WHY WCRI?

OBJECTIVE DATA AND ANALYSIS

Founded in 1983, the Workers Compensation Research Institute (WCRI) is an independent, not-for-profit research organization that 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 that conform to recognized scientific methods. Objectivity is further ensured through rigorous, unbiased peer review procedures.

Policymakers and other system stakeholders — employers, government, healthcare providers, insurers, labor unions, and service providers — utilize WCRI’s credible research to monitor state systems on a regular basis and to 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.

BALANCED, CREDIBLE RESEARCH USED BY:

- Policymakers
- Employers
- Insurers
- Healthcare providers
- Government
- Labor unions
- Service providers

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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.
LETTER FROM THE PRESIDENT AND CEO

Words cannot describe the unprecedented impact that COVID-19 has had on our lives. Like many organizations, WCRI moved quickly to a remote environment thanks to the careful planning of our IT department, as well as the talent and flexibility of our colleagues. COVID-19 disrupted normal business and thrust the workers’ compensation system into the spotlight as frontline workers contracted the virus and filed claims for their injuries.

Seeking to better understand the workers’ compensation system, reporters from top-tier media outlets (USA Today, The Wall Street Journal, Bloomberg, etc.) reached out to WCRI for help in understanding the system and the issue of compensability. We also hosted two well-attended webinars to inform our members and all stakeholders about how the virus spreads, how to keep people safe, and the virus’ impact on state workers’ compensation systems.

Across the country, states passed executive orders or laws to create a presumption of workers’ compensation coverage for workers who potentially contracted COVID-19 at their places of employment to make it easier for them to file workers’ compensation claims. In response, we published a series of studies using publicly available employment data to estimate the number of workers covered in many of these states.

In the new year, we published a study that provided an early look at the impact of COVID-19 on workers’ compensation claim composition. We will soon publish another study on the impact of COVID-19 on the delivery of medical care in state workers’ compensation systems, and we will continue to measure the impact of the pandemic on workers’ compensation claims with focused studies. Our benchmarking studies (CompScope™ Benchmarks, Medical Price Index, opioid studies, etc.) will also capture the impact of the virus on state workers’ compensation systems, which will give policymakers and stakeholders the information they need to facilitate informed decision-making to meet the needs of workers and employers during the pandemic.

Even though the pandemic was the focus for most state workers’ compensation systems and our members, our work on other aspects of state workers’ compensation systems continued to be cited in reports and in hearings, the majority of which (Florida, Illinois, Indiana, Oklahoma, and South Carolina) involved fee schedule reimbursement. We also continued to share our research findings at online conferences, in briefings to policymakers across the country, and via self-hosted webinars.

In these challenging times with so many unknowns, our research is needed now more than ever to understand the short- and long-term impact of COVID-19 on state workers’ compensation systems. Rest assured that WCRI will continue to provide policymakers and system stakeholders the sound research, credible data, and objective analysis that contribute to an informed debate while avoiding taking positions or making policy recommendations.

We thank our members for their generous support of our research through their data, funding, and expertise. WCRI would not be where it is today without their help. We are both well-prepared and well-positioned to inform the public policy debates ahead, and we look forward to continuing to work together toward this end.

Stay safe,

John Ruser, Ph.D.
President and CEO
WHERE OUR WORK WAS USED

**National:** A study published by the National Academy of Social Insurance — Workers’ Compensation: Benefits, Costs, and Coverage (2018 Data) — cited multiple WCRI studies, including Permanent Partial Disability Benefits: Interstate Differences; Do Higher Fee Schedules Increase the Number of Workers’ Compensation Cases?: Workers’ Compensation: Where Have We Come From? Where Are We Going?: and Will the Affordable Care Act Shift Claims to Workers’ Compensation Payors?

**National:** Frank McKay, chairman and chief appellate judge of the Georgia State Board of Workers’ Compensation, cited our research on opioids at the 2020 Southern Association of Workers’ Compensation Administrators’ All Committee Conference.

**National:** Our study Correlates of Opioid Dispensing is being used in a new training program (Opioid Hazard Awareness Training for Sand, Stone, and Gravel Workers) available to Mine Safety and Health Administration (MSHA) trainers and safety directors across the United States.

**National:** Our WCRI FlashReport — Interstate Variation and Trends in Workers’ Compensation Drug Payments: 2016Q1 to 2019Q1 was cited by a speaker at the 2020 National Workers’ Compensation and Disability Conference session on Workers’ Comp Regulatory and Legislative Trends that Belong on Your Radar for 2021.


