



# Workers Compensation Claim State Environmental Guide - Illinois

ILLINOIS – <http://iwcc.il.gov/>

## Indemnity issues

### Temporary Total Benefits

TTD rate is based on 2/3 of the AWW. AWW is based on gross earnings for the 52 week period prior to injury. Overtime is included at the straight time rate if overtime is regular or mandatory. Concurrent employment earnings are included if the employer was aware of the concurrent employment at the time of the injury.

TTD rate is subject to the maximum & minimum rates.

**Minimum:** The minimum is the employee's average weekly wage or the rate below, whichever is lower:

# of Children +/or spouse	1/15/18 through 1/14/2020	1/15/2020 through 1/14/2021	7/15/2020 through 1/14/2021	1/15/2021 through 7/14/2021	7/15/2021 through 1/14/2022	1/15/2022 through 7/14/2022
0	\$220.00	\$246.67	\$266.67	\$293.33	\$293.33	\$320.00
1	\$253.00	\$283.67	\$306.67	\$337.33	\$337.33	\$368.00
2	\$286.00	\$320.67	\$346.67	\$381.33	\$381.33	\$416.00
3	\$319.00	\$357.67	\$386.67	\$425.33	\$425.33	\$464.00
4	\$330.00	\$370.00	\$400.00	\$440.00	\$440.00	\$480.00

### Maximum:

Effective Date	Maximum
1/25/2018	\$1,463.80
7/15/2018	\$1,480.12
1/15/2019	\$1,506.81
7/15/2019	\$1,529.84
1/15/2020	\$1,549.07
7/15/2020	\$1,572.01
1/15/2021	\$1,613.93
7/15/2021	\$1,693.76
1/15/2022	\$1,734.83

Waiting period: 3 working days

Retro period: 14 calendar days

Limited or unlimited benefits: Not Applicable.



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The Travelers Indemnity Company and its property casualty affiliates. One Tower Square, Hartford, CT 06183

This material is for informational purposes only. All statements herein are subject to the provisions, exclusions and conditions of the applicable policy. For an actual description of all coverages, terms and conditions, refer to the insurance policy. Coverages are subject to individual insureds meeting our underwriting qualifications and to state availability.

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**Indemnity issues**

Temporary Partial Benefits	Temporary Partial Benefits became effective 2/1/06. Temporary Partial Benefits are equal to 2/3 of the difference between the average amount that the employee would be able to earn in the full performance of his/her regular job compared to the gross amount he/she is earning in the modified job provided by the employer or in any other job the employee is working. On or after 6/28/2011, the TPD benefit is 2/3 of the difference between the average amount the employee would be able to earn in their pre-injury job and the gross amount he/she earns in the light duty job. Prior to 6/28/2011 the TPD was calculated utilizing their gross earnings less net earnings while on light duty.
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**Indemnity issues**

Permanent Partial Benefits

The PPD rate is based on 60% of the AWW subject to the maximum & minimum rates.

**Minimum:** Same as TTD minimums.

**Maximum:** If amputation of a member or enucleation of an eye.

7/15/2014	\$1,341.07
1/15/2015	\$1,361.79
7/15/2015	\$1,379.73
1/15/2016	\$1,398.23
7/15/2016	\$1,428.74
1/15/2017	\$1,435.17
7/15/2017	\$1,440.60
1/15/2018	\$1,463.80
7/15/2018	\$1,480.12
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**Maximum:** If *not* amputation of a member or enucleation of an eye.

7/1/2013	\$712.55
7/1/2014	\$721.66
7/1/2015	\$755.22
7/1/2016	\$775.18
7/1/2017	\$790.64
7/1/2018	\$813.87
7/1/2019	\$836.69
7/1/2020	\$871.73
7/1/2021	\$937.11

Waiting period: Upon achievement of maximum medical improvement except in cases involving a statutory loss, e.g., amputations, loss of organ, facial/vertebra fractures) must be addressed upon cessation of temporary total disability benefits.

**Indemnity issues**

Permanent Partial Benefits  
(continued)

Permanent Partial Disability is not based on AMA guidelines. It is based on the following Schedule:

Part of Body or Member	Before 7/20/2005	7/20/2005 through 11/15/2005	11/16/2005 through 1/31/2006	2/1/2006 through present
Disfigurement	150	162	150	162
Thumb	70	76	70	76
First (index) finger	40	43	40	43
Second (middle) finger	35	38	35	38
Third (ring) finger	25	27	25	27
Fourth (little) finger	20	22	20	22
Great toe	35	38	35	38
Each other toe	12	13	12	13
Hand (Carpal Tunnel *)	190	205	190	205
Arm	235	253	235	253
Amputation above elbow	250	270	250	270
Amputation at shoulder joint	300	323	300	323
Foot	155	167	155	167
Leg	200	215	200	215
Amputation above knee	225	242	225	242
Amputation at hip joint	275	296	275	296
Eye	150	162	150	162
Enucleation of eye	160	173	160	173
Hearing loss of one ear	50	54	50	54
Hearing loss of both ears	200	215	200	215
Testicle – 1	50	54	50	54
Testicle – 2	150	162	150	162

\*on or after 6/28/2011 PPD for accidents resulting in CTS from repetitive trauma is up to 15% of the hand (at 190 weeks, not 205 weeks) totaling 28.5 weeks and can be increased to no more than 30% of the hand, 57 weeks.

