 days after receiving a written request. The COVID-19 presumption also allows new claims to be considered "timely filed" even if they missed certain other statutory deadlines.								

Table 17 "Presumption" Regulations: When an Injury or Illness Is Presumed to Have Been Acquired Through Workplace as of January 1, 2025									
Regulations regarding "Presumption of Causation" where specific medical conditions are presumed to have been caused by the worker's job, acquired in the workplace, and thus covered by workers' compensation. Generally this applies to specific illnesses and occupations where they are common, and where there is a well-understood causal mechanism. Some examples are firefighters and certain cancers commonly caused by burning chemicals, or first responders and post-traumatic stress disorder (PTSD) following particular incidents. In 2020, some jurisdictions considered adding presumptions for first responders and/or "essential workers" and COVID-19.									
Jurisdiction	Statutory Cite for Presumed Causation	Any Presumed Causation Rules in Jurisdiction	Limited to Specific Occupations and/or Conditions		Is Presumption Rebuttable? How?	Other Limits to Presumption	Rules Prompted by and/or Specific to COVID-19 Pandemic		
			Yes/No	Presumption Rule(s) and Limits			Yes/No	Details	Expire or Sunset Date
25	Washington - RCW 51.32.181 - Occupational disease presumption for frontline employees during public health emergencies. Under the presumption, any infectious or contagious diseases that are transmitted through respiratory droplets or aerosols, or through contact with contaminated surfaces and are the subject of a public health emergency are considered occupational diseases under RCW 51.08.140 during a public health emergency. Frontline employees must provide verification, as required by the department by rule, that they contracted the infectious or contagious disease that is the subject of the public health emergency. RCW 51.32.185 - Occupational disease presumption for firefighters and fire investigators. For firefighters as defined in RCW 41.26.030 (17)(a), (b), (c), and (h) covered under title 51, including supervisors, employed on a full-time, fully compensated basis as a firefighter of a private sector employer's fire department that included over fifty such firefighters, and public employee fire investigators there exists a prima facie presumption that: respiratory disease; any heart problems, experienced within seventy-two hours of exposure to smoke, fumes, or toxic substances, or experienced within twenty-four hours of strenuous physical exertion due to firefighting activities; cancer; and infectious disease are occupational diseases under RCW 51.08.140. For firefighters as defined above and law enforcement officers as defined in RCW 41.26.030(19) (b), (c), and (e), who are covered under title 51, there shall exist a prima facie presumption that: post-traumatic stress disorder is an occupational disease. In the case of law enforcement as defined above, there exists a prima facie presumption that: Any heart problems, experienced within seventy-two hours of exposure to smoke, fumes, or toxic substances, or experienced within twenty-four hours of strenuous physical exertion in the line of duty; and infectious diseases are occupational diseases under RCW 51.08.140. RCW 51.32.390 - Occupational disease presumption for health care employees during a public health emergency. Under the presumption covers any infectious or contagious diseases which are the subject of a public health emergency are considered occupational diseases under RCW 51.08.140. Health care employees must provide verification, as required by the department by rule, that they are in quarantine or have contracted the disease after exposure to the infectious or contagious disease that is the subject of the public health emergency.								
26	Washington - RCW 51.32.181 and 51.32.390 - For the purposes of this subsection (4), the day on which the occupational disease was contracted is whichever date occurs first of the following: (i) The date that the worker first missed work due to symptoms of the infectious or contagious disease; (ii) The date the worker was quarantined by a medical provider or public health official; or (iii) The date the worker received a positive test result confirming contraction of the infectious or contagious disease. (b) If leave or similar benefits are paid to the frontline employee as part of a federal or state program for these employees during the public health emergency, temporary total disability benefits are not payable for the same period of time covered by the federal or state