**Florida:** Findings from various WCRI studies were referenced in public comments at a meeting hosted by the Florida Division of Workers’ Compensation and again when the state’s Three-Member Panel met to consider the recommendations made by the Division. Both meetings focused on proposed changes to the 2021 reimbursement manuals, which detail fee schedules; maximum reimbursement allowances; and rules for physicians, hospitals, and ambulatory surgery centers.

**Illinois:** Findings from numerous WCRI studies (CompScope™ Medical Benchmarks for Illinois, 21st Edition; Designing Workers’ Compensation Medical Fee Schedules, 2019; WCRI Medical Price Index for Workers’ Compensation, 11th Edition; and Comparing Outcomes for Workers, 2019 Interviews) were cited in a motion submitted to the Illinois Workers’ Compensation Medical Fee Advisory Board to raise the reimbursement rate in the medical fee schedule for evaluation and management billing codes by 30 percent.

**Indiana:** WCRI’s research was cited by support staff to the Indiana General Assembly in a fiscal impact statement of House Bill 1332, which approved caps on ambulatory surgery center reimbursement.

**Montana:** Findings from WCRI’s Correlates of Opioid Dispensing study were used in a presentation on the impact and use of opioids in the state’s workforce by the Department of Labor & Industry to the Labor-Management Advisory Council.

**Oklahoma:** Findings from WCRI’s Designing Workers’ Compensation Medical Fee Schedules, 2019 were used in testimony during a hearing held by the Oklahoma Workers’ Compensation Commission to discuss fee schedule recommendations.

**South Carolina:** Findings from WCRI’s Designing Workers’ Compensation Medical Fee Schedules, 2019 and WCRI Medical Price Index for Workers’ Compensation, 11th Edition were used in comments received by the South Carolina Workers’ Compensation Commission about proposed changes to the 2020 Medical Services Provider Manual. The manual outlines billing and payment policies for physicians and other healthcare professionals, and provides the current schedule of fees.


**Texas:** Findings from WCRI’s CompScope™ Medical Benchmarks for Texas, 21st Edition were included in the Biennial Report of the Texas Department of Insurance to the 87th Legislature.
EARLY PREDICTORS OF LONGER-TERM OPIOID DISPENSING
Despite substantial reductions in recent years, opioids continue to be widely dispensed to workers with work-related injuries in several states. Longer-term opioid dispensing for workers with work-related injuries can lead to increased disability duration and even death.

This study identifies which patients are more likely to develop longer-term opioid use, given what is known about the worker, nature of the injury, and nature of the medical care early in the claim. These findings can help policymakers and stakeholders in targeting policies and programs aimed at reducing longer-term use of opioids to the appropriate worker.

The data for this study include workers with more than seven days of lost time who had injuries between January 1, 2016, and December 31, 2016, from 33 states.

REOPERATION & READMISSION RATES FOR WORKERS’ COMPENSATION PATIENTS UNDERGOING LUMBAR SURGERY
Post-surgery readmissions and reoperations are the primary quality indicators used by commercial, governmental, and a limited number of workers’ compensation payors in their value-based purchasing programs. This study helps policymakers and other stakeholders shed light on the areas where quality improvement is most needed. It can also prove useful to patients as they consider treatment options.

The study quantifies the 30-day and 90-day reoperation and readmission rates for workers’ compensation patients undergoing lumbar spine surgeries, and compares these rates with those for non-workers’ compensation patients undergoing the same surgeries reported by other studies. It also discusses the major types of reoperations and the main reasons for readmissions, examines medical payments per claim, and describes interstate variation in the prevalence of reoperation and readmission.

THE TIMING OF PHYSICAL THERAPY FOR LOW BACK PAIN: DOES IT MATTER IN WORKERS’ COMPENSATION?
As an increasing number of workers with injuries receive physical therapy (PT), this study examines the association between early initiation of PT and utilization of medical services, costs of medical services, and duration of temporary disability (TD) for workers with low back pain (LBP). The study focuses on claims with LBP-only injuries, recognizing that PT is often used as first-line treatment for LBP and other musculoskeletal injuries before considering opioid prescriptions and invasive procedures. This study is based on a large sample of LBP-only claims with more than seven days of lost time in 27 states.

