WORKERS COMPENSATION RESEARCH INSTITUTE

2019 ANNUAL REPORT

1983  A Catalyst for Improving Workers’ Compensation  2018

35 YEARS
 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.

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.

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WCRI was created 35 years ago to address a lack of information about the performance of state workers’ compensation systems. In its first year, the Institute published 4 studies and had 37 members. Today, we publish around 50 studies a year and enjoy the diverse support of 185 members made up of employers, government agencies, labor unions, insurers, services providers, and others.

Every year, WCRI’s research is used by stakeholders in states all across the country. What set 2018 apart from previous years was the use of our work at the federal level. We were invited to testify before the U.S. House Subcommittee on Workforce Protections, which was evaluating opioid prescribing in the workers’ compensation program for federal employees. Our work was also used by the U.S. House Committee on Small Business, which was assessing the opioid epidemic’s impact on small businesses. In both hearings, our work was used to highlight trends in the prescribing of opioids to injured workers in the private sector and to show what states have done to respond to the epidemic and curtail unnecessary prescribing.

Opioids and prescription drugs were also an important issue this year at the state level. In Pennsylvania, Governor Tom Wolf used two of our studies — Longer-Term Dispensing of Opioids, 4th Edition and The Impact of Opioid Prescriptions on Duration of Temporary Disability — in rolling out new guidelines to help prescribing providers determine the effective and appropriate use of opioids for injured workers. Our opioids and prescription drugs research was also used by policymakers and legislators in several states (Arizona, Georgia, Hawaii, Illinois, New York, and Pennsylvania) either in legislative hearings or communications. In addition, the National Council of Insurance Legislators passed a model act regarding the reimbursement and distribution of physician-dispensed drugs after receiving testimony on the subject from WCRI and other respected institutions.

Aside from the impact examples mentioned above, our many benchmarking studies — such as our CompScope™ Benchmarks and Medical Benchmarks studies, worker outcomes studies, and national inventories — continue to provide essential information to policymakers and system stakeholders, as they monitor the impact of reforms and compare the performance of their systems to those in other states.

Throughout our 35-year history, we have worked to push the envelope of our research to better understand state workers’ compensation systems and identify emerging issues and trends. We look forward to continuing our work while avoiding taking positions or making policy recommendations. We thank our members for their generous support of our research and share this 35-year milestone with them. The Institute would not be where it is today without their help.

Respectfully yours,

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

**National:** Ramona Tanabe, executive vice president and counsel of WCRI, testified before the U.S. House Subcommittee on Workforce Protections at a hearing on the opioid epidemic’s implications for the Federal Employees’ Compensation Act. During the hearing, Ms. Tanabe summarized findings from WCRI’s opioid research and fielded many questions about how states address opioid prescribing.

**National:** The U.S. House Committee on Small Business held a hearing to explore the effects of the opioid crisis on small businesses. The committee’s staff released a memo before the hearing that cited our research.


**National:** The National Council of Insurance Legislators (NCOIL) passed a model act on physician dispensing. In past years, NCOIL had invited WCRI to share our research with them on this important issue. Recently, NCOIL invited WCRI to provide analysis of how states had addressed the issue in light of their proposed model act.

**National:** WCRI’s study on longer-term use of opioids was cited by the National Safety Council in a fact sheet for employers on how prescription drugs may be affecting their workers’ compensation programs. This year, The Hartford and Shatterproof featured this fact sheet in a new website they launched to close the knowledge gap about opioids; break the stigma of addiction; and foster prevention, treatment, and recovery.

**Arizona:** WCRI’s research on physician dispensing was cited by numerous stakeholders during a public hearing held by the Industrial Commission of Arizona on whether to adopt additional reimbursement guidelines for medications dispensed in settings that are not accessible to the general public.

**Georgia:** Chairman Frank McKay of the Georgia State Board of Workers’ Compensation sent the U.S. Attorney for Northern Georgia a letter regarding the inappropriate and over-prescribing of opioids to injured workers in the state. The letter included findings from three WCRI studies.

**Hawaii:** During a hearing on Senate Bill 2358/House Bill 1631, WCRI’s studies, Are Physician Dispensing Reforms Sustainable? and Physician Dispensing of Higher-Priced New Drug Strengths and Formulation, were cited. The legislation was filed to limit physician-dispensed prescription drugs in workers’ compensation claims to 30 days from the work injury date, as well as to lower the reimbursement rates of prescription drugs in workers’ compensation claims.

