



Welcome to the San Francisco Workers' Compensation Council Meeting

Report to the San Francisco Workers' Compensation Council

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Agenda

- Purpose of the WC Council
- Accomplishments, Initiatives and Challenges
- Temporary Transitional Work Program Report
- COVID-19 Report
- Performance Quick Facts
- Financials
- Claim Analytics

Purpose of the Council



Background

- DHR took over administration of the Workers' Compensation Division starting 1/1/95 (Admin Code 16.82 and 16.83)
- WC expenditures increased substantially in the late 1990s, raising concerns about the City to contain costs and effectiveness of the WC program
- Review of WC program noted lack of oversight, effectiveness and direction
- In response to those concerns, Mayor Willie Brown appointed the Workers Compensation Council (WCC) in 1999



Purpose of WC Council

- Provide Oversight of Workers Compensation costs, initiatives, processes and procedures
- Act as advisory capacity on all WC matters on Cost containment and loss prevention
- Membership is established under Admin Code 16.121.2:
 - Human Resources Director (Chair)
 - City Administrator
 - Controller
 - City Attorney
 - Retirement System – Executive Director
 - Mayor’s Office - Director of Budget and Finance



Authority

- Sec. 16.121.3 of the SF Admin Code establishes Council's Powers and Duties
- Acts in an advisory capacity in all matters pertaining to workers' compensation and safety as required
- Assists the Human Resources Director in the establishment and maintenance of a record system that collects and tracks pertinent work injury and illness data



Overview of Progress

- In 2000, Passage of Proposition E established authority for SFMTA to separately self-insure
- Council submitted Annual Reports to Board of Supervisors to report on WC program progress
- External Audits done at request of WCC identified issues in WC cost containment and oversight, and recommended areas of improvement
- Overall, issues identified when Council was formed have been resolved, leaving WCC to serve in advisory and oversight capacity over the City's WC Program

Accomplishments, Initiatives & Challenges



Accomplishments

- Successfully transitioned Special Investigative Unit and Fraud Services to Intercare 4/5/23
- Successfully transitioned Medical Provider Network Access Assistant duties and MPN state filing to Intercare effective 5/1/23
- Workload and Staffing Analysis completed 2/21/23; will implement findings as resources allow in future budgets
- Management Promotions
 - Arnold Pacpaco - Assistant Director – Claims
 - Stanley Ellicott – Assistant Director – Finance and Technology
- Critical contract renewals completed, including:
 - ADR Director (Amendment to Extend, Add Value)
 - Claims Information System from Ventiv Technologies (Amendment to Extend, Add Value)



Accomplishments

- Completed annual WCD reporting Requirements to Division of Workers Compensation (DWC):
 - Annual Report of Inventory
 - Annual Reports for Alternate Dispute Resolution Programs for Police and Fire per CCR 10203 and 10204
- Completed successful migration of cash receipt processing to JP Morgan
- Finalized citywide workers' compensation budgets for FY23/FY24 which deliver General Fund Savings due to slower than anticipated cost growth and improved claim development factors



Current Initiatives

- Contract renewal for Ombudsperson services (Amendment to Extend, Add Value) progressing
- Profile Audit Review (PAR) Audit Preparation and Mock Assessment underway
- SF ADR Program Year 3 (FY2021-2022) Actuarial Analyses in progress
- Catastrophic Illness Program Draft Updates to Admin Code pending finalization and presentation to Board of Supervisors
- Staff Recruitments, exams and hiring ongoing for multiple WCD positions



Workplace Safety and Health Initiatives

- WCD is working with departments to ensure OSHA recordkeeping requirements at the department level are met and sharing best practices on matters that impact workplace safety within the CCSF safety community
- Meeting with departments and with SEIU Local 1021 on safety concerns
 - Assault Signage per MOU agreement drafted and pending review
- 3rd Quarter Safety Newsletter completed and distributed
- Collected and shared departmental Injury Illness Prevention Programs (IIPP) to better support departments on developing, implementing and managing their IIPPs
- Planning underway for city-wide Safety & Health Training to meet Cal/OSHA training requirements, to enhance safe work performance, and to promote workplace safety



WC Challenges for FY22-23

- **Inflation** – Rapid inflation over the past year has led to substantial increases in benefit rates- both indemnity and medical expense; adding to increased pressure to control costs
 - Eg. Temporary Disability rates increased 18% in past 2 years
- **Contracting**- lack of internal safety and health resources and available contracting staff citywide is impacting ability to provide Citywide safety resources and training through available contracts or internally
- **Lack of Medical Resources**- Health professional burnout and providers exiting the industry increases burden on remaining medical community who see workers comp cases. This adds delay to accessing care and thus further lost time
- **Aging CCSF Workforce** – 24% of CCSF staff eligible (including in WC Division) to retire in next 3 years, making it a challenging market to backfill and fill positions



WC Challenges for FY22-23

- **Pending Legislation** – Pending WC legislation aims to add to presumptions for PTSD, add new presumptions for hospital workers, and add TD benefits for denied UR treatment that is overturned
- **SB1127 passed 9/29/22:** Increases cost pressures for cancer work-related injuries by:
 - Increasing maximum time from 104 weeks to 240 weeks for specified firefighters and peace officers' disability benefits
 - Decreases time frame for carrier to deny liability for a claim from 90 to 75 days
 - Increases penalties when liability has been unreasonably rejected for claims of injury or illness, as defined in LC 3212 - LC 3213.2, to five times the amount of the benefits unreasonably delayed due to the rejection of liability, up to \$50,000

Temporary Transitional Work Program Report

- Deployed **Citywide Temporary Transitional Work Assignment (TTWA) Policy 11/10/22**
 - Policy implementation will drive improved Return to Work Outcomes by requiring City Departments to develop and facilitate modified duty for employees whose medical conditions allow for temporary transitional work assignments
 - Ongoing meetings and presentations with departments to address concerns, questions and challenges on temporary transitional work assignments



Current TTWA Efforts

- Ongoing meetings with departments to address concerns, questions and challenges on providing temporary transitional work assignments
- TTWA Policy sent to providers to educate them on the City's policy on early return-to-work and availability of modified work
- WCD centrally collecting job analyses and descriptions citywide to give providers in order to evaluate feasibility of temporary transitional work
- Pilot ongoing with internal WCD team to centrally track modified duty in claims system for reporting purposes
- System enhancements pending to help better track department accommodation of TTWA and fiscal impact of not providing modified duty
- Communications ongoing with MPN providers and injured employees on TTWA policy and program – setting the tone and expectation



TTWA Challenges

- Departments struggle with identifying tasks within department to place injured employees, placing limitation on modified duty
- Resistance to modifying existing approaches to modified duty
- Physicians taking injured employees off work completely without indicating restrictions
- Staff shortages for adjusting staff, MPN providers and within departments make it a challenge to consistently and timely address modified duty
- Several “urban myths” circulating regarding modified duty and applying TTWA, impacting culture toward TTWA



'Urban Myths' on TTWA

- “Employees are entitled to 1-year of WC benefits before going to modified duty.”
- “The employee’s commute has to be factored in when determining modified duty.”
- “The employee cannot change their shift when we accommodate.”
- “My department does not provide modified duty.”
- “If the employee does not want to return to modified duty, they should not have to.”



Seeking Guidance

- Issue – How to address departments who routinely do not offer modified duty where feasible
- Examples include, but not limited to:
 - Modified duty program established within department; yet department does not accommodate
 - Lack of response by department to adjuster inquiries on modified duty
 - Departments who project budget deficits, yet do not consistently offer modified duty



TTWA Next Steps

- Continued tracking within the Claims system for better reporting on the impacts and costs of failure to provide transitional work when eligible
- Continued vetting to add MPN physicians and clinics to ease provider access concerns and to better support the TTWA program
- Continued work with departments to address their concerns and challenges surrounding bringing injured employees back to work

COVID-19 Report



Citywide COVID-19 Report

Management of COVID since last meeting 2/5/2023:

- State and SFDPH emergency orders have ended
- Leaves types ended
- Federal COVID emergency ended early on April 10, 2023
- Monovalent MRNA vaccine replaced by bivalent vaccine
- FDA recommendation for second bivalent booster to older or immune compromised adults
- FDA meeting in June 2023 to decide about ongoing seasonal booster recommendations
- New variant XBB1.16: very contagious, mild, eye symptoms



Citywide COVID-19 Report

Number trends since last meeting 2/5/2023:

San Franciscans: 1 in 4 residents

- Peaked at 211/day, now 40/day
- Test positivity rate: peaked at 12.6% now down to 6.9%
- Total cases >198,000 an under estimation (only lab run test)

CCSF Employees: 1 in 5 employees

- Peaked at 137/week, now at <30/week
- CCSF Employees total COVID >6500 cases (includes repeat infection), data from employee submission in People & Pay
- Likely more accurate: includes both home antigen tests, and lab run tests



Citywide COVID-19 Report

Outbreaks (3 or more cases at a worksite in 14 days):

Outbreak considered over when one or fewer new cases in 14 days, so not lasting as long

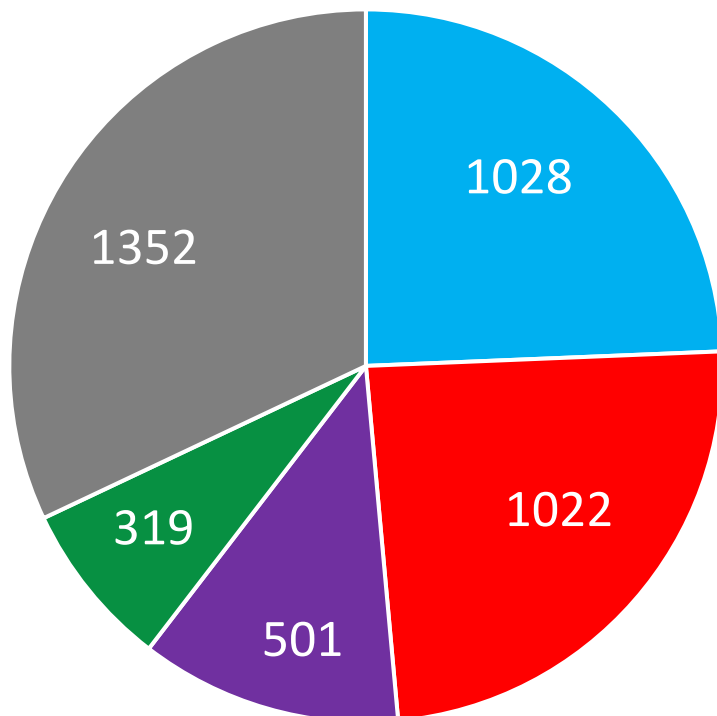
- 26 more outbreaks since last WCC meeting
- Now: 1 active, 264 resolved

Workers Comp COV claims:

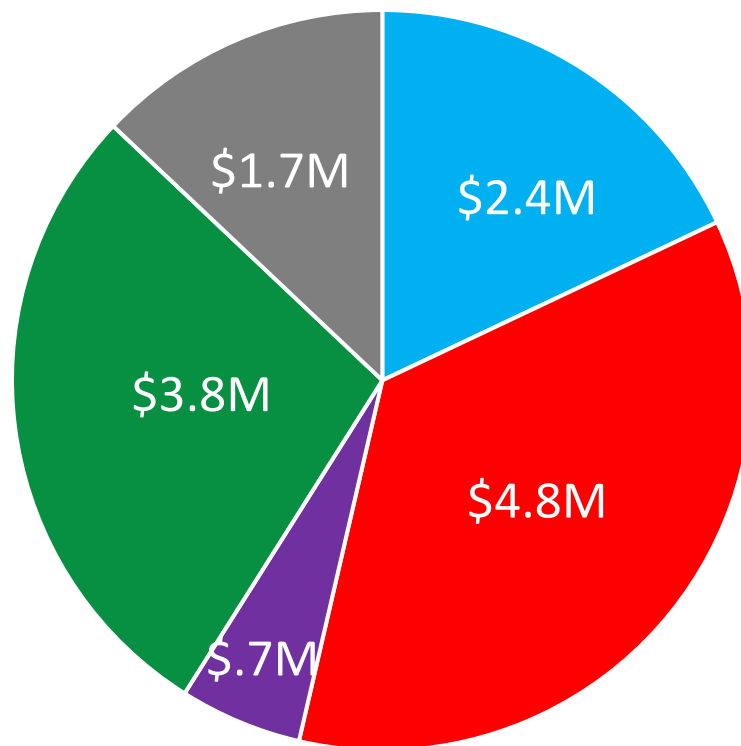
As of 9-Month

- 4,222 Claims Citywide
- 3,802 Accepted
- 444 Denied
- 12.3% of claims from FY23 Q3 were denied