COVID-19 WORKERS’ COMPENSATION PRESUMPTION COVERAGE
Several states have passed executive orders or laws that either create a presumption of workers’ compensation coverage for certain employees who contract COVID-19 or otherwise make it easier for an employee to file a workers’ compensation claim for COVID-19.

To date, the Institute has published studies for 12 states (Alaska, Arkansas, Indiana, Kentucky, Michigan, Minnesota, Missouri, New Hampshire, North Dakota, Texas, Utah, and Washington) using publicly available employment data to estimate the number of workers covered in each state. These laws and executive orders vary in the scope of workers covered, that is, which industries and/or occupations fall within the laws and executive orders. These studies give a sense of the size of employment potentially covered by the laws and orders. They do not estimate the number of workers who contract COVID-19 at work, nor do they measure the number of COVID-19 workers’ compensation claims.
WORKERS’ COMPENSATION PRESCRIPTION DRUG REGULATIONS: A NATIONAL INVENTORY, 2020

Across the country, there are a large number of different regulatory strategies, overseen by different agencies, to manage drugs prescribed to workers for their injuries.

This report provides policymakers and system stakeholders with a basic understanding of the different strategies adopted by all 50 states and the District of Columbia, and points to the text of the regulations for those seeking more detail.

It also provides information about some of the most prominent prescription drug issues stakeholders are concerned about today, including the rules for limiting and monitoring opioid prescriptions, medical marijuana regulations, workers’ compensation drug formularies, prescription drug monitoring programs, price regulations for pharmacy- and physician-dispensed drugs, and drug testing regulations.

COMPSCOPE™ MEDICAL BENCHMARKS AND COMPSCOPE™ BENCHMARKS

The flagship of WCRI’s benchmarks reports comprehensively measures the performance of 18 state workers’ compensation systems, how they compare with each other, and how they have changed over time. The reports are designed to help policymakers and others benchmark state system performance or a company’s workers’ compensation program. The benchmarks also provide an excellent baseline for tracking the effectiveness of policy changes and identifying important trends. In particular, the editions examine how income benefits, overall medical payments, costs, use of benefits, duration of disability, litigiousness, benefit delivery expenses, timeliness of payment, and other metrics of system performance have changed over time.

MONITORING TRENDS IN THE NEW YORK WORKERS’ COMPENSATION SYSTEM, 2020 EDITION

Originally established to monitor changes in the system following substantial legislative reforms in March of 2007, this report has evolved into a tool for tracking key metrics of system performance on an ongoing basis, as further legislative reforms and administrative changes continue to shape the system. This regular monitoring helps focus attention on policy objectives that are being met, objectives that are not being met, and unintended consequences that have emerged.

The analysis in this edition covers trends in indemnity benefits, medical payments, and benefit delivery expenses from 2007 to 2019 for claims at different maturities. In addition, it provides various interstate comparisons from other WCRI studies to help put the performance of the New York system into perspective, such as prices paid for medical services and the frequency and amount of opioids dispensed to workers.

WORKERS’ COMPENSATION LAWS AS OF JANUARY 1, 2019

This study is an essential tool for policymakers and other stakeholders to identify the similarities and distinctions between workers’ compensation regulations and benefit levels in effect as of January 1, 2019, in U.S. states and Canadian provinces. It is best used to understand macro-level differences and general tendencies across jurisdictions, such as the following:

• How many states/provinces allow individual or group self-insurance?
• How do the maximum and minimum payments for temporary and permanent total disability benefits vary?
• How many 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?
STUDIES PUBLISHED IN 2020

- Comparing Outcomes for Workers, 2019 Interviews (4 individual state studies)
- CompScope™ Benchmarks, 20th Edition (15 individual state studies)
- CompScope™ Medical Benchmarks, 21st Edition (15 individual state studies)
- COVID-19 Workers’ Compensation Presumption Coverage (12 individual state studies)
- Early Predictors of Longer-Term Opioid Dispensing
- Hospital Outpatient Payment Index: Interstate Variations and Policy Analysis, 9th Edition
- Reoperation & Readmission Rates for Workers’ Compensation Patients Undergoing Lumbar Surgery
- The Timing of Physical Therapy for Low Back Pain: Does it Matter in Workers’ Compensation?
- WCRI FlashReport — Interstate Variation and Trends in Workers’ Compensation Drug Payments: 2016Q1 to 2019Q4
- WCRI Medical Price Index for Workers’ Compensation, 12th Edition (MPI-WC)
- Workers’ Compensation Prescription Drug Regulations: A National Inventory, 2020

WCRI’s studies fall into two categories: topical and core benchmark.