program. RCW 51.32.185 - The presumption established in subsection (1)(a)(iii) of this section shall only apply to the following cancers: Prostate cancer diagnosed prior to the age of fifty, primary brain cancer, malignant melanoma, leukemia, non-Hodgkin's lymphoma, bladder cancer, ureter cancer, colorectal cancer, multiple myeloma, testicular cancer, kidney cancer, mesothelioma, stomach cancer, nonmelanoma skin cancer, breast cancer in women, and cervical cancer. The presumption established in subsection (1)(a)(iii) of this section shall only apply to any active or former firefighter or fire investigator who: (i) Has cancer that develops or manifests itself after the firefighter or fire investigator has served at least ten years; and (ii)(A) Was given a qualifying medical examination upon becoming a firefighter or fire investigator that showed no evidence of cancer; or (B)(I) For a firefighter or fire investigator who became a firefighter or fire investigator on or after July 28, 2019, the employer did not provide a qualifying medical examination upon becoming a firefighter or fire investigator; or (II) For a firefighter or fire investigator who became a firefighter or fire investigator before July 28, 2019, the employer did not provide a qualifying medical examination upon becoming a firefighter or fire investigator and the employer provides a qualifying medical examination on or before July 1, 2020. If a firefighter or fire investigator described in this subsection (3)(a)(ii)(B)(II) did not receive a qualifying medical examination before July 1, 2020, or is diagnosed with a cancer listed in (b) of this subsection at the time of the qualifying medical examination under this subsection (3)(a)(ii)(B)(II) and otherwise meets the requirements of this section, the presumption established in subsection (1)(a)(iii) of this section applies. Further limits include length of employment, start date, age diagnosis for specific cancers.								
27	West Virginia - Senate Bill 170 (effective March 8, 2024) revised existing statute to further include bladder cancer, mesothelioma, and testicular cancer to the existing types of cancer that may be presumed to have been incurred as a result of being a professional firefighter.								
28	West Virginia - Yes, presumption fails if criteria not met: (A) active employment by a fire department as a professional firefighter for a minimum of two years prior to cardiovascular injury or cardiovascular or pulmonary disease onset (B) injury or onset occurred within 6 months of actual firefighting, whether field or training, and (C) regarding leukemia, lymphoma, multiple myeloma, bladder cancer, mesothelioma, or testicular cancer, was employed by a fire department as a professional firefighter for a minimum of 5 years in the state prior to onset, has not used tobacco products for at least 10 years, and is not over age 65.								
29	West Virginia - W. Va. Code §55-19-4. Claims arising from the COVID-19 pandemic - Notwithstanding any law to the contrary, except as provided by this article, there is no claim against any person, essential business, business, entity, health care facility, health care provider, first responder, or volunteer for loss, damage, physical injury, or death arising from COVID-19, from COVID-19 care, or from impacted care.								
30	Wisconsin - A first responder under 2019 Wisconsin Act 185 is defined as an employee or volunteer for an employer that provides firefighting, law enforcement, medical or other emergency services, and who has regular direct contact with, or is regularly in close proximity to, patients with COVID-19, or other members of the public requiring emergency services within the scope of the individual's work for the employer.								
31	British Columbia - All other presumptions can be found in Policy item #97.20 of RS&CM.								
32	British Columbia - The rules and limits of the mental disorder presumption are further discussed in policy in Item C3-24.10 of the RS&CM.								
33	British Columbia - Section 137 of the Act refers to Schedule 1 which lists occupational diseases related to specific process or industry.								
34	New Brunswick - Regulation 2009-72 - General Regulation - Firefighters' Compensation Act outlines the prescribed diseases and the required length of service.								
35	Nova Scotia - 2022 responses. No 2025 data were provided.								
36	Nova Scotia - See https://www.novascotia.ca/just/regulations/regs/wocfire.htm .								
37	Nova Scotia - See https://www.novascotia.ca/just/regulations/regs/wocgen.htm .								
38	Ontario - Section 13(2) - General presumption. Section 15(3) for occupational diseases.								