**Illinois:** WCRI’s study, The Impact of Opioid Prescriptions on Duration of Temporary Disability, was cited in a joint lawsuit against opioid manufacturers, distributors, and prescribers. The complaint was filed by two Illinois-based self-insurance pools that provide workers’ compensation insurance to over 200 local municipalities.

**Massachusetts:** Two of WCRI’s opioid studies, Interstate Variations in Use of Opioids, 4th Edition and Impact of Opioid Prescriptions on Duration of Temporary Disability, were cited in an issue brief for a forum on “Opioids in the Workforce” by the Massachusetts Health Policy Forum.

**Massachusetts:** At a meeting, the Workers’ Compensation Advisory Council proposed changes to raise the level of the medical fee schedule. Several members, on both sides of the issue, cited findings from WCRI’s fee schedule and worker outcomes studies.

**Minnesota:** Findings from WCRI’s CompScope™ Medical Benchmarks for Minnesota, 19th Edition, were used in the Annual State of the Market presentation by the Minnesota Workers’ Compensation Insurance Association.

**New York:** Assemblywoman Kimberly Jean-Pierre cited our study, The Impact of Opioid Prescriptions on Duration of Temporary Disability, during debate on Assembly Bill A11028, which she sponsored. The purpose of the bill, which passed the New York Assembly, was to ensure adequate compensation for the surviving beneficiaries of injured workers who died as a result of an opioid overdose.

**Pennsylvania:** WCRI conducted and published a study on the impact of Pennsylvania physician-dispensing reforms after receiving a request from the Pennsylvania Bureau of Workers’ Compensation.

**Pennsylvania:** House Speaker Mike Turzai mentioned our opioid research during a press conference to promote Senate Bill 936, which would require the Pennsylvania Department of Labor & Industry to adopt an evidence-based drug formulary for workers’ compensation claims.

**Pennsylvania:** In the rollout of new opioid guidelines for workers’ compensation, Governor Tom Wolf cited a finding from WCRI’s study, Long-Term Dispensing of Opioids, 4th Edition. Another one of our studies, The Impact of Opioid Prescriptions on Duration of Temporary Disability, was also cited in the new opioid guidelines.

**Wisconsin:** At a hearing on Senate Bill (SB) 665, various stakeholder groups (business, labor, medical, and regulatory) cited WCRI’s CompScope™ Benchmarks and Medical Benchmarks for Wisconsin, worker outcomes studies, and other reports. SB 665 included various changes, including a proposal for a medical fee schedule, additional increases in maximum weekly payments for permanent partial disability benefits, and provisions related to opioid prescribing.
**RESEARCH SPOTLIGHT**

**WCRI FLASHREPORT: COMPARING PAYMENTS TO AMBULATORY SURGERY CENTERS AND HOSPITAL OUTPATIENT DEPARTMENTS**

Some studies indicate that ambulatory surgery centers (ASCs) provide care that is less expensive than services provided in hospitals. This study compares payments for similar knee and shoulder surgeries performed on injured workers in ASCs with hospital outpatient departments. This analysis is important because evidence about ASC surgeries from other payors (Medicare or group health insurance) may not apply in workers’ compensation settings.

**Visit our website to learn more.**

**THE IMPACT OF OPIOID PRESCRIPTIONS ON DURATION OF TEMPORARY DISABILITY**

The study examines the effect of opioid prescriptions on the duration of temporary disability benefits among workers with work-related low back injuries. While medical practice guidelines often advise against routine (i.e., nonsurgical) use of opioids to treat low back injuries, opioid use in nonsurgical lower back cases is common.

**Visit our website to learn more.**

**WCRI FLASHREPORT — TIME FROM INJURY TO MEDICAL TREATMENT: HOW STATES COMPARE**

This study examines interstate differences in the time from injury to first medical treatment among injured workers. It focuses on the median number of days from injury to first medical treatment by type of provider, service, and injury across 18 study states. While the study was not designed to explain why differences in the timing of medical services exist, it offers some factors that may influence the differences, including workers’ compensation policy choices.

