

# Survey of TDI Workers' Compensation Research Findings 2016



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Workers' Compensation Research and Evaluation  
Group





## Texas Department of Insurance Workers' Compensation Research and Evaluation Group (REG)

### Background

- REG conducts professional and objective studies on the WC system
- Studies include: the quality and cost of medical benefits; employer participation in the WC system; annual network report card; dispute resolution and overall effectiveness of the WC system.
- The Commissioner of Insurance adopts the REG's annual research agenda



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## Key Trends

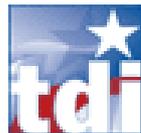
- Injury Rates
- Employer Participation Rates
- Medical Costs
- Network Report Card Results
- Impacts of the Pharmacy Closed Formulary
- Access to Medical Care



**Texas Department of Insurance**

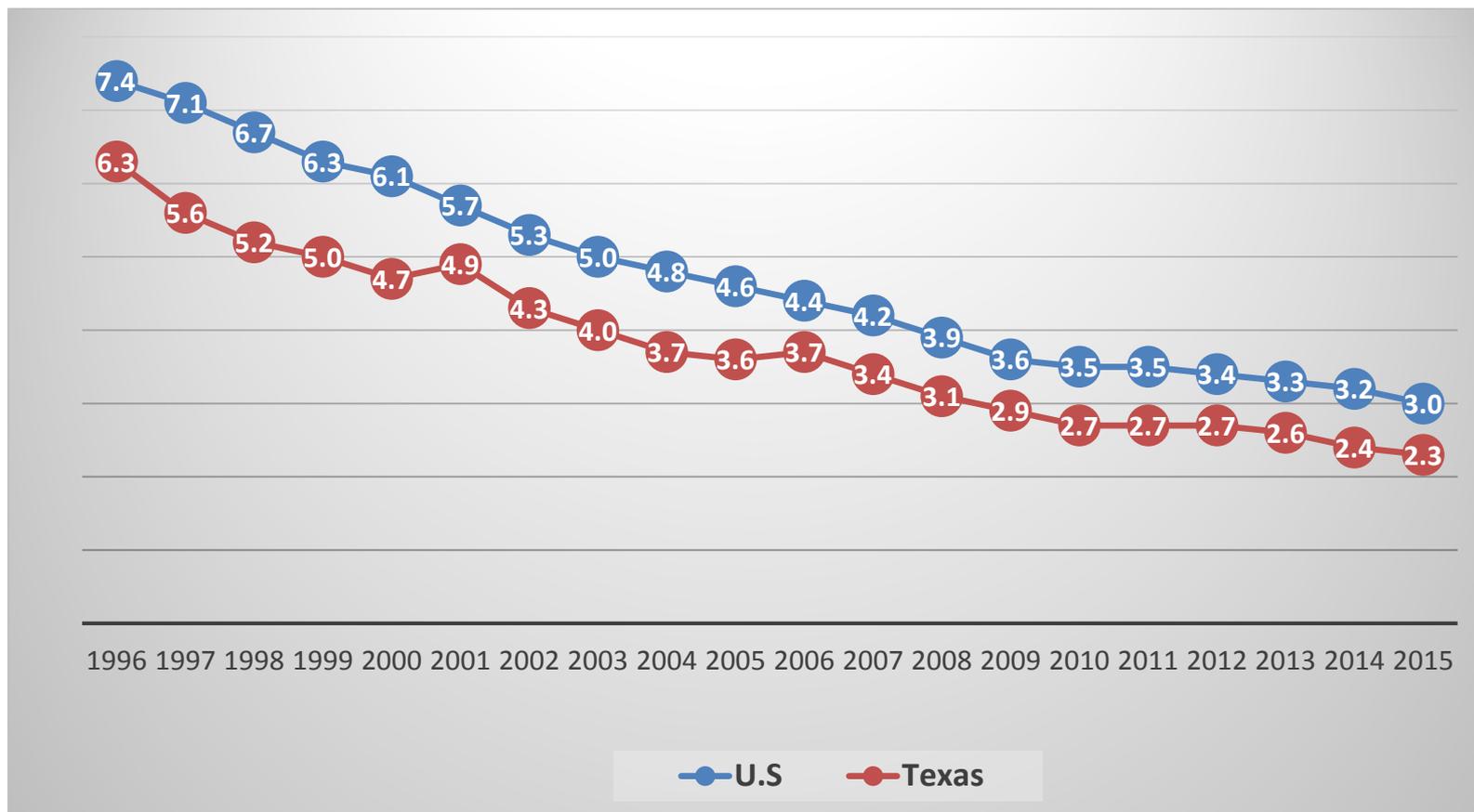
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# Injury Rates



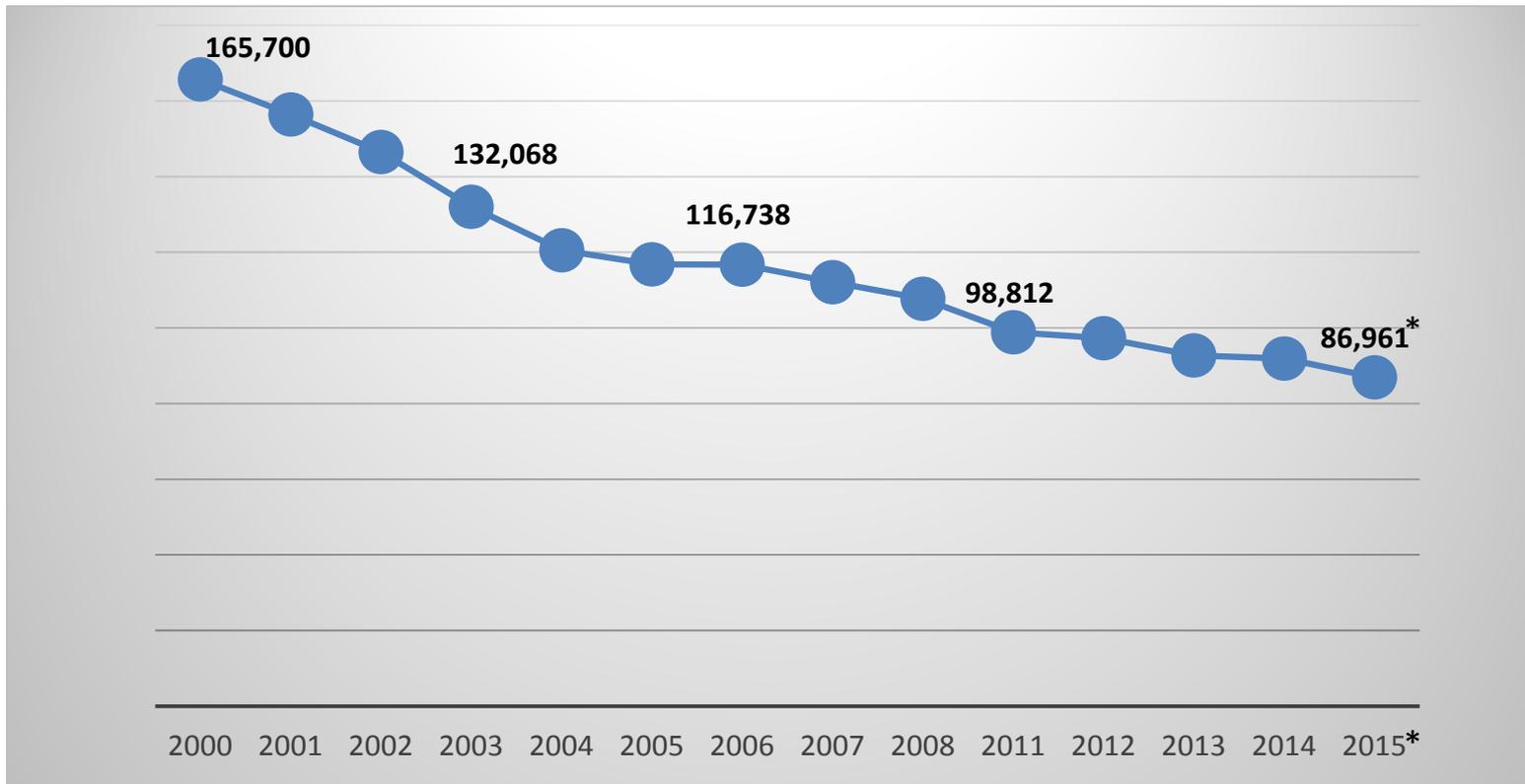
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# Texas and U.S. Nonfatal Occupational Injury and Illness Rates per 100 Full-Time Employees (2000-2015)



Source: Texas Department of Insurance, Division of Workers' Compensation, and the U.S. Department of Labor, Bureau of Labor Statistics, 2016.

# Number of Workers' Compensation Claims Reported to the Division of Workers' Compensation (DWC), Injury Years 2000-2015



Source: Texas Department of Insurance, Division of Workers' Compensation, *System Data Report*, data available as of June 2016.

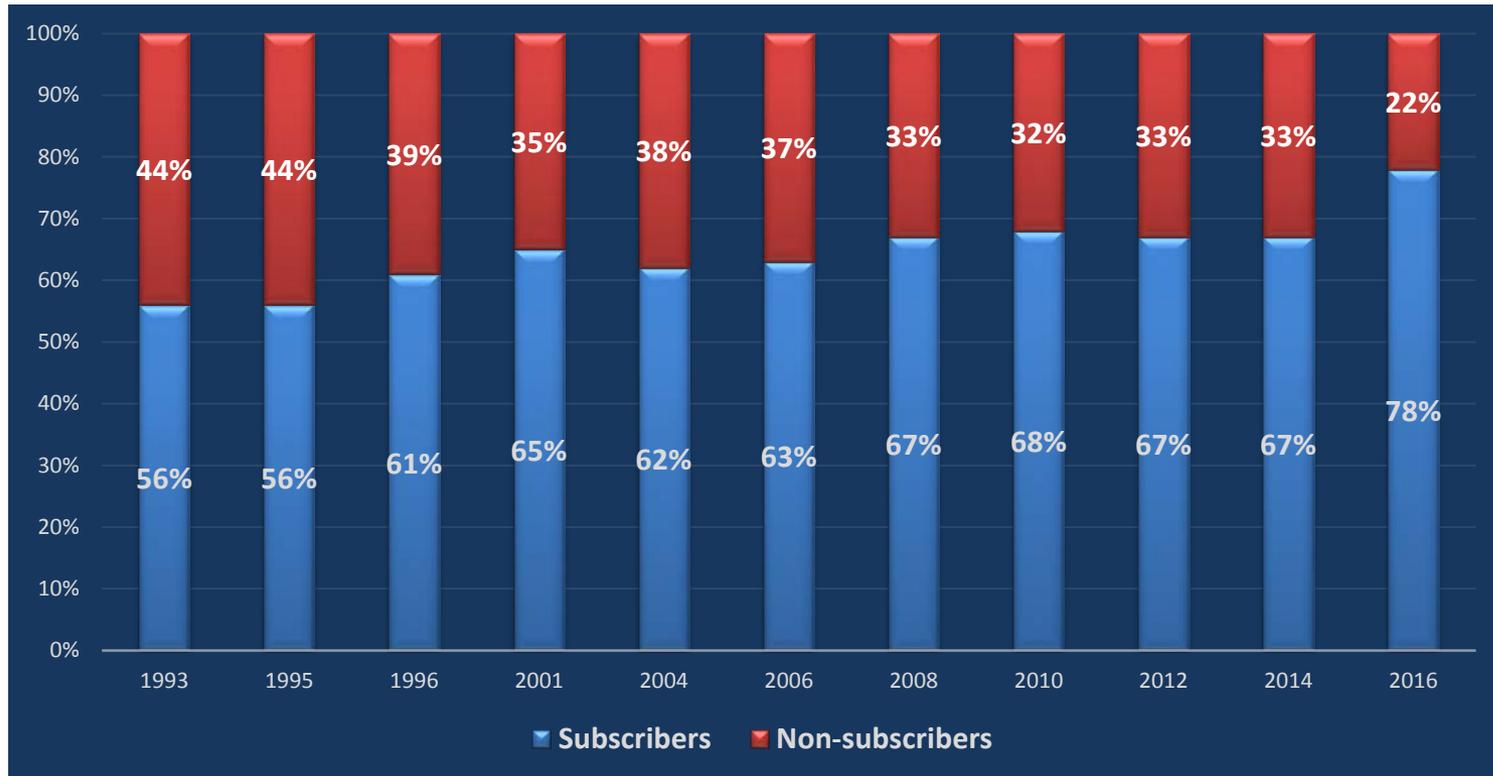
\*Note: These numbers include the claims that are required to be reported to DWC, including fatalities, occupational diseases and injuries with at least one day of lost time. Data for 2015 should be viewed with caution since the number of claims per calendar year will continue to grow as injuries for that calendar year are reported or as "medical only" injuries begin to lose time away from work.

# Employer Participation in the Texas Workers' Compensation System

# Survey Sample and Administration

- TDI made slight modifications to the survey instrument first developed by the Research and Oversight Council on Workers' Compensation (ROC)
- TDI pulled a random probability sample (stratified by industry and employment size) of Texas employers from Texas Workforce Commission (TWC) data
- TDI and the Public Policy Research Institute (PPRI) at Texas A&M University completed 1,911 interviews with year-round private sector Texas employers during June – September 2016
- Interview respondents held the following positions in the companies:
  - Company's owner = 44%
  - Company's human resources Administrator = 14%
  - Company's claim administrator = 1%
  - Company's risk manager = 2%
  - Others = 39%
- Employer non-subscription estimates have a +/- 2.4% margin of error at the 95% confidence interval

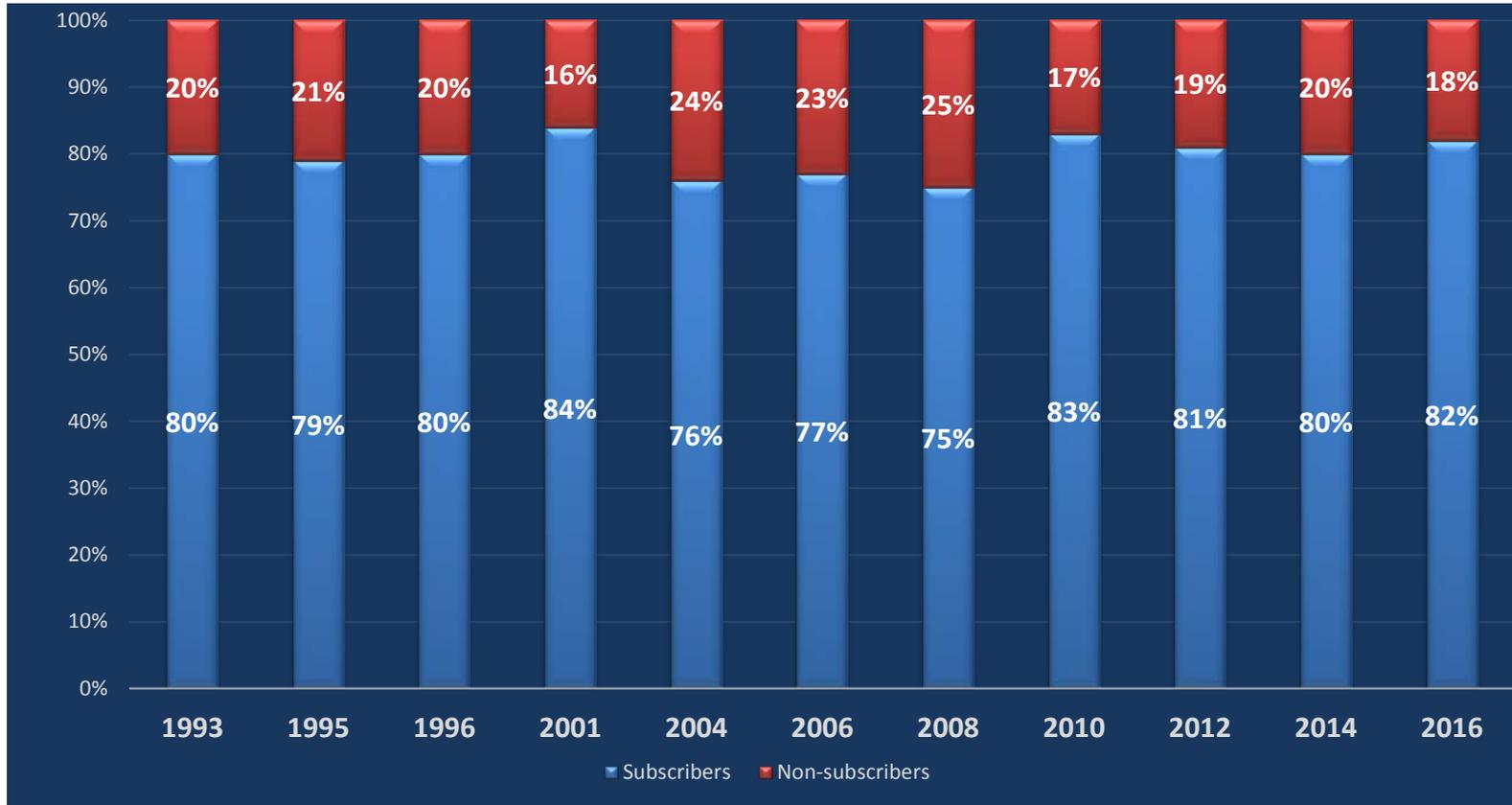
# Percentage of Texas Employers that are subscribers and non-subscribers: 1993-2016



Source: *Survey of Employer Participation in the Texas Workers' Compensation System*, 1993 and 1995 estimates from the Texas Workers' Compensation Research Center and the Public Policy Research Institute (PPRI) at Texas A&M University; 1996 and 2001 estimates from the Research and Oversight Council on Workers' Compensation and PPRI; and 2004 - 2016 estimates from the Texas Department of Insurance Workers' Compensation Research and Evaluation Group and PPRI.