Table 18 Other Administrative Procedures as of January 1, 2025

Regulations regarding the jurisdiction's use of the internet, document management, and additional powers of the defense attorney. The table shows information about three additional processes stakeholders have discussed in recent years. First, about the electronic storage of claim documents and whether any parties to the claim have online access. Second, whether jurisdictions permit claim hearings, conferences, or other processes to happen virtually, by video or audio conference. Third, whether the jurisdiction allows the payor to initiate legal proceedings against third parties without the worker's agreement.

Jurisdiction	Jurisdiction Provides Online Access to Claim Information	Link to Website or Database	The Following Claim Documents (e.g., letters, notices, key dates) Are Available Online	Parties Outside of Agency Who Can Access System to Monitor Claim Progress				Hearings, Conferences and/or Mediation over Video or Audio		Insurer May Initiate Legal Proceedings Without Worker's Agreement (yes/no)		
				Worker's Attorney	Worker	Employer	Insurer/TPA	Are Remote Meetings Permitted? Under Specific Conditions?	Was Permission Due to COVID-19 Pandemic, and Will This Continue?	Malpractice Claim	Subrogation of Third-Party Awards	Other Action
Alabama	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes, and remote meetings will be continued beyond the pandemic as long as all parties involved are willing to conduct the mediation electronically and not in person	N/A	Yes	Yes
Alaska	No	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes (1)	Yes (1)	Yes (1)
Arizona	Yes	https://azicawc.force.com/claims/	All	Yes	Yes	Yes	Yes	Yes	Yes, and yes	Yes (2)	Yes (2)	
Arkansas	No	(3)	N/A	No	No	No	No	Mediations are allowed by telephone and have been for several years. Zoom or Teams have been used but only specifically at the request of the parties. Hearings are never done by telephone but have been conducted by Zoom or Teams	This may continue after the pandemic but only on a limited basis and by request of the parties	Yes, only if third party	The carrier or the employer may maintain an action in tort against any third party responsible for the injury or death of a claimant. This is found in Ark. Code Ann. § 11-9-410, § 11-9-908 allows the same for self-insurer guaranty groups	Yes, against negligent third party
California	Yes	For case parties: https://www.dir.ca.gov/dwc/EAMS/EAMS.htm Public information case search: https://www.dir.ca.gov/dwc/EAMS/EAMS_PublicInformationSearch.htm	For case parties: Electronic Adjudication Management System (EAMS) tracks all key dates and contains all filed case documents, orders/decisions issued by judge For public: case information available, but limited due to privacy issues	Yes	Yes	Yes	Yes	Yes	Yes, instituted at the beginning of the COVID-19 public health emergency when Governor issued "stay at home" order As of 10/1/2021: trials, lien trials, and expedited hearings resumed in person; settlement conferences, status conferences, lien conferences continue to be held remotely by telephone	Yes		
Colorado	No	N/A	N/A					Yes	Not related to pandemic and will continue	Yes	Yes	
Connecticut	No	None	None	No	No	No	No	Allowed during Covid-19 pandemic. Currently only allowed at judge's discretion	Yes. Currently allowed at judge's discretion	Yes	Yes	No
Delaware	No (4)	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes		Yes (5)	
District of Columbia	No			No	No	No	No	Yes	No. Yes.			
Florida (6)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Georgia	Yes (7)	https://sbwc.georgia.gov/organization/about-state-board-workers-compensation/icms https://sbwc.georgia.gov/icms/edi-implementation/edi-service-providers	All Board forms and documents are uploaded or scanned into ICMS (integrated claims management system) for processing	Yes (8)	Yes (8)	Yes, self-insured employers/funds (8)	Yes, insurance/claims offices (8)	Yes, by agreement of the parties	Yes, virtual processes created during pandemic. Will continue by agreement of parties	No	Yes	N/A
Hawaii	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes/No	No	No	
Idaho	No as of Jan 1, 2025 but in progress	No as of Jan 1, 2025 but in progress	No as of Jan 1, 2025, but in progress	No as of Jan 1, 2025 but in progress	No as of Jan 1, 2025, but in progress	No as of Jan 1, 2025, but in progress	No as of Jan 1, 2025, but in progress	Yes	Remote meetings were permitted pre-pandemic and will continue	n/a	Yes, in certain circumstances per Idaho Code 72-223	Yes, for certain actions including a declaratory ruling or to recover funds in accordance with Idaho Code 72-316
Illinois	Yes	https://fwcc.dynamics365portals.us/	All	Yes	Yes	Yes	Yes	Some. Trials must be in person	Yes, and yes	No	No	May not initiate
Indiana	No	N/A	None	N/A	N/A	N/A	N/A	Yes	No	No	Yes	None
Iowa	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Kansas	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Kentucky	Yes	Litigation Management System (LMS)	Most everything is available online	Yes	Yes	Yes	Yes	Zoom is allowed at ALJ discretion	Yes	N/A	In the name of the employee	
Louisiana	Yes	No	N/A	No	No	No	No	Yes	Yes, and yes	No	Yes	Yes, per La. R.S. 23:1314 E (1)
Maine	No							Yes - Troubleshooting and mediations are being conducted only by phone. Hearings are being conducted by phone or remote technology (Zoom)	https://www.maine.gov/wcb/COVID_FAQ_5-18-2023.pdf	39-A ME Rev Stat §107. Liability of 3rd persons; election of employee; subrogation		
Maryland	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Massachusetts	No	Yes (9)	All case-related documents (10)	Yes (9)	Yes (10)	Yes (10)	Yes (9)	Yes	Yes, and yes	Yes	Yes	Yes (11)
Michigan	No	N/A	N/A	No	No	No	No	Yes	Yes, and yes	No	Yes	Mediation/trial

