

# Retro monthly report

DATE: \_\_\_\_\_  
PAGE: \_\_\_\_\_

DEPARTMENT OF LABOR AND INDUSTRIES  
COMPOSITE CLAIMS REPORT  
PROGRAM KEY: \_\_\_\_\_

RETR0 ID: \_\_\_\_\_  
RETR0 GROUP NAME: \_\_\_\_\_

EMPLOYER NAME: \_\_\_\_\_  
TOTAL REPORTED CLAIMS FOR MM/DD/YYYY THROUGH MM/DD/YYYY INCLUDES CLAIM ACTIONS AND PAYMENTS THROUGH MM/DD/YYYY

ACCOUNT NUMBER: \_\_\_\_\_

CLAIMANT'S NAME LAST INITIAL	CLAIM NUMBER	DATE OF INJURY OR LAST EXPOSURE	TIME OF INJURY	AGE	SEX	RISK CLASS	CLAIM TYPE	CLAIM STATUS	RECOVERY FACTOR/ % OF LIABILITY	NATURE OF INJURY	LOCATION OF INJURY	
ACCIDENT TYPE	INJURY SOURCE		TL DAYS PAID			MEDICAL AID PAID	INDEMNITY AWARDED	FUTURE RESERVE MED AID	FUTURE RESERVE INDEMNITY	CASE INCURRED LOSS	DISCOUNTED DEVELOPED LOSS	FINAL INCURRED LOSS
SMITH D	AA111	01/01/2011	08 210	25	M	3501 \$6644	TL \$18,480	OPEN \$11,111*	\$55,555*	\$91,790*	SPRAIN \$241,232*	LOWER LEG
FALL TO WORK SURFACE	WORK SURFACE											
JONES T	AA222	01/10/2011	16 0	43	F	3501 \$188	MA \$0	CLOSED	\$0	\$188	CUT \$340	FINGER
STRUCK AGAINST	METAL UHS							\$11,111	\$55,555	\$91,978	\$241,572	
TOTAL*			210			\$6,832	\$18,480					

\*\*\* FUTURE RESERVES FOR SOME RETRO CLAIMS ARE BASED ON THE AVERAGE COSTS OF CLAIMS WITHIN EACH CLAIM TYPE. CASE RESERVE STAFF WILL EVALUATE INDEMNITY CLAIMS WHICH REMAIN OPEN APPROXIMATELY 3 MONTHS FROM DATE OF INJURY, AND MEDICAL AID CLAIMS WITH MORE THAN \$11,000 PAID.

## Get the most from your Retro monthly report

One of the benefits of participating in L&I's Retrospective Rating (Retro) Program is that you get a detailed monthly report that tracks your claims.

**How you use this monthly report is crucial to your Retro success:**

- It allows you to review each claim early and in detail and then take proactive steps to manage the claim.
- A full review of your claims will help you understand the types of injuries or illnesses that are occurring so that you can take steps to reduce or eliminate hazards.

**Please see the reverse side for a detailed explanation of the monthly report fields.**

**SEE REVERSE** 

**Contact us for more information:**

**360-902-4851**

*Email to [Retro@Lni.wa.gov](mailto:Retro@Lni.wa.gov)*

*On the web at [www.Retro.Lni.wa.gov](http://www.Retro.Lni.wa.gov).*



Washington State Department of  
**Labor & Industries**



1		2		3		4		5		6		7		8					
CLAIMANT'S NAME LAST INITIAL	CLAIM NUMBER	DATE OF INJURY OR LAST EXPOSURE	TIME OF INJURY	AGE	SEX	RISK CLASS	CLAIM TYPE	CLAIM STATUS	RECOVERY FACTOR/ % OF LIABILITY	NATURE OF INJURY	LOCATION OF INJURY								
9		10		11		12		13		14		15		16		17		18	
ACCIDENT TYPE		INJURY SOURCE		TL DAYS PAID	MEDICAL AID PAID		INDEMNITY AWARDED	FUTURE RESERVE MED AID	FUTURE RESERVE INDEMNITY	CASE INCURRED LOSS	DISCOUNTED DEVELOPED LOSS	FINAL INCURRED LOSS							
SMITH D	AAA111	01/01/2011	08	25	M	3501	TL	OPEN			SPRAIN	LOWER LEG							
FALL TO WORK SURFACE		WORK SURFACE		210	\$6644		\$18,480	\$11,111*	\$55,555*	\$91,790*	\$241,232*								
JONES T	AAA222	01/10/2011	16	43	F	3501	MA	CLOSED			CUT	FINGER							
STRUCK AGAINST		METAL UNS		0	\$188		\$0		\$0	\$188	\$340								
TOTAL*				210	\$6,832		\$18,480	\$11,111	\$55,555	\$91,978	\$241,572								