Claim Volume



Claim Cost



- SF Police Dept
- SF Fire Dept
- Community Health Network
- Sheriffs Office
- All Other Depts



COVID Claim Differences

- All first responder Depts covered by presumption legislation
- There are differences between Depts:

Average TD Loss Days/Claim	COVID	Non-COVID
SF Fire Dept	12	27
SF Police Dept	10	39
Sheriffs Office	30	51

- Notes: include time range 7/1/2020-3/31/2023, only closed claims, includes all Dept roles



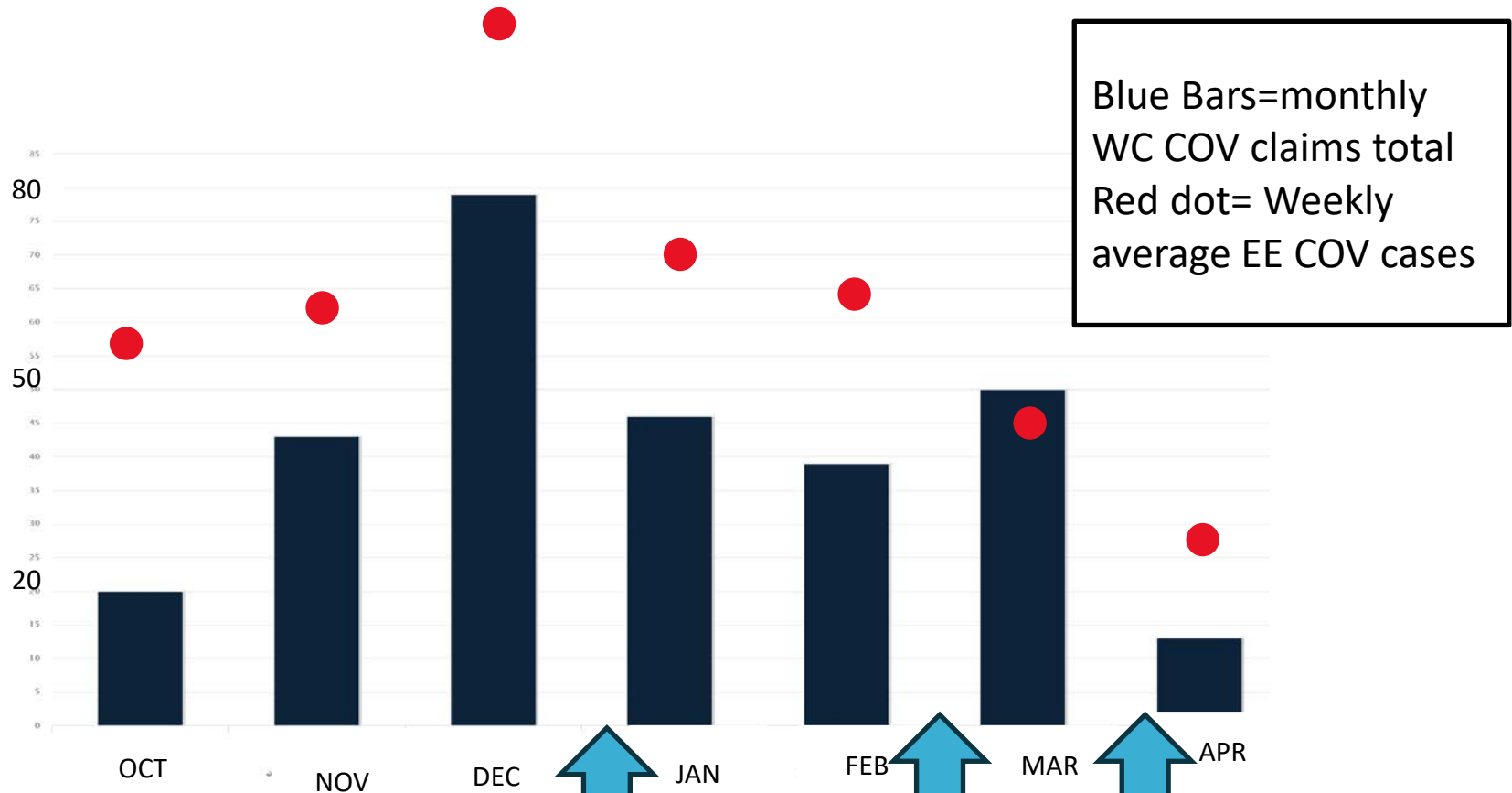
What are WC COVID costs

- \$13.16M total spent on COVID illness and time away by WC
- Citywide 4850 Pay (“Disability Pay”) totaled \$8.64M or 63.3% of COVID-19 Claim Expense
- Average medical portion of claim cost: 13% due to medical expenditures, average \$441 on average claim of \$3,282
- Very low overall rate (2.8%) of hospitalization for COVID-19 claims (120 hospitalizations / 4,222 claims)
- Of the hospitalizations: 108 were before there was vaccine available or required (from 3/2020- 11/2021)

	Inpatient Hosp.	Outpatient Hosp.	Totals
Pre-Vax Avail	\$649,175	\$232,043	\$881,218
Post-Vax Avail	\$25,669	\$6,385	\$32,055
Totals	\$674,844	\$238,429	\$913,273

- High exposure claims:
 - The 20 most expensive open claims have incurred \$3.35M
 - 17 of the 20 claims were experienced by public safety departments

DHHR WC Claims vs. Employee weekly cases



Key Dates:

12/31/22 COV leave ended

2/28/2023 PHEL Ended

3/13/2023 Quarantine shorten to 5 days, no test

Performance Quick Facts



FY23 Q3 Performance Quick Facts

Fiscal Health

Ratio of Actuals to Budget

FY23 Q3 97%

Benchmark: 95%

Claim Volume

Count of New Claims in Period

	Claims	Total
FY23Q3	Indemnity	578
	Medical	188
Benchmark	Indemnity	498
	Medical	202

Claim Cost

Average Cost of Claims Closed in Period

	Cost	Total
FY23Q3	Indemnity	\$14,000
	Medical	\$439
Benchmark	Indemnity	\$12,200
	Medical	\$756

Duration

Average Days Open of Claims Closed in Period

	Days
FY23Q3	274
Benchmark	194

Notes: All benchmarks based on rolling four-year averages (FY19-23). Fiscal health metric includes overhead and claim expenditures and is based on original budget, excluding any carryforward. Duration excludes disability retirement and future medical claims.

Financials



Benefit Expense by Reserve

	FY21 Actuals	FY22 Actuals	FY23 Proj. Actuals at Q2	FY23 Proj. Actuals at Q3	YOY Change (%)
INDEMNITY					
Temporary Disability	13,504,622	17,293,455	18,150,494	17,991,963	3.9%
Permanent Disability	14,663,983	17,720,503	17,173,055	16,527,904	-7.2%
INDEMNITY SUBTOTAL	<i>28,168,605</i>	<i>35,013,959</i>	<i>35,323,548</i>	<i>34,519,867</i>	<i>-1.4%</i>
4850 SALARY CONTINUATION	32,206,988	35,921,457	33,062,841	31,830,381	-12.9%
VOCATIONAL REHABILITATION	159,210	175,685	240,350	229,609	23.5%
MEDICAL	28,460,327	34,780,846	32,710,917	34,718,564	-.2%
EXPENSE	3,103,060	3,515,462	3,070,427	2,828,795	-24.3%
RECOVERY	-768,520	-688,841	-921,041	-740,236	6.9%
GRAND TOTAL	91,329,670	108,718,568	103,487,042	103,386,980	-5.2%

Notes:

1. All figures exclude SFMTA
2. Projected actuals reflect forecast as of the 9-Month Report



Department Expenditure Trends

Department	FY22 Actuals	FY23 Revised Budget	FY23 Proj. Actuals at 6-M	FY23 Proj. Actuals at 9-M	FY23 Surplus/ (Deficit)	YOY Change
Police	20,307,019	20,973,830	21,335,438	22,108,361	(1,134,530)	1,801,342
Public Health	17,916,563	20,301,646	17,274,706	17,108,301	1,939,417	(808,262)
Fire	17,049,008	18,956,805	16,530,160	15,608,914	3,347,891	(1,440,094)
Sheriff	8,290,933	9,383,892	8,243,514	8,722,701	661,191	431,768
Public Works	5,532,181	5,473,000	4,847,703	4,939,160	533,840	(593,021)
Recreation & Parks	4,541,961	4,754,000	4,101,110	4,164,269	589,731	(377,692)
Human Services	2,831,064	3,106,000	2,619,477	2,747,065	358,935	(83,999)
Airport	4,140,650	4,515,035	4,694,837	5,714,806	(1,199,771)	1,574,156
PUC-Water	2,046,395	2,129,000	2,454,367	2,571,920	(442,920)	525,525
PUC-Wastewater	2,243,452	2,488,000	2,748,864	2,591,823	(103,823)	348,371
Total Top Ten Departments	84,899,226	92,081,209	84,850,175	86,277,320	4,549,961	1,378,094
Total of All City Departments	93,621,127	103,850,977	95,652,947	97,031,914	6,819,063	3,410,787

Notes:

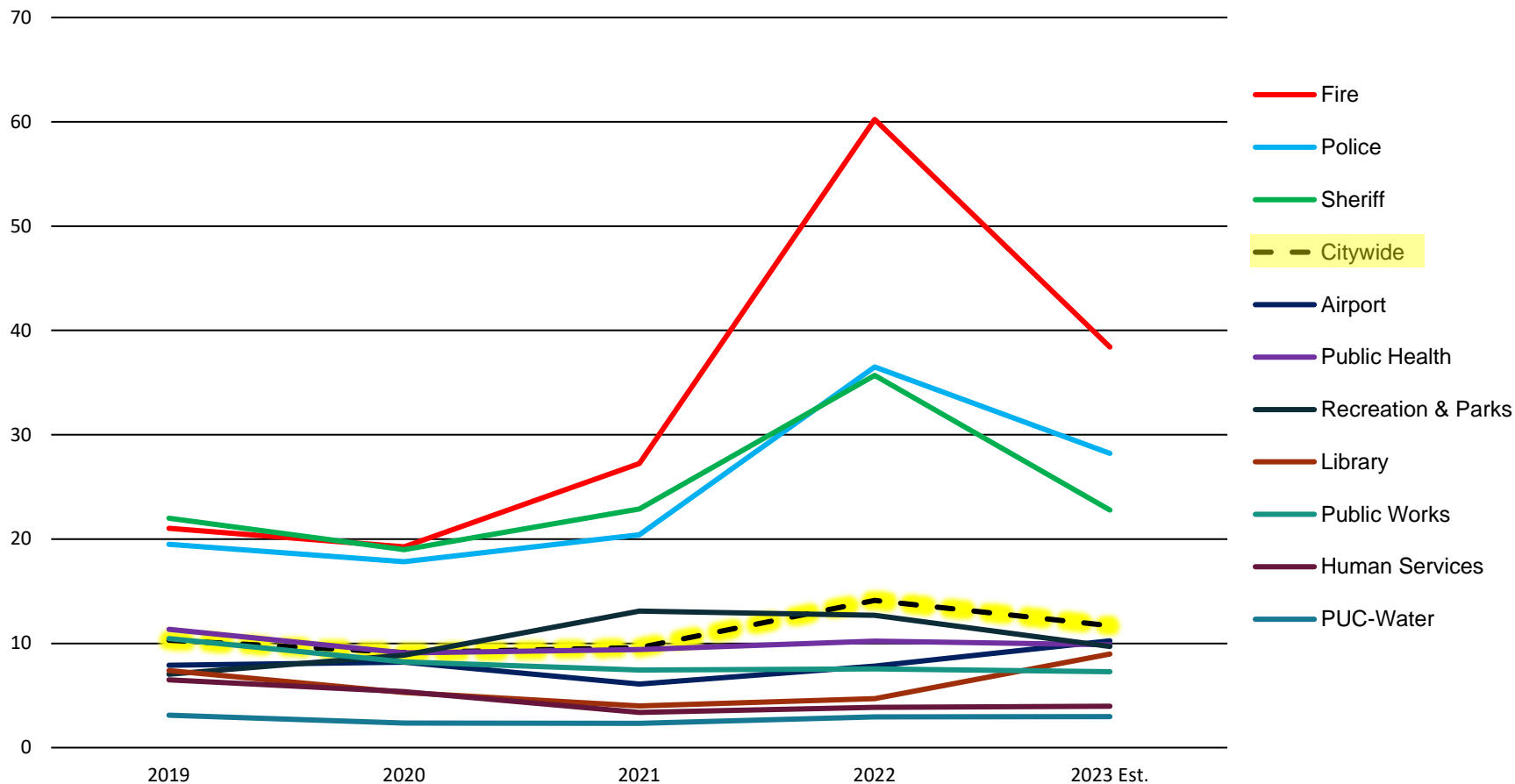
1. Expenditures exclude LC4850 salary continuation benefits and SF Community College, and include program overhead
2. Departments sorted by FY23 Revised Budget
2. Projected actuals reflect forecast as of the 6-Month Report