The Institute’s topical studies focus on the major current public policy issues and long-term challenges confronting workers’ compensation systems. The studies evaluate the impact of recent reforms and identify emerging trends and issues; actions and policies that improve disability and medical management; and key leverage points to improve system performance.

The core benchmark studies are the central research program at the Institute, with our CompScope™ Benchmarks reports as the flagship. From medical costs to worker outcomes, the studies in this program examine the changes in performance of individual state systems and provide meaningful interstate comparisons.

With these studies, stakeholders, public officials, and policymakers can monitor their systems on a regular basis and make important interstate comparisons. Identifying incremental changes in system performance — trends that may signal either improvement or deterioration — also helps them set goals, make improvements, and avoid crises.

Like all of WCRI’s research, studies are free for members and can be downloaded from our website: www.wcrinet.org.

PRESENTATIONS & EDUCATION

EDUCATING DIVERSE GROUPS

This is a sample of the diverse groups with which we shared our research over the past year.

- American Property Casualty Insurance Association
- Arkansas Workers’ Compensation Commission
- Quebec Committee on Standards, Equity, Health, and Safety at Work
- Industrial Commission of Arizona
- Utah Labor Commission
- Louisiana Workers’ Compensation Corporation
- Louisiana Workforce Commission
- Minnesota Workers’ Compensation Insurers Association
- National Academies of Sciences, Engineering, and Medicine
- National Academy of Social Insurance
- New York State Department of Finance
- New York State Insurance Fund
- NJM Insurance Group
- Northeastern University
- U.S. Department of Veterans Affairs
- U.S. Government Accountability Office
- University of Maryland School of Medicine
- Virginia Self-Insurers Association
- Worker’s Compensation Board of Indiana

RESEARCH PRESENTED

Every year, WCRI staff are invited to present our research at events across the country. This is a sample of the events and venues we were invited to present at during the past year.

- 2020 AMCOMP Annual Meeting
- 2020 Comp Laude® Gala
- 27th Annual LASIE Conference
- AMCOMP Webinar
- Casualty Actuarial Society Webinar
- CDC/NIOSH Transportation, Warehousing and Utilities (TWU) Sector Council Meeting
- IAIABC’s 2020 Central States Association Spring Seminar
- Illinois Chamber of Commerce’s 13th Annual Virtual Workers’ Compensation & Safety Conference
- myMatrixx Virtual Event
- Occupational Risk Prevention (ORP) International Foundation’s 2020 Online Conference
- WorkCompCentral’s Virtual Conference
ANNUAL CONFERENCE

Our 36th Annual Issues & Research Conference, held in Boston, MA, featured exciting and informational sessions on generational differences and stereotypes in the workplace, impact of age on worker outcomes and claims costs, opioid dispensing trends and alternatives for pain management, how NIOSH tackles total worker health, and the importance of mental health for injured workers.

This conference was also our greenest yet. This was accomplished by partnering with TripZero to offset the carbon footprint (travel and hotel) of those who attended the conference, using biodegradable badges, providing pitchers of water and reusable cups to avoid use and disposal of plastic bottles, and moving the majority of the paper for the conference (slides, attendance lists, etc.) to our conference app.

WEBINARS

- COVID-19 Compensability Under Workers’ Compensation (1,580 registrants)
- Delivery of Medical Care and Return to Work During COVID-19 (871 registrants)
- Performance of the Pennsylvania Workers’ Compensation System (613 registrants)
- Performance of the New York Workers’ Compensation System (318 registrants)
- Early Physical Therapy for Injured Workers With Low Back Pain (188 registrants)

PRESENTATIONS & EDUCATION (continued)

Photos from the event can be seen on our Facebook Page: www.facebook.com/WCRIPage.

VIDEOS

With video increasingly becoming the preferred way to convey information, WCRI produces video clips for each study we publish. In these videos, we walk viewers through the studies so they can better understand the purpose of the studies, see what lies inside, and find out how to access the information. In 2020, videos on our YouTube channel received more than 3,000 individual views. In addition to video clips for each of our studies, our YouTube channel includes videos on the benefits of becoming a member of WCRI as well as attending our annual conference. Our page can be found on YouTube, as well as accessed through our website at www.wcrinet.org.
Since 2011, WCRI has maintained a strong presence across the most popular social media channels. On platforms such as Twitter, LinkedIn, Facebook, Instagram, and YouTube, the Institute disseminates accurate news and information to a broad audience interested in workers’ compensation issues.

