

TO: ALL WORKERS' COMPENSATION INSURANCE CARRIERS, THIRD-PARTY ADMINISTRATORS, AND ALL SELF-INSURED EMPLOYERS

FROM: PAUL TAURIELLO, DIRECTOR
COLORADO DIVISION OF WORKERS' COMPENSATION

DATE: May 15, 2020

SUBJECT: MAXIMUM RATES FOR WORKERS' COMPENSATION BENEFITS FOR THE YEAR BEGINNING JULY 1, 2020, THROUGH AND INCLUDING JUNE 30, 2021.

MAXIMUM TEMPORARY DISABILITY BENEFIT SCHEDULE

	Days:	1	2	3	4	5	6
		\$ 153.46	\$ 306.92	\$ 460.38	\$ 613.84	\$ 767.30	\$ 920.76
1 Week	\$ 1,074.22	\$ 1,227.68	\$ 1,381.14	\$ 1,534.60	\$ 1,688.06	\$ 1,841.52	\$ 1,994.98
2 Week	\$ 2,148.44	\$ 2,301.90	\$ 2,455.36	\$ 2,608.82	\$ 2,762.28	\$ 2,915.74	\$ 3,069.20
3 Week	\$ 3,222.66	\$ 3,376.12	\$ 3,529.58	\$ 3,683.04	\$ 3,836.50	\$ 3,989.96	\$ 4,143.42
4 Week	\$ 4,296.88	\$ 4,450.34	\$ 4,603.80	\$ 4,757.26	\$ 4,910.72	\$ 5,064.18	\$ 5,217.64

EFFECTIVE JULY 1, 2020, AT 12:01 AM

MAXIMUM COMPENSATION BENEFIT RATE: To qualify for the maximum rate of **\$1,074.22**, a wage of at least **\$1,611.33** per week must be earned.

SCHEDULED IMPAIRMENT RATE: Payable at a weekly compensation rate of **\$337.11**.

NON-SCHEDULED (OR MEDICAL) IMPAIRMENT: Payable at the TTD weekly rate, but not less than \$150.00 per week and not more than **\$590.24** per week.

BODILY DISFIGUREMENT: Maximum is **\$5,686.96** and up to **\$11,371.92** for extensive facial or body scars, burn scars or stumps resulting from the loss of limbs.

LUMP SUMS: Maximum lump sum for an injured worker or sole dependent with a date of injury after January 1, 2014 is **\$99,094.93**. For cases with multiple dependents, the aggregate of all lump sums cannot exceed **\$198,187.35**.

COMBINED CAPS: Maximum combined TTD and PPD benefits for individuals with 25% or less whole person impairment is **\$99,094.93**. Maximum combined benefits for individuals with greater than 25% whole person impairment are **\$198,187.35**.

FATAL CASE: Maximum of **\$1,074.22** per week.

Dependents Benefits: and the extent of their dependency is determined as of the date of injury. The right to death benefits becomes fixed as of that date except as provided in §8-41-501 (1)(c).

Minimum Death Benefit: 25% of Maximum Weekly Benefit or **\$268.56**.

Claims with no dependents: **\$22,657.98** payable the Colorado Uninsured Employers Fund.

**STATE OF COLORADO
DEPARTMENT OF LABOR AND EMPLOYMENT
DIVISION OF WORKERS' COMPENSATION**

ORDER

WHEREAS, pursuant to Colorado Revised Statute §8-47-106, the State Average Weekly Wage shall be established by the Director of the Division of Workers' Compensation annually, on or before July 1 based upon the average weekly earnings in Colorado as referenced in §8-73-102 (1)-(3), and being fully advised in the premises;

THE DIRECTOR FINDS:

1. That the Colorado State Average Weekly Wage as referenced in §8-73-102 (1)-(3) is **\$1,180.47**
2. That the maximum benefit rate for Temporary Total Disability, Temporary Partial Disability, Permanent Total Disability, and Death Benefits under the Workers' Compensation Act of Colorado shall be ninety-one percent (91%) of such Average Weekly Wage or **\$1,074.22**.
3. That to be eligible for the maximum of **\$1,074.22** the claimant must have a weekly income of at least **\$1,611.33**.
4. Pursuant to §8-42-108(3), the limits of disfigurement are adjusted based on the percentage of adjustment to the state average weekly wage. The maximum limit for disfigurement is **\$5,686.96** and up to **\$11,371.92** for extensive facial or body scars, burn scars or stumps resulting from the loss of limbs.
5. Pursuant to §8-42-107(6)(b), the scheduled compensation rate shall be adjusted based on the percentage of adjustment to the state average weekly wage. The compensation rate for a scheduled injury is **\$337.11**.
6. Pursuant to §8-42-107.5, the limits on the amount of compensation for combined temporary disability payments and partial disability payments shall be increased to **\$99,094.93** for claimants whose impairment rating is twenty-five percent of the whole person or less and **\$198,187.35** for claimants whose whole person impairment rating is greater than twenty-five percent.
7. Pursuant to §8-43-406, for injuries sustained on or after January 1, 2014, the maximum lump sum payment for an injured worker or sole dependent is **\$99,094.93**. In cases where there are multiple dependents, the maximum aggregate of all lump sums is **\$198,187.35**.
8. Pursuant to §8-46-102(1)(c), For injuries resulting in death sustained on or after July 1, 2018 in which the deceased has no dependents, the payment to the Colorado Uninsured Employer the sum of **\$22,657.98**.

NOW, THEREFORE, BE IT ORDERED: That as of 12:01 a.m. July 1, 2020, and for the ensuing twelve months through and including June 30, 2021, the benefits rates shall be as described above.

Dated: May 15, 2020

DIVISION OF WORKERS' COMPENSATION



By _____
Paul Tauriello
Director