Claim Analytics



Claims Incurred Per 100 FTE

Top 10 Departments



Notes:

- 1. Report only claims are excluded
- 2. 2023 Est. reflects a straight line of FY2023 Q1-Q3 claim volume for the whole fiscal year
- 3. Inclusive of COVID-19 claim experience



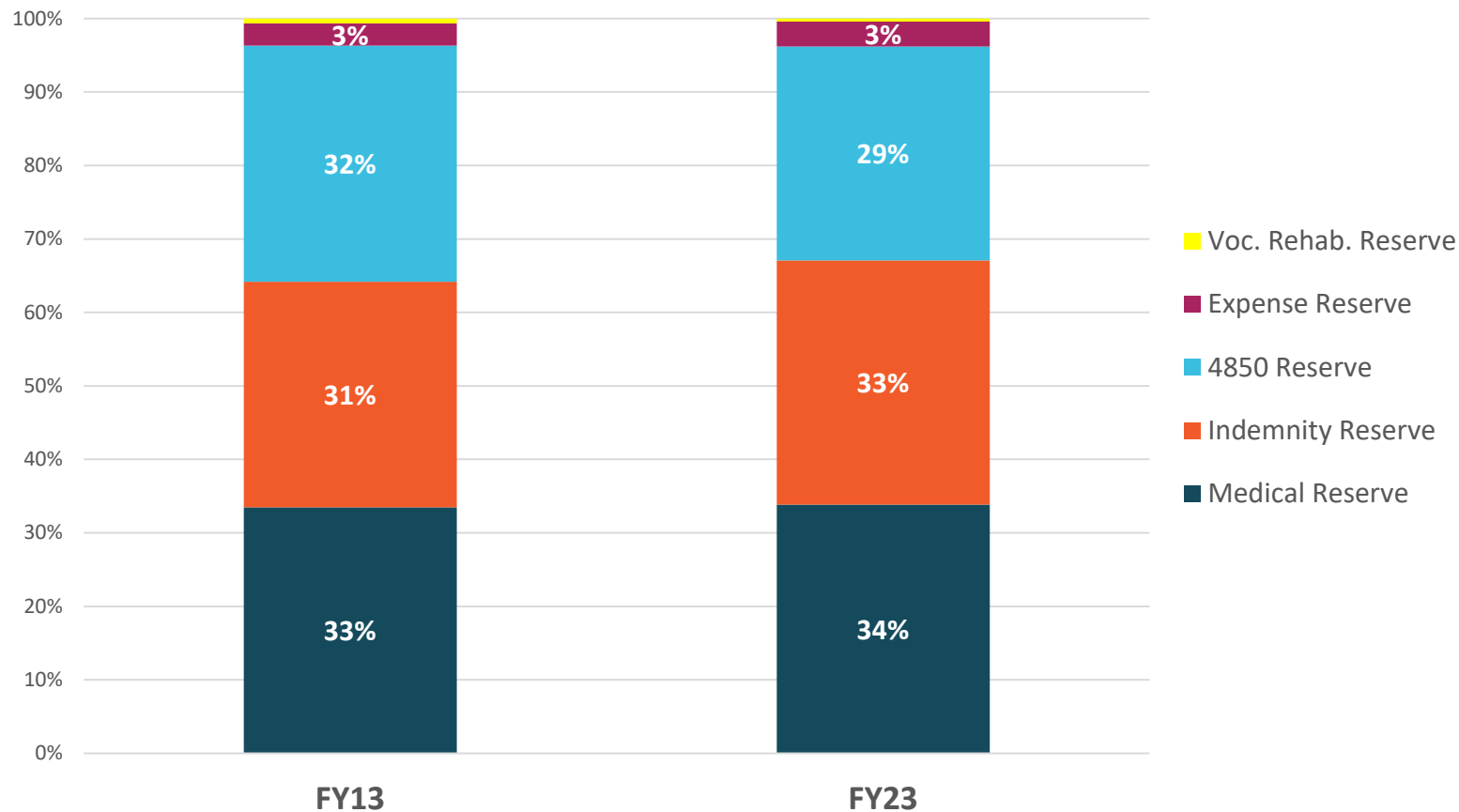
Claim Filing Frequency

	FY19-22			FY23 Q3			FY23 Q3 Increase / Decrease		
Department	Average Indemnity Claims Per Quarter	Average Medical Claims Per Quarter	Average Indemnity + Medical Claims Per Quarter	Total Indemnity Claims	Total Medical Claims	Total Indemnity + Medical Claims	Indemnity	Medical	Indemnity + Medical
Fire	107	13	120	150	15	165	43 or 40%	2 or 16%	45 or 38%
Public Health	69	105	174	67	94	161	-2 or -2%	-11 or -11%	-13 or -7%
Police	120	24	144	136	20	156	16 or 13%	-4 or -15%	12 or 8%
Sheriff	53	5	58	45	4	49	-8 or -15%	-1 or -21%	-9 or -16%
Airport	21	9	30	34	10	44	13 or 62%	1 or 11%	14 or 47%
Recreation & Parks	26	8	34	28	8	36	2 or 7%	0 or 2%	2 or 6%
Human Services	23	4	26	18	6	24	-5 or -21%	2 or 66%	-2 or -9%
Public Works	16	12	28	18	2	20	2 or 14%	-10 or -83%	-8 or -28%
Water Pollution Control	7	2	9	13	4	17	6 or 98%	2 or 106%	9 or 100%
PUC-Water	8	6	13	9	7	16	1 or 15%	1 or 26%	3 or 20%
Citywide	498	202	700	578	188	766	80 or 16%	-14 or -7%	66 or 9%



Historical Comparison of Claim Costs

Distribution of Costs (%) by Reserve Category of Closed Claims



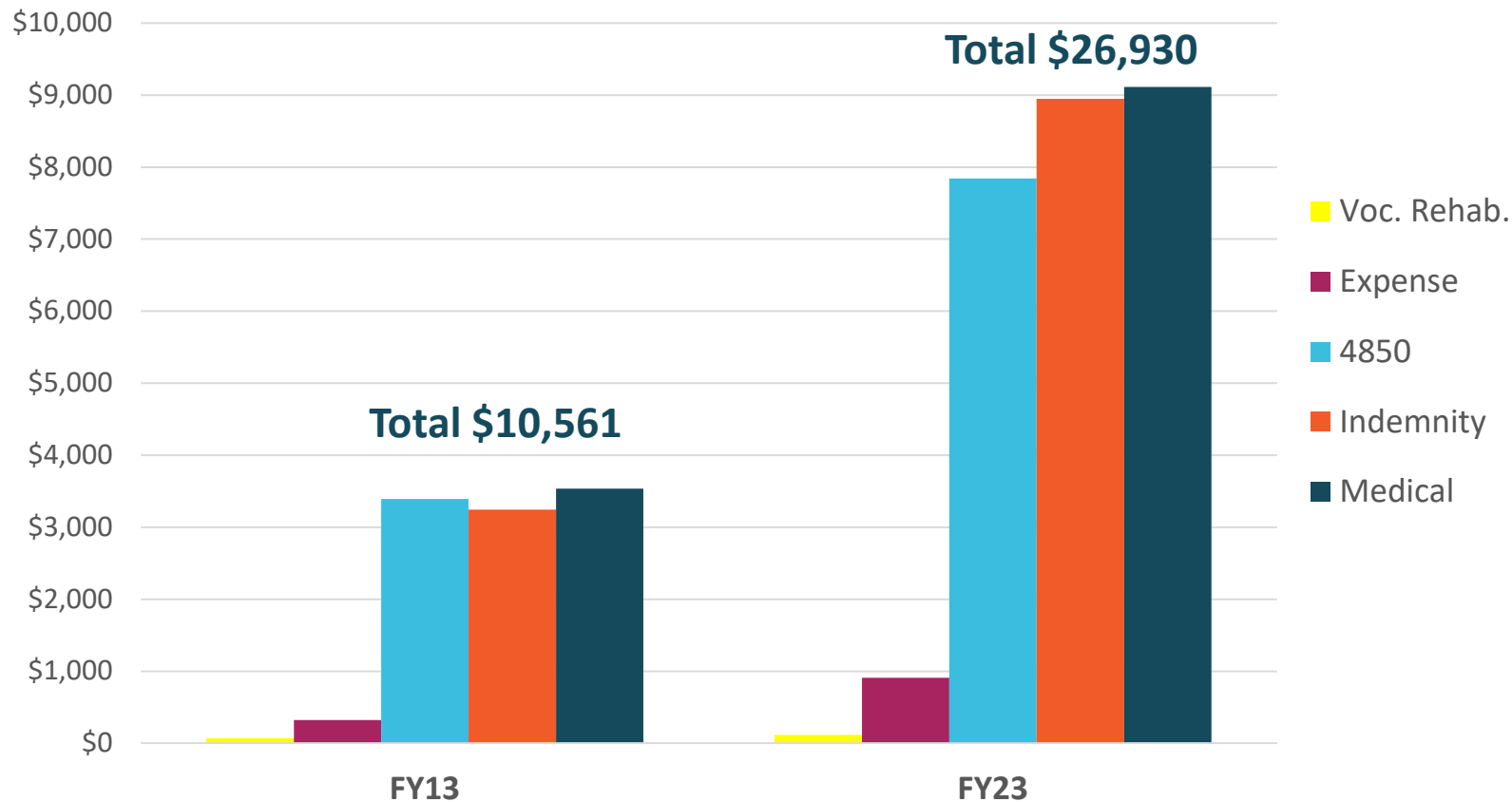
Notes:

1. Only Q1 – Q3 data were included in each fiscal year.



Historical Distribution of Claim Costs

Average Claim Expense at Closure by Reserve Category (\$)