**Visit our website to learn more.**

**MONITORING TRENDS IN THE NEW YORK WORKERS’ COMPENSATION SYSTEM, 2018 EDITION**

This is the 11th annual report to regularly track key metrics of the performance of the New York workers’ compensation system after implementation of the following statutory changes enacted in March 2007:

- increased maximum statutory benefits
- limited the number of weeks of permanent partial disability (PPD) benefits
- implemented medical treatment guidelines
- adopted a fee schedule for pharmaceuticals
- established networks for diagnostic services and thresholds for preauthorization
- enacted administrative changes to increase the speed of resolving disputes

**Visit our website to learn more.**

**WORKERS’ COMPENSATION MEDICAL COST CONTAINMENT: A NATIONAL INVENTORY, 2018**

This study provides policymakers and system stakeholders with an inventory of the cost containment initiatives employed by all 50 states, the District of Columbia, and two U.S. federal programs (Federal Employees’ Compensation Act, and the Longshore and Harbor Workers’ Compensation Act). The report contains key features of each jurisdiction’s cost containment initiatives, such as:

- medical fee schedules
- regulation of hospital charges
- choice of provider
- treatment guidelines
- utilization review/management
- managed care
- pharmaceutical regulations
- urgent care and ambulatory surgery center fee schedules
- medical dispute regulations

**Visit our website to learn more.**
WORKERS’ COMPENSATION PRESCRIPTION DRUG REGULATIONS: A NATIONAL INVENTORY, 2018

Across the country, states are grappling with an array of regulatory strategies, overseen by different agencies, to address the prescribing of medicine. This report provides policymakers and system stakeholders with a basic understanding of the strategies adopted by all 50 states and points to the regulations for those seeking more detail. The report also provides tables about some of the most prominent prescription drug issues stakeholders were concerned about in 2018, such as:

- 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
- Drug Testing Regulations

Visit our website to learn more.

COMPSCOPE™ MEDICAL BENCHMARKS AND COMPSCOPE™ BENCHMARKS

The flagship of WCRI’s benchmarks reports comprehensively measure the performance of 18 different 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.

The medical editions, in particular, 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.

Visit our website to learn more.
WCRI’s studies fall into two categories: topical and core benchmark studies.

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. By identifying incremental changes in system performance — trends that may signal either improvement or deterioration — they can also set goals, make improvements, and avoid crises.

Some of the Studies We Published Last Year:

- Comparing Outcomes for Injured Workers, 2017 Interviews (3 individual state reports — Minnesota, Pennsylvania, and Tennessee)
- CompScope™ Benchmarks, 18th Edition (16 individual state reports)
- CompScope™ Medical Benchmarks, 19th Edition (16 individual state reports)
- Correlates of Opioid Dispensing
- Hospital Outpatient Payment Index: Interstate Variations and Policy Analysis, 7th Edition
- Monitoring Physician Dispensing Reforms in Pennsylvania
- Payments to Ambulatory Surgery Centers in Georgia
- The Impact of Opioid Prescriptions on Duration of Temporary Disability
- WCRI FlashReport: Comparing Payments to Ambulatory Surgery Centers and Hospital Outpatient Departments
- WCRI FlashReport: Texas-Like Formulary for Louisiana State Employees
- WCRI FlashReport — Time from Injury to Medical Treatment: How States Compare
- WCRI Medical Price Index for Workers’ Compensation, 10th Edition (MPI-WC)
- Workers’ Compensation Medical Cost Containment: A National Inventory, 2018
- Workers’ Compensation Prescription Drug Regulations: A National Inventory, 2018

