

CIRCULAR LETTER 3257—JANUARY 4, 2024

TO: Members of the Bureau

FROM: Donna Knepper

RE: Proceedings of the WCRB Governing Board

WI Unit Statistical Plan Manual Rule Update – Permanent Partial Loss

Pursuant to ch. 626, Wis. Stat., the Office of the Commissioner of Insurance has approved the following changes adopted by the Governing Board. The changes to the WI Statistical Plan Manual – WI Reporting Requirements are approved effective December 21, 2023, applicable to new and renewal business.

II WISCONSIN REPORTING REQUIREMENTS

Permanent Total Disability Code-02

Report as permanent total each claim which has been adjudged to constitute permanent total disability or which is defined as such under the law, or which in the judgment of the data provider will result in permanent total disability.

In general, permanent total disability includes cases involving the loss or loss of use of both hands, arms, feet, legs, eyes, or any combination of such members.

Temporary Total or Temporary Partial Disability Code—**05** Report as temporary every case, which involves or is expected to involve indemnity benefits but which does not constitute a case of death, permanent total or permanent partial as defined in this section.

Medical Only Claims Code-06

When reporting claims involving medical losses only, make no entry in the field captioned indemnity and report the medical amount with the appropriate injury type code and classification code.

Permanent Partial Disability Code—*09* A permanent partial loss is defined as any permanent injury that does not involve

permanent total disability.

A permanent partial loss is defined as:

- Any permanent injury which does not involve permanent total disability.
- Any temporary injury which satisfies any one of the following criteria:

The duration of disability benefits exceeds or is expected to exceed one full year. No loss is to be reported as temporary total if the duration of

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total disability exceeds or is expected to exceed 52 weeks.

A lump sum settlement is made or, in the judgment of the data provider, will be required to settle future benefits.

The extent of liability for future payments cannot be determined. The amount reported as indemnity incurred shall include specific benefits and compensation for temporary disability as well as loss of earning capacity.

NOTE: For ALAE only claims, report the injury code used to set up the claim's reserve. If there was no reserve, report Injury Code 06- Medical Only Claims Code.