## The following explanations correspond with the numbers shown on the sample report:

- Date of Injury/Date of Last Exposure:** Indicates the date the injury occurred or the last date the worker was exposed to the hazard with this employer.
- Time of Injury:** The time of injury is shown in military time. Example: 1 = 1:00 a.m. and 24 = 12:00 midnight. Note: Hour 25 indicates either an occupational disease claim, with exposure that occurred over time, or a claim where no specific time was listed on the Report of Accident.
- Risk Class:** A classification assigned to each claim, based on the work being performed by the employee and the employer's assigned risk classifications. The risk class is assigned by L&I.
- Claim Type:** The following codes are used to describe these types of claims:
  - FATAL – A work-related death.
  - TPD – Total Permanent Disability/Pension; awarded or reserved.
  - SSLIF – Structured Settlement with ongoing, lifetime payments.
  - SSPER – Structured Settlement with fixed, periodic payments.
  - SSONE – Structured Settlement with one-time lump-sum payment.
  - PPD – Permanent Partial Disability; awarded or reserved.
  - TL – Time Loss or Loss of Earning Power; paid or reserved.
  - MISC – Miscellaneous Accident Fund; paid or reserved.
  - MA – Medical Aid only.
- Claim Status:** Open or closed as of the freeze date.
- Recovery Factor/% of Liability:** Percentage of total claim costs charged after calculation of third party, second injury or occupational disease liability apportionment.
- Nature of Injury:** Describes an injury or illness in terms of its principal physical characteristic.
- Location of Injury:** Describes the bodily location of the injury.
- Accident Type:** The event that resulted in the injury or exposure.
- Injury Source:** The object, substance, exposure, or bodily motion that caused or inflicted the injury or illness.
- Time-Loss (TL) Days Paid:** A count of all days for which Time-Loss Compensation was paid. Neither Loss of Earning Power days paid nor Time-Loss days reserved are included in this count.
- Medical Aid Paid:** Medical and some vocational costs paid from the Medical Aid Fund as of the freeze date.
- Indemnity Awarded:** Benefits paid or awarded from the Accident Fund as of the freeze date.
- Future Reserve Medical Aid:** Estimated costs of additional Medical Aid Fund benefits expected to be paid throughout the life of the claim.
- Future Reserve Indemnity:** Estimated costs of additional Accident Fund benefits expected to be paid throughout the life of the claim.
- Case Incurred Loss:** Total paid or awarded claim costs plus reserves, if any.
- Discounted Developed Loss:** The case incurred loss multiplied by the discounted loss development factor (LDF).
- Final Incurred Loss:** Calculated by using the discounted developed loss and applying the Performance Adjustment Factor (PAF), Expected Loss Ratio Factor (ELRF) and any capping. This step is not completed until after the coverage year ends, during the quarterly process.

Note: Claim values identified with an asterisk (\*) are based on actuarial averages calculated for Retro only.

# Sample copy of the Monthly report Factors and Average Claim Values

DEPARTMENT OF LABOR AND INDUSTRIES  
 COMPOSITE CLAIMS REPORT  
 PROGRAM KEY: RP22043A

RETRO ID:  
 RETRO GROUP NAME:

DATE: MM/DD/YYYY  
 PAGE: 1

DISCOUNTED LOSS DEVELOPMENT FACTORS FOR COVERAGE PERIOD: 04/01/2011

CLAIM TYPE	FATAL		TPD		SS-LIF		SS-PER		SS-ONE		PPD	
	IND	MA	IND	MA	IND	MA	IND	MA	IND	MA	IND	MA
FACTOR	1.0000	1.0000	1.0000	1.9219	1.0000	1.9219	4.0000	2.9171	4.0000	2.9171	4.0000	2.9171