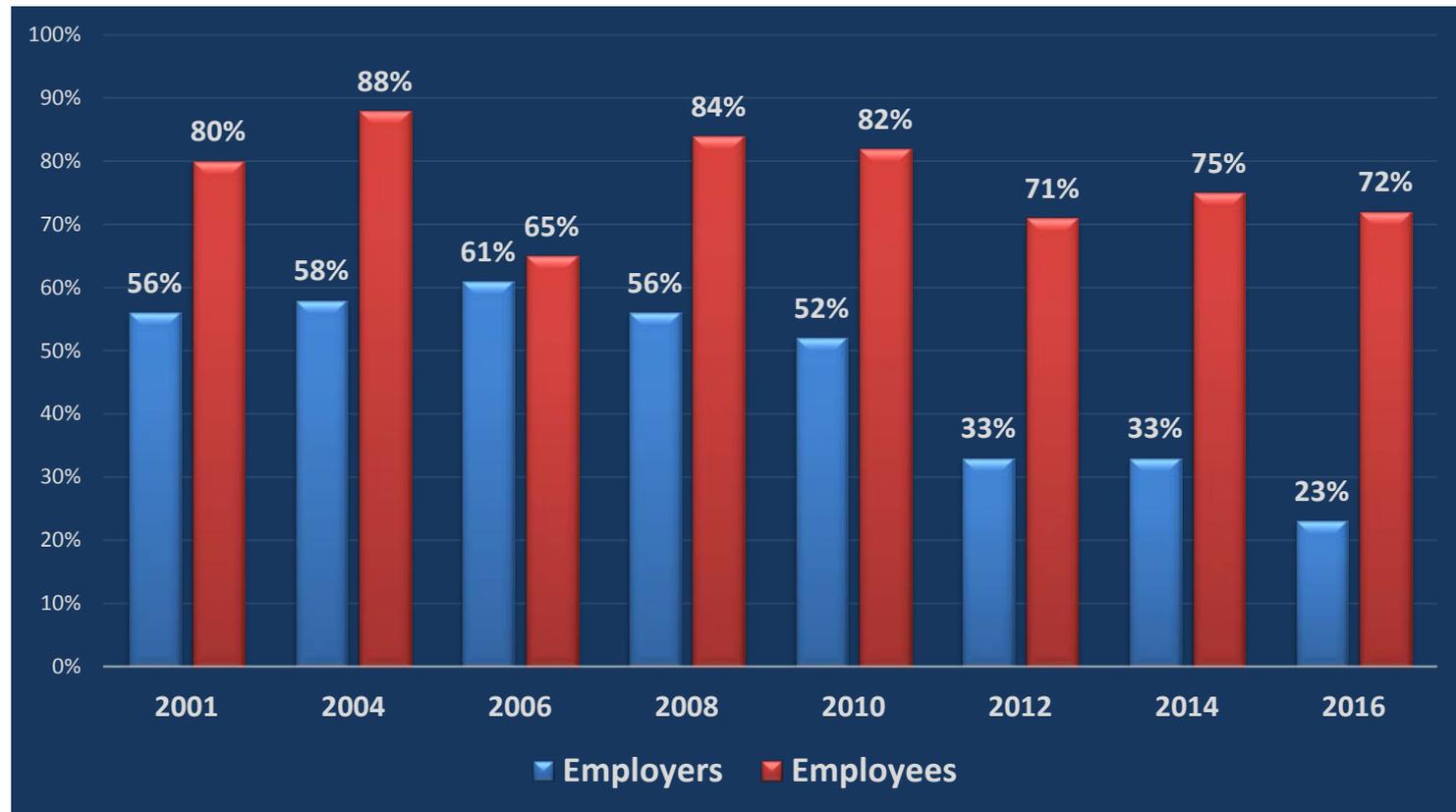


# Percentage of Texas Private Sector Employees Employed by Subscribers and Non-subscribers: 1993-2016



Source: *Survey of Employer Participation in the Texas Workers' Compensation System*, 1993 and 1995 estimates from the Texas Workers' Compensation Research Center and the Public Policy Research Institute (PPRI) at Texas A&M University; 1996 and 2001 estimates from the Research and Oversight Council on Workers' Compensation and PPRI; and 2004 - 2016 estimates from the Texas Department of Insurance Workers' Compensation Research and Evaluation Group and PPRI.

# Percentage of Non-subscriber Employers That Pay Occupational Benefits and Percentage of Non-subscriber Employees Covered by Occupational Benefit Plans: 2001 – 2016



Source: *Survey of Employer Participation in the Texas Workers' Compensation System*, 2001 estimates from the Research and Oversight Council on Workers' Compensation and the Public Policy Research Institute (PPRI) at Texas A&M University; and 2004 -2016 estimates from the Texas Department of Insurance Workers' Compensation Research and Evaluation Group and PPRI, 2016.

# Percentage of Texas employers that are non-subscribers, by employment size: 1995-2016

Employment Size	1995	1996	2001	2004	2006	2008	2010	2012	2014	2016
<b>1-4 Employees</b>	55%	44%	47%	46%	43%	40%	41%	41%	<b>43%</b>	<b>31%</b>
<b>5-9 Employees</b>	37%	39%	29%	37%	36%	31%	30%	29%	<b>27%</b>	<b>19%</b>
<b>10-49 Employees</b>	28%	28%	19%	25%	26%	23%	20%	19%	<b>21%</b>	<b>10%</b>
<b>50-99 Employees</b>	24%	23%	16%	20%	19%	18%	16%	19%	<b>18%</b>	<b>10%</b>
<b>100-499 Employees</b>	20%	17%	13%	16%	17%	16%	13%	12%	<b>14%</b>	<b>11%</b>
<b>500 + Employees</b>	18%	14%	14%	20%	21%	26%	15%	17%	<b>19%</b>	<b>19%</b>

Note: Non-subscription estimates for 1993 were based on different employer size categories than were used in later years so they are not directly comparable.

Source: *Survey of Employer Participation in the Texas Workers' Compensation System*, 1993 and 1995 estimates from the Texas Workers' Compensation Research Center and the Public Policy Research Institute (PPRI) at Texas A&M University; 1996 and 2001 estimates from the Research and Oversight Council on Workers' Compensation and PPRI; and 2004 -2016 estimates from the Texas Department of Insurance Workers' Compensation Research and Evaluation Group and PPRI.



# Percentage of Texas employers that are non-subscribers, by industry: 2004-2016

Industry Type	Non-subscription Rate						
	2004	2006	2008	2010	2012	2014	2016
Agriculture/Forestry/Fishing/Hunting	39%	25%	27%	25%	29%	26%	14%
Mining/Utilities/Construction	32%	21%	28%	19%	22%	20%	19%
Manufacturing	42%	37%	31%	31%	29%	25%	21%
Wholesale Trade/ Retail Trade/Transportation	40%	37%	29%	32%	26%	34%	20%
Finance/Real Estate/Professional Services	32%	33%	33%	33%	32%	29%	24%
Health Care/Educational Services	41%	44%	39%	32%	35%	41%	28%
Arts/Entertainment/Accommodation/Food Services	54%	52%	46%	40%	40%	39%	24%
Other Services Except Public Administration	39%	42%	36%	42%	49%	47%	22%

Source: *Survey of Employer Participation in the Texas Workers' Compensation System*, 1993 and 1995 estimates from the Texas Workers' Compensation Research Center and the Public Policy Research Institute (PPRI) at Texas A&M University; 1996 and 2001 estimates from the Research and Oversight Council on Workers' Compensation and PPRI; and 2004 -2016 estimates from the Texas Department of Insurance Workers' Compensation Research and Evaluation Group and PPRI.

## Primary Reasons Subscribing Employers gave for Purchasing Workers' Compensation Coverage 2008 - 2016

Primary reasons given by surveyed employers	Percentage of subscribing employers				
	2008	2010	2012	2014	2016
Employer was able to provide injured employees with medical care through a workers' compensation health care network	24%	27%	20%	22%	25%
Employer thought having workers' compensation was required by law	25%	22%	19%	22%	20%
Employer was concerned about lawsuits	14%	18%	21%	20%	20%
Employer needed workers' compensation coverage in order to obtain government contracts	3%	6%	9%	10%	11%
Workers' compensation insurance rates were lower	2%	2%	11%	10%	10%

Source: *Survey of Employer Participation in the Texas Workers' Compensation System*, Public Policy Research Institute at Texas A&M University and the Texas Department of Insurance Workers' Compensation Research and Evaluation Group, 2016.

# Primary reasons why large subscribing employers (500+ employees) said they purchase workers' compensation coverage 2008 - 2016

Primary reasons given by surveyed employers with 500+ employees	Percentage of large subscribing employers				
	2008	2010	2012	2014	2016
Employer was able to provide injured employees with medical care through a workers' compensation health care network	28%	29%	20%	<b>23%</b>	<b>26%</b>
Employer thought having workers' compensation coverage was required by law	16%	17%	17%	<b>16%</b>	<b>16%</b>
Employer was concerned about lawsuits	13%	12%	17%	<b>14%</b>	<b>13%</b>
Employer was able to reduce its workers' compensation insurance costs through deductibles, certified self insurance, group self-insurance or other premium discounts	3%	13%	17%	<b>19%</b>	<b>13%</b>
Employer needed workers' compensation coverage in order to obtain government contracts	NA	NA	11%	<b>10%</b>	<b>12%</b>

Source: *Survey of Employer Participation in the Texas Workers' Compensation System*, Public Policy Research Institute at Texas A&M University and the Texas Department of Insurance Workers' Compensation Research and Evaluation Group, 2016.

# Primary Reasons Non-subscriber Employers did not Purchase Workers' Compensation Coverage 2008 - 2016

Primary reasons given by surveyed employers	Percentage of non-subscribing employers				
	2008	2010	2012	2014	2016
Employer had too few employees	26%	25%	17%	<b>21%</b>	<b>26%</b>
Employers are not required to have workers' compensation insurance by law	11%	13%	17%	<b>19%</b>	<b>24%</b>
Workers' compensation insurance premiums were too high	26%	32%	15%	<b>17%</b>	<b>18%</b>
Employer had few on-the-job injuries	9%	12%	17%	<b>20%</b>	<b>18%</b>
Medical costs too high/Employer felt they could do a better job than the Texas workers' compensation system at reducing the costs of on-the-job-injuries	4%	5%	10%	<b>16%</b>	<b>6%</b>

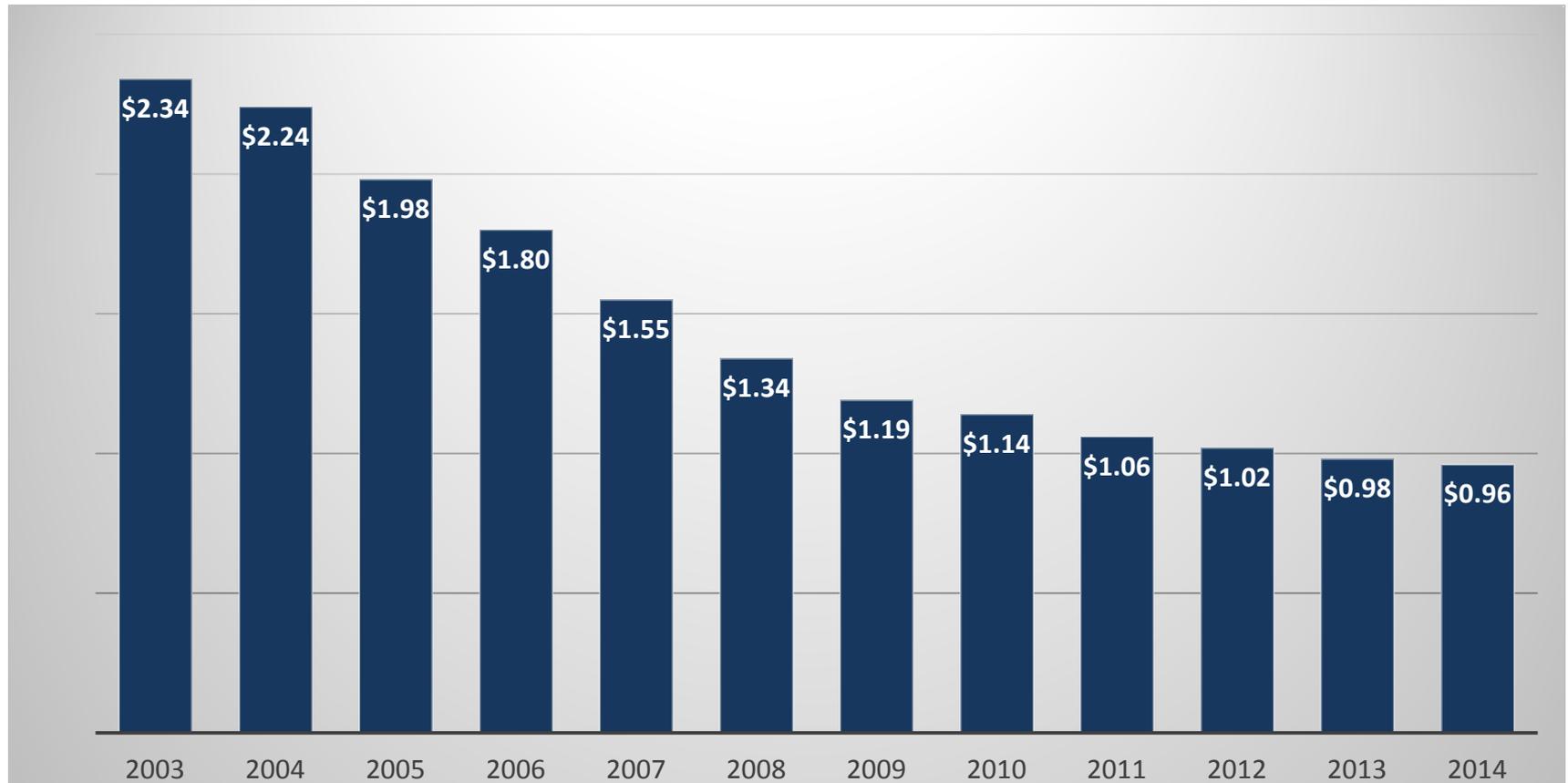
Source: *Survey of Employer Participation in the Texas Workers' Compensation System*, Public Policy Research Institute at Texas A&M University and the Texas Department of Insurance Workers' Compensation Research and Evaluation Group, 2016.

# Primary reasons why large non-subscribing employers (500+ employees) said they did not purchase workers' compensation coverage 2008 - 2016

Primary reasons given by surveyed non-subscribing employers with 500+ employees	Percentage of large non-subscribing employers				
	2008	2010	2012	2014	2016
The employer felt the company could do a better job than the Texas workers' compensation system at ensuring that employees injured on the job receive appropriate benefits (medical and wage loss)	NA	28%	20%	30%	30%
Medical costs too high/Employer felt they could do a better job than the Texas workers' compensation system at reducing the costs of on-the-job-injuries	13%	10%	24%	23%	31%
Employer not required to have workers' compensation insurance by law	NA	2%	14%	15%	17%
Workers' compensation insurance premiums were too high	49%	50%	23%	21%	14%

Source: *Survey of Employer Participation in the Texas Workers' Compensation System*, Public Policy Research Institute at Texas A&M University and the Texas Department of Insurance Workers' Compensation Research and Evaluation Group, 2016.

