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NEW ILLINOIS WORKERS' COMPENSATION RATES

State's Average Weekly Wage (SAWW):	
<u>From 7/15/08 to 1/15/09:</u>	\$ 912.56
<u>From 1/15/09 to 7/15/09:</u>	\$ 923.56
Maximum Temporary Total Rate (TT):	
<u>From 7/15/08 to 1/15/09:</u>	\$1,216.75
<u>From 1/15/09 to 7/15/09:</u>	\$1,231.41
Maximum Permanent Partial Disability	
Rate (PPD): <u>From 7/1/07 to 7/1/08:</u>	\$ 636.15
<u>From 7/1/08 to 7/1/09:</u>	\$ 664.72
Minimum Rate for Death and Permanent Total	
(PTD) cases: <u>From 7/15/08 to 1/15/09:</u>	\$ 456.28
<u>From 1/15/09 to 7/15/09:</u>	\$ 461.78

SUMMARY OF COMPENSATION RATE CHANGES SINCE 2000:

<u>Effective Dates</u>	<u>SAWW</u>	<u>MAX. TT</u>	<u>MAX. PPD*</u> (7/1 to 7/1)	<u>MIN. PTD</u>
1/15/00 to 7/15/00	674.86	899.81	485.65	337.43
7/15/00 to 1/15/01	695.30	927.06	516.15	347.65
1/15/01 to 7/15/01	717.24	956.32	516.15	358.62
7/15/01 to 1/15/02	729.09	972.12	534.16	364.55
1/15/02 to 7/15/02	742.24	989.65	534.16	371.12
7/15/02 to 1/15/03	748.59	998.12	542.17	374.30
1/15/03 to 7/15/03	753.31	1,004.41	542.17	376.66
7/15/03 to 1/15/04	759.01	1,012.01	550.47	379.51
1/15/04 to 7/15/04	764.80	1,019.73	550.47	382.40
7/15/04 to 1/15/05	775.92	1,034.56	567.87	387.96
1/15/05 to 7/15/05	788.99	1,051.99	567.87	394.50
7/15/05 to 1/15/06	808.73	1,078.31	591.77	404.37
1/15/06 to 7/15/06	822.20	1,096.27	591.77	411.10
7/15/06 to 1/15/07	840.65	1,120.87	619.97	420.33
1/15/07 to 7/15/07	861.38	1,148.51	619.97	430.69
7/15/07 to 1/15/08	873.28	1,164.37	636.15	436.64
1/15/08 to 7/15/08	883.86	1,178.48	636.15	441.93
7/15/08 to 1/15/09	912.56	1,216.75	664.72	456.28
1/15/09 to 7/15/09	923.56	1,231.41	664.72	461.78

* Maximum PPD rates are in effect from 7/1 of each year to 7/1 of the following year.

Rate Calculations - Short Method:

AWW÷3x2=TT Rate x.9=PPD (60% of AWW)

Travel Expense Allowed by Commission:

50.5¢ per mile (effective 7/1/08 to 6/30/09)

Temporary Total - Computing Fraction of Week:

1/7 week - .1428 4/7 week - .5714

2/7 week - .2857 5/7 week - .7142

3/7 week - .4285 6/7 week - .8571

MINIMUM RATES:*

Status	Until 2/1/06	Until 2/1/06
	Temporary Total	Permanent Partial**
Single	\$ 100.90	\$ 80.90
Married (no children)	105.50	83.20
1 Child	108.30	86.10
2 Children	113.40	88.90
3 Children	117.40	91.80
4 or more Children	124.30	96.90

* Not to exceed the employee's average weekly wage.

** Not applicable in death or permanent total cases.

New Minimum TTD and PPD Rates	Injuries On/After:	2/1/06	7/1/07	7/1/08
Base Rate:		\$260.00	\$300.00	\$310.00
Single Employee:		\$173.32	\$200.00	\$206.67
Employee with 1 dependent:		\$199.32	\$230.00	\$237.67
Employee with 2 dependents:		\$225.32	\$260.00	\$268.67
Employee with 3 dependents:		\$251.32	\$290.00	\$299.67
Employee with 4+ dependents:		\$260.00	\$300.00	\$310.00

***The minimum rate for TTD and PPD is increased to 66-2/3% of the sum of the Federal minimum wage or the Illinois minimum wage, whichever is higher, multiplied by 40 hours. The percentage rate shall be increased by 10% for each spouse and child, not to exceed 100% of the total minimum wage calculation. As of 2/1/06, the Illinois minimum wage of \$6.50 per hour will apply; the minimum hourly rate increased to \$7.50 on 7/1/07 and to \$7.75 on 7/1/08.

MAXIMUM WEEKS FOR SCHEDULED LOSSES:

INJURIES OCCURRING

	Before	7/20/05-	11/16/05-	On or after
	7/20/05	11/15/05	1/31/06	2/1/06
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	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 (under WC Act)	50	54	50	54
Hearing loss of both ears (under WC Act)	200	215	200	215
Loss of one testicle	50	54	50	54
Loss of both testicles	150	162	150	162

Noise-Induced Hearing Loss (OD Act) - 100 weeks each ear.
 Whole Body Impairment (Body as a Whole) - 500 weeks.
 Loss of Kidney, Spleen or Lung - not less than 10 weeks.
 Skull Fracture, Fractured Vertebra - not less than 6 weeks.
 Fracture of Transverse Process - not less than 3 weeks.
 Fracture of Facial Bone - not less than 2 weeks.