Table 18 Other Administrative Procedures as of January 1, 2025

Regulations regarding the jurisdiction's use of the internet, document management, and additional powers of the defense attorney. The table shows information about three additional processes stakeholders have discussed in recent years. First, about the electronic storage of claim documents and whether any parties to the claim have online access. Second, whether jurisdictions permit claim hearings, conferences, or other processes to happen virtually, by video or audio conference. Third, whether the jurisdiction allows the payor to initiate legal proceedings against third parties without the worker's agreement.												
Jurisdiction	Jurisdiction Provides Online Access to Claim Information	Link to Website or Database	The Following Claim Documents (e.g., letters, notices, key dates) Are Available Online	Parties Outside of Agency Who Can Access System to Monitor Claim Progress				Hearings, Conferences and/or Mediation over Video or Audio		Insurer May Initiate Legal Proceedings Without Worker's Agreement (yes/no)		
				Worker's Attorney	Worker	Employer	Insurer/TPA	Are Remote Meetings Permitted? Under Specific Conditions?	Was Permission Due to COVID-19 Pandemic, and Will This Continue?	Malpractice Claim	Subrogation of Third-Party Awards	Other Action
Minnesota	Yes (12)	https://campus.dli.mn.gov/user/login and https://efile.oah.mn.gov/login	Reports and other documents in the division file	Yes (13)	Yes	Yes	Yes	Administrative conferences and some workers' compensation proceedings at the Office of Administrative Hearings (OAH) may take place by audio and/or video	Except for certain proceedings, OAH continues to allow proceedings using Microsoft Teams	Yes	Yes	Yes (14)
Mississippi	Yes	https://www.mwcc.ms.gov/ato/s/#/login	All pleadings and any documents filed by the parties or Commission to an attorney of record	Yes	No	No; E/C Attorney of Record	No; E/C Attorney of Record	Yes	No	No	Yes	N/A
Missouri	Jurisdiction did not provide responses for this table											
Montana	No	N/A	N/A	N/A	N/A	N/A	N/A	Yes, as long as reasonable accommodations are made for participation	Remote meetings were taking place prior to the pandemic and increased during the pandemic and will continue for the foreseeable future	N/A	Yes	N/A
Nebraska	No	Not available	None	(15)	(15)	(15)	(15)	Yes	Yes; unknown	(16)	(16)	(16)
Nevada	Limited	Webportal with insurer/TPA security and permissions only	Blank claim forms available at https://dir.nv.gov/WCS/home/	No	No	No	Yes	Yes	Yes, related to pandemic; unknown if it will continue beyond	N/A	Yes	Yes
New Hampshire	No (17)	N/A	First Report of Injury, NH Workers' Compensation Medical Form, Permanent Impairment Award, Memo of Payment, Compensation for Death Authorization	No	No	No	No	Yes, per request	Yes. Will continue for the foreseeable future	No	Yes	Petition to reduce or terminate indemnity benefits
New Jersey	Yes	(18)	Claim petitions, motions, orders	Yes	No	In certain circumstances	Yes	Due to the pandemic, most WC proceedings are conducted remotely. Preapproval must be granted for in-court proceedings, i.e., hearings, motions	Yes. Unknown if it will continue	No	Yes, in the NJ Superior Court	
New Mexico	Yes, if in formal dispute resolution/adjudication process	https://workerscomp.nm.gov/WCA-eServices	Legal pleadings	Yes	Yes	Yes	Yes	Yes	Telephonic mediations and hearings were common before pandemic. After pandemic increased use of web-based platforms. Anticipate that telephonic and web-based meetings/proceedings will continue	Yes, but very fact-dependent	Yes	Determination of indemnity and medical benefits
New York	(19)	(20)	(21)	Yes	Yes	Yes	Yes	Yes (22)	No (22)	Yes, if the worker fails to commence action within time limits. Insurer must provide written notice to worker of its intent to commence an action	Yes, if the worker fails to commence action within time limits. Insurer must provide written notice to worker of its intent to commence an action	N/A
North Carolina	No	Deputy Commissioner and Full Commission decisions, which are public records, can be found here: https://www.ic.nc.gov/livelink/livelink.exe?func=LL.getlogin&NextURL=%2Flivelink%2Flivelink%2Eexe%3Ffunc%3D%26objAction%3Dsearchprompt	None at this time, but see (23)	(23)	(23)	(23)	(23)	(24)	(25)	If the malpractice claim is a third party claim, then yes, after 12 months has passed from the date of injury or death if the injured worker is deceased, the injured worker's personal representative) has not settled or initiated litigation in the third party claim. See 97-10.2(c). Note, however, that the employer has no statutory right to a lien on the proceeds of a legal malpractice case arising from an attorney's failure to timely file a third party action. (See Grant Construction Co. v. McRae, 146 N.C. App. 370, 553 S.E.2d 89 (2001)	Yes, after 12 months has passed from the date of injury or death if the injured worker (or, if injured worker is deceased, the injured worker's personal representative) has not settled or initiated litigation in the third party claim. See 97-10.2(c)	Yes, assuming the "other action" is a cause of action against a third party who is alleged to have legal liability for the injury or death that is the subject of the workers' compensation claim, in which case G.S. 97-10.2(c) applies in this scenario, as well
North Dakota	No	No	N/A	No	No	No	No	Yes	Precipitated by the pandemic; however it is unlikely that we will ever change our policy now. We will most likely continue with video meetings, etc.	N/A	N/A	N/A
Ohio	Yes, but for parties only	N/A	To parties only	With authority	Yes	Yes	Yes	Yes (26)	Yes (26)	Yes (27)	Yes	Yes (27)
Oklahoma	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A

