

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, 2018

SUBJECT: MAXIMUM RATES FOR WORKERS' COMPENSATION BENEFITS FOR THE YEAR BEGINNING JULY 1, 2018, THROUGH AND INCLUDING JUNE 30, 2019.

**MAXIMUM TEMPORARY DISABILITY BENEFIT SCHEDULE**

Days:	1	2	3	4	5	6
	\$ 141.12	\$ 282.24	\$ 423.36	\$ 564.48	\$ 705.60	\$ 846.72
1 Week	\$ 987.84	\$ 1,128.96	\$ 1,270.08	\$ 1,411.20	\$ 1,552.32	\$ 1,693.44
2 Week	\$ 1,975.68	\$ 2,116.80	\$ 2,257.92	\$ 2,399.04	\$ 2,540.16	\$ 2,681.28
3 Week	\$ 2,963.52	\$ 3,104.64	\$ 3,245.76	\$ 3,386.88	\$ 3,528.00	\$ 3,669.12
4 Week	\$ 3,951.36	\$ 4,092.48	\$ 4,233.60	\$ 4,374.72	\$ 4,515.84	\$ 4,656.96

**EFFECTIVE JULY 1, 2018, AT 12:01 AM**

**MAXIMUM COMPENSATION BENEFIT RATE:** To qualify for the maximum rate of **\$987.84**, a wage of at least **\$1,481.76** per week must be earned. C.R.S. § 8-42-105.

**SCHEDULED IMPAIRMENT RATE:** Payable at a weekly compensation rate of **\$307.26**. C.R.S. § 8-42-107(6)(b)

**NON-SCHEDULED (OR MEDICAL) IMPAIRMENT:** Payable at the TTD weekly rate, but not less than \$150.00 per week and not more than **\$542.78** per week. C.R.S. § 8-42-107(8)(d).

**BODILY DISFIGUREMENT:** Maximum is **\$5,229.68** and up to **\$10,457.52** for extensive facial or body scars, burn scars or stumps resulting from the loss of limbs. C.R.S. § 8-42-108.

**LUMP SUMS:** Maximum lump sum for an injured worker or sole dependent with a date of injury after January 1, 2014 is **\$91,126.84**. For cases with multiple dependents, the aggregate of all lump sums cannot exceed **\$182,251.37**.

**COMBINED CAPS:** Maximum combined TTD and PPD benefits for individuals with 25% or less whole person impairment is **\$91,126.84**. Maximum combined benefits for individuals with greater than 25% whole person impairment are **\$182,251.37**.

**FATAL CASE:** Maximum of **\$987.84** per week, C.R.S. § 8-42-114.

**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 C.R.S. § 8-41-501 (1)(c).

**Minimum Death Benefit:** 25% of Maximum Weekly Benefit or **\$246.96**, C.R.S. § 8-42-114.

**Claims with no dependents:** **\$20,836.09** 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 C.R.S. § 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 C.R.S. § 8-73-102 (1)-(3) is **\$1,085.55**
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 **\$987.84**
3. That to be eligible for the maximum of **\$987.84** the claimant must have a weekly income of at least **\$1,481.76**.
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 **\$5,229.68** and up to **\$10,457.52** 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 **\$307.26**.
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 **\$91,126.84** for claimants whose impairment rating is twenty-five percent of the whole person or less and **\$182,251.37** 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 **\$91,126.84**. In cases where there are multiple dependents, the maximum aggregate of all lump sums is **\$182,251.37**.
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 **\$20,836.09**.

**NOW, THEREFORE, BE IT ORDERED:** That as of 12:01 a.m. July 1, 2018, and for the ensuing twelve months through and including June 30, 2019, the benefits rates shall be as described above.

Dated: May 15, 2018

DIVISION OF WORKERS' COMPENSATION



By \_\_\_\_\_  
Paul Tauriello  
Director