# Average Premium per \$100 of Payroll by Policy Year

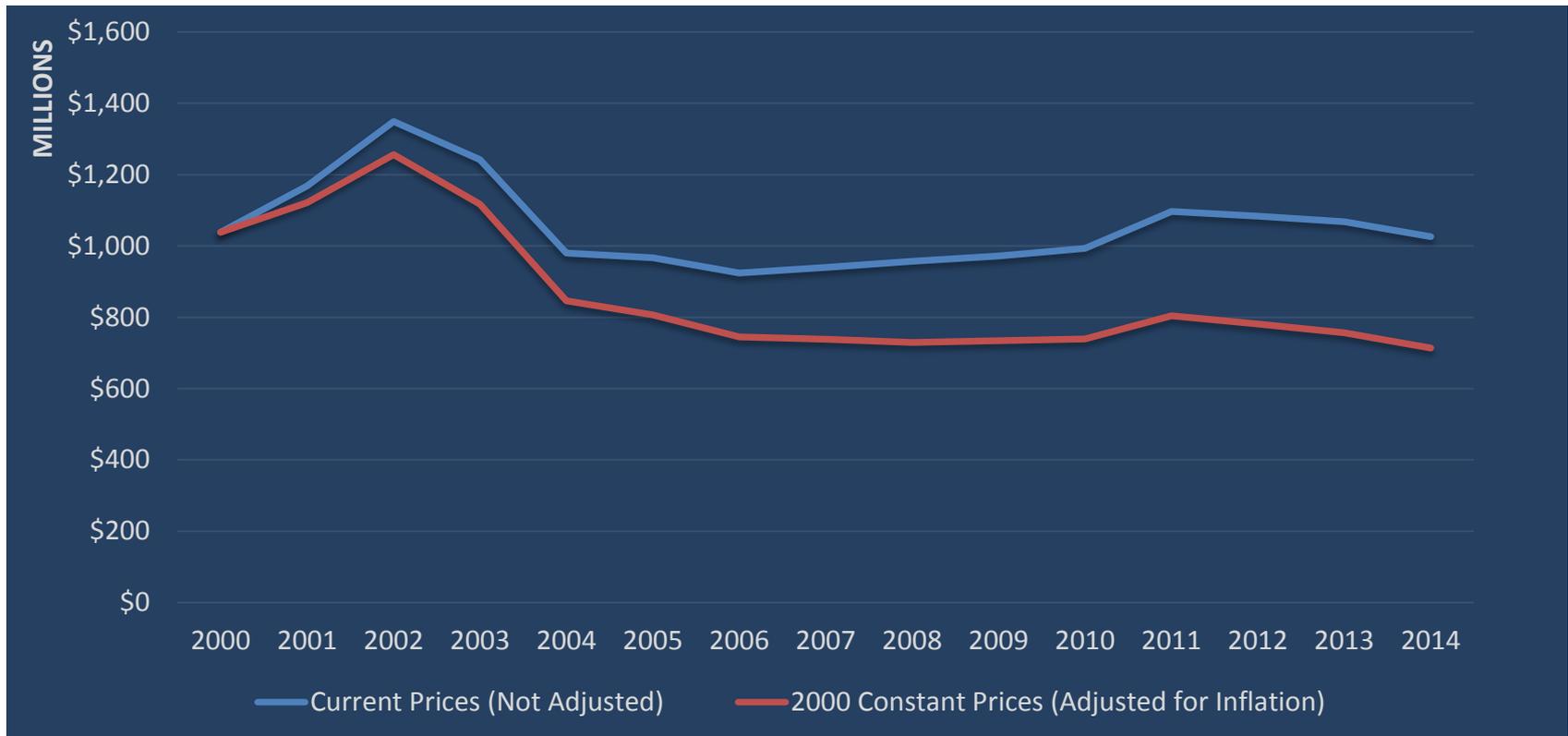


Source: The Texas Workers' Compensation Financial Data Call and data compiled by National Council on Compensation Insurance (NCCI), 2016.

# Medical Costs and Utilization in the Texas Workers' Compensation System

# Total Professional and Hospital Costs: Current and Inflation-Adjusted Prices, by Service Year

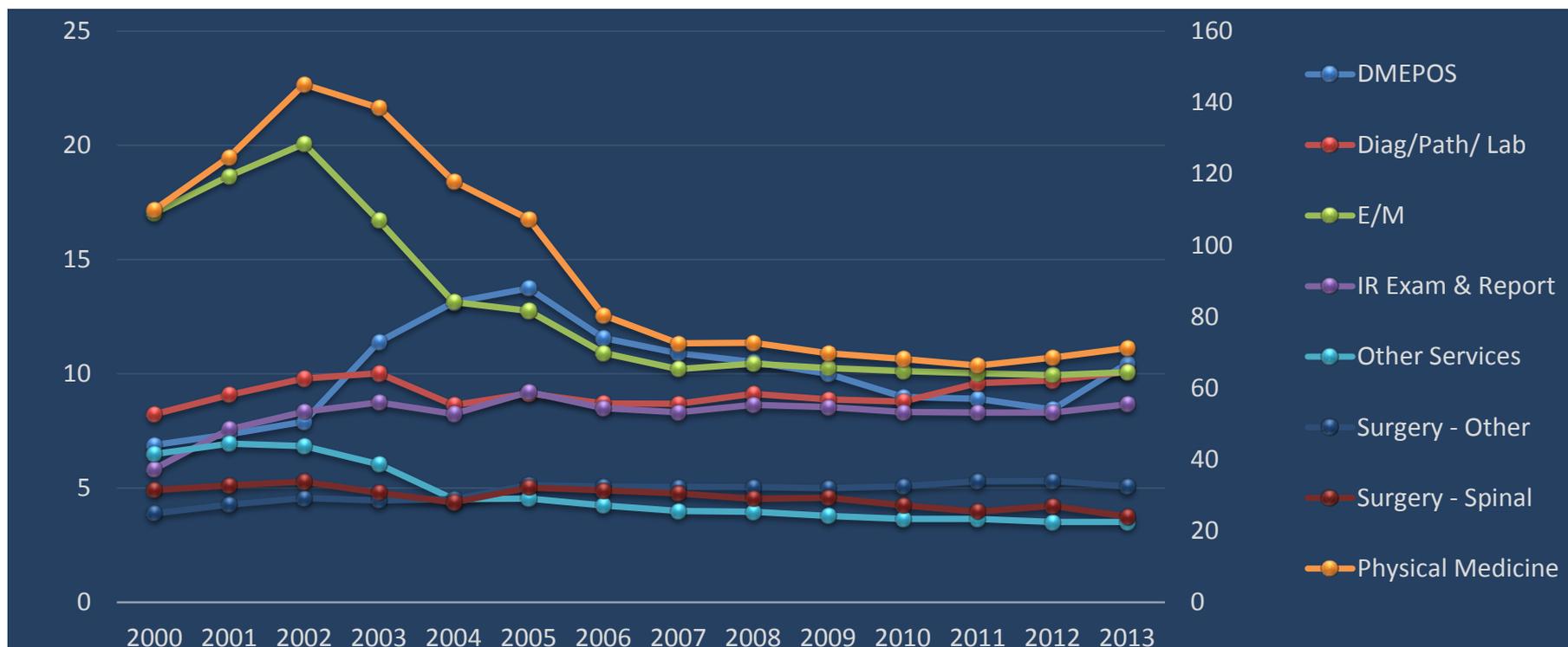
Total 2014 costs are about the same as in 2000 in current prices.  
Total 2014 costs are 31 percent lower in inflation-adjusted prices.



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Utilization: Number of Professional Services per Lost-Time Claim, Service Type by Injury Year

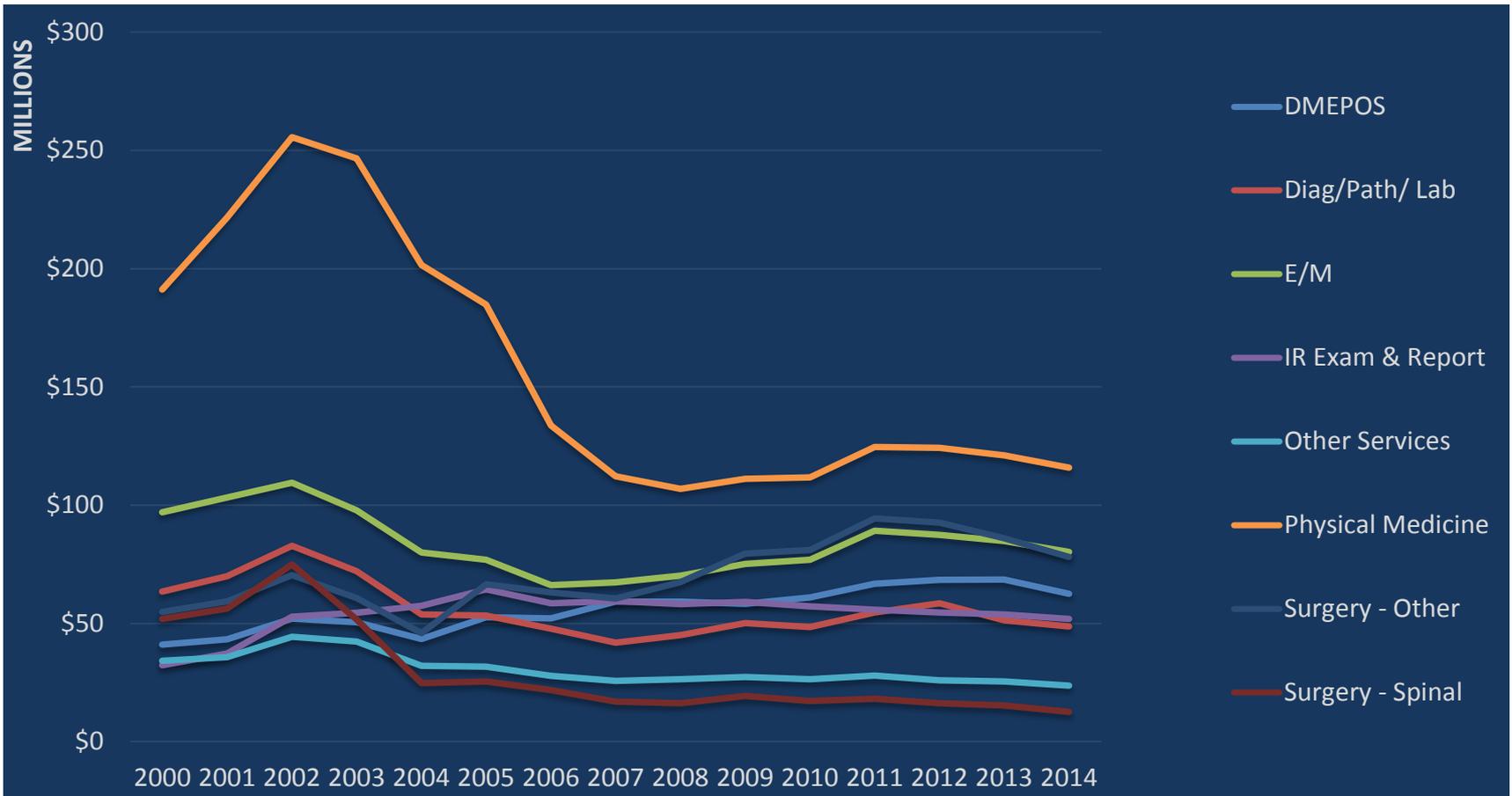
## Number of Services 12-Months Post-Injury



Note: Lost-Time claims are claims with more than 7 days of lost time.

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Total Professional Costs for Lost-Time Claims: Service Type by Service Year

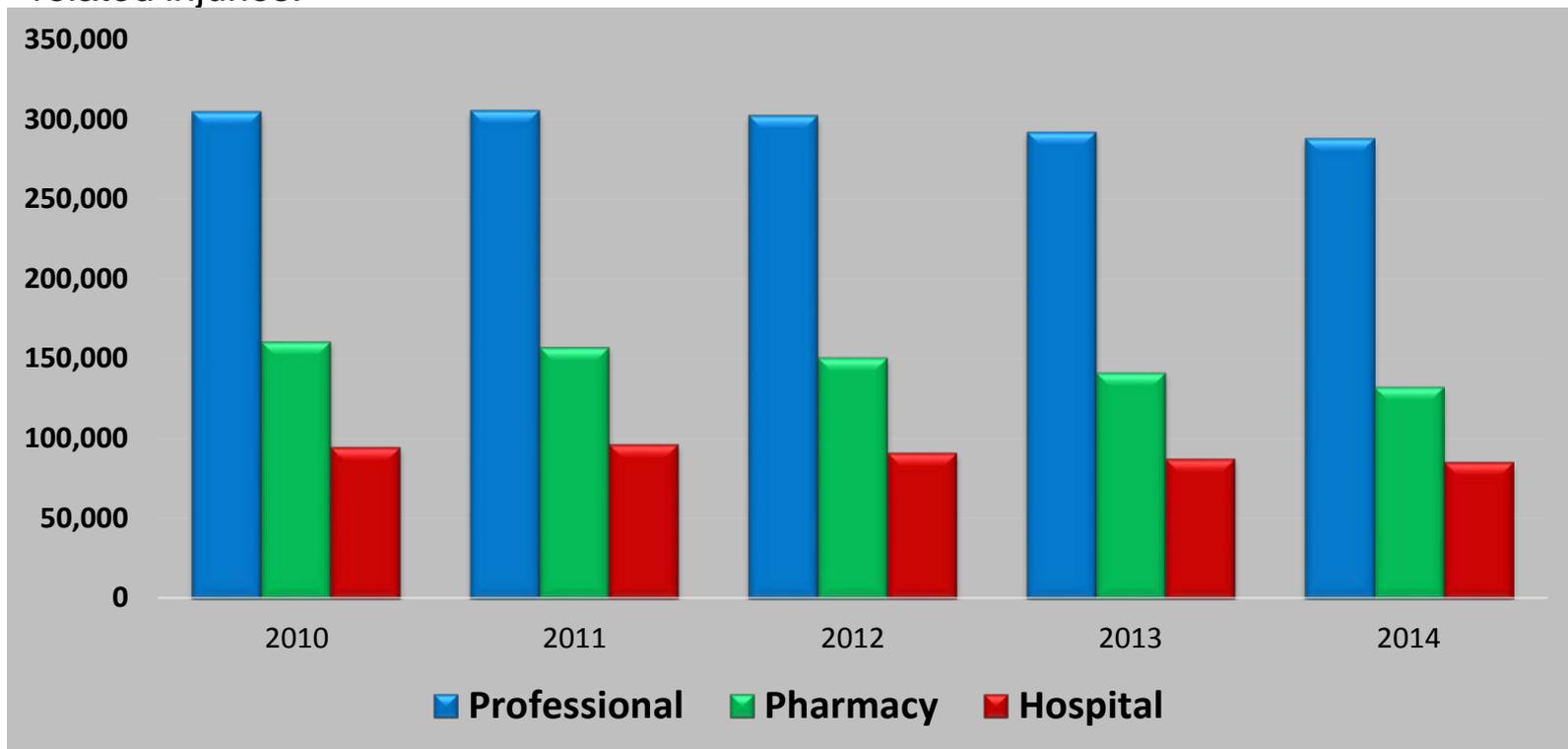


Note: Lost-Time claims are claims with more than 7 days of lost time.