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

Presentations & Education

Research Presented at Conferences

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

- 15th Annual Worker’s Compensation Insurance ExecSummit
- 17th Annual Pennsylvania Workers’ Compensation Education Conference
- 2018 Annual Meeting of the American Economic Association
- 2018 Casualty Actuarial Society’s Annual Meeting
- 2018 Comp Laude® Awards and Gala
- 2018 Montana Governor’s Conference
- 2018 National Council of Self-Insurers Annual Meeting
- 2018 National Workers’ Compensation and Disability Conference® & Expo
- 21st Tennessee Bureau of Workers’ Compensation Education Conference
- American Bar Association’s 2018 Midwinter Seminar & Conference of the Workers’ Compensation Committee
- Casualty Actuarial Society’s 2018 Casualty Loss Reserve Seminar
- Georgia State Board of Workers’ Compensation Annual Conference
- IAIABC’s 104th Convention
- Kentucky CompEd 27th Annual Workers’ Compensation Seminar
- Louisiana Workers’ Compensation Association
- Maine Workers’ Compensation Commission
- Maryland Workers’ Compensation Commission
- Massachusetts Workers’ Compensation Commission
- Michigan Workers’ Compensation Commission
- Minnesota Workers’ Compensation Commission
- Missouri Workers’ Compensation Commission
- Montana Workers’ Compensation Commission
- Nebraska Workers’ Compensation Commission
- Nevada Workers’ Compensation Commission
- New Hampshire Workers’ Compensation Commission
- New Jersey Workers’ Compensation Commission
- New Mexico Workers’ Compensation Commission
- New York Workers’ Compensation Commission
- North Carolina Workers’ Compensation Commission
- North Dakota Workers’ Compensation Commission
- Ohio Workers’ Compensation Commission
- Oklahoma Workers’ Compensation Commission
- Oregon Workers’ Compensation Commission
- Pennsylvania Workers’ Compensation Commission
- Rhode Island Workers’ Compensation Commission
- South Carolina Workers’ Compensation Commission
- South Dakota Workers’ Compensation Commission
- Tennessee Bureau of Workers’ Compensation
- Texas Workers’ Compensation Commission
- Utah Workers’ Compensation Commission
- Washington Workers’ Compensation Commission
- West Virginia Workers’ Compensation Commission
- Wisconsin Workers’ Compensation Commission
- Wyoming Workers’ Compensation Commission

Educating Diverse Groups

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

- Arkansas Rehabilitation Services
- Arkansas Rehabilitation Services
- Chairman’s Advisory Council, Medical Subcommittee, of the Georgia State Board of Workers’ Compensation
- Georgia State Board of Workers’ Compensation
- Illinois Office of the Governor
- Insurance Federation of Pennsylvania
- Massachusetts House of Representatives
- Massachusetts Workers’ Compensation Advisory Council
- National Institute for Occupational Safety and Health (NIOSH) and the Centers for Disease Control and Prevention (CDC)
- Pennsylvania Bureau of Workers’ Compensation
- Pennsylvania Workers’ Compensation Advisory Council
- Tennessee Bureau of Workers’ Compensation
- Virginia Workers’ Compensation Commission Medical Fee Schedule Regulatory Advisory Panel
- Wisconsin Department of Workforce Development
- Worker’s Compensation Board of Indiana
- Worker’s Compensation Rating and Inspection Bureau of Massachusetts
ANNUAL CONFERENCE

Registration for our 34th annual conference in March of 2018 increased by 20 percent. The conference agenda was a huge hit due to its exciting and informational sessions, including a keynote discussion about the future of labor force trends and the impact of technology by Dr. Erica L. Groshen, former head of the U.S. Bureau of Labor Statistics. The theme of the conference was “Work and the Comp System: Evolution, Disruption, and the Future.”

WEBINARS

Every year, we hold several webinars on our research. Our members, as well as non-members, find these of great value since they receive a high-level understanding of the research, and are able to ask questions about what they are learning.

All the webinars we hold are recorded and available on our website for members and non-members. This is just another way we are making it easier for members and non-members alike to learn about our research in a format and time convenient for them.

This is a sample of the topics our webinars covered over the past year, as well as the number of policymakers who registered for them.

- In November, we held a webinar that highlighted a shift in where injured workers receive medical care. Of the 203 who registered for it, 46 were policymakers.
- In September, we held a webinar about the impact of Pennsylvania’s physician-dispensing reform. Of the 178 who registered for it, 29 were policymakers.
- In June, we held a webinar to discuss findings from our study on the impact of opioid prescriptions on duration of temporary disability. Of the 373 who registered for it, 72 were policymakers.
- In January, we hosted a webinar about our latest research on changes to hospital reimbursement in four states. Of the 195 who registered for it, 36 were policymakers.

PRESENTATIONS & EDUCATION (continued)

Videos

With video increasingly becoming the preferred way to absorb information, we now maintain a YouTube channel with video releases in conjunction with our reports. In addition, a video about the benefits of becoming a member of WCRI, as well as another about attending our annual conference, can be accessed through our website: www.wcrinet.org.
Since 2011, WCRI has maintained a strong presence across the most popular social media channels. On platforms such as Twitter, Facebook, LinkedIn, Google+, and YouTube, the Institute disseminates accurate news and information to a broad audience interested in workers’ compensation issues and research.