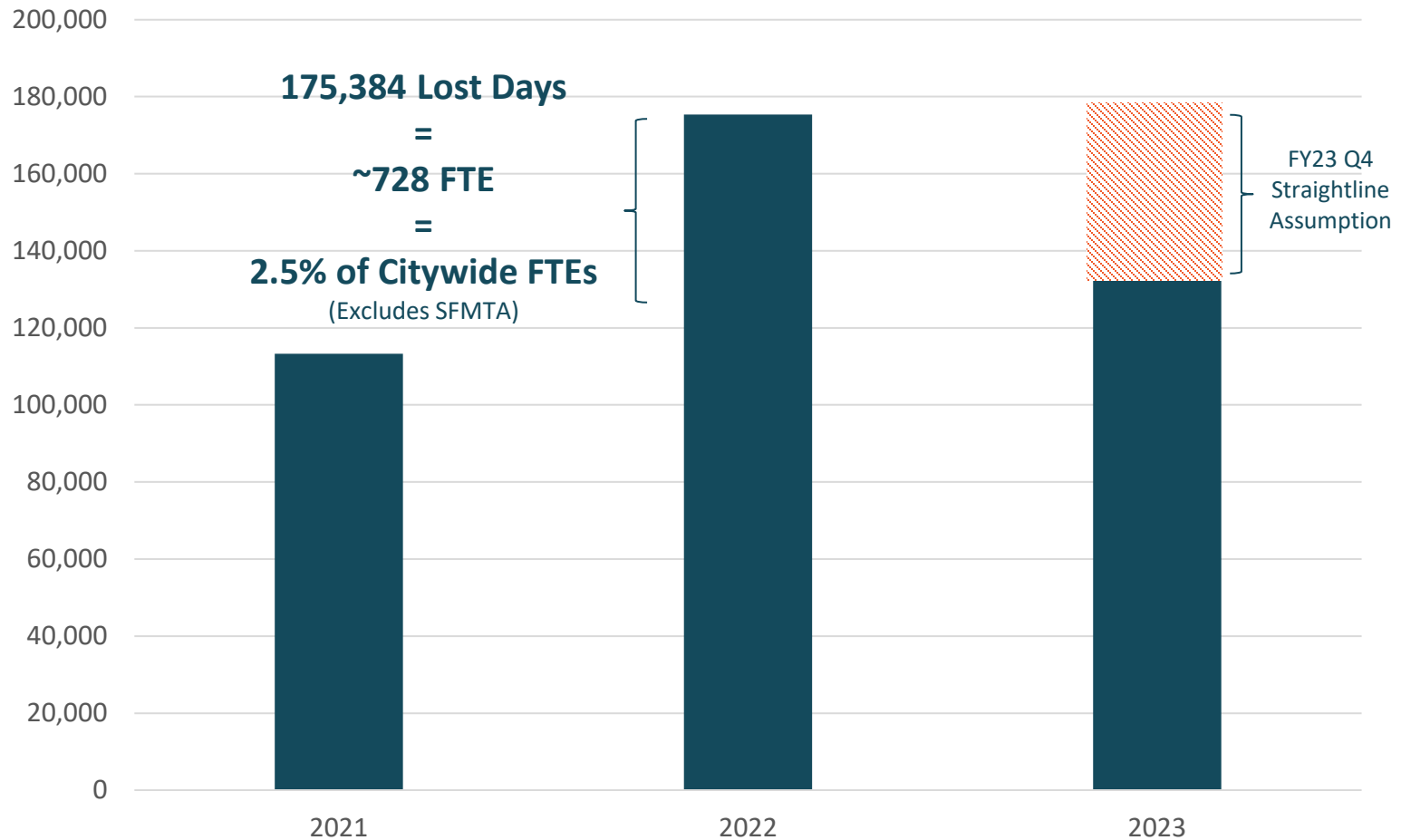


Notes:

- 1. Only Q1 – Q3 data were included in each fiscal year.
- 2. Dollars are unadjusted.



TD Lost Days by Fiscal Year



Notes:

- 1. TD lost days calculation includes temporary disability payments and 4850 (“Disability Pay”) payments.
- 2. Payment data ranged from 7/1/2020 to 3/31/2023.
- 3. Top 5 departments with the most lost days in FY23 (accounted for 75% of the total), from highest to lowest: POL, DPH, FIR, SHF, and AIR.



Litigation Statistics

Department	Open Indemnity Claims Added from FY19-FY23Q3	Represented Claims	Represented %	Litigated Claims	Litigated %
Police	492	209	42%	52	11%
Fire	403	105	26%	21	5%
Public Health	384	134	35%	102	27%
Sheriff	294	124	42%	79	27%
Airport	148	42	28%	32	22%
Recreation & Parks	136	44	32%	37	27%
Public Works	114	59	52%	59	52%
Human Services	102	49	48%	14	14%
Water Pollution Control	58	10	17%	4	7%
PUC-Water	57	20	35%	17	30%
Citywide	2,496	898	36%	488	20%

Note: Latest fiscal year includes data up to the current reporting quarter.

Appendix



Appendix 1: Claim Cause Group Definitions

Claim Cause Group	Definition	Type(s) of Injury
Abrasion	Injuries sustained as a result of rubbing against a rough surface/wall	Skin
Bodily Motion	Injuries sustained due to physical motion, such as bending, lifting, reaching, pulling/pulling, twisting/turning, etc.	Primarily orthopedic injuries.
Caught In, Under, Between	Injuries that have occurred due to being pinned by, under or between objects, furniture, or equipment. This includes injuries occurring as a result of a cave-in.	Orthopedic injuries, lacerations, crush injuries.
Cumulative Trauma	Use for repetitive stress injuries due to repeated exposure over time.	Single or multiple body parts used in repeated exposure over a period of time – e.g. Carpal Tunnel, prolonged standing, psyche stress.
Explosion	Used for injuries sustained as a result of an explosion.	Orthopedic, burns, internal, catastrophic injuries, etc.
Exposure	Used for various internal injuries, such as repeated exposure to carcinogens, stressful work situation, or hard physical work leading to a negative bodily reaction. This can also include reactions to poisonous or toxic substances.	Cancer, heart trouble, internal injuries or exposure to poison oak, MRSA, or heat stroke. Also may include foreign substance into eyes or body, or bloodborne pathogen exposure.
Fall, Slip or Trip	Injuries sustained from a slip and fall, or trips and slips. This includes falls from elevation, from stairs, ladders, onto walkways, etc.	Single or multiple body parts, resulting in sprains, strains, contusions, lacerations, fractures, etc.
Ingestion	Injury sustained due to ingesting harmful substance.	Internal/exposure.



Appendix 1: Claim Cause Group Definitions, Cont.

Claim Cause Group	Definition	Type(s) of Injury
Misc	Miscellaneous injury not covered in other areas or rarely filed	Misc
Personal Injury/Illness	Injury that is non-occupational in nature, but aggravated or exacerbated by work.	Personal injury of a orthopedic or internal nature.
Physical Assault	Injuries sustained due to physical altercations (being struck or striking person or people).	Single or multiple body parts involved. Results in lacerations, sprains, strains, fractures, abrasions, even internal injuries.
Stress	Injuries sustained due to work related stress.	Primarily psychological/psychiatric injuries, including any resulting physical symptoms.
Struck By/Against	Injuries when objects are thrown at employees, when an employee is hit by a random moving machine part or object; or collides with an object such as a door or piece of furniture.	Orthopedic or head injuries
Suffocated	Injuries sustained due to suffocation, such as during a fire.	Respiratory injuries, smoke inhalation. May overlap with Exposure.
Vehicle Accident	Injuries sustained due to a vehicle, including vehicle/pedestrian accident or incident. This may be car or truck, motorcycle, bicycle, scooter, etc.	Orthopedic, single or multiple body parts, head, internal
Vibration	Injuries sustained due to vibration or seismic event, such as an earthquake.	Orthopedic, internal, head, etc.



Appendix 2: Claim Cause Definitions

Claim Cause Group	Claim Cause	When Used
Abrasion	ABRASION/RUBBED	<i>Injuries sustained as a result of rubbing against a rough surface/wall</i>
Bodily Motion	BENDING/STOOPING	<i>Bending down to tie shoes, etc.</i>
Bodily Motion	LIFTING	<i>Injuries from lifting weights, desks, tables, equipment, etc.</i>
Bodily Motion	PUSHING/PULLING	<i>Pushing or pulling of furniture, equipment or patients.</i>
Bodily Motion	REACHING	<i>Reaching for equipment resulting in hyperextension of extremities, etc.</i>
Bodily Motion	RUNNING/WALKING	<i>Injuries while running (during exercise or running after suspects), stepping off a curb the wrong way, injuries while walking.</i>
Bodily Motion	THROWING/WIELDING	<i>Injury sustained during baton-use exercise or other use of equipment in a throwing or maneuvering type motion.</i>
Bodily Motion	TWISTING/TURNING	<i>Injuries resulting from exiting vehicle, maneuvering in small spaces, etc.</i>
Caught In, Under, Between	CAUGHT IN, UNDER, BETWEEN	<i>Injuries as a result of being pinned under, or between objects, furniture, or equipment.</i>
Caught In, Under, Between	CAVE IN	<i>Injuries sustained due to being crushed by collapsing debris, such as in a tunnel or collapsing building in a fire.</i>
Cumulative Trauma	CONTINUOUS TRAUMA	<i>For repetitive stress injury due to repeated exposure over time.</i>
Cumulative Trauma	REPEATED MOTION	<i>Repetitive stress injury due to continued motion (typing, etc.). May be used interchangeably with CONTINUOUS TRAUMA</i>
Cumulative Trauma	REPEATED TRAUMA	<i>same as CONTINUOUS TRAUMA</i>
Explosion	EXPLOSION	<i>Injuries when bombs are set off during demonstrations and protest or fireworks during celebrations. Also may be a gas/fire explosion.</i>



Appendix 2: Claim Cause Definitions, Cont.

Claim Cause Group	Claim Cause	When Used
Exposure	ADVERSE REACTION	<i>Dizziness/Fatigue/Headaches due to heat exposure, intense exercise, dehydration, etc. Also could be an allergic reaction or exposure to poisonous substance.</i>
Exposure	BODILY REACTION	<i>The body's reaction to repeated exposures to carcinogens, stressful work situations, hard physical work. This could also be an allergic reaction to a poisonous substance or toxic substance.</i>
Exposure	CONTACT INFECTIOUS AGENT	<i>Needle Sticks, Exposure to blood borne pathogens (blood, saliva, urine, etc.)</i>
Exposure	CONTACT WITH CHEMICALS	<i>Exposure to Toxin, chemicals</i>
Exposure	CONTACT WITH ELECTRICITY	<i>Electrocution</i>
Exposure	CONTACT WITH EXTREME TEMPERATURE	<i>Injuries sustained during firefighting or working in extreme heat.</i>
Exposure	Contact with Radiation	
Exposure	DERMAL	<i>Dermatitis due to contact with poison oak, poison ivy, etc.</i>
Exposure	FOREIGN SUBSTANCE	<i>Object/s getting into the eyes</i>
Exposure	INHALATION	<i>Injuries from smoke inhalation during firefighting, or inhaling chemical vapors.</i>
Exposure	PANDEMIC	<i>COVID-19</i>
Exposure	SPLASHED	<i>Refers to when liquid splashes onto eyes or body. Overlaps with CONTACT INFECTIOUS AGENT.</i>
Fall, Slip or Trip	FALL FROM CHAIR	<i>Sitting and falling off chair. Chair might have slid from underneath claimant.</i>
Fall, Slip or Trip	FALL FROM ELEVATION	<i>Fall from a height, such as from a roof.</i>
Fall, Slip or Trip	FALL FROM LADDER	<i>Injuries while falling off ladder.</i>



Appendix 2: Claim Cause Definitions, Cont.

Claim Cause Group	Claim Cause	When Used
Fall, Slip or Trip	FALL FROM STAIRS	<i>Injuries resulting from falling down stairs or steps.</i>
Fall, Slip or Trip	FALL FROM VEHICLE	<i>Injuries due to an officer falling off a police motorcycle or bicycle.</i>
Fall, Slip or Trip	FALL ONTO AGAINST OBJECTS	<i>Filed if someone fell onto a certain object or machine, or against an object or machine such as gurneys and side tables</i>
Fall, Slip or Trip	FALL SAME LEVEL	<i>Slip and Fall due to wet floor, slippery floo. Also used for an employee falling onto the ground (similar to Slip/Trip)</i>
Fall, Slip or Trip	FALL SCAFFOLD/WALKWAY	<i>Fall from scaffolding/walkway</i>
Fall, Slip or Trip	SLIP / TRIP	<i>Slipping on wet surface or tripping over object on the floor.</i>
Ingestion	INGESTION	<i>Sustained due to drinking/eating harmful substance such as chemicals</i>
Misc	EVENT TYPE (NEC)	
Misc	FAULTY EQUIPMENT	<i>Injuries from defective chairs, tables and other equipment</i>
Misc	FAULTY ROADWAY MTA	<i>Injury sustained due to road/street defect such as sinkhole or large pothole. Track/Track issues</i>
Misc	UNASSIGNED	
Personal Injury/Illness	PERSONAL INJURY/ILLNESS	<i>Injury or illness of a nonindustrial nature but filed as EE was at work (or aggravated by work).</i>
Physical Assault	ASSAULT, PHYSICAL	<i>Used for physical assaults by the public, by patients/detainees, or between employees in a Workplace Violence setting</i>
Stress	ASSAULT, MENTAL/VERBAL	<i>Altercation between co-workers, with the public, patients, etc. Overlaps with STRESS, RELATIONAL CONFLICT</i>



Appendix 2: Claim Cause Definitions, Cont.