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Jurisdiction	Jurisdiction Provides Online Access to Claim Information	Link to Website or Database	The Following Claim Documents (e.g., letters, notices, key dates) Are Available Online	Parties Outside of Agency Who Can Access System to Monitor Claim Progress				Hearings, Conferences and/or Mediation over Video or Audio		Insurer May Initiate Legal Proceedings Without Worker's Agreement (yes/no)		
				Worker's Attorney	Worker	Employer	Insurer/TPA	Are Remote Meetings Permitted? Under Specific Conditions?	Was Permission Due to COVID-19 Pandemic, and Will This Continue?	Malpractice Claim	Subrogation of Third-Party Awards	Other Action
Oregon	No [28]	N/A	N/A	N/A	N/A	N/A	N/A	Yes - unconditional	Remote hearings, conferences, and mediation preceded the pandemic and will continue	No	Yes	N/A
Pennsylvania	Yes	https://www.wcais.pa.gov/OL/AM/PUB/Login.aspx	Various documents relating to the claim, medical issues, and disputes	Yes	Yes	Yes	Yes	Remote hearings are legal without special conditions	Implemented as a result of the pandemic. Expected to continue for most hearings	No	No	N/A
Rhode Island	No	N/A	N/A	N/A	N/A	N/A	N/A	Yes	No	Yes [29]	Yes [29]	
South Carolina	Yes [30]	https://wccprogress.sc.gov/web/index.html	All Claim documents	Yes	Yes	Yes and attorney if applicable	Yes and attorney if applicable	Yes; no specific conditions	Yes	Yes; 20 day notice required	Yes; 20 day notice required	Yes; 20 day notice required
South Dakota	No	No						Remote meetings are legal and there are no specific conditions required. They are not related to the pandemic and will be available in the future.	No	Yes	Yes	Yes
Tennessee	In part [31]	https://wc.tn.gov/TNComp	Court of WC Claims active cases	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No
Texas	No							Yes [32]	No [33]	Yes	Yes	
US Federal Programs - FECA	Yes	https://ecomp.dol.gov/ [34]	Entire case file [34]	Yes	Yes	Yes	No	Yes	Not related; will continue	N/A	N/A	N/A
US Federal Programs - Longshore	Yes	https://dlhwc.dol.gov/#/	Parties to the claim [35]	Yes	Yes	Yes	Yes	Yes	No. This was permitted prior to COVID and will continue	N/A	N/A	N/A
Utah	No	N/A	N/A	No	No	No	No	Yes	N/A	No	No	No
Vermont	No		None [36]					Remote meetings are legal and require no specific conditions	Yes; likely yes			21 V.S.A. § 624(c) The settlement and release by the employee shall not be a bar to action by the employer or its insurance carrier to proceed against the third party for any interest or claim it might have
Virginia	Yes	https://www.workcomp.virginia.gov/webfile	All documents in the file	Yes	Yes	No	Yes	Yes	Greatly expanded due to the pandemic; has continued to some degree beyond	Yes	Yes	
Washington	Yes	https://secure.lni.wa.gov/home/signup.aspx	Letters, orders, dates, chart notes, employer documents, secure messages, treatment requests	Yes	Yes	Yes	Yes	Yes. Though most are in person with a remote option	Yes. Will likely continue	Yes	Yes	No
West Virginia	Litigation progress is tracked by the Board of Review through their e-filing process	Public access is not available; attorneys for both claimant and/or employer do have access to view and submit documents through an online portal	Litigation documents, including evidence, notices, orders, decisions, and closing arguments	Yes, access in specific claim(s) to licensed attorney	No	No [37]	No [37]	Hearings shall be conducted virtually, by telephone conference call, or by other similar means. Hearings will not be conducted in person unless the Board of Review finds good cause has been established to conduct a hearing in person [38]	Remote/Virtual hearings were implemented due to the pandemic and are continued post-pandemic	No [39]	No [39]	No [39]
Wisconsin	No	N/A	N/A	[40]			[41]	Yes	Yes [42]			Allowed in Circuit Court
Wyoming	No	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Not related to pandemic and will continue	No	No	No
Canadian Jurisdictions Participating (stated in Canadian currency)												
British Columbia	Yes	https://www.worksafebc.com/en/claims/manage-claim/view-submit-claim-information	Claim status; correspondence related to the claim, including decision letters and medical reports; notes from conversations with claims team members; payment and wage rate information; direct deposit information; contact details and personal information	Yes [43]	Yes [43]	Yes [44]	No	Yes	Yes. Will continue	Yes [45]	Yes	Yes [45]