**Indemnity issues**

<p>Permanent Total Benefits</p>	<p>Permanent total disability benefits are payable in cases of complete disability that renders the employee wholly and permanently incapable of work. The specific loss of both hands, both arms and both feet, or both legs, or both eyes, or of any two thereof, or the permanent and complete loss of use thereof, constitutes total and permanent disability.</p> <table border="1" data-bbox="529 348 1200 1087"> <thead> <tr> <th colspan="2">Minimum</th> <th colspan="2">Maximum</th> </tr> </thead> <tbody> <tr><td>1/15/2014</td><td>\$501.34</td><td>1/15/2014</td><td>\$1,336.91</td></tr> <tr><td>7/15/2014</td><td>\$502.90</td><td>7/15/2014</td><td>\$1,341.07</td></tr> <tr><td>1/15/2015</td><td>\$510.67</td><td>1/15/2015</td><td>\$1,361.79</td></tr> <tr><td>7/15/2015</td><td>\$517.40</td><td>7/15/2015</td><td>\$1,379.73</td></tr> <tr><td>1/15/2016</td><td>\$524.34</td><td>1/15/2016</td><td>\$1,398.23</td></tr> <tr><td>7/15/2016</td><td>\$535.79</td><td>7/15/2016</td><td>\$1,428.74</td></tr> <tr><td>1/15/2017</td><td>\$538.19</td><td>1/15/2017</td><td>\$1,435.17</td></tr> <tr><td>7/15/2017</td><td>\$540.23</td><td>7/15/2017</td><td>\$1,440.60</td></tr> <tr><td>1/15/2018</td><td>\$548.93</td><td>1/15/2018</td><td>\$1,463.80</td></tr> <tr><td>7/15/2018</td><td>\$555.05</td><td>7/15/2018</td><td>\$1,480.12</td></tr> <tr><td>1/15/2019</td><td>\$565.06</td><td>1/15/2019</td><td>\$1,506.81</td></tr> <tr><td>7/15/2019</td><td>\$573.69</td><td>7/15/2019</td><td>\$1,529.84</td></tr> <tr><td>1/15/2020</td><td>\$580.90</td><td>1/15/2020</td><td>\$1,549.07</td></tr> <tr><td>7/15/2020</td><td>\$589.51</td><td>7/15/2020</td><td>\$1,572.01</td></tr> <tr><td>1/15/2021</td><td>\$605.23</td><td>1/15/2021</td><td>\$1,613.93</td></tr> <tr><td>7/15/2021</td><td>\$635.16</td><td>7/15/2021</td><td>\$1,693.76</td></tr> <tr><td>1/15/2022</td><td>\$650.56</td><td>1/15/2022</td><td>\$1,734.83</td></tr> </tbody> </table> <p>Waiting period: Upon stipulation by parties or award by the Illinois Workers' Compensation Commission. Unlimited benefits</p>	Minimum		Maximum		1/15/2014	\$501.34	1/15/2014	\$1,336.91	7/15/2014	\$502.90	7/15/2014	\$1,341.07	1/15/2015	\$510.67	1/15/2015	\$1,361.79	7/15/2015	\$517.40	7/15/2015	\$1,379.73	1/15/2016	\$524.34	1/15/2016	\$1,398.23	7/15/2016	\$535.79	7/15/2016	\$1,428.74	1/15/2017	\$538.19	1/15/2017	\$1,435.17	7/15/2017	\$540.23	7/15/2017	\$1,440.60	1/15/2018	\$548.93	1/15/2018	\$1,463.80	7/15/2018	\$555.05	7/15/2018	\$1,480.12	1/15/2019	\$565.06	1/15/2019	\$1,506.81	7/15/2019	\$573.69	7/15/2019	\$1,529.84	1/15/2020	\$580.90	1/15/2020	\$1,549.07	7/15/2020	\$589.51	7/15/2020	\$1,572.01	1/15/2021	\$605.23	1/15/2021	\$1,613.93	7/15/2021	\$635.16	7/15/2021	\$1,693.76	1/15/2022	\$650.56	1/15/2022	\$1,734.83
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<p>Fatality Benefits</p>	<p>The primary beneficiaries of the survivors' benefit are the spouse and children under the age of 18. If no primary beneficiaries exist, benefits may be paid to totally dependent parents. If no totally dependent parents exist, benefits may be paid to persons who were at least 50% dependent on the employee at the time of death. If there are eligible children at the time of remarriage, benefits will continue. If there are no eligible children at the time of remarriage, the spouse is entitled to a final lump sum payment equal to two years of compensation. All rights to further benefits are extinguished.</p> <p>For injuries occurring on or after 2/1/06: Death benefits are paid for 25 years or \$500,000, whichever is greater. Statutory Burial Expense: \$8,000 <b>Minimum:</b> Same as Permanent Total minimums. <b>Maximum:</b> Same as Permanent Total maximums. Waiting Period: Must prove up spousal relationship and/or dependency.</p>																																																																								