Claim Cause Group	Claim Cause	When Used
Stress	RELATIONAL CONFLICT	<i>Stress as a result of interpersonal conflicts at work (with Supervisor and/or co-workers)</i>
Stress	STRESS MTA	<i>MTA uses this for all stress claims</i>
Struck By/Against	COLLISION	<i>Running into another person at the office, striking a body part (e.g., nose) against another object, Hallway and door collisions</i>
Struck By/Against	STRUCK BY FALLING OBJECT	<i>Injuries resulting from fighting fires or being hit by an object.</i>
Struck By/Against	STRUCK BY MOVING OBJECT	<i>Injuries when objects are thrown at employees. May overlap with PHYSICAL ASSAULT. Also if EE is hit by a random moving machine part or object.</i>
Suffocated	SUFFOCATED	<i>Fighting fires</i>
Vehicle Accident	VEHICLE ACCIDENT	<i>Motor Vehicle Accidents (City Vehicles, motorcycles), rear-enders, collision with other vehicles</i>
Vehicle Accident	VEHICLE OVERTURNED	<i>Use VEHICLE ACCIDENT</i>
Vehicle Accident	VEHICLE RAN OFF ROADWAY	<i>Use VEHICLE ACCIDENT</i>
Vehicle Accident	VEHICLE SUDDEN START/STOP	<i>Use VEHICLE ACCIDENT</i>
Vibration	VIBRATION	<i>Earthquake</i>



SFMTA

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**Municipal
Transportation
Agency**

Workers' Compensation Council

May 8, 2023



SFMTA

Agenda

- Accomplishments & Initiatives
- Challenges
- COVID-19 Report
- Performance Quick Facts
- Claim Analytics
- Financials

Accomplishments, Initiatives, & Challenges



Accomplishments & Initiatives

SFMTA

- LightSpeed initiative through Q3 FY 2023 - 113 onsite investigations have been completed as of 3/31/23.
- Early intervention program , 242 files reviewed through 3-31-23.
- Subrogation Recoveries Recorded – A total of \$380,670 in subrogation recoveries have been recorded in FY 2023, ytd; with an additional sum of over \$400,000 expected to be recorded by end of FY 2023.
- Quarterly claim reviews with SFMTA and the team, with the next meeting is 5/18/23.
- Closing Project: Weekly Roundtables with Deputy City Attorney's office reviewing files with companion claims to pursue final settlements.
- Initiative – Pursuing updated job analysis/job descriptions.
- TWP/RTW Program: Initiated and rolled out to the divisions.
- Round Table Discussion- New Claims with 30 days TTD paid.
- Injured Employee Survey – Development and Testing, with rollout scheduled for 5/1/23.



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Current Challenges

- Rise in Temporary Disability Benefit Maximum is effective 1/1/23 and expected to impact the overall indemnity costs for CY 2023
 - New max rate is \$1,619.15/week
- Budget
- Ongoing Review of Assault Claims
- Enhancement of the Medical Provider Network (MPN)
 - Recruiting physicians for participation in MPN

COVID-19 Report



COVID-19 Report

- 14 COVID-19 Workers' Compensation Claims filed in FY 2023, as of 3/31/23.
 - 12 Indemnity claims
 - 1 Litigated Claims
 - 4 Denied Claims
- 353 *COVID-19 Workers' Compensation Claims filed as of 3/31/23.*
 - 253 *Reported claims only.*
 - 66 *Indemnity claims reported*
 - 8 *Litigated claims*
 - 31 *Denied claims: Negative test or not occupational in nature.*
 - *Average paid per indemnity claim = \$10,941.*
 - *Average Incurred per indemnity claim = \$13,932.*
 - *As of 3/31/23, only 7 claims remained open.*

Performance Quick Facts



FY 2023 YTD Performance Quick Facts

SFMTA

Claim Cost

Average Closed Claim Cost in Period

	SFMTA FY 2023, Q3	Benchmark 5 Year Quarterly Average
Indemnity	\$24,059	\$20,702
Medical Only	\$265	\$553

Claim Volume

Count of New Claims in Period

	SFMTA FY 2023, Q3	Benchmark 5 Year Quarterly Average
Indemnity	138	137
Medical Only	8	17

Fiscal Health

Ratio of Actuals to Budget

	SFMTA FY 2023, YTD	Benchmark FY YTD 2023 Budget
Total	84%	75%

Duration

Average Days Open of Claims Closed in Period

	SFMTA FY 2023, Q3	Benchmark 5 Year Average
Total	461 Days	799 Days

Notes: All benchmarks based on rolling five-year averages (FY 18-22). Fiscal health metric includes claim expenditures only and is based on the revised budget, excluding any carry forward and excludes TPA fees. Claim volume, cost and duration excludes first aid, disability retirement and future medical claims.

Claim Analytics

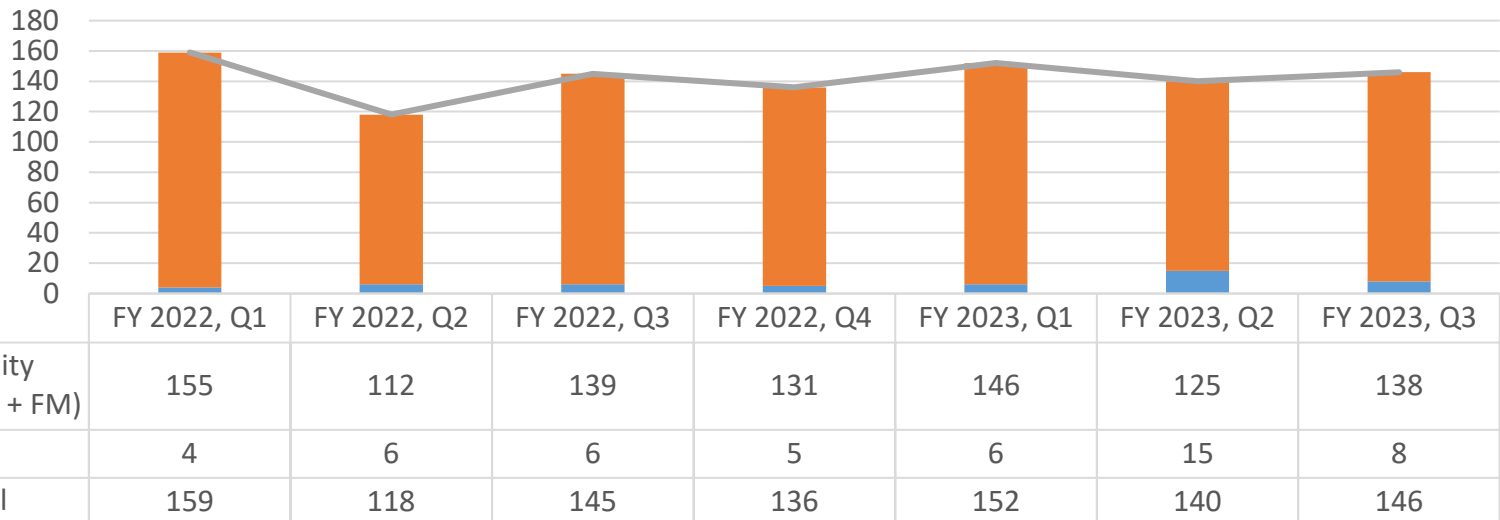


Claim Filing Frequency

SFMTA

	Indemnity Claims	Medical Claims	Total Indemnity + Medical Claims
Average # of claims reported each quarter FY 2018 through FY 2022	137	17	154
Actual # of New claims Reported in FY 2023, Q3	138	8	146
Variance	Indemnity Claims	Medical Claims	Total Indemnity + Medical Claims
# of Claims	1	-9	-8
% of Change	Less Than 1%	-36%	-5%

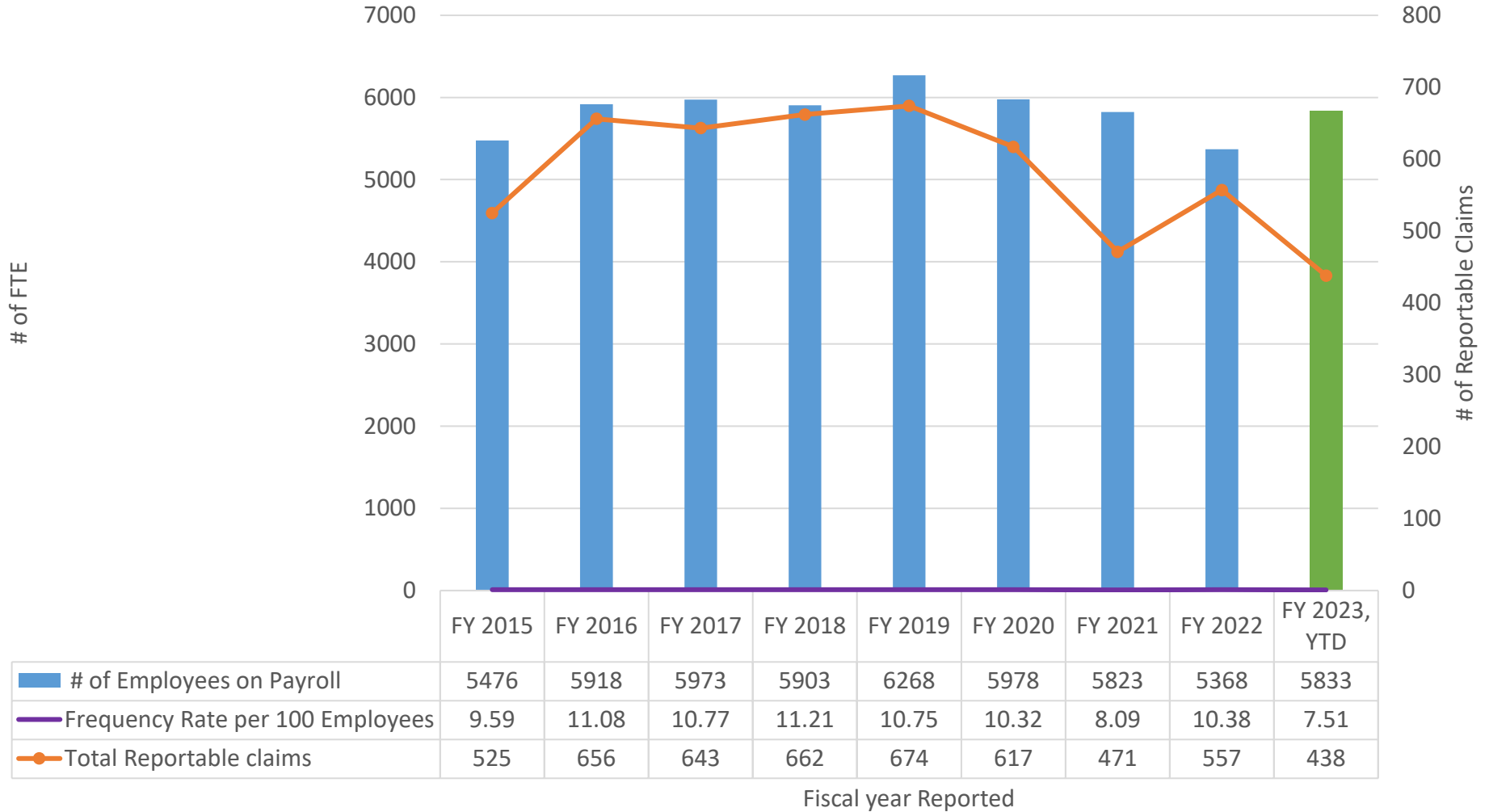
Claims Added 7/1/22 through 3/31/23, valued 3/31/23