Followers at the end of 2020:
- Twitter: 3,409
- LinkedIn: 2,465
- Facebook: 640

MEDIA COVERAGE

This past year, our research was mentioned more than 500 times in newspapers and blogs across — and outside — the country. Here is a sample of the news organizations that covered our research.
WCRI believes in corporate social responsibility, whether by giving back to our community or protecting the environment for future generations, with ongoing and new initiatives.

**SOCIAL INITIATIVES:** WCRI has contributed both time and money to causes such as Cradles to Crayons, Kids’ Chance, The Greater Boston Food Bank, and Tailored for Success, Inc.

WCRI donates $2 to Kids’ Chance for every completed post-webinar and conference feedback survey — resulting in close to $10,000 in cash donations to date — to benefit children affected by a parent’s work-related injury or death, so they can pursue their educational dreams without financial burden.

“It’s high time that the ideal of success should be replaced by the ideal of service.”
— Albert Einstein
MEMBER SPOTLIGHT

WCRI conducts quarterly interviews with members to learn why they become members, the value they derive from our research, and other topics. Here are some examples of how members responded to one of the questions:

“What value do you derive from being a member of WCRI?”

“I wanted to see how we measured up to other self-insured employers, and WCRI gave us the industry benchmarks we were looking for. The other major value has been the access to other employer members and the ability to network with them on the topic of workers’ compensation. While we may compete with some of the other members in the retail space, we all have a common interest in improving the workers’ compensation system.”

John Culhane, Claim Services Insights Manager at Wegmans Food Markets

“I value the thoughtful in-depth analysis that is unbiased and fact based. The trusted information and insights that are developed are for all workers’ compensation stakeholders. WCRI has played a strong role in keeping the workers’ compensation system healthy with how they have successfully managed the research agenda.”

Matt Massaro, Head of Workers’ Compensation Middle & Large Commercial at The Hartford

“WCRI is an outstanding source of information to the Tennessee AFL-CIO and its affiliated members. As policymakers and stakeholders in Tennessee and across the United States debate the issues related to workers’ compensation, the research provided by the Institute has been invaluable to the Tennessee AFL-CIO in our discussions about the future of workers’ compensation in our state.”

Billy Dycus, President of the Tennessee AFL-CIO

“My understanding of the methodology and mission of the WCRI has allowed me to appreciate the independent research and findings that populate the WCRI reports. Reports that are not agenda driven assist all to formulate opinions based upon correct information.”

Michael J. Brennan, Chairman of the Illinois Workers’ Compensation Commission

Read the full versions of these interviews at: www.wcrinet.org/news/member-spotlight.

GOVERNANCE

The responsibility for policymaking rests with the Institute’s board of directors — a representative group of members who are elected by the membership for staggered three-year terms and meet three times a year. Operating responsibility is vested by the board in the president and CEO, with direction from the board and advice from committees established by the board.

The Research Committee, composed of representatives of member companies, gives the president and CEO guidance on the Institute’s research program.

The Disability and Medical Management Advisory Board provides guidance to the president and CEO, as well as funding for issues related to disability and medical management.

Project advisory committees assist the research staff in the formulation and conduct of specific studies. These committees are made up of representatives of member companies, public officials, academic researchers, and others knowledgeable about the specific topics before them.

BOARD (as of 1/2021)

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- Albertsons Companies
- American Electric Power Company
- Best Buy
- Big Lots, Inc.
- Bimbo Bakeries USA
- Chevron Corporation
- Costco Wholesale
- Grimmway Enterprises, Inc.
- Johns Hopkins University
- Kaiser Permanente
- Marriott International, Inc.
- Mayo Clinic
- Partners Healthcare
- Publix Super Markets, Inc.
- Raytheon Company
- The Sherwin-Williams Company
- Southern California Edison
- Stanford University
- United Airlines
- United Parcel Service
- Walmart
- The Walt Disney Company
- Wegmans Food Markets, Inc.