CLAIM TYPE	TL		MISC		MA	ELRF		PAF
	IND	MA	IND	MA	MA	IND	MA	
FACTOR	4.0000	4.0000	8.0000	5.3547	3.2031	1.0000	1.0000	1.0000

AVERAGE CLAIM VALUES:      FATALITY: 280,400      = ( INDEMNITY: 268,594.00 + MEDICAL: 11,806.00 )

INJURY DATE	TPD				
	TPD	PPD	TL	MISC	MA
4/1 - 6/30	24,550	832	15,812	416	14,281
7/1 - 9/30	24,702	837	15,910	419	13,860
10/1 - 12/31	24,855	843	16,008	421	7,048
1/1 - 3/31	25,009	848	16,107	424	7,143

INJURY DATE	PPD			
	PPD	TL	MISC	MA
4/1 - 6/30	4,265	5,825	312	9,409
7/1 - 9/30	4,291	5,861	314	9,132
10/1 - 12/31	4,318	5,898	316	7,048
1/1 - 3/31	4,345	5,934	318	7,143

INJURY DATE	TL		
	TL	MISC	MA
4/1 - 6/30	9,986	416	6,862
7/1 - 9/30	10,048	419	6,954
10/1 - 12/31	10,110	421	7,048
1/1 - 3/31	10,173	424	7,143

INJURY DATE	MISC	
	MISC	MA
4/1 - 6/30	5,201	5,126
7/1 - 9/30	5,233	4,975
10/1 - 12/31	5,266	3,524
1/1 - 3/31	5,298	3,571

INJURY DATE	MA
	MA
4/1 - 6/30	623
7/1 - 9/30	604
10/1 - 12/31	512
1/1 - 3/31	519

## Sample copy of the Monthly report Average Claim Values and explanations

**AVERAGE CLAIM VALUES:      FATALITY: 280,400      = ( INDEMNITY: 268,594.00 + MEDICAL: 11,806.00 )**

INJURY DATE	TPD				
	TPD	PPD	TL	MISC	MA
4/1 - 6/30	24,550	832	15,812	416	14,281
7/1 - 9/30	24,702	837	15,910	419	13,860
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INJURY DATE	MA
	MA
4/1 - 6/30	623
7/1 - 9/30	604
10/1 - 12/31	512
1/1 - 3/31	519

### Additional Explanation:

#### Average Claim Values:

L&I's actuaries calculate average claim values for open Retro claims using the date of injury or last injurious exposure and type of claim. When a case reserve has not yet been established, the average costs (by claim type and benefit) are used in open claims.

#### When are these average values used?

- When paid or awarded benefits are less than the average costs, the claim is open, and no case reserve has been established.

#### When are these average values not used?

- When the claim is closed.
- When paid and awarded benefits exceed these average costs.
- When a claim has been case reserved, and the reserve is greater than the average for its claim type.

#### How will these averages be displayed?

- The difference between the paid or awarded amount and the average values will display in the future reserve fields on the report.
- The average value will display in the case reserve column(s) on the data file.
- 'R' will display in the Case Reserve source field in the data file when the average is used.

# Sample copy of the Monthly report Summary

DEPARTMENT OF LABOR AND INDUSTRIES

RETRO-ID:

DATE:

COMPOSITE CLAIM REPORT

RETRO GROUP NAME:

PAGE:

PROGRAM: M4022235

EMPLOYER NAME:

ACCOUNT NUMBER:

SUMMARY OF TOTAL CLAIMS FOR PERIOD 04/01/2011 THROUGH 03/30/2012 INCLUDES CLAIM ACTIONS AND PAYMENTS THROUGH 02/03/2012

TYPE OF CLAIM	NUMBER OF CLAIMS	AVERAGE DAYS PAID	TIME LOSS DAYS	MEDICAL AID PAID	INDEMNITY LOSSES AWARDED	FUTURE RESERVES	CASE INCURRED LOSSES	DEVELOPED & DISCOUNTED LOSSES	FINAL INCURRED LOSSES
MEDICAL ONLY:	11	0	0.0	3,390	0	611*	4,001	12,815	0
MISC ACCIDENT FUND:	0	0	0.0	0	0	0	0	0	0
TIME LOSS:	6	258	43.0	4,881	34,668	43,506*	83,055	201,668	0
PERMANENT PARTIAL DISABILITY:	1	162	162.0	12,552	36,988	0	49,540	147,952	0
STRUCTURED SETTLEMENT ONE TIME:	0	0	0.0	0	0	0	0	0	0
STRUCTURED SETTLEMENT FIXED/PERIODIC:	0	0	0.0	0	0	0	0	0	0
STRUCTURED SETTLEMENT LIFETIME/ONGOING:	0	0	0.0	0	0	0	0	0	0
TOTAL PERMANENT DISABILITY:	0	0	0.0	0	0	0	0	0	0
FATAL:	0	0	0.0	0	0	0	0	0	0
TOTALS **	18	420	23.3	20,823	71,665	44,117*	136,596	362,435	0

\* FUTURE RESERVES FOR SOME RETRO CLAIMS ARE BASED ON THE AVERAGE COSTS OF CLAIMS WITHIN EACH CLAIM TYPE. CASE RESERVE STAFF WILL EVALUATE INDEMNITY CLAIMS WHICH REMAIN OPEN APPROXIMATELY 8 MONTHS FROM DATE OF INJURY AND MEDICAL AID CLAIMS WITH MORE THAN \$11,000 PAID.

**Monthly Report Format**

## Field Definitions (in order shown on report)

Field Name	Definition/Explanation
Retro ID	The unique numeric identifier assigned to each Retro participant (Group, or individually enrolled firm)
Coverage Start Date	First day of the Retro participant's plan year.
Account Number	L&I account assigned to each member.
Business Name	Name of the member account.
Retro Freeze Date	The Friday following the last workday of the month. All actions and payments on claims through this date will be included in this report. If Friday is the last workday of the month, such as March 30, 2012, this is the Retro freeze date.
Date Received at L&I	The date L&I received the report of accident.
Claimant Last Name	Injured worker's last name.
Claimant First Initial	First initial of injured worker's first name.
Claim Number	The claim ID assigned by L&I.
Date of Injury or Last Exposure	Date injury occurred or last date worker was exposed to the hazard with this employer.
Time of Injury	The hour the injury occurred, based on military time. Hour 25 is used for occupational disease claims, and when no time is provided on the ROA.
Age	Injured Worker's age on date of injury.
Sex	Male or Female
Risk Class	A classification assigned to each claim, based on the work being performed by the employee and the employer's assigned risk classifications. The risk class is assigned by L&I.
Claim Type	The classification of claim, based on the hierarchy of benefits either paid or reserved on open claims.
Claim Status	Open or Closed as of the freeze date.
Occupation	Common job title based on the injured worker's description.
Nature of Injury	Describes an injury or illness in terms of its principal physical characteristic.
Body Location of Injury	Describes the bodily location of the injury.
Accident Type	The event that resulted in the injury or exposure.
Source of Injury	The object, substance, exposure, or bodily motion that directly produced or inflicted the injury or illness.
Associated Object	From the federal codes, an injury description that identifies the object, substance or person involved in an accident.
Stay at Work Flag	Y or Blank. Y displays on claims where reimbursements have been paid under the Stay at Work program. These reimbursements ARE NOT included in Retro calculations.
Direct Care Provider Flag	Y or blank. Y indicates claims where medical treatment has been provided by a direct primary care provider. These services are not currently being tracked.
Time Loss Days Paid	A count of all days for which Time-Loss Compensation was paid. Neither Loss of Earning Power days paid nor Time-Loss days reserved are included in this count.
Case Reserves- Medical Aid	Total case reserve includes costs previously paid plus a future estimate of benefits from the medical aid fund.
Case Reserves - Miscellaneous Accident Fund	Total case reserve includes costs previously paid plus a future estimate of benefits from the miscellaneous accident fund.
Case Reserves - Pension (Pension Annuity)	Total case reserve includes costs previously paid plus a future estimate of pension fund benefits. Any claim with an estimated pension reserve will be typed as a TPD claim.
Case Reserves - PPD	Total case reserve includes costs previously paid plus a future estimate of permanent partial disability benefits.