Claims Frequency Per 100 FTE

SFMTA

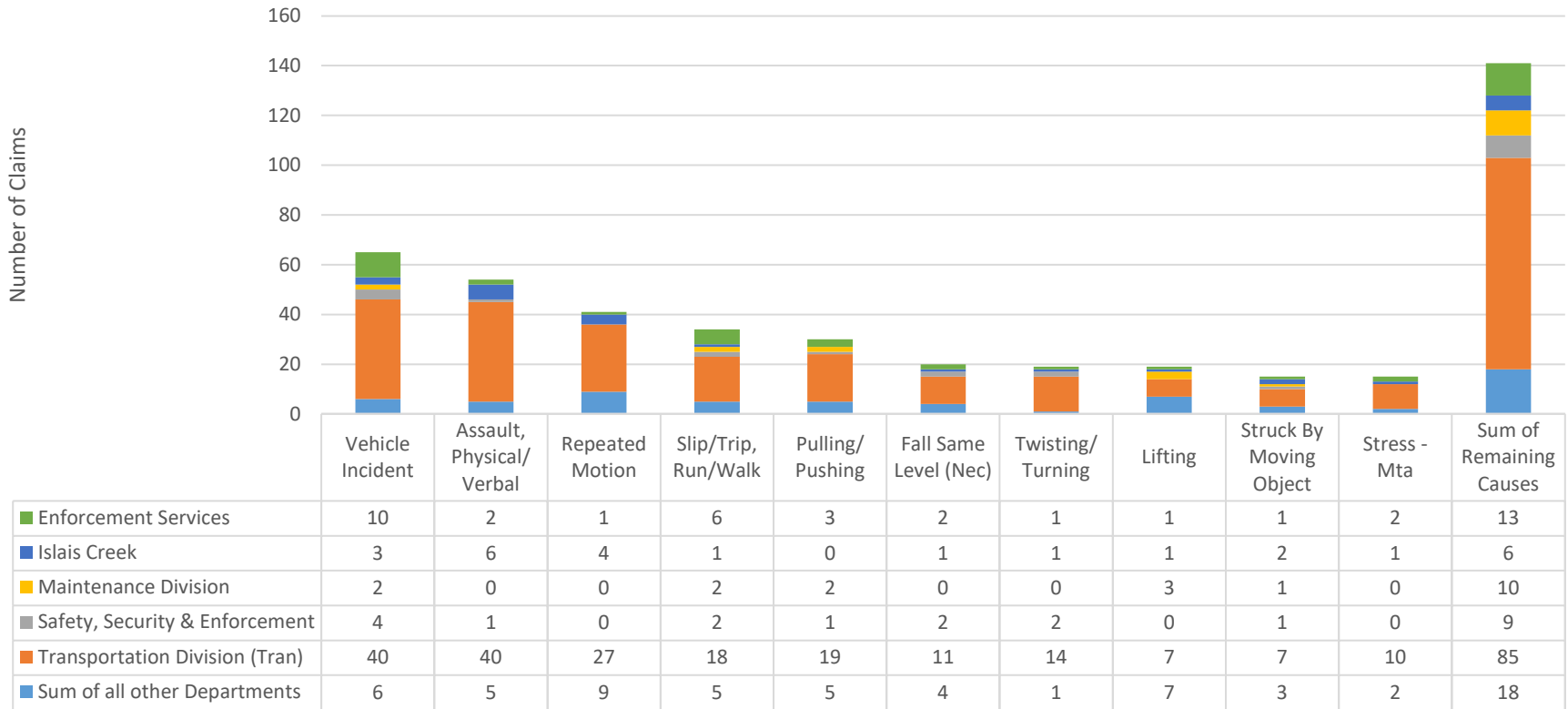




Claim Cause Distribution

SFMTA

Top 10 Cause of Injury Descriptions Reported for the Top 5 Departments
Rolling 12 Months: 4/1/22 to 3/31/23



Top 10 Causes of Injury

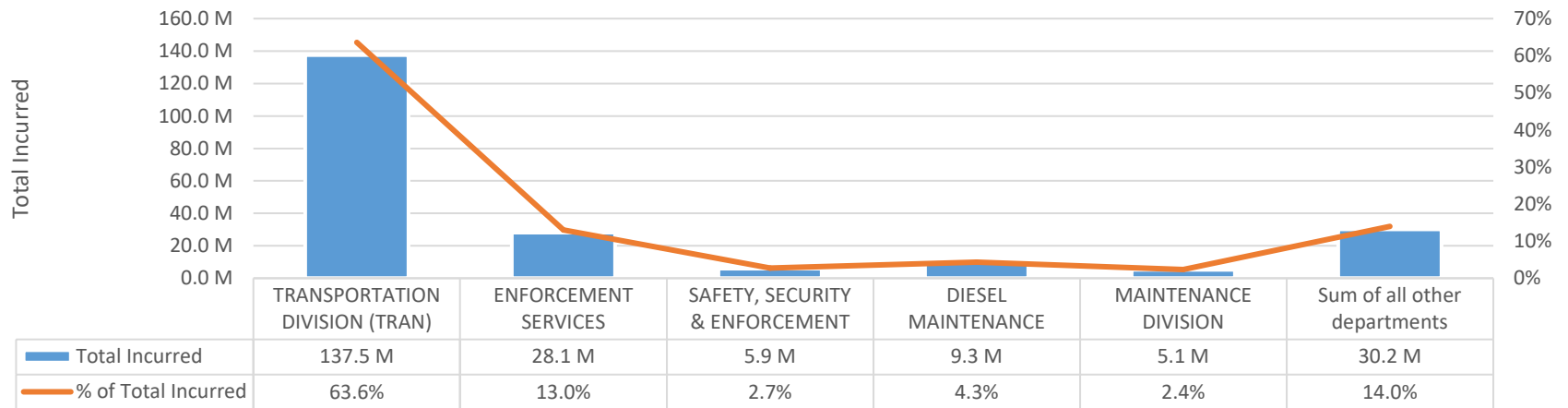
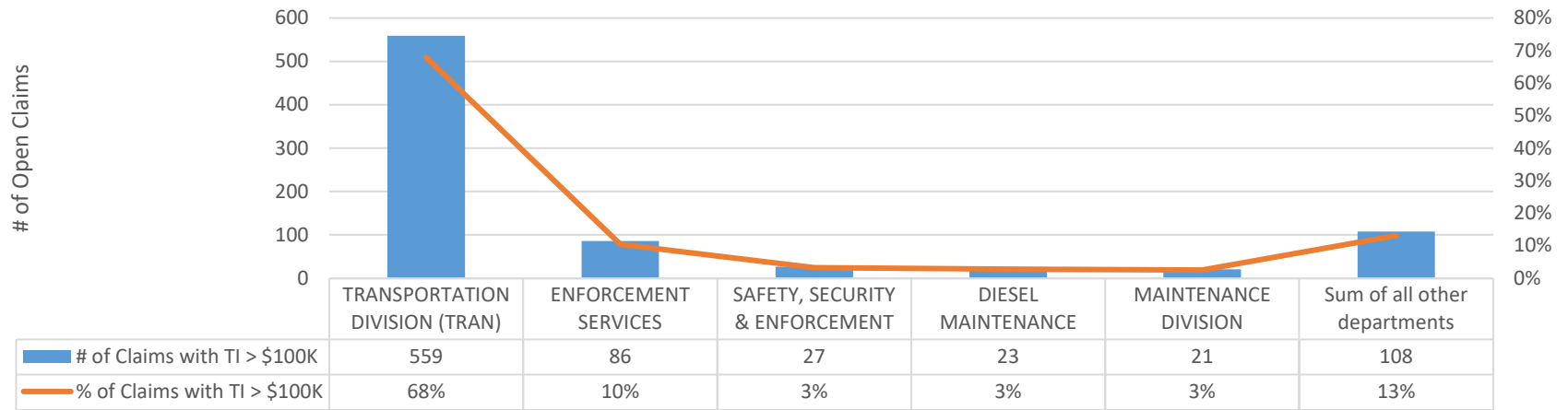
Notes: Claim cause group definitions are listed in Appendix 1



Open Claim Cost Stratification

SFMTA

Open Claims with Total Incurred Greater Than \$100K

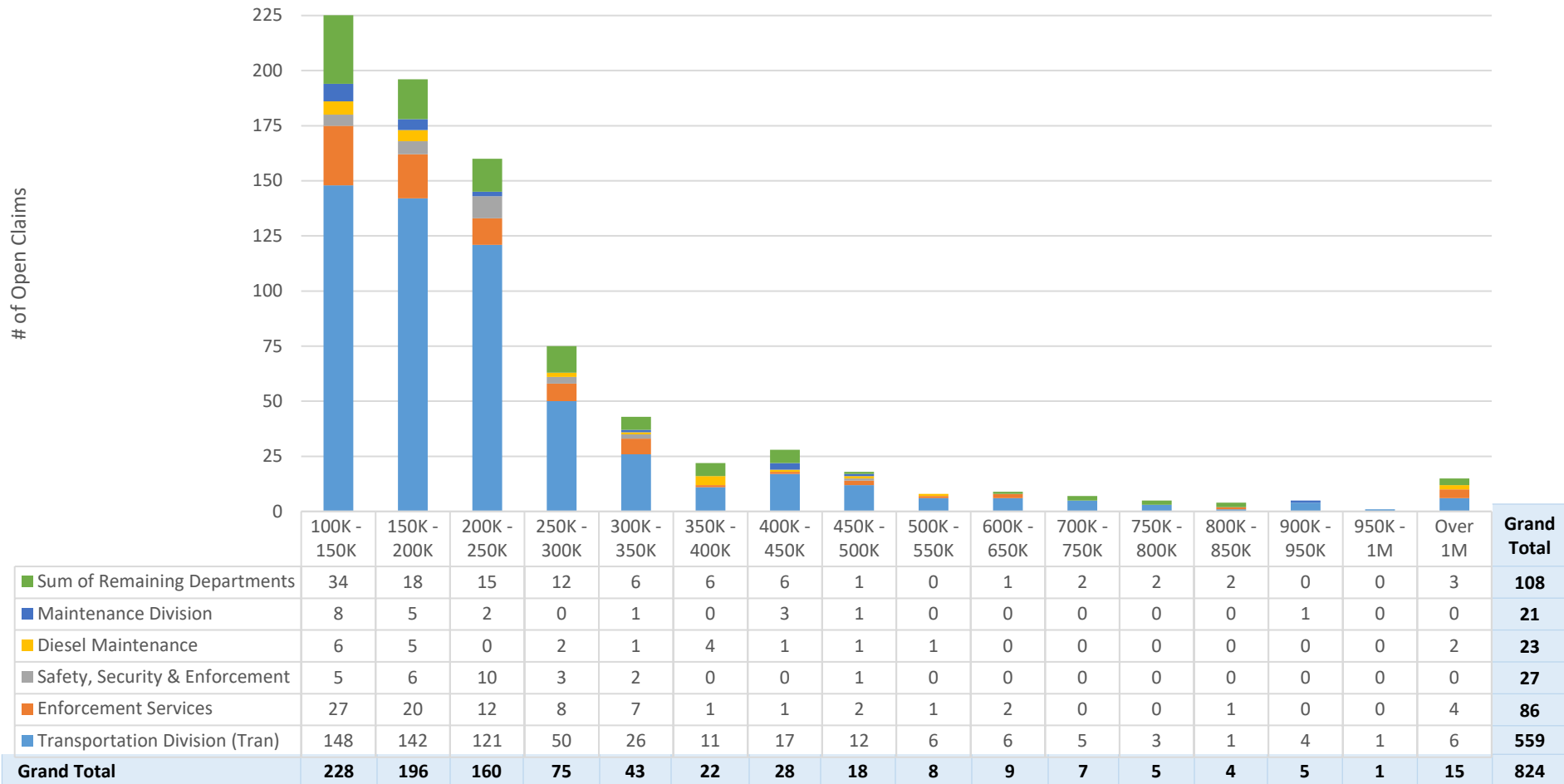


824 Open claims have a total incurred \geq \$100k. The total incurred on this set of open claims equals **\$216.1 Million**. Data as of 3/31/2023



Open Claim Stratification

SFMTA



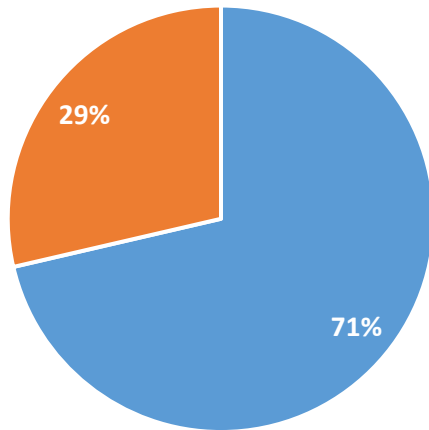
A total of **824** open claims have a total incurred \geq \$100k. Data as of 3/31/2023



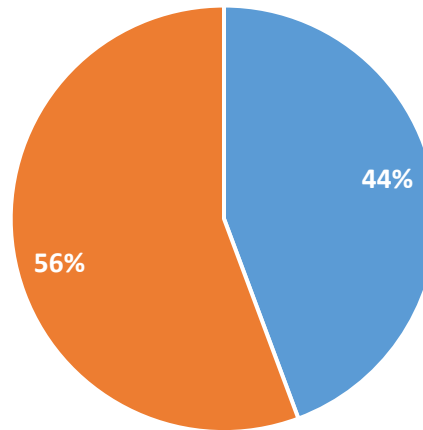
Open Active Indemnity vs. Future Medical

