



Workers' comp changes in effect 09/01/2011

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An outline of the important substantive changes to the Illinois Workers' Compensation Act that went into effect on September 1, 2011.

Yesterday was an important day for the new Workers' Compensation Act. The substantive changes to the law went into effect as of September 1, 2011.

For accidental injuries that occur on or after September 1, 2011, the new Section 8.1b is applicable. This section allows the use of the American Medical Association Guides to the Evaluation of Permanent Impairment to be considered when determining the permanent partial disability a worker suffers as a result of his or her injury. Factors considered when determining permanent partial disability are now limited to the injured employee's age, occupation, future earning capacity, evidence of disability in medical records, and a written report of a medical doctor detailing the level of the injured worker's permanent impairment based on the AMA Guides.

For medical treatment rendered on or after September 1, 2011, the new Medical Fee Schedule applies. This new Schedule reduces reimbursements to doctors and hospital by 30% from the current fee schedule. The Chicago Tribune article yesterday entitled, "*Charting changes to Illinois workers' compensation,*" finally reported from a standpoint that adequately considered the effect of the changes to the Act on the injured worker, stating "The Illinois State Medical Society warns that reducing reimbursements will discourage physicians from treating injured workers. If fewer doctors are willing to treat injured workers, care becomes more complicated and more expensive, the society said." To read the full Chicago Tribune article, [click here](#).

Although reimbursements are being cut by 30%, the National Council on Compensation Insurance (NCCI) filed a report with the Illinois Department of Insurance stating that this reduction would only account for a 7.4% decrease in premiums to be paid by Illinois employers. The NCCI filed an additional 1.4% decrease to result from changes in benefits, like the permanent partial disability benefits mentioned above. The Illinois Department of Insurance

approved the 8.8% decrease in voluntary advisory insurance rates to take effect as of yesterday. However, insurers are able to charge more or less than the advisory insurance rates.

For proposed or provided health care services after September 1, 2011, the new Utilization Review (UR) provisions apply. UR is the procedure by which the workers' compensation insurance company sends an injured worker's medical records to be reviewed by a physician (usually in another state) to opine on whether certain treatments may or may not be necessary. The UR physician does not interview or examine the injured worker. UR reports ignore the subjective complaints and healing times of individual patients, and adhere to a strict objective measure of what is appropriate treatment for most people. The Amendments put the burden on the injured worker to refute UR findings by showing that a variance from the standards used by the reviewing physician is reasonably necessary to cure or relieve the effects of his or her injury.

This change will require an injured worker and his or her attorney to litigate medical issues more frequently – costing the injured worker time and money. It will increase the likelihood that a claim will have to proceed to hearing in front of an Arbitrator. It will require an injured worker's attorney to take the deposition of UR professionals which may result in the delay of appropriate medical treatment.

If you have questions regarding how these changes apply to you or your loved ones, please contact Ridge & Associates at (312) 372-8282.