**Monthly Report Format**

## Field Definitions (in order shown on report)

Field Name	Definition/Explanation
Case Reserves - Time Loss	Total case reserve includes costs previously paid plus a future estimate of time loss and/or loss of earning power benefits.
Medical Aid Paid to Date	Medical and some vocational costs paid from the Medical Aid Fund as of the freeze date.
Miscellaneous Accident Fund Paid/Awarded	Travel and other costs paid, or Voc Option 2 benefits awarded from the Miscellaneous Accident Fund as of the freeze date.
LEP Paid to Date	Loss of Earning Power (LEP) benefits paid as of freeze date. LEP claims are classified as Time Loss and use Time Loss factors.
PPD Interest Paid to Date	The interest paid to the injured worker on Permanent Partial Disability benefit installment payments. Interest paid is included in the total costs/charges of the claim.
PPD Paid to Date	The portion of the Permanent Partial Disability benefit award that has been paid as of freeze date.
PPD Total Award	Total award for Permanent Partial Disability, often to be paid out in installments.
Time Loss Paid/Awarded	Total amount of payments made to a worker to partially replace wages lost while temporarily unable to return to work after a work related injury or illness. Also includes the amount awarded to workers who select Vocational Option 2, equivalent to six months of time loss.
Pension/Fatality Award Amount	Total amount awarded to a worker permanently and totally unable to return to gainful employment, or to the survivors of a fatally injured worker.
Structured Settlement Flag	Y or blank. Y indicates that an issue has been resolved on the claim through the structured settlement process.
Structured Settlement Awarded Benefit	Total benefits awarded according to terms of a structured settlement agreement.
Structured Settlement PTD Amount	The portion of structured settlement benefits paid as of freeze date.
Vocational Option 2 Award Amount (TL)	The benefit amount, equivalent to six months of time-loss benefits, awarded to injured workers who select Vocational Option 2.
Vocational Option 2 Training Benefit	The amount charged to the employer's account for training available to the worker when they have selected Vocational Option 2. The charge includes paid costs for training under Voc. Option 2, plus 66% of the balance available to the worker.
Recovery Factor	The percentage of total claim costs charged after calculation of third party or second injury recoveries.
Occupational Disease Flag	Y or blank. Y indicates claims filed for disease or infection that arose naturally and proximately out of employment.
Occupational Disease Liability Percentage	The percentage of total claim costs charged to the employer for an occupational disease claim.
Single Incident Claim Flag	Y or blank. Y indicates claims filed, arising from a single event incident.
Single Incident Percentage	Each claim's proportionate share of the capped costs of a single incident.
Single Incident Indemnity Override Amount	Accident fund costs assigned to each claim based on the single incident percentage.
Single Incident Medical Aid Override Amount	Medical aid fund costs assigned to each claim based on the single incident percentage.
Catastrophic Claim Override Amount	Per claim cost of claims included in a catastrophic event: one in which three or more workers die or are permanently disabled. The employer is charged twice the average cost of all claims filed for the event.
Case Reserve Source	Either 'R' or blank. R indicates average values for open retro claims, calculated by L&I actuaries based on the date of injury or last injurious exposure, and by type of claim. These average costs are displayed on open claims in case reserve fields when a case reserve has not yet been established.
Indemnity Paid/Awarded	Total costs of benefits paid or awarded from the Accident Fund as of the freeze date.
Future Reserves Indemnity (Accident Fund)	Estimated costs of additional Accident Fund benefits expected to be paid throughout the life of the claim.