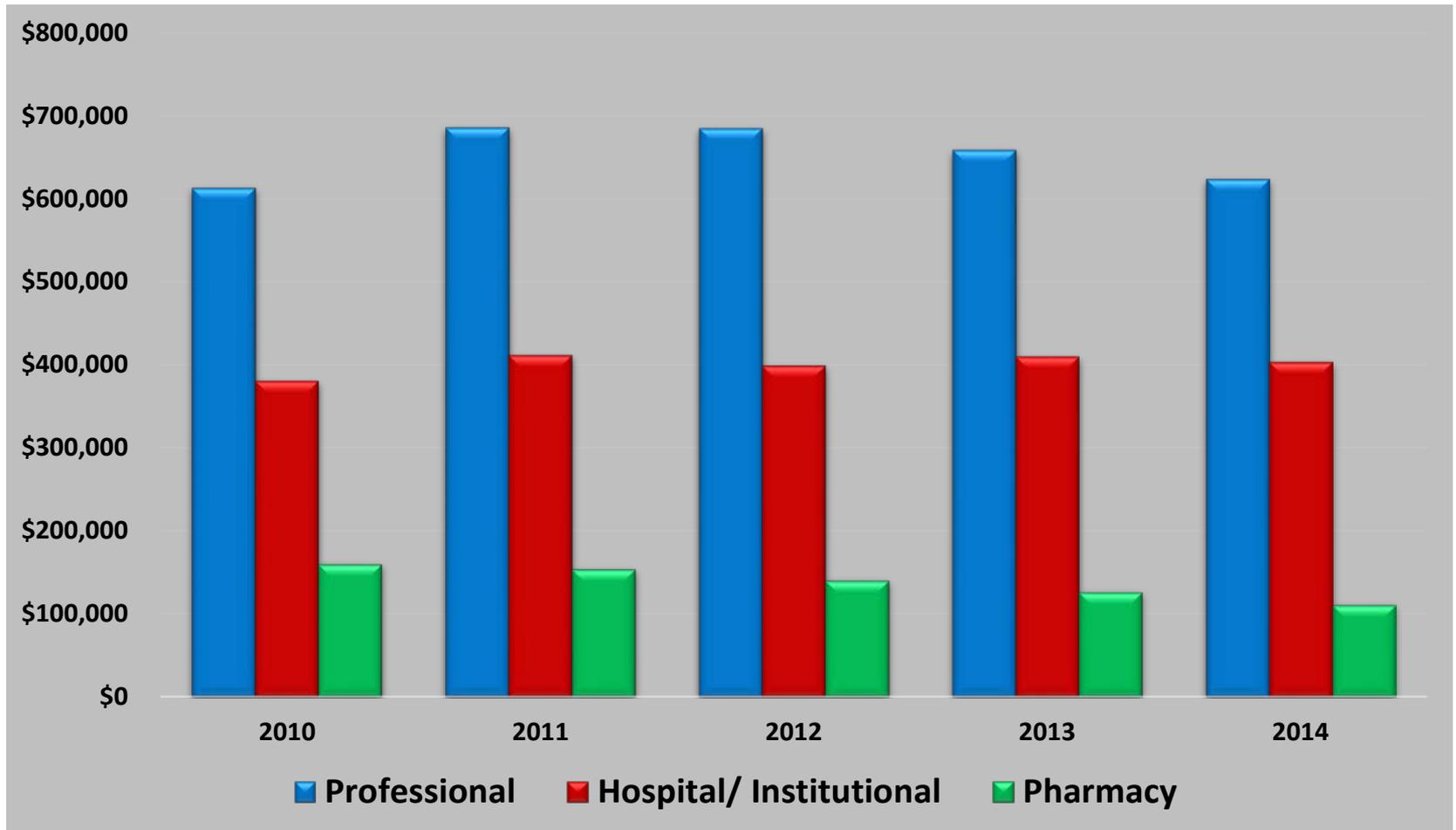
Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Number and Percentage of Injured Employees: Bill Type by Service Year

- ❖ 94 percent of claims received at least one professional service in 2014.
- ❖ 43 percent of claims received pharmacy services.
- ❖ 28 percent of claims received hospital/institutional services.
- ❖ Approximately 1,400 injured employees receive dental services each year for their work-related injuries.



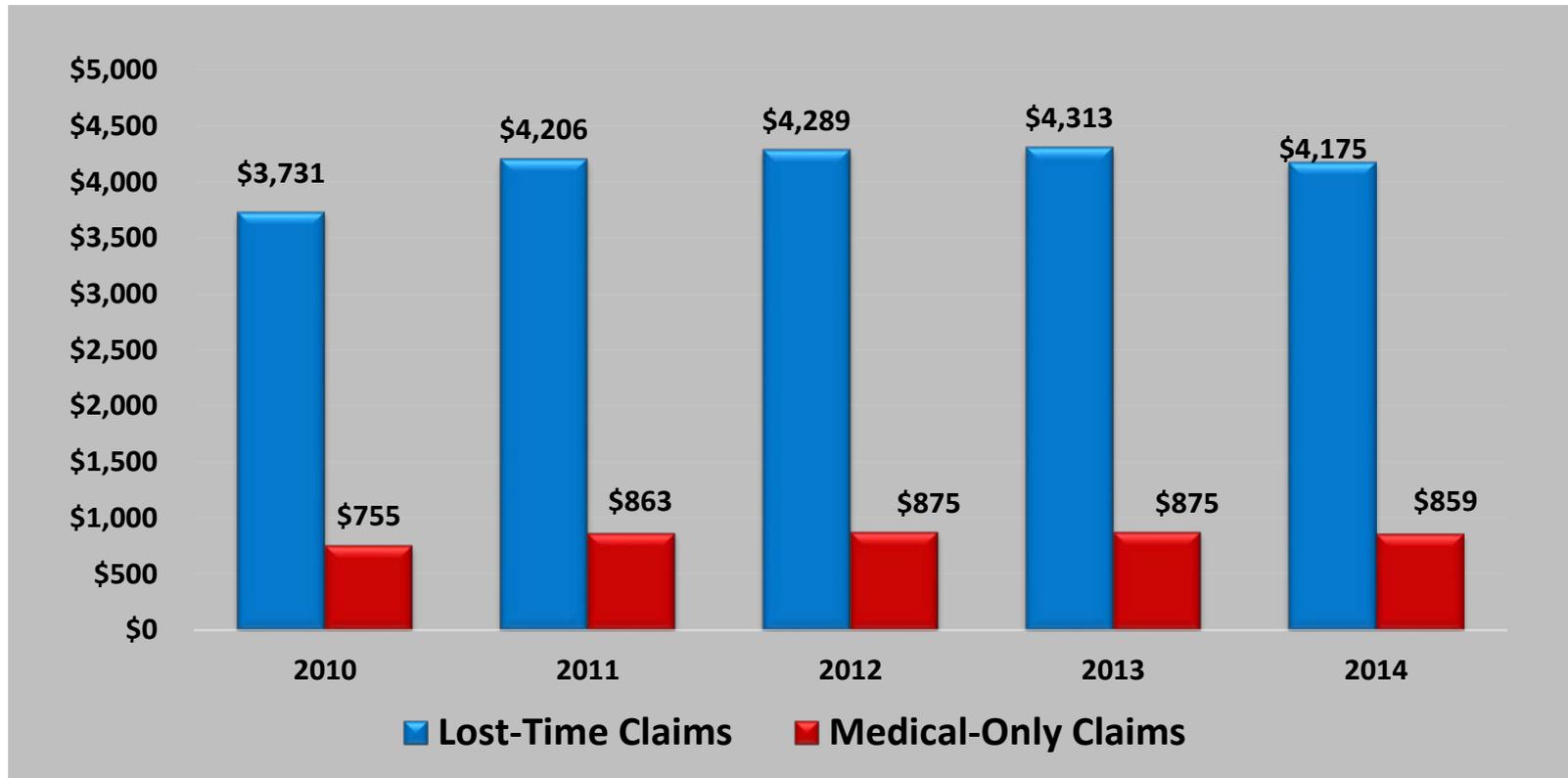
# Total Costs (Thousand Dollars): Bill Type by Service Year



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Average Costs Per Claim for Professional Services: Claim Type by Service Year

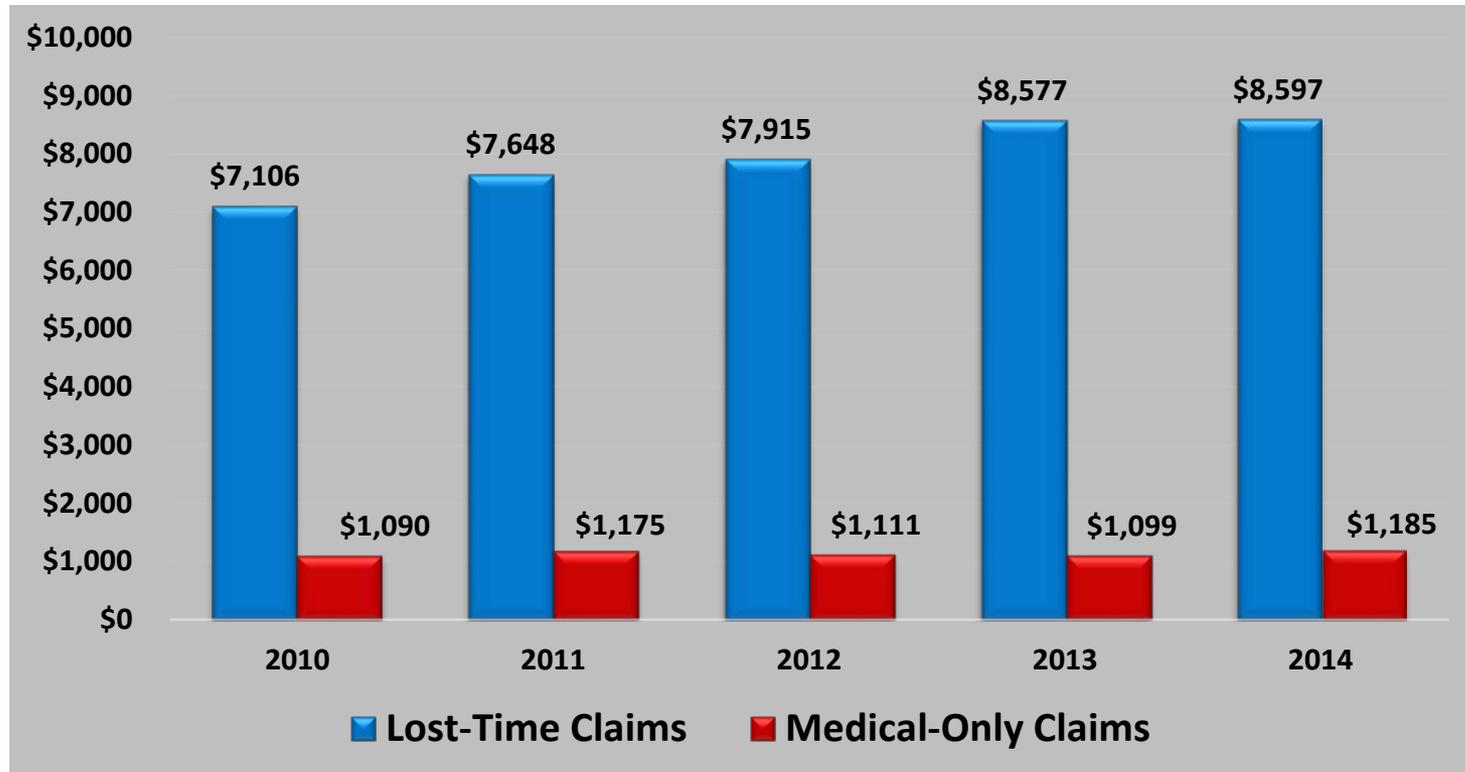
- ❖ Average costs decreased in 2014 for the first time since 2010.



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Average Hospital Costs per Claim: Claim Type by Service Year

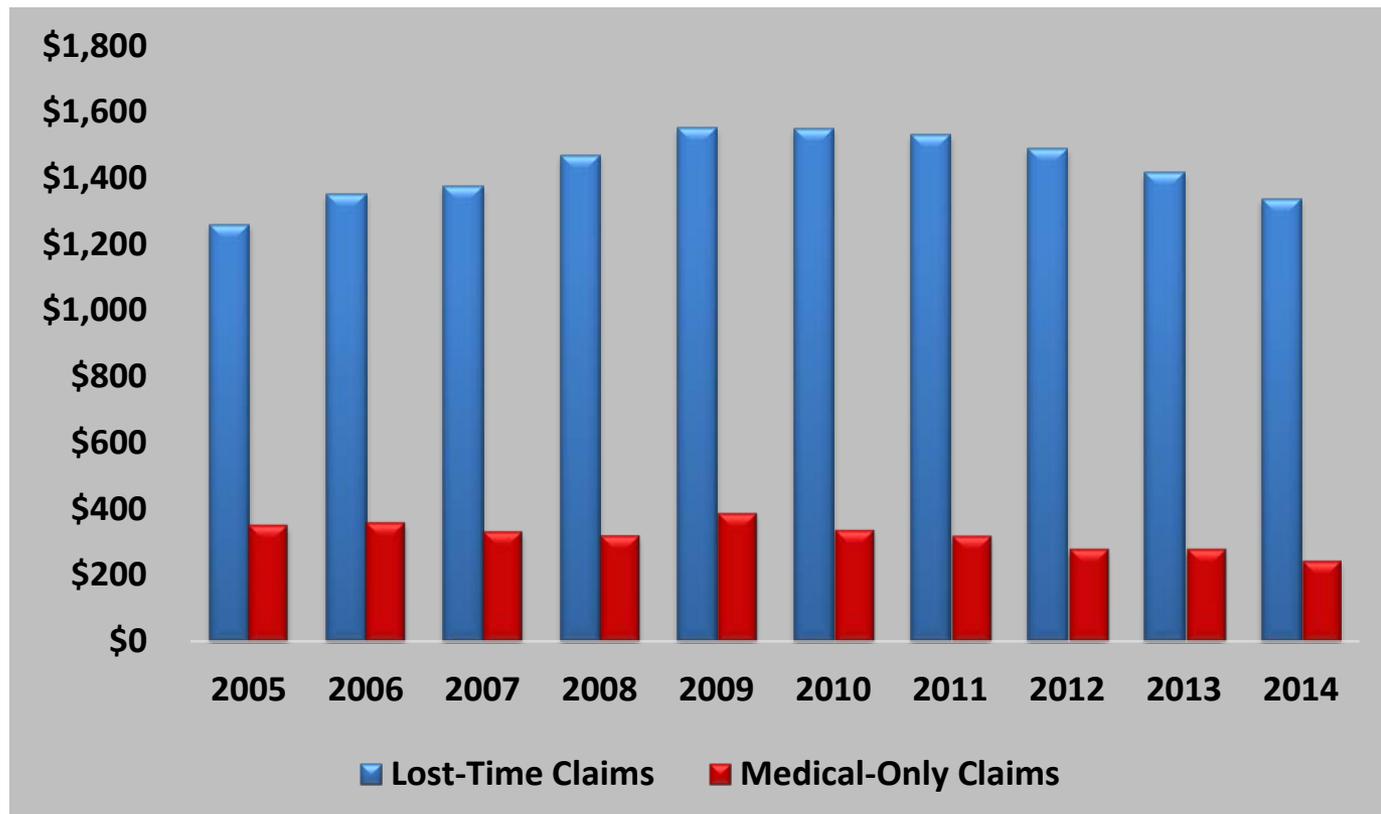
- ❖ Average hospital costs for lost-time claims increased 21 percent since 2010.
- ❖ Average hospital costs for medical-only claims increased 8 percent in 2014.



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Average Pharmacy Costs (Thousand Dollars): Claim Type by Service Year

- ❖ Average pharmacy costs decreasing since 2010.