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Jurisdiction	Jurisdiction Provides Online Access to Claim Information	Link to Website or Database	The Following Claim Documents (e.g., letters, notices, key dates) Are Available Online	Parties Outside of Agency Who Can Access System to Monitor Claim Progress				Hearings, Conferences and/or Mediation over Video or Audio		Insurer May Initiate Legal Proceedings Without Worker's Agreement (yes/no)		
				Worker's Attorney	Worker	Employer	Insurer/TPA	Are Remote Meetings Permitted? Under Specific Conditions?	Was Permission Due to COVID-19 Pandemic, and Will This Continue?	Malpractice Claim	Subrogation of Third-Party Awards	Other Action
New Brunswick	Yes	https://www.worksafenb.ca/myervices/	Payment information, claim status, prescription and physiotherapy treatment history	No	Yes	No [46]	No	Yes, must meet requirements under the Right to Information and Protection of Privacy Act, the Personal Health Information Privacy Act, and the Official Languages Act	Implementation as a result of pandemic, has continued as part of our case management approach when it best serves the client	Yes [47]	Yes [47]	Yes [47]
Nova Scotia as of January 1, 2022 [48]	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Yes	No	N/A	Yes	N/A
Ontario	No	It is accessible to the parties through access requests for the file	N/A	N/A	N/A	N/A	N/A	Yes	N/A (Remote hearings were also done prior to the pandemic)	Yes	Yes	Yes
Prince Edward Island	No	N/A	N/A	N/A	N/A	N/A	N/A			N/A	No [49]	N/A
Saskatchewan	Yes	https://myaccount.wcb.sask.ca/online-services	Claim information including payment history and form submission application	Yes [51]	Yes	Yes [51]	N/A	Yes	Yes [52]	No	Yes	Yes [53]
Notes: Amounts for Canadian jurisdictions are stated in Canadian currency; amounts for U.S. jurisdictions are stated in U.S. currency.												
1 Alaska - AS 23.30.015.												
2 Arizona - The right to pursue a subrogation claim automatically gets assigned to the carrier after one year.												
3 Arkansas - The state website links to a claims database that is maintained by a third party. A user must have a subscription to it and pay for each search. It is primarily used by businesses that want to search backgrounds of potential employees to learn whether they previously had a workers' compensation claim. Our Compliance division will look up a claimant and provide a file no. for a \$5.00 fee. The requestor can obtain copies of the claimant's file from our Clerk's office if they need more detailed information.												
4 Delaware - Maintains internal system. Outside parties can request copies for an administrative fee.												
5 Delaware - 19 Del. C section 2363(a) - It is only the injured worker, dependent or personal representative and does not commence such a third party action within 260 days of DOI.												
6 Florida - The Office of the Judges of Compensation Claims has authority over the workers' compensation legal dispute process. See https://www.fljcc.org/jcc/ .												
7 Georgia - You can file directly into ICMS (at no cost) or file by EDI (Electronic Data Interchange) and it will go into ICMS. The role you have in the system will determine access and what you can file into ICMS (integrated claims management system).												
8 Georgia - You must register with the Board first to have access.												
9 Massachusetts - The Dept. of Industrial Accidents allows parties to a disputed or reported matter access to the case file. This includes attorneys, insurers, injured workers, employers, and TPAs.												
10 Massachusetts - The injured worker or employer must apply to the DIA for access. These parties are only allowed to view cases and documents to which they are a direct party.												
11 Massachusetts - An insurer may initiate a second injury fund (G.L. c. 152, Sec. 37) recovery without the consent of the injured worker.												
12 Minnesota - Parties can access claims through the Work Comp. Campus system. There is a separate system for claims at the Office of Administrative Hearings.												
13 Minnesota - The attorney must file with the commissioner in Campus a notice of representation of the worker. If so, they have the same access to documents in the division file that the represented person has, unless the notice specifically limits their access. See Minn. Stat. § 176.231, subd. 9a (b).												
14 Minnesota - An employer/insurer can bring an action against a third party tortfeasor without employee consent. See Minn. Stat. § 176.061 for specific information on third-party liability.												
15 Nebraska - A public records request for information related to workers' compensation claims may be made.												
16 Nebraska - These actions are outside of the jurisdiction of the Nebraska Workers' Compensation Court.												
17 New Hampshire - The Department maintains some form of internal tracking of claims.												
18 New Jersey - Attorneys, insurance carriers, and third party administrators must register with the NJ Division of Workers' Compensation to gain access to the system known as "COURTS." At that time, the link will be provided by the NJ DWC staff.												
19 New York - The Workers' Compensation Board does not track claim progress online. Over 25 years ago, the Board built an electronic Claims Information System (CIS), which contains all information, documents, and FROI/SROI data, for all claims. In addition Board staff perform most of the work on claims in CIS including sending correspondence and notices to parties, scheduling hearings, recording outcomes from hearings, and creating and issuing decisions. The Board tracks the status of claims through CIS. Parties (claimants and payors), legal representatives of claimants, and those the payors grant access to in accordance with Workers' Compensation Law § 110-a, have online access to the case documents and certain information through eCase. To access eCase a party or legal representative must have a user ID and password, and only has access to claims in which it is a party or legal representative. In 2022 the Board implemented OnBoard Limited Release which is the first part of a new system. OnBoard is web based and used by claims administrators (carriers, self-employed employers, and third-party administrators), medical providers, and Board staff with regards to prior authorization requests. A provider will submit a PAR through OnBoard, the claims administrator will review and act on the request, and when necessary Board staff will review and resolve denials.												