**Monthly Report Format**

## Field Definitions (in order shown on report)

Field Name	Definition/Explanation
Future Reserves Medical Aid	Estimated costs of additional Medical Aid Fund benefits expected to be paid throughout the life of the claim.
Case Incurred Cost Medical Aid	Total paid or awarded costs from the Medical Aid Fund, plus reserves, if any.
Case Incurred Cost Indemnity (Accident Fund)	Total paid or awarded costs from the Accident Fund, plus reserves, if any. Accident Fund costs include non medical costs such as wage replacement (Time Loss) some vocational rehabilitation, Permanent Partial and Permanent Total Disability (PPD and PTD-Pension) and survivor benefits.
Total Case Incurred Cost	Total paid or awarded claims costs plus reserves, if any.
Medical Losses Developed & Discounted	Case incurred Medical Aid Fund costs multiplied by the discounted loss development factor (LDF).
Indemnity (AF) Losses Developed & Discounted	Case incurred Accident Fund costs multiplied by the discounted loss development factor (LDF).
Medical Losses Developed, Discounted & Capped	Case incurred Medical Aid Fund costs multiplied by the discounted loss development factor (LDF) and any applicable caps for single incident or catastrophic claims.
Indemnity (AF) Losses Developed, Discounted & Capped	Case incurred Accident Fund costs multiplied by the discounted loss development factor (LDF) and any applicable caps for single incident or catastrophic claims.
Medical Losses Developed, Discounted, Capped with ELRF	Case incurred Medical Aid Fund costs multiplied by the discounted loss development factor (LDF), Expected Loss Ratio Factor (ELRF) and any applicable caps for single incident or catastrophic claims.
Indemnity (AF) Losses Developed, Discounted, Capped with ELRF	Case incurred Accident Fund costs multiplied by the discounted loss development factor (LDF), Expected Loss Ratio Factor (ELRF) and any applicable caps for single incident or catastrophic claims.
Final Incurred Loss (LDF/discount, cap, ELRF, PAF)	Calculated by using the discounted developed loss and applying the Performance Adjustment Factor (PAF), Expected Loss Ratio Factor (ELRF) and any capping. This step is not completed until after the coverage period ends, during the quarterly and adjustment processes.
Discounted Loss Development Factor (LDF) - Medical	An actuarially determined factor unique to each Retro coverage year, multiplied by Medical Aid Fund incurred losses. Loss development factors take into account additional claims costs (such as future reopenings and inadequate reserves) which may occur over time, considering all claims in a given Retro coverage period. Discounting takes into account the time value of money. All factors vary by type of claim.
Discounted Loss Development Factor (LDF) - Indemnity	An actuarially determined factor unique to each Retro coverage year, multiplied by Accident Fund incurred losses. Loss development factors take into account additional claims costs (such as future reopenings and inadequate reserves) which may occur over time, considering all claims in a given Retro coverage period. Discounting takes into account the time value of money. All factors vary by type of claim.
Expected Loss Ratio Factor (ELRF) - Medical	An actuarially determined factor unique to each Retro coverage year which is multiplied by Medical Aid Fund incurred losses to ensure consistent results when rate adequacy varies.
Expected Loss Ratio Factor (ELRF) - Indemnity	An actuarially determined factor unique to each Retro coverage year which is multiplied by Accident Fund incurred losses to ensure consistent results when rate adequacy varies.
Performance Adjustment Factor (PAF)	An actuarially determined factor unique to each Retro coverage year. PAF's insure that aggregate refunds for a given Retro coverage year are in proportion to how Retro employers' performance compares to non-retro employers.



**Monthly Report Format**

## Field Definitions (Alphabetical)

Field Name	Definition/Explanation
Accident Type	The event that resulted in the injury or exposure.
Account Number	L&I account assigned to each member.
Age	Injured Worker's age on date of injury.
Associated Object	From the federal codes, an injury description that identifies the object, substance or person involved in an accident.
Body Location of Injury	Describes the bodily location of the injury.
Business Name	Name of the member account.
Case Incurred Cost Indemnity (Accident Fund)	Total paid or awarded costs from the Accident Fund, plus reserves, if any. Accident Fund costs include non medical costs such as wage replacement (Time Loss) some vocational rehabilitation, Permanent Partial and Permanent Total Disability (PPD and PTD-Pension) and survivor benefits.
Case Incurred Cost Medical Aid	Total paid or awarded costs from the Medical Aid Fund, plus reserves, if any.
Case Reserve Source	Either 'R' or blank. R indicates average values for open retro claims, calculated by L&I actuaries based on the date of injury or last injurious exposure, and by type of claim. These average costs are displayed on open claims in case reserve fields when a case reserve has not yet been established.
Case Reserves - Miscellaneous Accident Fund	Total case reserve includes costs previously paid plus a future estimate of benefits from the miscellaneous accident fund.
Case Reserves - Pension (Pension Annuity)	Total case reserve includes costs previously paid plus a future estimate of pension fund benefits. Any claim with an estimated pension reserve will be typed as a TPD claim.
Case Reserves - PPD	Total case reserve includes costs previously paid plus a future estimate of permanent partial disability benefits.
Case Reserves - Time Loss	Total case reserve includes costs previously paid plus a future estimate of time loss and/or loss of earning power benefits.
Case Reserves- Medical Aid	Total case reserve includes costs previously paid plus a future estimate of benefits from the medical aid fund.
Catastrophic Claim Override Amount	Per claim cost of claims included in a catastrophic event: one in which three or more workers die or are permanently disabled. The employer is charged twice the average cost of all claims filed for the event.
Claim Number	The claim ID assigned by L&I.
Claim Status	Open or Closed as of the freeze date.
Claim Type	The classification of claim, based on the hierarchy of benefits either paid or reserved on open claims.
Claimant First Initial	First initial of injured worker's first name.
Claimant Last Name	Injured worker's last name.
Coverage Start Date	First day of the Retro participant's plan year.
Date of Injury or Last Exposure	Date injury occurred or last date worker was exposed to the hazard with this employer.
Date Received at L&I	The date L&I received the report of accident.
Direct Care Provider Flag	Y or blank. Y indicates claims where medical treatment has been provided by a direct primary care provider. These services are not currently being tracked.