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Network and Non-network Claims Report Card Results

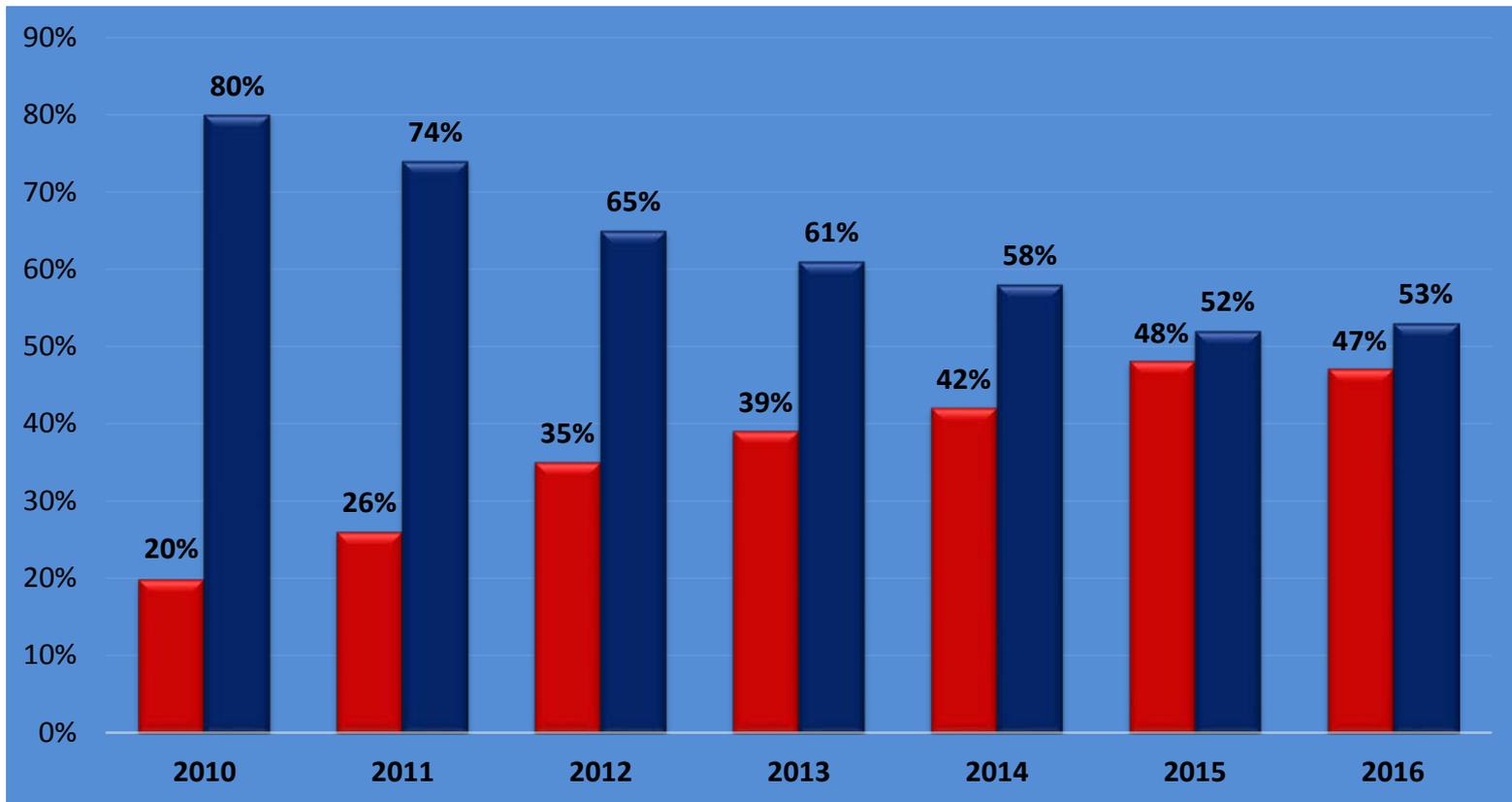
# Report card elements

## **Texas Ins. Code 1305.502**

- Health care costs
- Utilization of health care
- Employee access to care
- Employee satisfaction with care
- Return-to-work outcomes
- Health-related outcomes

# Percentage of Claims: Network and Non-network

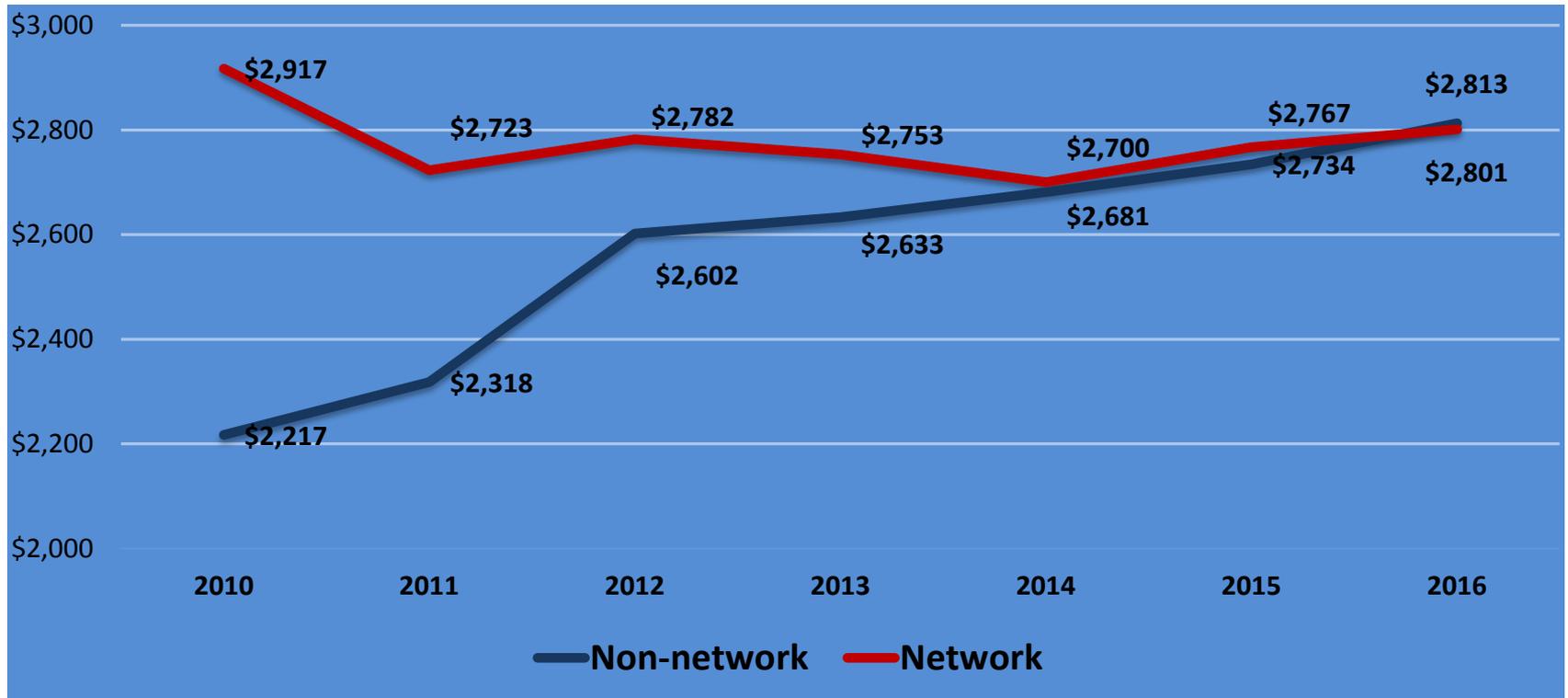
❖ Percent of claims in TDI-certified networks more than doubled since 2010



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Average Medical Costs: Network vs Non-network, By Injury Year, Six months maturity

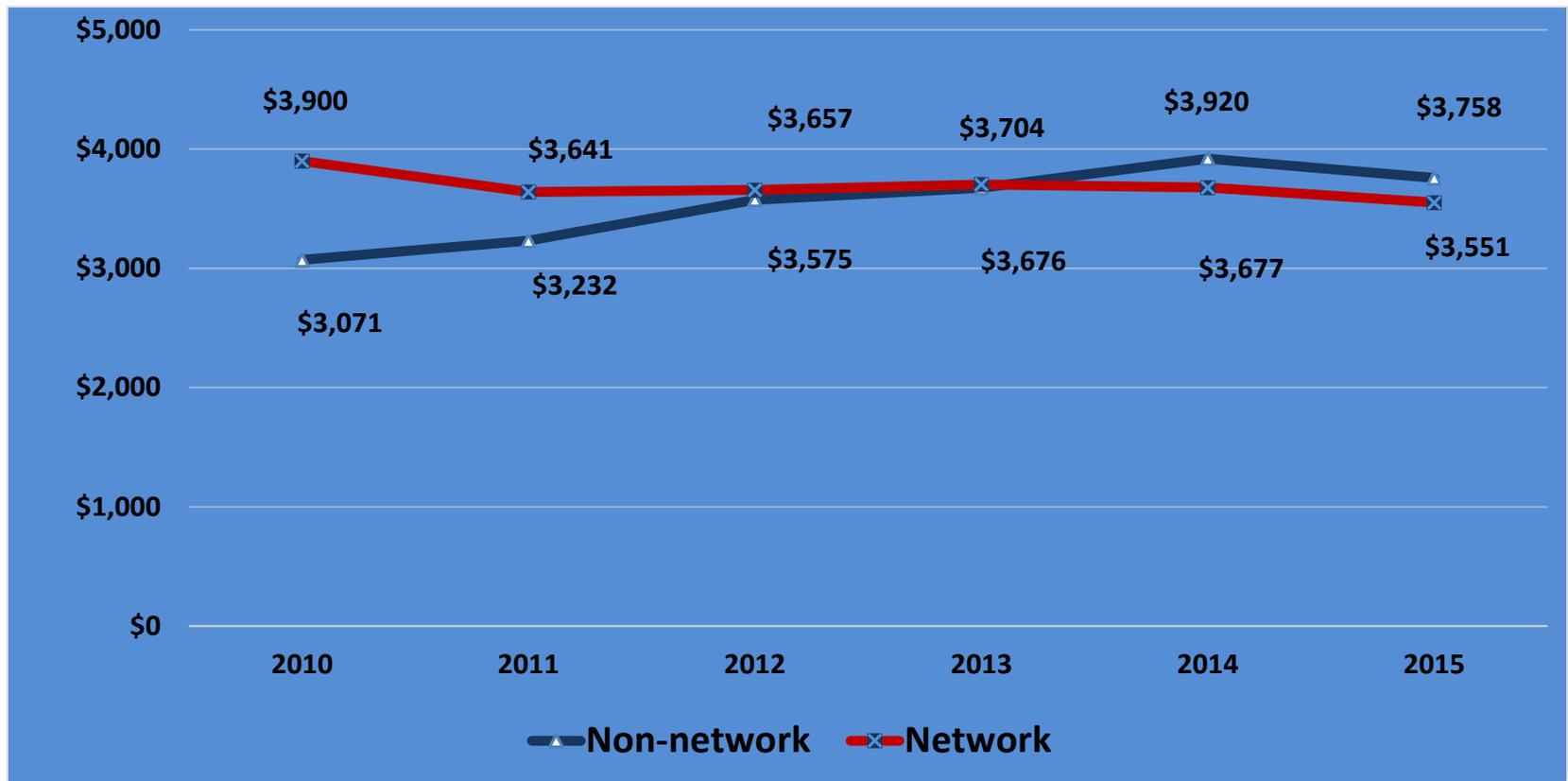
- ❖ Network Average Cost is lower in 2016 than in 2010
- ❖ Non-network Average Cost is higher in 2016 than in 2010



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Average Medical Costs: Network vs Non-network, By Injury Year, 18 months maturity

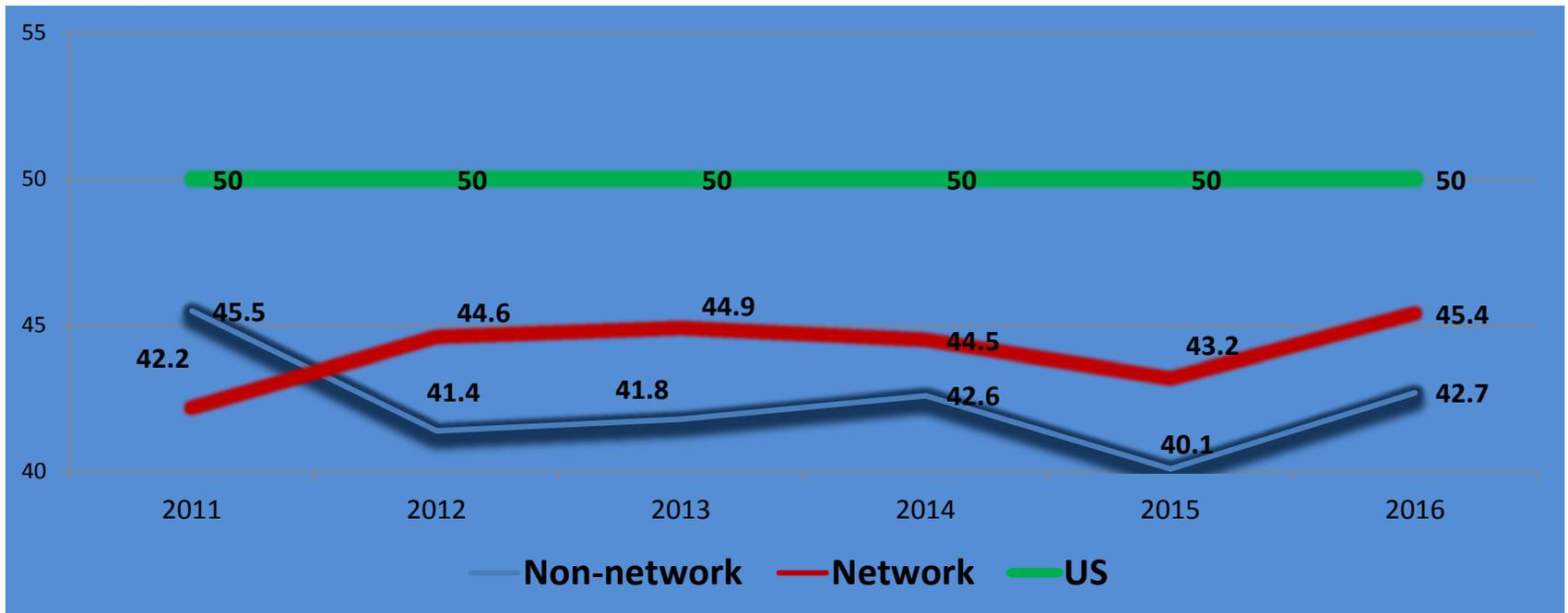
❖ Network per claim cost fell from 27% higher than non-network in 2010 to 5% lower in 2015



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Physical Functioning Scores Network vs Non-network Claimants

- ❖ Network claimants consistently score higher than non-network claimants since 2012

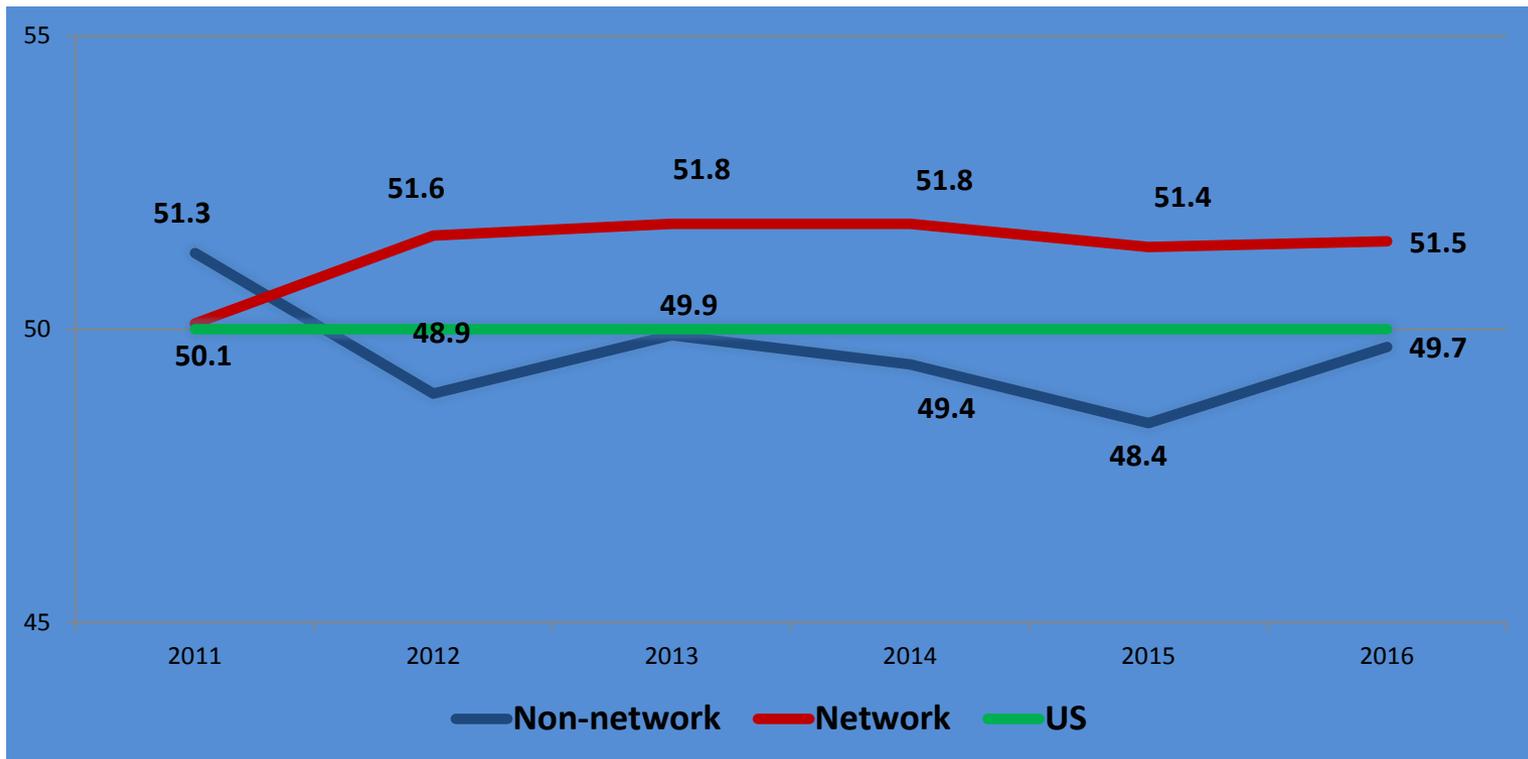


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Mental Functioning Scores

## Network vs Non-network Claimants

- ❖ Network claimants consistently score higher than non-network claimants and the U.S. population since 2012.