SFMTA

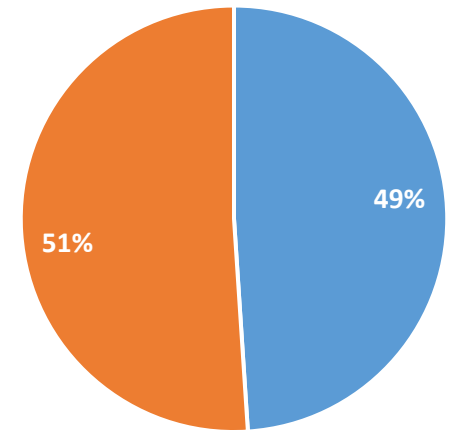
% of Claims



% of Total Paid



% of Total Incurred



■ Active ■ Future Medical

	# of Open Claims	Total Paid	Total Outstanding	Total Incurred
Active Indemnity	1117	\$72,753,670	\$51,109,710	\$123,863,380
Future Medical	448	\$91,379,609	\$37,743,931	\$129,123,540
Grand Total	1565	\$164,133,279	\$88,853,641	\$252,986,920

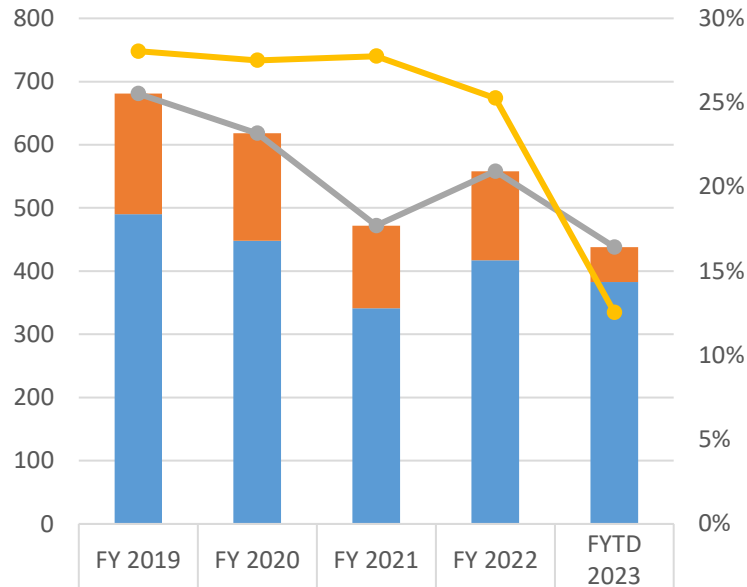


Litigated vs Non-Litigated

SFMTA

Total Litigation Status by Fiscal Year Reported, valued 3/31/23

Claims reported FY 19 through FYTD 23 only
Includes MO, FM and Active Indemnity

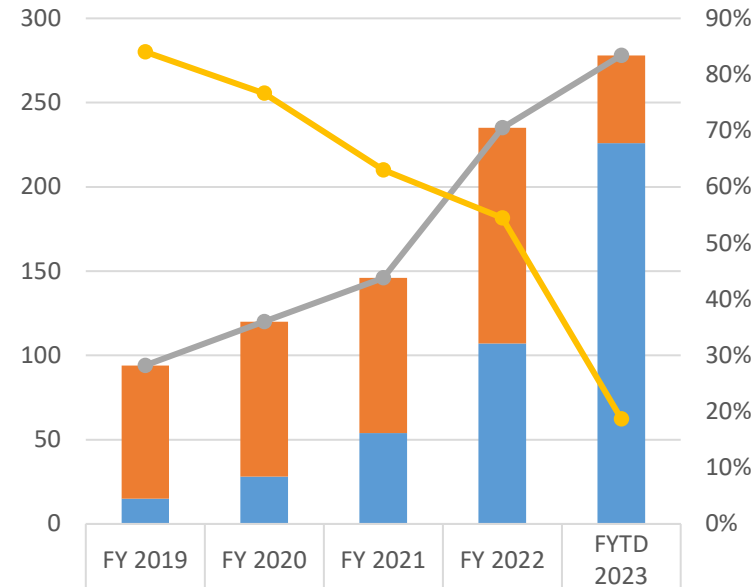


# Litigated	191	170	131	141	55
# Not Litigated	490	448	341	417	383
Total claims	681	618	472	558	438
Litigation Rate	28%	28%	28%	25%	13%

The chart above summarizes total reportable claims received, open and closed, sorted by fiscal year reported. Litigation status is valued as of 3/31/23.

Current Active Litigation Status by Fiscal Year Reported, valued 3/31/23

Claims reported FY 19 through FYTD 23 only
Includes Open Active Indemnity Only



# Litigated	79	92	92	128	52
# Not Litigated	15	28	54	107	226
Total claims	94	120	146	235	278
Litigation Rate	84%	77%	63%	54%	19%

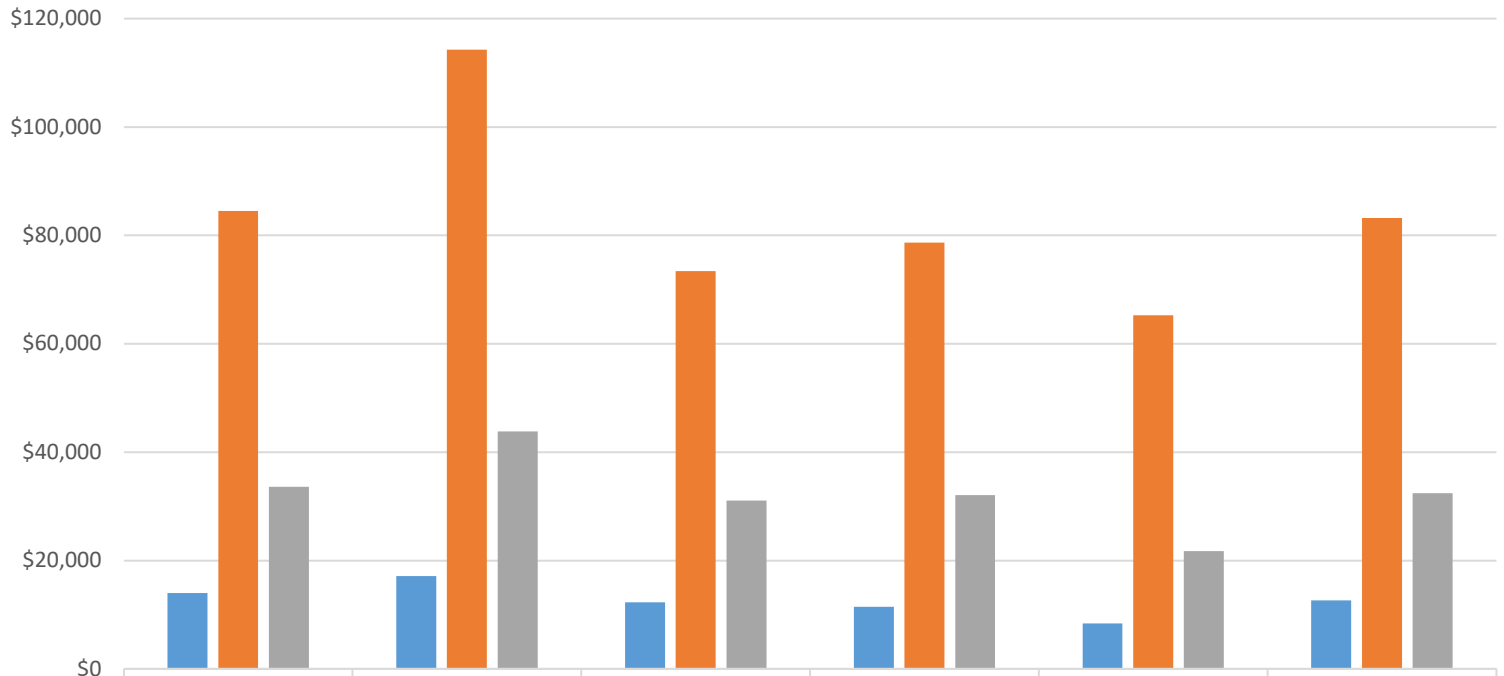
The chart above summarizes the current open litigation stats for unresolved active indemnity claims only, sorted by fiscal year reported. Litigation status is valued as of 3/31/23.



SFMTA

Litigated vs Non-Litigated by FY Closed

Average Paid by Litigated Status
for Claims CLOSED in the Referenced Fiscal Year



	FY 2019	FY 2020	FY 2021	FY 2022	FYTD 2023	Average for last 5 FY
Average Paid per Non Litigated Claim	\$14,035	\$17,138	\$12,278	\$11,495	\$8,425	\$12,674
Average Paid per Litigated Claim	\$84,476	\$114,257	\$73,413	\$78,676	\$65,238	\$83,212
Total Average Paid	\$33,588	\$43,819	\$31,047	\$32,049	\$21,738	\$32,448

Financials

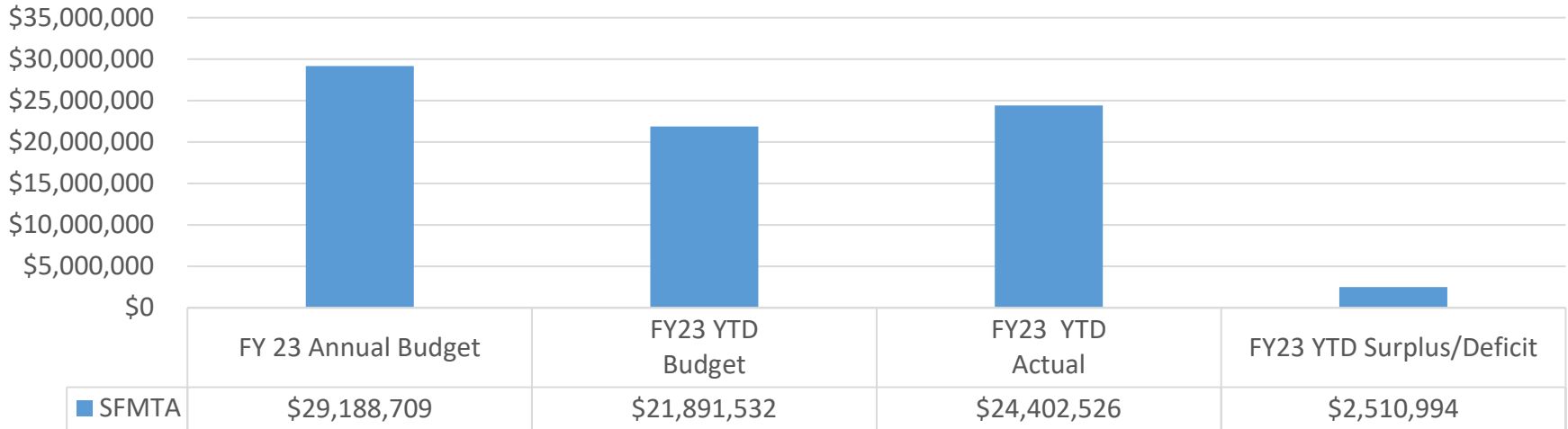


SFMTA Expenditure Trends

SFMTA

	FY22 Budget	FY22 Actuals	FY 23 Annual Budget	FY23 YTD Budget	FY23 YTD Actuals	FY23 YTD Surplus/Deficit
SFMTA	\$29,450,537	\$29,004,223	\$29,188,709	\$21,891,532	\$24,402,526	\$2,510,994

SFMTA





Payments by Fiscal Year

SFMTA

	FY 19-20 Actuals	FY 20-21 Actuals	FY 22 Actuals	FY 23 YTD Actuals	FY 23 Projected Actuals	FY 22 Actual to FY 23 Projected YOY Change (%)
# of claims with payments in the period	2,227	2,028	1,941	1,799	2,399	24%
INDEMNITY	\$18,401,610	\$19,147,352	\$18,663,476	\$17,595,201	\$23,460,267	26%
Temporary Disability	\$13,132,765	\$13,834,255	\$13,790,485	\$13,174,669	\$17,566,226	27%
Permanent Disability	\$5,268,845	\$5,313,097	\$4,872,991	\$4,420,531	\$5,894,042	21%
VOCATIONAL REHAB	\$43,084	\$33,585	\$53,460	\$58,295	\$77,727	45%
MEDICAL	\$8,724,619	\$8,945,689	\$9,521,676	\$6,601,802	\$8,802,403	-8%
EXPENSE	\$1,243,584	\$995,718	\$989,692	\$527,898	\$703,864	-29%
RECOVERY	<\$264,068>	<\$423,713>	<\$224,081>	<\$380,670>	<\$507,560>	33%
GRAND TOTAL	\$28,148,829	\$28,698,631	\$29,004,223	\$24,402,526	\$32,536,701	12%

Notes:

1. Expenditures reflect benefit payments issued through the Claims Financial System, and do not include overhead or salary continuation benefits.