**Monthly Report Format**

## Field Definitions (Alphabetical)

Field Name	Definition/Explanation
Discounted Loss Development Factor (LDF) - Indemnity	An actuarially determined factor unique to each Retro coverage year, multiplied by Accident Fund incurred losses. Loss development factors take into account additional claims costs (such as future reopenings and inadequate reserves) which may occur over time, considering all claims in a given Retro coverage period. Discounting takes into account the time value of money. All factors vary by type of claim.
Discounted Loss Development Factor (LDF) - Medical	An actuarially determined factor unique to each Retro coverage year, multiplied by Medical Aid Fund incurred losses. Loss development factors take into account additional claims costs (such as future reopenings and inadequate reserves) which may occur over time, considering all claims in a given Retro coverage period. Discounting takes into account the time value of money. All factors vary by type of claim.
Expected Loss Ratio Factor (ELRF) - Indemnity	An actuarially determined factor unique to each Retro coverage year which is multiplied by Accident Fund incurred losses to ensure consistent results when rate adequacy varies.
Expected Loss Ratio Factor (ELRF) - Medical	An actuarially determined factor unique to each Retro coverage year which is multiplied by Medical Aid Fund incurred losses to ensure consistent results when rate adequacy varies.
Final Incurred Loss (LDF/discount, cap, ELRF, PAF)	Calculated by using the discounted developed loss and applying the Performance Adjustment Factor (PAF), Expected Loss Ratio Factor (ELRF) and any capping. This step is not completed until after the coverage period ends, during the quarterly and adjustment processes.
Future Reserves Indemnity (Accident Fund)	Estimated costs of additional Accident Fund benefits expected to be paid throughout the life of the claim.
Future Reserves Medical Aid	Estimated costs of additional Medical Aid Fund benefits expected to be paid throughout the life of the claim.
Indemnity (AF) Losses Developed & Discounted	Case incurred Accident Fund costs multiplied by the discounted loss development factor (LDF).
Indemnity (AF) Losses Developed, Discounted & Capped	Case incurred Accident Fund costs multiplied by the discounted loss development factor (LDF) and any applicable caps for single incident or catastrophic claims.
Indemnity (AF) Losses Developed, Discounted, Capped with ELRF	Case incurred Accident Fund costs multiplied by the discounted loss development factor (LDF), Expected Loss Ratio Factor (ELRF) and any applicable caps for single incident or catastrophic claims.
Indemnity Paid/Awarded	Total costs of benefits paid or awarded from the Accident Fund as of the freeze date.
LEP Paid to Date	Loss of Earning Power (LEP) benefits paid as of freeze date. LEP claims are classified as Time Loss and use Time Loss factors.
Medical Aid Paid to Date	Medical and some vocational costs paid from the Medical Aid Fund as of the freeze date.
Medical Losses Developed & Discounted	Case incurred Medical Aid Fund costs multiplied by the discounted loss development factor (LDF).