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

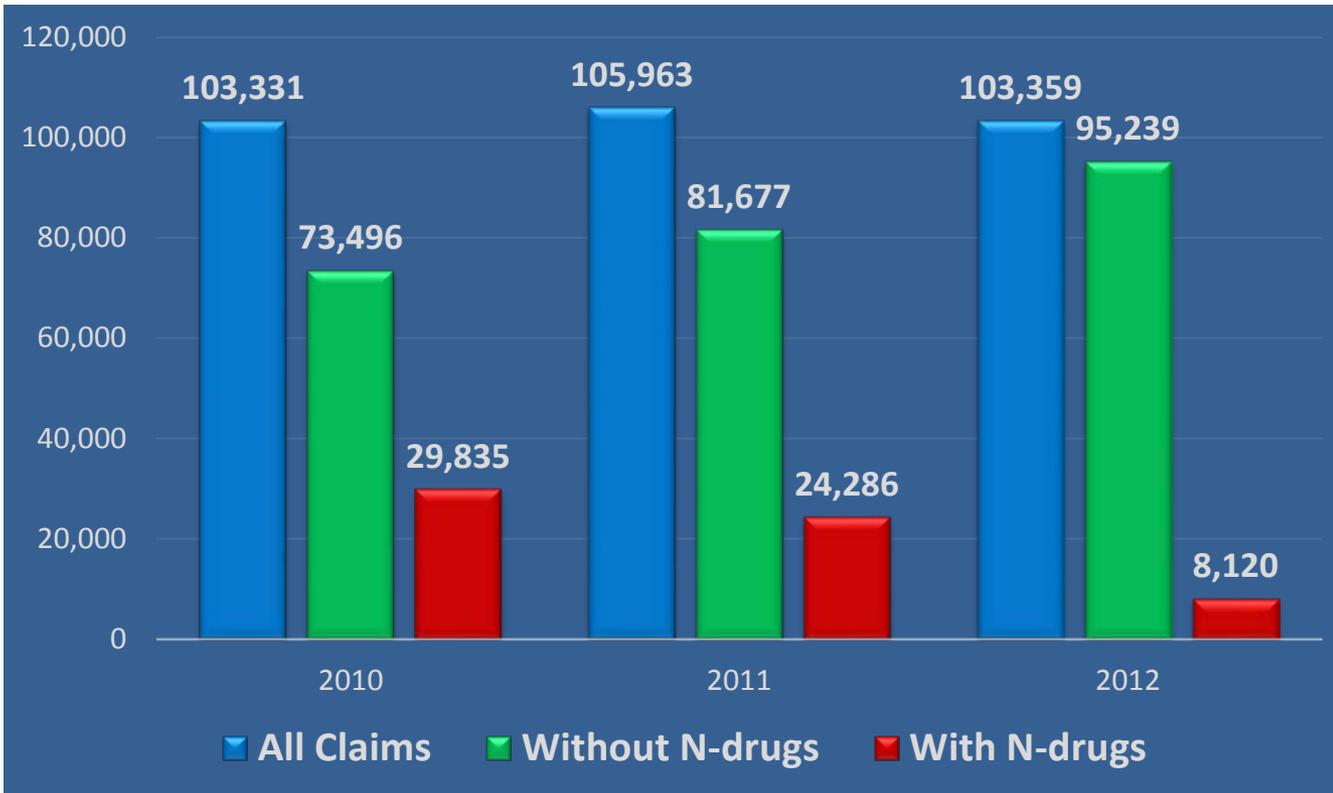
# Impact of the Texas Pharmacy Closed Formulary

# What is the Closed Formulary?

Formulary includes all FDA-approved drugs prescribed and dispensed for outpatient use, but excludes :

- drugs with “N” status identified in the current edition of the Official Disability Guideline (ODG) Treatment in Workers’ Comp/ Appendix A, *ODG Workers’ Compensation Drug Formulary* and any updates
- any compounded drugs that contains a drug identified with an “N” status in ODG; and
- investigational or experimental drugs as defined in Texas Labor Code §413.014(a)

# Number of Claims Receiving Pharmaceuticals in Texas, by Injury Year (24 Months Maturity)



**Change from  
2011 (Pre-formulary)  
to  
2012 (Post-formulary)**

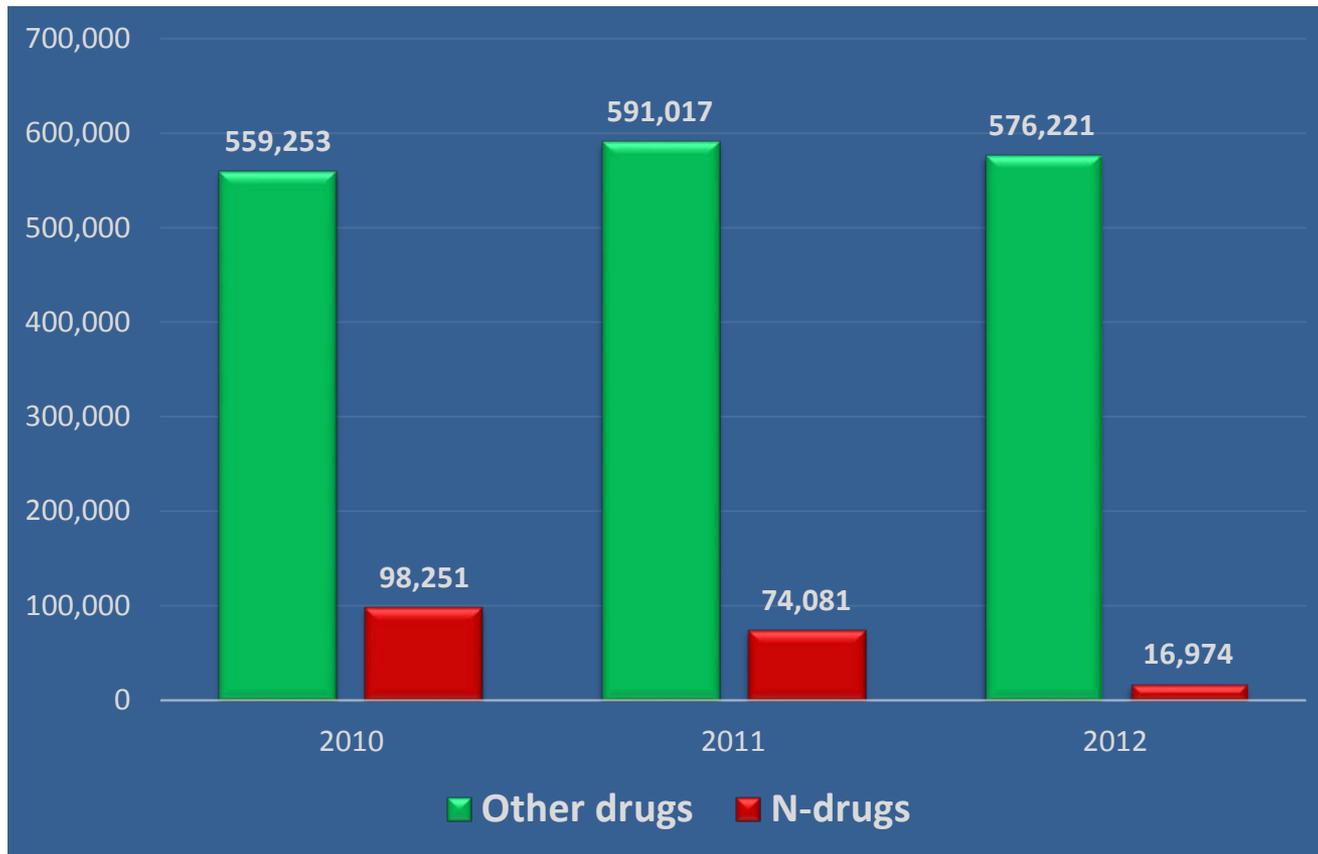
- All claims fell 2 percent.

- Claims without N-drugs increased 17 percent.

- Claims with N-drugs decreased 67 percent.

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Number of Prescriptions by Drug Type, by Injury Year (24 Months Maturity)



**Change from 2011 (Pre-formulary) to 2012 (Post-formulary)**

- Total prescriptions fell 10%
- Other drug prescriptions fell 3%
- N-drug prescriptions fell 77%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Total and Average Costs: N-drugs, by Injury Year (24 Months Maturity)



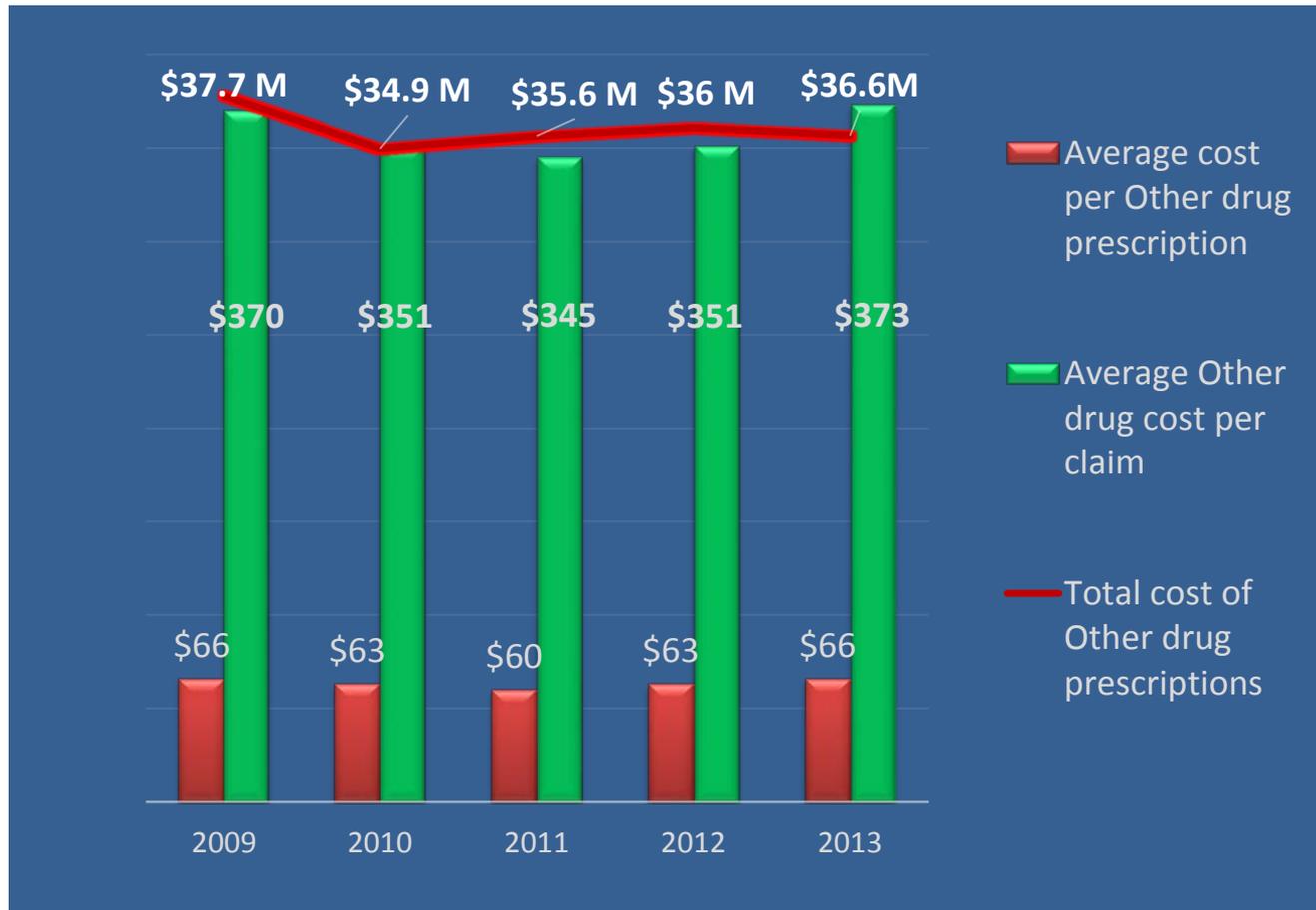
**Change from 2011 (Pre-formulary) to 2012 (Post-formulary)**

- **Total cost of N-drugs fell 79 percent.**

- **Average per-claim cost of N-drug fell 35 percent.**

- **Average per-prescription cost of N-drug drug fell 5 percent.**

# Total and Average Costs: Other Drugs, by Injury Year (24 Months Maturity)

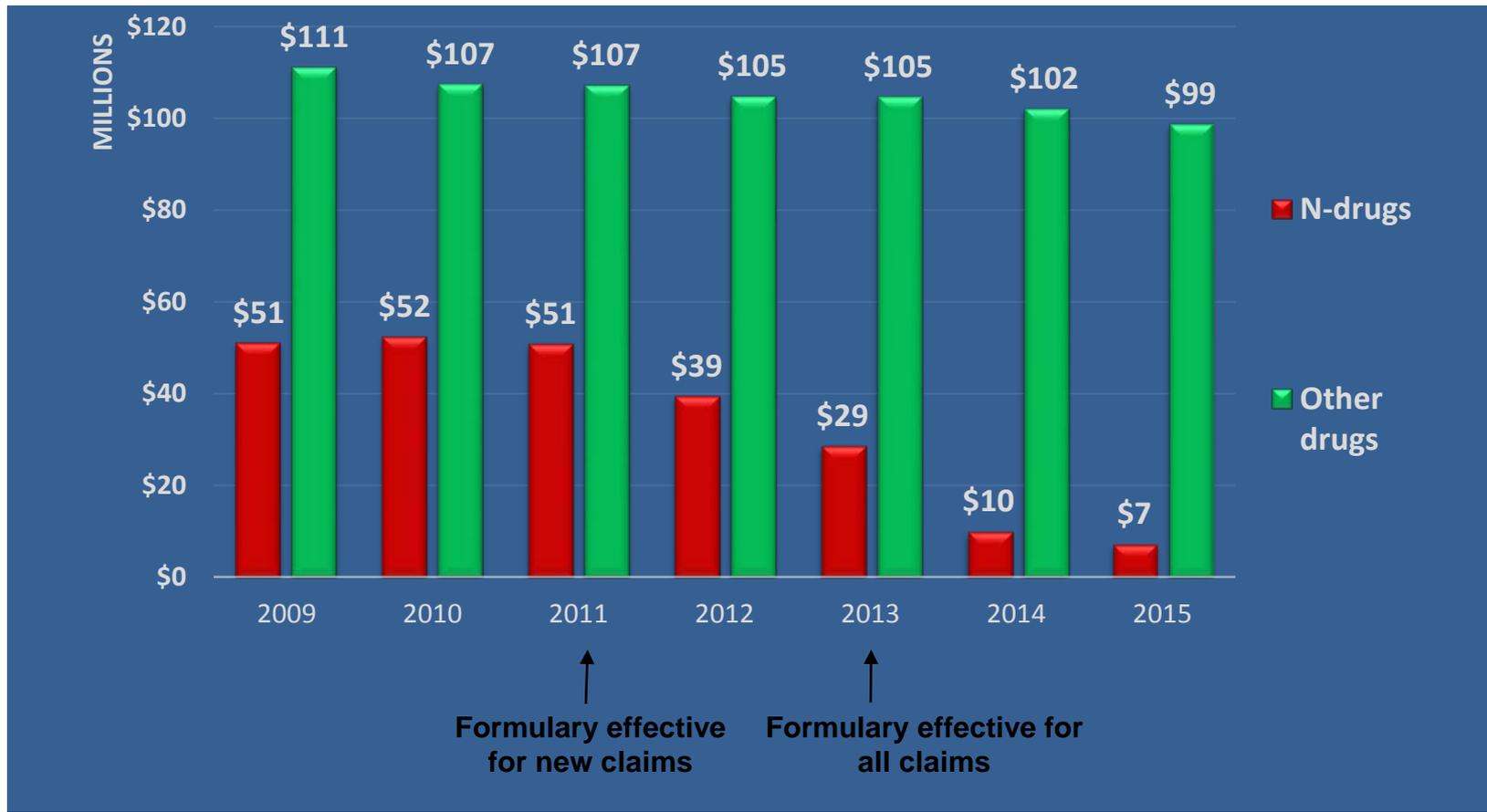


**Change from 2011 to 2012 (Pre- to Post-Formulary)**

- Total cost of Other drugs increased 1 percent.
- Average per-claim cost of Other drugs increased 2 percent,
- Average per-prescription cost of Other drugs increased 4 percent.