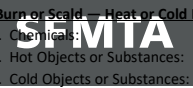
Report Definitions

SFMTA

CLAIM VOLUMES		
Category	Method	Notes
Claims Opened	IVOS - Claim_Log (Main)	Add Date (claim) = each month; Format = PDF; data prior to March 2013 is unreliable in iVOS, and is drawn from Sedgwick data as reported in HR Monthly Report
New Claims by Type	IVOS - Claim_Log (Main)	Add Date (claim) = each month; Format = PDF
Claims Re-Opened	IVOS - SFMTAClaimStatusMain (Main)	Reporting History Period by each month; Format = PDF; data prior to March 2013 is unreliable in iVOS, and is drawn from Sedgwick data as reported in HR Monthly Report
Claims Closed	IVOS - SFMTAClaimStatusMain (Main)	Reporting History Period by each month; Format = PDF; data prior to March 2013 is unreliable in iVOS, and is drawn from Sedgwick data as reported in HR Monthly Report
Closing Ratio	Calculation	% "Claims Closed"/("Claims Opened" + "Claims Reopened")
Claims Pending EOM	IVOS - SFMTAClaimStatusMain (Main)	Reporting History Period by month; Format = PDF; data prior to March 2013 is based on formula calculated backwards from March 2013
FINANCIALS		
Category	Method	Notes
Payments Issued	IVOS - LossRunMTA (Main)	Reporting History Period by each month; Format = PDF; Reporting History Period = FY2013-2014; Reporting History Period = FY2012-2013
Open Claims Financials	IVOS - LossRunMTA (Main)	Reporting History Period = Last Month; Period Claimant Status = Open; Format = PDF; Data from Paid, Outstanding and Incurred columns
Open Claims Stratification	IVOS - LossRunMTA (Main)	Reporting History Period = Last Month; Format = Excel Data Only; Pivot table filtered for "Open" and grouped by \$50K
LITIGATION STATISTICS		
Category	Method	Notes
Open Litigated	IVOS - SFMTAClaimStatusMain (Main)	Reporting History Period by each month; Litigated (claimant) = checked; Format = PDF; Data from Ending Open column (Indemnity row); data prior to March 2013 is unreliable in iVOS and is excluded
Open Indemnity	IVOS - SFMTAClaimStatusMain (Main)	Reporting History Period by each month; Format = PDF; Data from Ending Open column (Indemnity row); data prior to March 2013 is unreliable in iVOS and is excluded
CAUSE ANALYSIS		
Category	Method	Notes
Cause by Frequency	IVOS - LossRunMTA (Main)	Reporting History Period = Last Month; Add Date (Claim) = last 12-month period; Format = Excel Data Only; Pivot Table filtered for top-10 Causes by count of Claim Numbers
Cause by Severity	IVOS - LossRunMTA (Main)	Reporting History Period = Last Month; Add Date (Claim) = last 12-month period; Format = Excel Data Only; Pivot Table filtered for top-10 Causes by sum Payment Amounts
Closed Claims	IVOS - LossRunMTA (Main)	Reporting History Period = Last Month; Closed Date (claimant) = last 12-month period; Period Claimant Type (claimant_reporting_history) = First Aid, Medical, Indemnity, Future Medical, Disability Retirement (excludes Reported, Pending); Format = Excel Data Only, calculate Duration (Months), calculate Average Monthly Cost; Pivot Table with Totals and Averages, calculate Average Cost per Claim per Month
Cause Determination	Department and Adjuster Verification	Cause codes are provided utilizing the NCCI mandated codes for State reporting purposes. The cause is determined by the department reporting the claim within SFMTA, our new set-up staff importing the claim to the system and the final review by the claims adjuster when managing the claim.
DIVISION STATISTICS		
Category	Method	Notes
Injuries by Division	IVOS - LossRunMTA (Main)	Reporting History Period = Last Month; Incident Date = last 12-month period; Format = Excel Data Only; Pivot Table filtered for top-10 Divisions by count of Claim Numbers and sum of Payment Amounts
INJURY RATE		
Category	Method	Notes
Injury Rate Per Month	IVOS - LossRunMTA (Main)	Reporting History Period = Last Month; Incident Date = last 12-month period; Format = PDF No Detail/ FTE # from SFMTA
LAG TIME REPORT		
Category	Method	Notes
Lag Time Information	IVOS- LagTime Report	Reporting History Period = Last Month; Add Date =last 12-month period; Sort by Division, Format = PDF No Detail



Claim Cause Definitions



I. Burn or Scald — Heat or Cold Exposures — Contact With

01. Chemicals:	Includes Hydrochloric Acid, Sulfuric Acid, Battery Acid, Methanol, Antifreeze
02. Hot Objects or Substances:	
11. Cold Objects or Substances:	
03. Temperature Extremes:	Non-Impact Injuries Resulting in a Burn Due to Hot or Cold Temperature Extremes, includes Freezing or Frostbite
04. Fire or Flame:	
05. Steam or Hot Fluids:	
06. Dusts, Gases, Fumes or Vapors:	Includes Inhalation of Carbon Dioxide, Carbon Monoxide, Propane, Methane, Silica (Quartz), Asbestos Dust and Smoke
07. Welding Operations:	Includes Welder's Flash (Burns to Skin or Eyes as a Result of Exposure to Intense Light from Welding)
08. Radiation:	Includes Effects of Ionizing Radiation Found in X-Rays, Microwaves, Nuclear Reactor Waste, and Radiating Substances and Equipment. Includes Non-Ionizing Radiation Such as Sunburn
14. Abnormal Air Pressure:	
84. Electrical Current:	Includes Electric Shock, Electrocution and Lightning
09. Contact With, NOC:	Not Otherwise Classified in Any Other Code. Includes Cleaning Agents and Fertilizers

II. Caught In, Under or Between

10. Machine or Machinery:	Running or Meshing Objects, a Moving and a Stationary Object, Two or More Moving Objects
12. Object Handled:	Includes Medical Hospital Bed and Parts, Wheelchair, Clothespin Vise
20. Collapsing Materials:	Slides of Earth
13. Caught In, Under or Between, NOC:	Either Man-Made or Natural, Not Otherwise Classified in Any Other Code

III. Cut, Puncture, Scrape Injured by

15. Broken Glass:	
16. Hand Tool, Utensils; Not Powered:	Includes Needle, Pencil, Knife, Hammer, Saw, Axe, Screwdriver
17. Object Being Lifted or Handled:	Includes Being Cut, Punctured or Scraped by a Person or Object Being Lifted or Handled
18. Powered Hand Tool, Appliance:	Includes Drill, Grinder, Sander, Iron, Blender, Welding Tools, Nail Gun
19. Cut, Puncture, Scrape, NOC:	Not Otherwise Classified in Any Other Code. Includes Power Actuated Tools

IV. Fall, Slip or Trip Injury

25. From Different Level (Elevation):	Includes Collapsing Chairs, Falling from Piled Materials, Off Wall, Catwalk, Bridge
26. From Ladder or Scaffolding:	
27. From Liquid or Grease Spills:	
28. Into Openings:	Includes Mining Shafts, Excavations, Floor Openings, Elevator Shafts
29. On Same Level:	
30. Slip, or Trip, Did Not Fall:	Slip or Trip and Did Not Come in Contact with the Floor or Ground
32. On Ice or Snow:	
33. On Stairs:	
31. Fall, Slip or Trip, NOC:	Not Otherwise Classified in Any Other Code. Includes Tripping Over Object, Slipping or Organic Materials

V. Motor Vehicle

40. Crash of Water Vehicle:	
41. Crash of Rail Vehicle:	
45. Collision or Sideswipe with Another Vehicle,:	Vehicle Collision, Both Vehicles in Motion
46. Collision with a Fixed Object::	Collision Occurring with Standing Vehicle or Stationary Object
47. Crash of Airplane:	
48. Vehicle Upset:	Includes Overturned or Jackknifed
50. Motor Vehicle, NOC:	Not Otherwise Classified in Any Other Code. Includes Injuries Due to Sudden Stop or Start, Being Thrown against Interior Parts of the Vehicle and Vehicle Contents Being Thrown against



Claim Cause Definitions, Continued

VI. Strain or Injury by

52. Continual Noise:

53. Noise: Injury to Ears or Hearing Due to the Cumulative Effects of Constant or Repetitive Noise

53. Twisting Motions Induced by Sudden Noise, Fright, loss of balance: Free Bodily Motion That Imposes Stress or Strain on Some Part of Body. Includes Assumption of Unnatural Position, Involuntary

54. Jumping or Leaping:

55. Holding or Carrying:

Applies to Objects or People. Includes Restraining a Person

56. Lifting:

Includes Objects or People

57. Pushing or Pulling:

Includes Objects or People

58. Reaching:

59. Using Tool or Machinery:

61. Welding or Throwing:

Physical Effort or Overexertion from Attempts to Resist a Force Applied by an Object Being Handled

97. Repetitive Motion:

Cumulative Injury or Condition Caused by Continual, Repeated Motions; Strain by Excessive Use, Carpel Tunnel

60. Strain or Injury by, NOC:

Not Otherwise Classified in Any Other Code

VII. Striking Against or Stepping on

NOTE: Applies to Cases in Which the Injury Was Produced by the Impact Created by the Person, Rather than by the Source

65. Moving Part of Machine:

66. Object Being Lifted or Handled:

67. Sanding, Scraping, Cleaning Operation:

68. Stationary Object:

69. Stepping on Sharp Object:

70. Striking Against or Stepping on, NOC: Includes Scratches or Abrasions Caused by Sanding, Scraping, Cleaning Operations, Not Otherwise Classified in Any Other Code

VIII. Struck or Injured by

NOTE: Applies to Cases in Which the Injury Was Produced by the Impact Created by the Source of Injury, Rather than by the Injured Person

74. Fellow Workers, Patient or Other Person:

75. Falling or Flying Object:

76. Hand Tool or Machine in Use:

Struck by Co-Worker, Either on Purpose or Accidentally. Includes Being Struck by a Patient While Lifting or Moving Them Not in Act of a Crime

77. Motor Vehicle:

Applies When a Person is Struck by a Motor Vehicle, Including Rail Vehicles, Water Vehicles, Airplanes

78. Moving Parts of Machine:

79. Object Being Lifted or Handled:

Includes Dropping Object on Body Part

80. Object Handled by Others:

Includes Another Person Dropping Object on Injured Person's Body Part

85. Animal or Insect:

Includes Bite, Sting or Allergic Reaction

86. Explosion or Flare Back:

Rapid Expansion, Outbreak, Bursting, or Upheaval. Includes Explosion of Cars, Bottles, Aerosol Cans, or Buildings. "Flare back" Involves Superheated Air and Combustible Gases

81. Struck or Injured, NOC:

Not Otherwise Classified in Any Other Code. Includes Kicked, Stabbed, Bitten

IX. Rubbed or Abraded by

94. Repetitive Motion:

Caused by Repeated Rubbing or Abrading; Applies to Non-Impact Cases in Which the Injury Was Produced by Pressure, Vibration or Friction between the Person

and the Source of Injury.

95. Rubbed or Abraded, NOC:

Not Otherwise Classified in Any Other Code. Includes Foreign Body in Ears

X. Miscellaneous Causes

82. Absorption, Ingestion or Inhalation, NOC:

Not Otherwise Classified in Any Other Code. Applies Only to Non-Impact Cases in Which the Injury Resulted from Inhalation, Absorption (Skin Contact), or Ingestion of Harmful Substance

87. Foreign Matter (Body) in Eye(s):

Injury to Eyes Resulting from Foreign Matter That is Not Otherwise Classified in Any Other Code

88. Natural Disasters:

Injury Resulting from Natural Disaster. Includes Hurricane, Earthquake, Tornado, Flood, Forest Fire



San Francisco Workers' Compensation Council

**Our next meeting will be held on
August 7, 2023 at 9:00AM Pacific**