Retrospective Rating Program  
**Monthly Report Format**  
 Field Definitions (Alphabetical)

Field Name	Definition/Explanation
Medical Losses Developed, Discounted & Capped	Case incurred Medical Aid Fund costs multiplied by the discounted loss development factor (LDF) and any applicable caps for single incident or catastrophic claims.
Medical Losses Developed, Discounted, Capped with ELRF	Case incurred Medical Aid Fund costs multiplied by the discounted loss development factor (LDF), Expected Loss Ratio Factor (ELRF) and any applicable caps for single incident or catastrophic claims.
Miscellaneous Accident Fund Paid/Awarded	Travel and other costs paid, or Voc Option 2 benefits awarded from the Miscellaneous Accident Fund as of the freeze date.
Nature of Injury	Describes an injury or illness in terms of its principal physical characteristic.
Occupation	Common job title based on the injured worker's description.
Occupational Disease Flag	Y or blank. Y indicates claims filed for disease or infection that arose naturally and proximately out of employment.
Occupational Disease Liability Percentage	The percentage of total claim costs charged to the employer for an occupational disease claim.
Pension/Fatality Award Amount	Total amount awarded to a worker permanently and totally unable to return to gainful employment, or to the survivors of a fatally injured worker.
Performance Adjustment Factor (PAF)	An actuarially determined factor unique to each Retro coverage year. PAF's insure that aggregate refunds for a given Retro coverage year are in proportion to how Retro employers' performance compares to non-retro employers.
PPD Interest Paid to Date	The interest paid to the injured worker on Permanent Partial Disability benefit installment payments. Interest paid is included in the total costs/charges of the claim.
PPD Paid to Date	The portion of the Permanent Partial Disability benefit award that has been paid as of freeze date.
PPD Total Award	Total award for Permanent Partial Disability, often to be paid out in installments.
Recovery Factor	The percentage of total claim costs charged after calculation of third party or second injury recoveries.
Retro Freeze Date	The Friday following the last workday of the month. All actions and payments on claims through this date will be included in this report. If Friday is the last workday of the month, such as March 30, 2012, this is the Retro freeze date.
Retro ID	The unique numeric identifier assigned to each Retro participant (Group, or individually enrolled firm)
Risk Class	A classification assigned to each claim, based on the work being performed by the employee and the employer's assigned risk classifications. The risk class is assigned by L&I.
Sex	Male or Female
Single Incident Claim Flag	Y or blank. Y indicates claims filed, arising from a single event incident.
Single Incident Indemnity Override Amount	Accident fund costs assigned to each claim based on the single incident percentage.
Single Incident Medical Aid Override Amount	Medical aid fund costs assigned to each claim based on the single incident percentage.
Single Incident Percentage	Each claim's proportionate share of the capped costs of a single incident.
Source of Injury	The object, substance, exposure, or bodily motion that directly produced or inflicted the injury or illness.

**Monthly Report Format**

## Field Definitions (Alphabetical)

Field Name	Definition/Explanation
Stay at Work Flag	Y or Blank. Y displays on claims where reimbursements have been paid under the Stay at Work program. These reimbursements ARE NOT included in Retro calculations.
Structured Settlement Awarded Benefit	Total benefits awarded according to terms of a structured settlement agreement.
Structured Settlement Flag	Y or blank. Y indicates that an issue has been resolved on the claim through the structured settlement process.
Structured Settlement PTD Amount	The portion of structured settlement benefits paid as of freeze date.
Time Loss Days Paid	A count of all days for which Time-Loss Compensation was paid. Neither Loss of Earning Power days paid nor Time-Loss days reserved are included in this count.
Time Loss Paid/Awarded	Total amount of payments made to a worker to partially replace wages lost while temporarily unable to return to work after a work related injury or illness. Also includes the amount awarded to workers who select Vocational Option 2, equivalent to six months of time loss.
Time of Injury	The hour the injury occurred, based on military time. Hour 25 is used for occupational disease claims, and when no time is provided on the ROA.
Total Case Incurred Cost	Total paid or awarded claims costs plus reserves, if any.
Vocational Option 2 Award Amount (TL)	The benefit amount, equivalent to six months of time-loss benefits, awarded to injured workers who select Vocational Option 2.
Vocational Option 2 Training Benefit	The amount charged to the employer's account for training available to the worker when they have selected Vocational Option 2. The charge includes paid costs for training under Voc. Option 2, plus 66% of the balance available to the worker.