20 New York - The Board's Claims Information System is not online. However, eCase, which is used by parties and legal representatives, is an online limited version of CIS. Both OnBoard Limited Release and eCase through the Board's website, www.wcb.ny.gov .												
21 New York - All documents submitted to the Board or issued by the Board to the parties, as well as information about the claims and parties, documents created as part of the PAR process in OnBoard, and FROI/SROI data are available online through eCase.												
22 New York - The creation and use of the Board's virtual hearing capability predated the pandemic, as the first virtual hearings were held in November 2017. Since March 2019 all hearings in claims for workers' compensation benefits have been conducted using the Board's virtual hearing process which allows parties, attorneys/representatives, witnesses, and others to attend workers' compensation hearings by video using their mobile device or computer. Prior to March 2020, parties had the option to appear in person at a hearing or to attend remotely. From March 16, 2020, through October 7, 2024, parties were no longer allowed to attend hearings in person and were required to attend hearings remotely using the virtual hearing process. The Workers' Compensation Law Judge calls the claimant at the start of the hearing. Beginning October 8, 2024, the Board reopened to the public by appointment only, for in-person hearings and other appointments. An in-person hearing is only scheduled if a party requests at a hearing to have their next hearing in person at a Board location. Such requests need to be made to the administrative law judge during a scheduled virtual hearing. If such a request is not made, hearings will remain virtual. If a represented party requests to attend their hearing in person, their attorney or legal representative is required to appear in person as well.												
23 North Carolina - A new consolidated case management system was launched in 2024, and future developments to the system will allow parties to access their cases online.												
24 North Carolina - Remote hearings are allowed at both the Deputy Commissioner and Full Commission levels. For Deputy Commissioner hearings, the Deputy Commissioner may grant a remote hearing via videoconference upon a showing of good cause. For Full Commission hearings, the parties may jointly agree to a remote hearing via videoconference and if all parties do not agree to a remote hearing via videoconference, a party who wishes to appear remotely at the otherwise in-person hearing may request to appear via telephone.												
25 North Carolina - Videoconference hearings came about in response to the COVID-19 pandemic. Telephone hearings were utilized and allowed at the administrative level and at the Full Commission level prior to the pandemic. Both types of remote hearings are likely to continue to be utilized and allowed under appropriate circumstances.												
26 Ohio - Remote hearings, conferences, and mediations are legal in Ohio if specific conditions are met, and will continue to be so post-pandemic.												
27 Ohio - BWC has the statutory authority per O.R.C. Sections 4123.93 and 4123.931 to bring a cause of action independent of an injured worker under most any theory in tort.												
28 Oregon - While the jurisdiction does not track claim progress online, specific claim processors (insurers, self-insured employers, and service companies) may do so, and those databases may be available to policyholders and their injured workers.												
29 Rhode Island - The general question was, "can the insurer initiate legal proceedings without worker's agreement?" The answer to that is yes, with some limitations. Those limitations are contained in Section 28-35-58 of the Workers' Compensation Act. Section 28-35-58 (b) provides that where an employee has not commenced legal action within 2 years and 8 months after the injury, the employer may pursue subrogation and commence a suit with or without the employee's consent or agreement. To do so, the insurer or employer must have 26 weeks or 6 months before the expiration of the 2 years and 8 months have notified the employee that failure to commence action within 2 years and 8 months after the injury will operate as an assignment of his right of action to the employer. After commencement of the action, the attorney for the employer must again notify the employee in writing by personal service or certified mail of the action and the name of the Court where it was filed. The employee can then join as a Plaintiff in that suit.												
30 South Carolina - Claim information is available through our e-Case portal for claim parties only.												
31 Tennessee - This is only for cases where a Dispute Certification Notice has been issued to the Court of Workers' Compensation Claims (CWCC). The cases must be active before the CWCC.												
32 Texas - The informal mediation stage in the dispute process is now held remotely unless there is good cause to hold it in person. The contested case hearing is still an in-person hearing with a good cause exception for it to be held remotely.												
33 Texas - Contested case hearings were held remotely during the pandemic but began again in person on August 2, 2021.												
34 US Federal Programs - FECA - FECA does not employ the Employees' Compensation Operations and Management Portal (ECOMP) to track claim processes internally; however, FECA has employed the ECOMP Entity Management System which allows designated representatives, such as law firms, union representatives, or individual attorneys, to access case data and case file documents electronically. ECOMP allows Federal Employee's or Contractors who have sustained a work-related injury or illness to report the incident to their supervisor. Stakeholders and interested parties can use ECOMP to upload documents to active FECA cases.												
35 US Federal Programs - Longshore - The Employees' Compensation and Management Portal (ECOMP) is the case tracking system.												
36 Vermont - Forms can be accessed at https://labor.vermont.gov/workers-compensation .												
37 West Virginia - Claimant attorney and employer attorney have access to the online portal for information regarding claims in which they are involved; however, claimants, employers, and TPAs do not have access.												