**Service Providers**
- Aetna
- Aon Risk Services, Inc.
- Authentic 4D
- Cadence Rx
- Cara Partners
- CCMSI
- ChronoRx
- Comprehensive Outcomes Management Technologies (COMT)
- CONCENTRA, Inc.
- Contiver
- CORA Health Services, Inc.
- CorVel Corporation
- Coventry Workers’ Comp Services
- ExamWorks Clinical Solutions
- FAIR Health, Inc.
- First MCO, Inc.
- Gallagher Bassett Services, Inc.
- GENEX Services, Inc.
- Goodman McGuire, LLP

**Insurers**
- AF Group
- AIG
- American Property Casualty Insurance Association
- CA State Compensation Insurance Fund
- CNA Insurance
- Eastern Alliance Insurance Group
- Employers Mutual Casualty Company
- Everest National Insurance Company
- The Hanover Insurance Group
- The Hartford Insurance Group
- Kentucky Employers Mutual Insurance
- Liberty Mutual Group
- Mitsui Sumitomo Insurance Co. of America
- New Jersey Manufacturers Insurance Company
- New Mexico Mutual Casualty Company, Inc.
- The PMA Insurance Group

**Ratings Bureaus**
- Compensation Advisory Organization of Michigan
- Indiana Compensation Rating Bureau
- Massachusetts Workers’ Compensation Rating & Inspection Bureau
- Minnesota Workers’ Compensation Rating Bureau
- Pennsylvania Compensation Rating Bureau
- Texas Department of Insurance

**Associates**
- Aflac
- Aon
- American Casualty Insurance
- Arizona Division of Workers’ Compensation
- Arkansas Division of Workers’ Compensation
- California Division of Workers’ Compensation
- Colorado Division of Workers’ Compensation
- Connecticut Workers’ Compensation Commission
- Delaware Office of Workers’ Compensation
- District of Columbia Office of Workers’ Compensation
- Florida Department of Financial Services
- Georgia State Board of Workers’ Compensation
- Hawaii Department of Labor and Industrial Relations
- Idaho Industrial Commission
- Illinois Workers’ Compensation Commission
- Iowa Division of Workers’ Compensation
- Kansas Department of Human Resources
- Kentucky Department of Workers’ Claims
- Louisiana Department of Insurance
- Louisiana Office of Risk Management
- Louisiana Office of Workers’ Compensation Administration
- Maine Workers’ Compensation Board
- Maryland Workers’ Compensation Commission
- Massachusetts Compensation Board
- Massachusetts Department of Industrial Accidents
- Massachusetts Department of Insurance
- Massachusetts Division of Insurers
- Michigan Workers’ Compensation Agency
- Minnesota Department of Labor and Industry
- Mississippi Workers’ Compensation Commission
- Montana Department of Labor & Industry
- National Institute for Occupational Safety and Health
- Nebraska Workers’ Compensation Court
- Nevada Department of Business and Industry
- New Hampshire Department of Labor
- New Hampshire Insurance Department
- New Mexico Workers’ Compensation Administration
- New York State Workers’ Compensation Board
- Ohio Workers’ Compensation Commission
- Oregon Department of Consumer and Business Services
- Pennsylvania Department of Labor & Industry
- Rhode Island Department of Labor and Training
- South Carolina Workers’ Compensation Commission
- South Dakota Department of Labor and Regulation
- Tennessee Department of Labor & Workforce Development
- Texas Department of Insurance
- Texas State Office of Risk Management
- Utah Labor Commission
- Vermont Department of Labor
- Virginia Workers’ Compensation Commission
- West Virginia Workers’ Compensation Commission
- Wisconsin Department of Workforce Development

**Disability and Medical Management Research Funders**
- AIG
- Aon
- Applied Health Systems
- Liberty Mutual
- MedRisk, Inc.
- Matrix, an Express Scripts Company
- One Call
- Optum
- Paradigm
- Sedgwick Claims Management Services, Inc.
- Texas Mutual Insurance Company
- The Hartford
- The Travelers
- Zurich Services Corporation

**CompScope™ Funders**
- Compensation Advisory Organization of Michigan
- Florida Department of Financial Services
- Georgia State Board of Workers’ Compensation
- Illinois Workers’ Compensation Commission
- Indiana Compensation Rating Bureau
- Louisiana Department of Insurance
- Massachusetts Workers’ Compensation Rating & Inspection Bureau
- Minnesota Workers’ Compensation Board
- New Jersey Compensation Rating & Inspection Bureau
- New York Compensation Rating Board
- North Carolina Rating Bureau
- Pennsylvania Compensation Rating Bureau
- Texas Department of Insurance
- Virginia Workers’ Compensation Commission
- Wisconsin Compensation Rating Bureau