**Indemnity issues**

Vocational Rehabilitation Settlement Allowed	If, as a result of the accident, the employee cannot return to his pre-accident regular duties in which he or she was engaged at the time of injury, the employee and employer are required to develop a vocational rehabilitation plan. If a vocational rehabilitation plan cannot be developed by the parties, the Arbitrator will determine if the employee is a vocational candidate and impose a vocational rehabilitation plan. The employee must cooperate in a reasonable rehabilitation program or risk the suspension of benefits.
Cap on benefits, exceptions	Yes

**Medical issues**

Initial Choice of Provider/ Change of Provider	<p>First aid and emergency care are not considered to be one of the employee's two choices. Nonemergency care obtained before the employee reports the injury to the employer does not count as one of the two choices.</p> <p>Travelers has an approved Preferred Provider Program or "PPP". The employee has a choice of two physicians within the Travelers PPP. If the employee declines to participate in the PPP he/she is limited to one choice of doctor. Further, referrals from the selected provider are not considered a choice of provider.</p>
Medical Fee Schedule	Yes. Effective for treatment beginning 2/1/06. It is not Medicare based. It is based from an IL state specific formula.
Managed Care	Yes. The employee may decline participation in the PPP at any time by sending the employer a written statement. If the employee declines participation, it counts as one of the two choices of medical providers. See "Choice of Provider/Change of Provider" section above.
Utilization Review	Yes. May include prospective review, second opinions, concurrent review, discharge planning, peer review, independent medical examinations and retrospective review. Only a health care professional may make determinations regarding the medical necessity of health care services during the course of utilization review. Must be a Certified Illinois Utilization Program to obtain the rebuttable presumption.
Treatment Guidelines	No
Generic Drug Substitution	The state allows generic substitution; however, it is not mandatory.
Medical Mileage Reimbursement Rate	Mileage is mandatory for IME attendance and paid at 58.5 cents per mile effective January 1, 2022
Network Information	Coventry Integrated Network
Ability to Terminate Medical Treatment	Medical treatment may be terminated based on an Independent Medical Examination which supports termination of medical treatment.
Settlement Allowed	Yes. Future medical treatment can be closed out on settlement contracts.
Cap on benefits, exceptions	Yes. Subject to Medical Fee Schedule. Balance billing is not allowed.

**Other Issues**

WC Hearing Docket Speed	Cases set on initial status call 60 days post filing of an Application for
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**Illinois Workers Compensation Claim State Environmental Guide**

**Other Issues**

	<p>Adjustment of Claim. Cases are returned to the Docket every 90 days thereafter until resolved or motioned for hearing. Can take up to 2 years for average case to proceed to a hearing.</p> <p>Cases have been delayed because of COVID guidelines. Currently Arbitrators must pre-try all cases before a trial date can be assigned and trial dates are extremely limited.</p>	
Staff Counsel	<p>Holecek &amp; Associates 161 N. Clark Street Suite 800 Chicago, IL 60601</p>	<p>Law Offices of Steven Larson 940 West Port Plaza, Suite 208 St. Louis, MO 63146</p>
Hearings require attorney or claim handler participation	<p>Attorney participation is required.</p>	
Occupational Diseases	<p>Handled same as Occupational Injury.</p>	
Second Injury Fund availability	<p>Available through the state.</p>	
Other Offset Opportunities	<p>May take credit for prior injuries involving a specific body member. No credit allowed for prior Body as a Whole injuries.</p>	
EDI	<p>Transition from EDI Release 1 to EDI release 3.1 effective 6/14/2019</p>	
In-State Adjusting Required	<p>No</p>	
License or Certification Required	<p>No</p>	
	<p>The Statute of Limitations is 3 years from the date of injury or 2 years from the last workers' compensation payment, whichever is later.</p>	