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38	West Virginia - Board of Review procedural rule (W.Va. Code St. R. 102-1-8.2.): Date and time of administrative hearings. Upon a timely request for a hearing, the Board of Review shall determine the date and time such hearing will be conducted. Hearings shall be conducted virtually, by telephone conference call, or by other similar means. Hearings will not be conducted in person unless the Board of Review finds good cause has been established to conduct a hearing in person.											
39	West Virginia - The insurer is entitled to statutory subrogation of medical benefits paid, and in claims after 1/1/2006 or claims under the Uninsured Employer Fund, also to indemnity benefits paid, if the injured party or his or her dependent(s), or representative make a claim against a third party. The injured worker, dependent(s) or representative have a duty to give reasonable notice to the Offices of the Insurance Commissioner upon filing of a claim against a third party. (W. Va. Code § 23-2A-1 et seq.)											
40	Wisconsin - Using DWD's Litigated Case Portal System, attorneys representing parties in litigated cases of claims may see documents in the department's electronic file for their specific cases that were submitted or generated as part of the litigation process.											
41	Wisconsin - Insurers/TPAs may request access to view and submit required documents to the department via Insurers' Pending Reports system.											
42	Wisconsin - Telephonic pre-hearing conferences, primarily with pro se applicants, were held prior to pandemic.											
43	British Columbia - WorkSafeBC's online services provide workers and their representatives with a variety of tools to view the status of a claim, and view and manage claim information online.											
44	British Columbia - WorkSafeBC's online services provide employers with a variety of tools to view information and complete transactions in an easy, fast, and secure way. For example, employer's can create an online services account to access limited information about their workers' claims, as well as complete transactions and access other tools related to insurance, health and safety, and claims management.											
45	British Columbia - Malpractice claims and other actions may be pursued by WorkSafeBC to the extent that they are included in a subrogated action.											
46	New Brunswick - Employers have access to a separate online portal system that provides reports related to claim costs and calculation of assessment rates.											
47	New Brunswick - When a worker claims compensation section 10(10) of the <i>Workers' Compensation Act</i> allows for subrogation of all rights of the worker or dependents in respect of the injuries.											
48	Nova Scotia - 2022 responses. No 2025 data were provided.											
49	Prince Edward Island - If a third party was involved, the worker must elect to claim benefits with WCB. If they elect to receive compensation benefits, they transfer the right of any action against the third party to WCB.											
50	Saskatchewan - A worker can appoint a representative to assist them (e.g., legal counsel, family member, etc.). An Authorization Letter of Representation form must be submitted.											
51	Saskatchewan - Employers have limited access to claim file documents due to privacy restrictions on some of the information.											
52	Saskatchewan - This may have become more prevalent due to COVID-19 but was available prior to COVID-19.											
53	Saskatchewan - Various fines and penalties directed by Act, some of which allow WCB to pursue summary conviction (e.g., knowingly providing false or misleading information, failing to report a person's return to work, etc.).											

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Of course, any errors or omissions that remain in the report are the responsibility of the author.

Karen Rothkin, Ph.D.

ABOUT WCRI

Our Mission:

To be a catalyst for significant improvements in workers' compensation systems, providing the public with objective, credible, high-quality research on important public policy issues.

Founded in 1983, the Workers Compensation Research Institute (WCRI) is an independent, not-for-profit research organization which strives to help those interested in making improvements to the workers' compensation system by providing highly regarded, objective data and analysis.

The Institute does not take positions on the issues it researches; rather, it provides information obtained through studies and data collection efforts, which conform to recognized scientific methods. Objectivity is further ensured through rigorous, unbiased peer review procedures.

With WCRI's research, policymakers and other system stakeholders—employers, insurers, and labor unions—can monitor state systems on a regular basis and identify incremental changes to improve system performance. This results in a more enduring, efficient, and equitable system that better serves the needs of workers and employers.

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