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

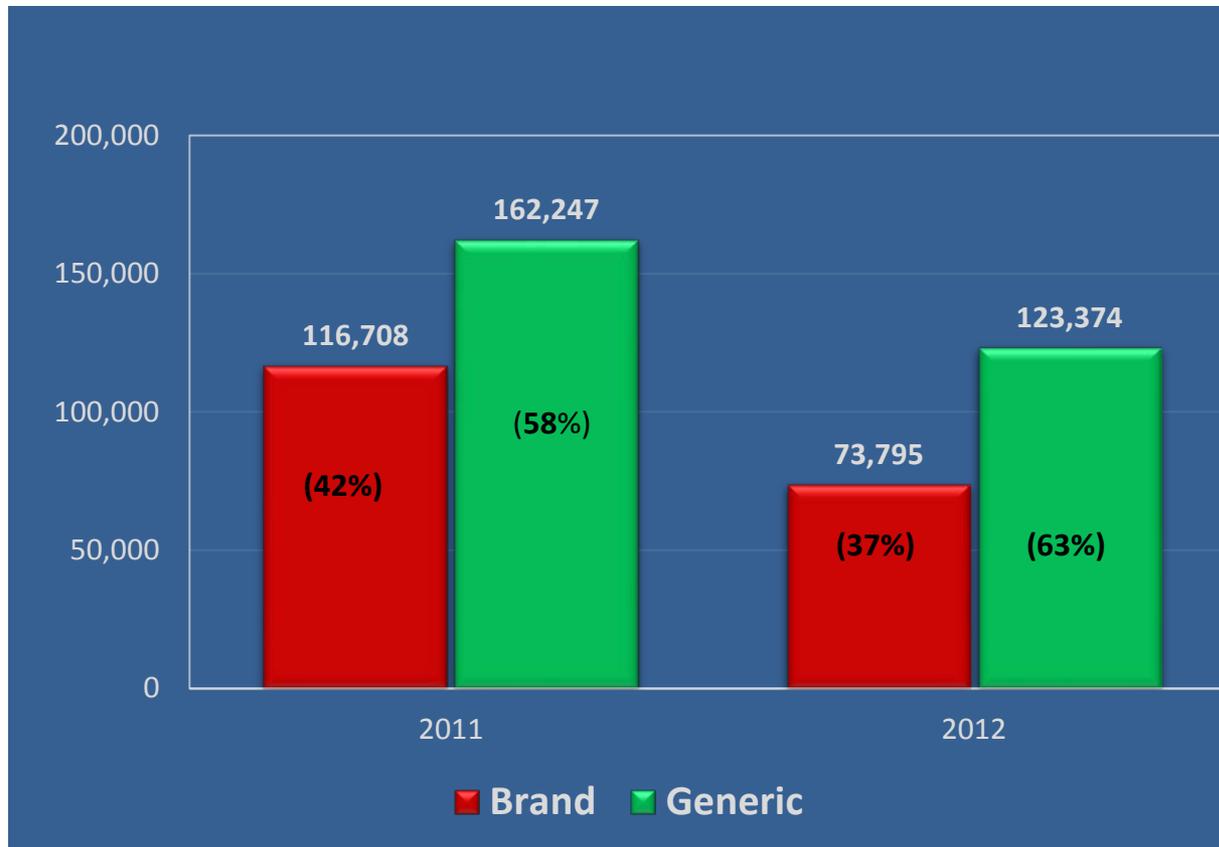
# Total Pharmacy Costs by Drug Status, by Service Year



Note: Service year 2015 data may be incomplete and subject to change.

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Generic Substitution: Prescriptions of N-drugs, by Service Year



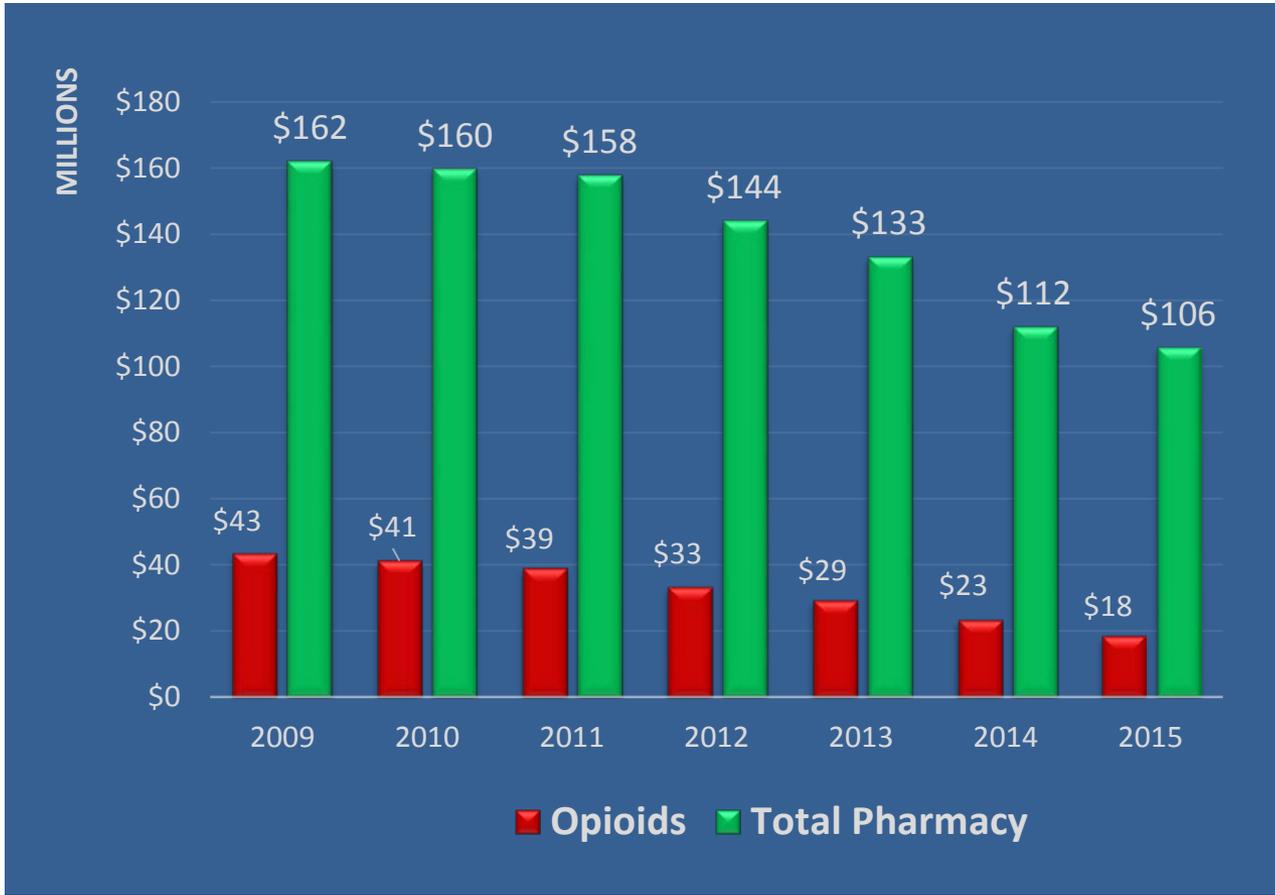
**Change from  
2011 (Pre-  
formulary) to  
2012 (Post-  
formulary)**

**-Generic rates for  
N-drugs increased  
from 58 percent to  
63 percent.**

**- Use of brand  
drugs decreased  
from 42 percent to  
37 percent.**

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Total Pharmacy and Opioid costs, by Service Year

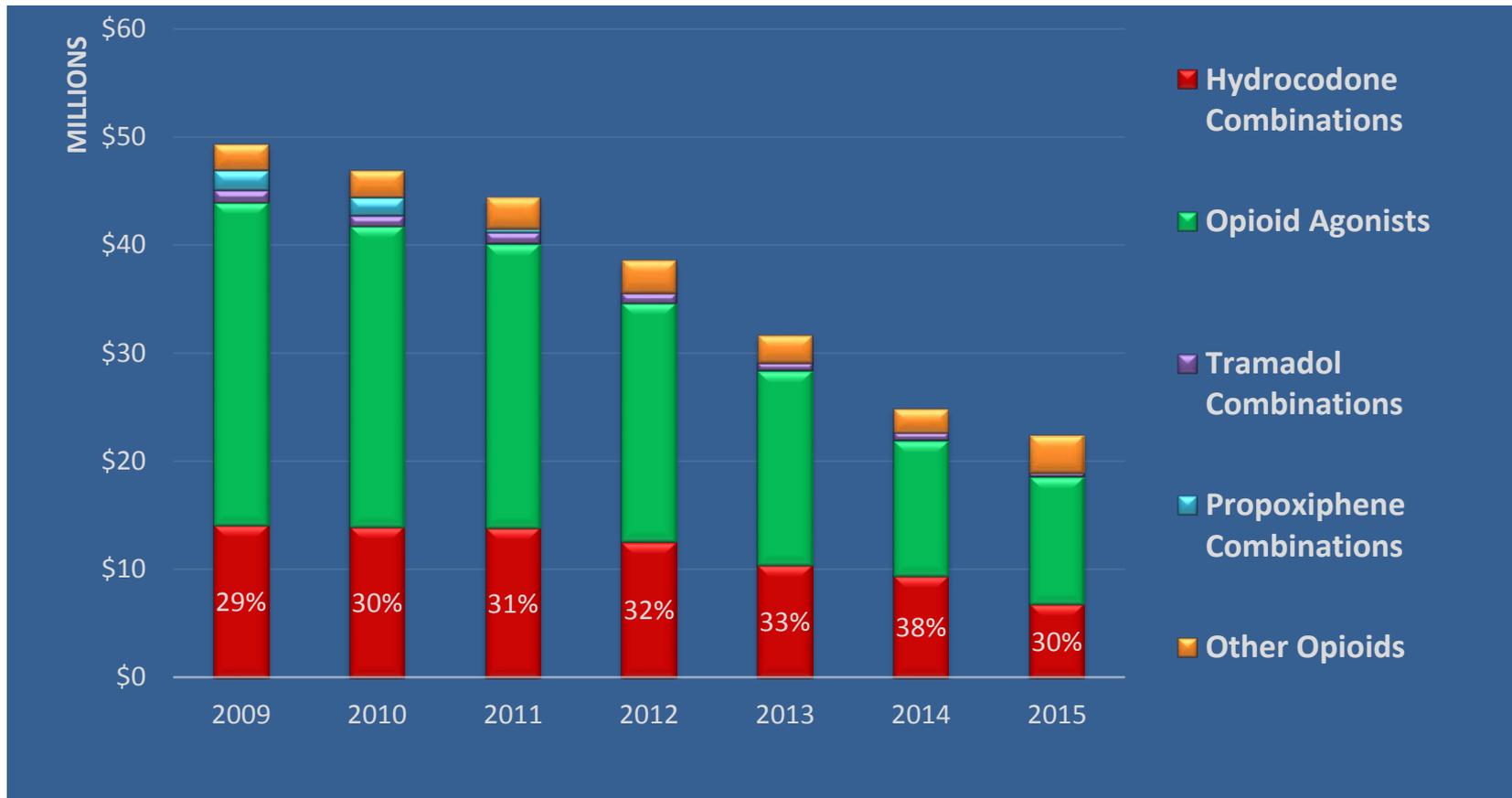


- The share of opioids decreased from 27 percent of total pharmacy cost in 2009 to 18 percent in 2015.
- Since 2009, total pharmacy cost decreased by 35 percent, while opioid cost decreased by 57 percent.

Note: Service year 2015 data may be incomplete and subject to change.

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Costs of Opioids and Hydrocodone Combination Products, by Service Year

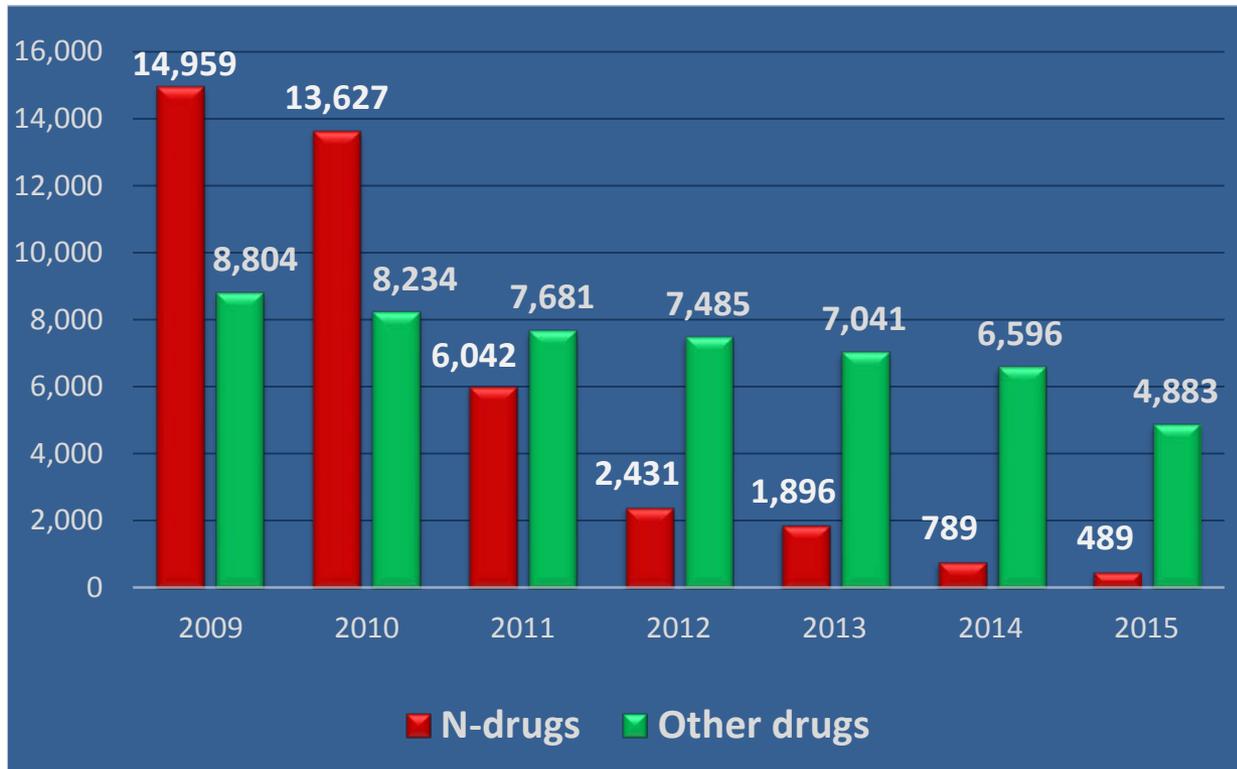


Note: Service year 2015 data may be incomplete and subject to change. Hydrocodone combination products were reclassified by the Federal Government as Schedule II Narcotics in October, 2014.

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Number of Claims Receiving Opioid Prescriptions with 90+ Morphine Milligram Equivalent (MME)/Day, by Service Year

- ❖ According to the Centers for Disease Control (CDC's *Morbidity and Mortality Weekly Report*, March 2016), the average daily dosage of fatal opioid overdose cases is 98 MMEs/day.