Followers at the end of 2018:
- Twitter: 3,000+
- LinkedIn: 1,000+
- Facebook: 400+

MEDIA COVERAGE

This past year, our research was mentioned more than 600 times in newspapers and blogs all across the country. This is a sample of the news organizations that covered our research.

Opioids Might Not Be Useful for Injured Workers in the First Place

New York Post | April 24, 2018
Maria LaMagna, Marketwatch

The relationship between opioids and the number of Americans in the workplace is looking increasingly complicated. America’s opioid addiction crisis is devastating families and costing the country billions of dollars. And yet when used to treat pain appropriately, opioids can also help people — especially women — stay in the workforce, when they would have otherwise dropped out, a recent study from Princeton University concluded.

But how do opioids affect workers’ compensation after they’re injured on the job? That’s the question asked by a new study from researchers at the Workers Compensation Research Institute in Cambridge, Mass., the Alice Peck Day Memorial Hospital in Lebanon, N.H. and the Department of Economics at the University of California, Irvine.

What they found: Longer-term use of opioids roughly tripled the amount of money employers spent on temporary disability benefits... (continued online)

WCRI believes in corporate social responsibility — whether it is giving back to our community or protecting the environment for future generations — and supported such efforts with ongoing and new initiatives in 2018.

THE ENVIRONMENT: WCRI continues to make our reports available online versus printing hard copies. In the event that we printed hard copies, such as our annual report, we used recycled paper.

SOCIAL INITIATIVES: WCRI contributes both time and money to causes such as Cradles to Crayons, Greater Boston Food Bank, and Kids’ Chance.

WCRI donates $2 for every completed post-webinar and conference feedback survey to Kids’ Chance, resulting in over $8,000 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.

WCRI staff volunteered at The Greater Boston Food Bank (GBFB), where we helped sort, pack, label, and distribute 11,002 pounds of food, which translates to 9,168 meals for hungry families across Eastern Massachusetts.

“IT’S HIGH TIME THAT THE IDEAL OF SUCCESS SHOULD BE REPLACED BY THE IDEAL OF SERVICE.”
— Albert Einstein
MEMBER SPOTLIGHT
WCRI invites members to provide quarterly feedback about the value they derive from membership. This question received the following responses.

WHAT VALUE DO YOU DERIVE FROM BEING A MEMBER OF WCRI?

“I know the WCRI can be counted on to provide the hard, independent, and factual data we need to make good decisions in this time of ever-changing dynamics. The WCRI is an important and valued partner of all stakeholders in the field of workers’ compensation. As chair of the labor side of the Advisory Council, I rely on the broad scope of data and research provided by the WCRI to make informed decisions on behalf of injured workers in Wisconsin.”

Stephanie Bloomingdale, President, Wisconsin AFL-CIO

“Being included in WCRI’s CompScope™ Benchmarks studies has provided useful data and information in the analysis of our Georgia Medical Fee Schedule that we publish annually. Since Georgia is a large workers’ compensation state in terms of premiums paid and benefits paid, the CompScope™ studies that compare regional and nationwide payment data are useful for comparison. The payment data and use of it by WCRI in preparing analytical reports help us in our policymaking decisions in furthering our goals of providing a fair and balanced workers’ compensation system and ensuring injured workers have access to quality medical treatment at a reasonable price to the employer.”

Frank McKay, Chairman, Georgia State Board of Workers’ Compensation

“WCRI is a unique organization that invites members from all aspects of the workers’ compensation system to participate: employers, providers, state agencies, worker advocates, labor unions, and insurance carriers. These broad perspectives bring significant value and rich texture to the research outcomes. As an ‘actuary,’ I am naturally biased toward data and the information they provide. As a trained ‘quantitative analyst,’ I recognize the challenge of data management and believe that WCRI’s research methods create significant credibility and trust for their work products. Because of the various state flavors of workers’ compensation regulations, it is important to have benchmarks at this granular level. WCRI is an excellent source of detailed data. As an insurance carrier, we are diligently managing workplace injuries for our customers’ employees. We also evaluate our overall effectiveness at managing various types of claims, medical utilization, and indemnity benefits. Another way WCRI provides us value is by allowing us to compare our internal data with theirs, which provides us with broader industry experience.”

Donna Glenn, SVP, Casualty Product Manager, Liberty Mutual

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 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.

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Thank You!