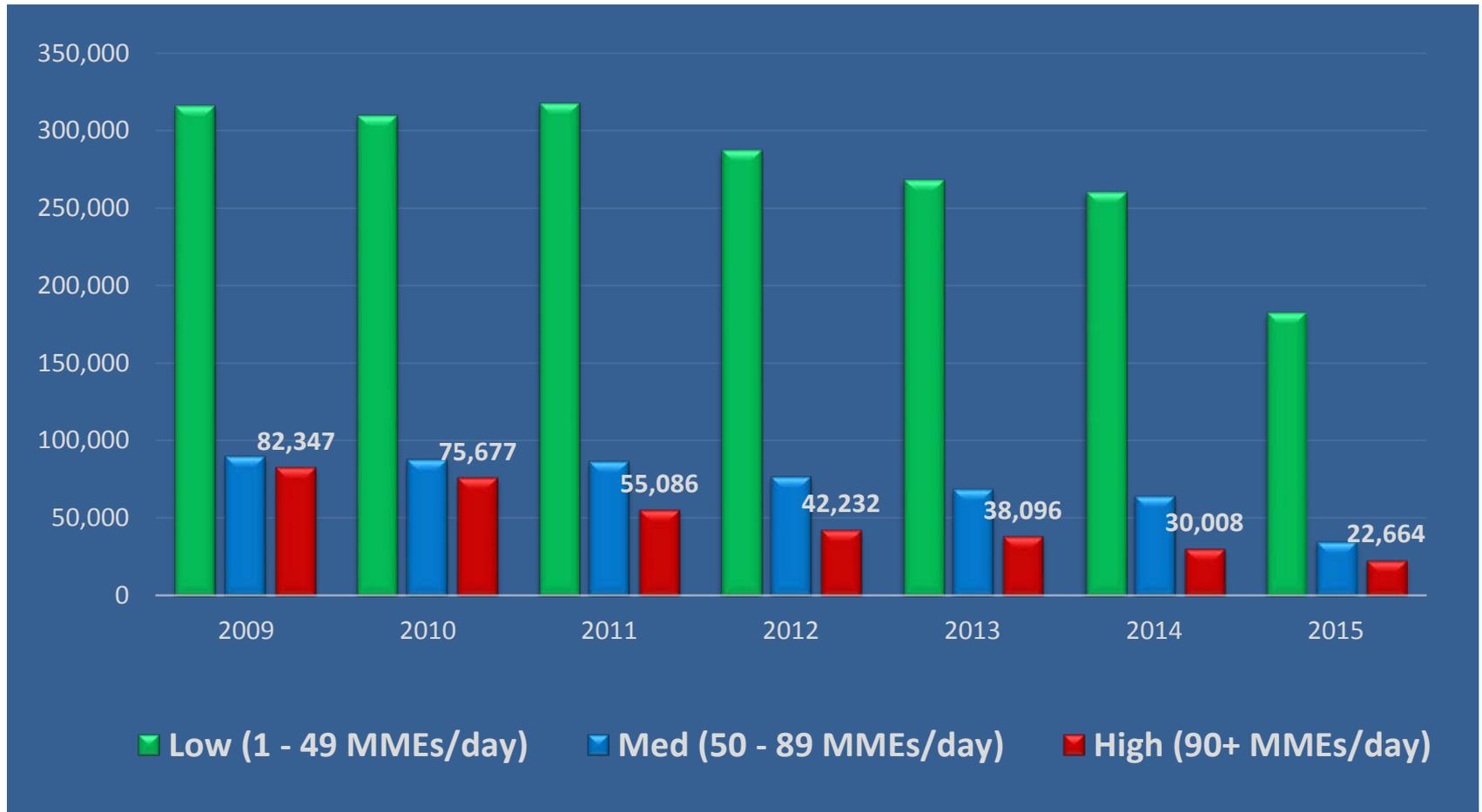


The number of claims receiving 90+ MMEs/day of N-drug opioids fell from almost **15,000** in 2009 to less than **500** in 2015.

Note: Service year 2015 data may be incomplete and subject to change. Morphine milligram equivalent (MME) is a way to measure the relative potency of a dose of a particular opioid painkiller. The CDC currently cautions physicians against prescribing opioids to  $\geq 90$  MME/day for patients.

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Number of Opioid Prescriptions by Morphine Milligram Equivalent (MME) Dosage Group, by Service Year



Note: Service year 2015 data may be incomplete and subject to change. Morphine milligram equivalent (MME) is a way to measure the relative potency of a dose of a particular opioid painkiller. The CDC currently cautions physicians against prescribing opioids to  $\geq 90$  MME/day for patients.

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# No Evidence of Substitution Effects from N-drugs to Other Drugs, Number of Prescriptions and Claims, by Service Year

- ❖ Number of claims with N-drug and Other drug prescriptions continue to decrease in 2015.
- ❖ Average number of N-drug and Other drug prescriptions in 2015 lower than in pre-formulary years.

		2009	2010	2011	2012	2013	2014	2015
<b>N-drugs</b>	Number of Rx	335,077	321,501	278,955	197,169	129,485	37,983	26,701
	Number of claims	59,952	57,830	49,006	29,743	18,971	8,496	5,851
	<b>Rx per claim</b>	<b>5.6</b>	<b>5.6</b>	<b>5.7</b>	<b>6.6</b>	<b>6.8</b>	<b>4.5</b>	<b>4.6</b>
<b>Other drugs</b>	Number of Rx	1,186,198	1,158,220	1,187,527	1,155,590	1,070,659	1,020,103	880,265
	Number of claims	159,062	154,221	153,875	151,673	141,968	135,809	124,962
	<b>Rx per claim</b>	<b>7.5</b>	<b>7.5</b>	<b>7.7</b>	<b>7.6</b>	<b>7.5</b>	<b>7.5</b>	<b>7.0</b>

Note: Service year 2015 data may be incomplete and subject to change.

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# No Evidence of Substitution Effects from N-drugs to Physical Medicine (PM) services, Number of PM services, by Service Year

- ❖ Sample of 2,159 claims with N-drug prescriptions before the formulary took effect
- ❖ Post formulary:
  - 85 percent (1,840 claims) had no N-drug prescriptions and reduced PM services
  - 13 percent (274 claims) had no change or decreased number of N-drug prescriptions and reduced PM services
  - 2 percent (45 claims) had increased N-drug prescriptions and increased PM services

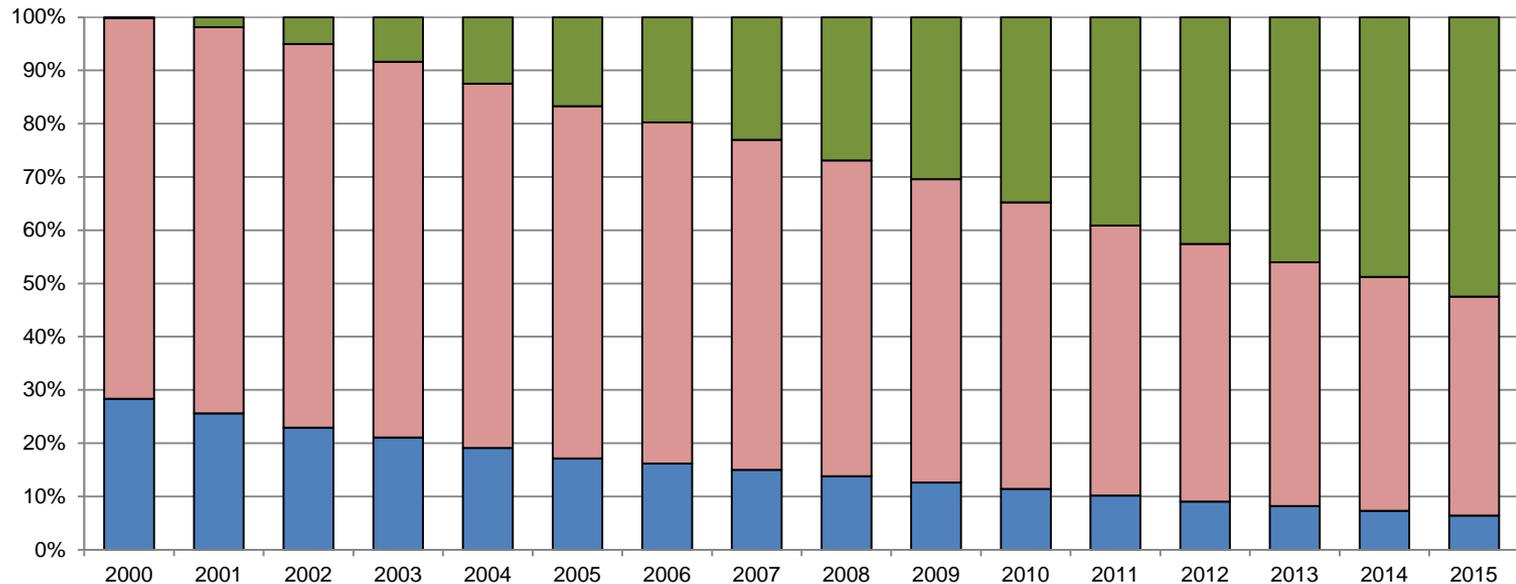
Post-Formulary Changes	Number of claims	Average Number of Units of Physical Medicine Services	
		Pre-formulary	Post-formulary
No N-drugs	1,840 (85%)	95.9	73.0
No change or decreased N-drugs	274 (13%)	77.6	68.4
Increased N-drugs	45 (2%)	76.3	121.4

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Access to Medical Care

# Participating Physicians by Year of License

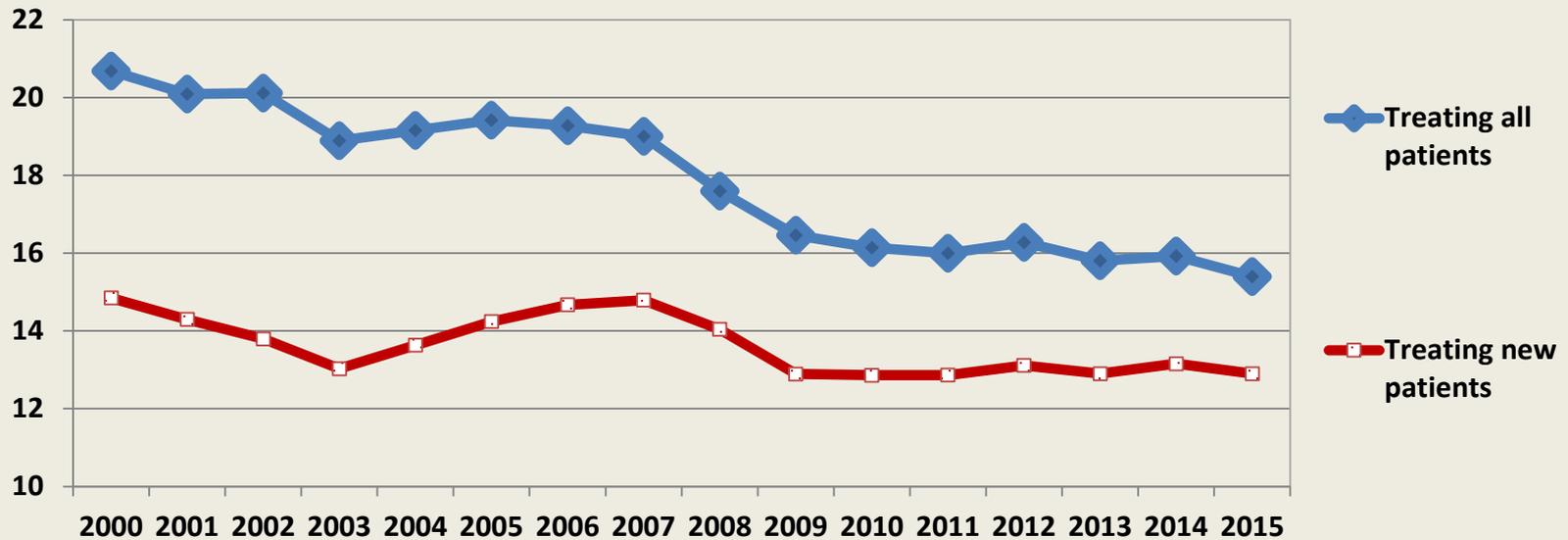
- ❖ **53 percent of participants were physicians licensed in 2000 or later.**
- ❖ **6 percent of participants were physicians licensed prior to 1978, down from 28 percent of the total in 2000.**



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Number of Claims Per Participating Physician by Injury Year

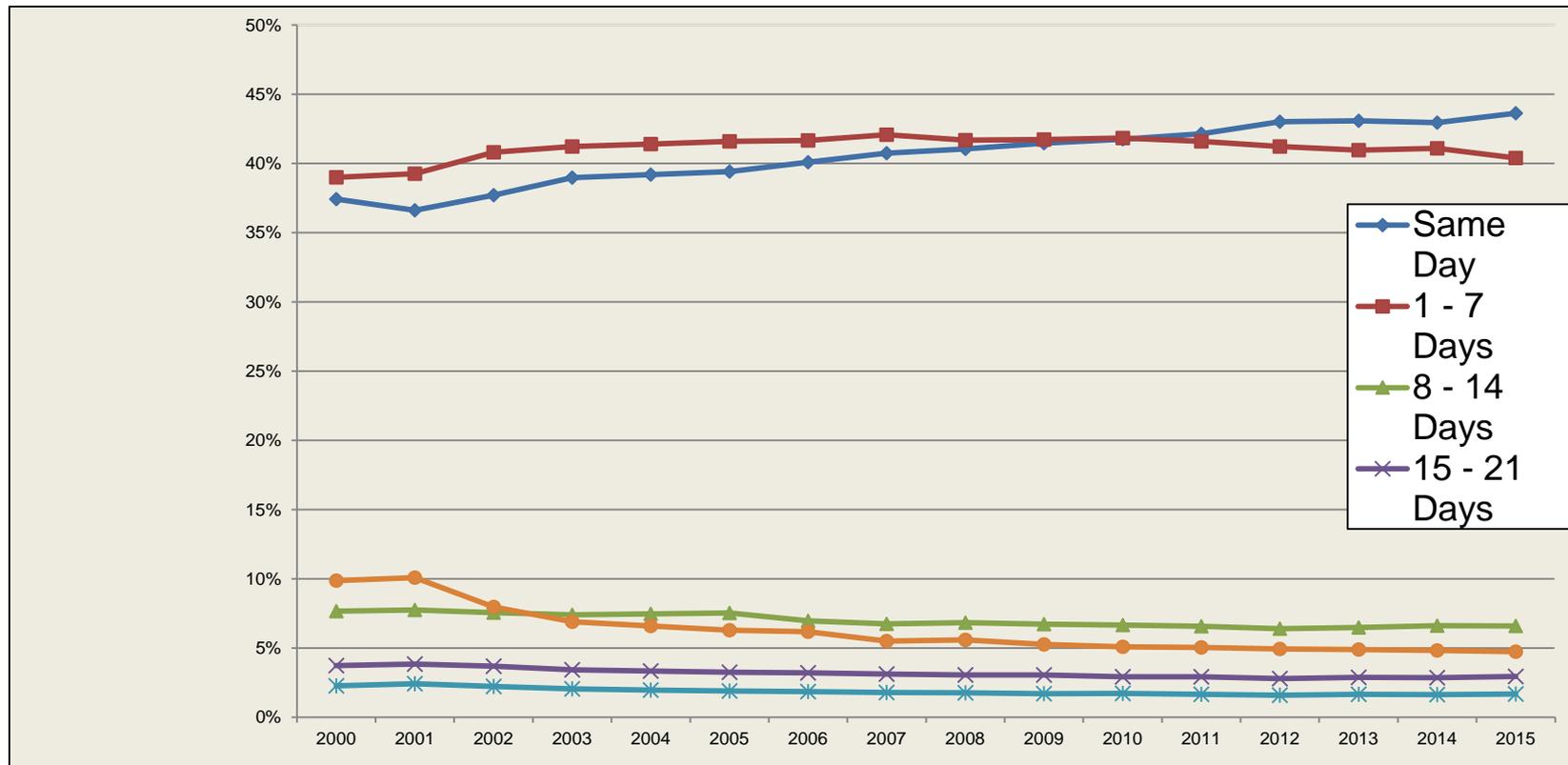
- ❖ Since 2000, the total # of WC claims treated in each year decreased by 22 percent.
- ❖ The # of new claims decreased by 11 percent.
- ❖ The # of participating physicians increased by about 5 percent in the same period.
- ❖ Result: The average # of claims per physician decreased for physicians treating new patients and all patients.



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

# Number of Days to First Non-Emergency Visit From a Medical Doctor

- ❖ Claims with 'same day' or '1 to 7 days' wait time increased from 76 % in 2000 to 84% in 2015.
- ❖ Claims with 29 days or more days delay decreased from 11 percent in 2000 to 6 percent in 2015.



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2016.

In closing . . .



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# Summary of Key Trends for Texas

- Texas injury rates decreasing for the past 15 years, lower than U.S. average.
- Employer participation rates increased to 78%, while the percentage of private-sector employees covered increased from 80 percent to 82 percent.
- Average premium per \$100 of payroll has fallen by 50 percent since 2003.
- Medical costs, adjusted for inflation and lower injuries, 30 percent lower than in 1998.
- Network average cost lower than non-network average cost per claim.
- Injured employees in networks have higher functioning scores than non-network injured employees.
- The Texas pharmacy closed formulary resulted in major reductions of N-drug utilization.
- Improvements in access to medical continue to hold.



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REG's main Web page at the Texas Department of Insurance:  
[www.tdi.texas.gov/wc/regulation/roc](http://www.tdi.texas.gov/wc/regulation/roc)

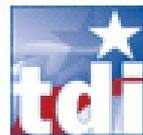
For more information, contact us at [WCRResearch@tdi.texas.gov](mailto:WCRResearch@tdi.texas.gov).

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Per Chapter 405 of the *Texas Labor Code*, the Workers' Compensation Research and Evaluation Group at the Texas Department of Insurance is responsible for conducting professional studies and research on various system issues, including:

- the delivery of benefits;
- litigation and controversy related to workers' compensation;
- insurance rates and rate-making procedures;
- rehabilitation and reemployment of injured employees;
- the quality and cost of medical benefits;
- employer participation in the workers' compensation system;
- employment health and safety issues; and
- other matters relevant to the cost, quality, and operational effectiveness of the workers' compensation system.

*Thank you!*



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