

2007 Workers' Compensation Network Report Card Results

WC Network Report Card

- Health Care Costs
- Utilization
- Satisfaction with Care
- Access to Care
- Return-to-Work
- Health Outcomes



Texas Department of Insurance
Workers' Compensation Research and Evaluation Group



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CONTENTS

About This Report	1
Data Sources	2
How were medical costs and utilization measures calculated?	3
How was the injured worker survey conducted?	3
Key Findings	4
Health Care Costs	7
Utilization of Care	9
Satisfaction with Medical Care	10
Access to Care	12
Return-to-Work	16
Health Outcomes	17
Appendices	19

About This Report

In 2005, the 79th Texas Legislature passed House Bill (HB) 7, which authorized the use of workers' compensation health care networks certified by the Texas Department of Insurance (Department). This legislation also directed the Workers' Compensation Research and Evaluation Group (REG), to publish an annual report card comparing the performance of certified networks with each other as well as non-network claims on a variety of measures including:

- Health care costs;
- Utilization;
- Satisfaction with care;
- Access to care;
- Return-to-work; and
- Health outcomes.

In March 2006, the Department began certifying workers' compensation networks. Currently 31 networks covering over 213 Texas counties are certified to provide workers' compensation health care services to insurance carriers.

The results presented in this first annual report card represent a high-level comparison of new claims treated by certified networks as of February 1, 2007 and non-network claims at approximately six months post-injury (for cost and utilization measures) and five to ten months post-injury (for satisfaction, access to care, return-to-work and health outcomes measures). As of February 1, 2007, a total of 5,532 new claims and 775 existing claims (i.e., claims with dates of injury prior to the certification of the network) were treated by 8 certified networks, although most of these claims were treated by one network. Given the relative small number of claims being treated in network at the time of this analysis, comparisons among certified networks were not feasible.

Although considerable efforts were made to ensure the comparability of network and non-network claims in this analysis, readers should note that it is too early to fully evaluate the differences between network and non-network claims given the relatively small population of network claims and the early stages of network

implementation in Texas. Rather, the findings presented in this report set the stage for future comparisons between network and non-network claims and highlight some potential areas for improvement for certified networks.

For more information on the networks certified by the Department, their service areas and their contact information, see <http://www.tdi.state.tx.us/wc/wcnet/index.html>. Questions or complaints regarding certified networks should be directed to the Health and Workers' Compensation Network Certification Division (HWCN) by e-mail at **WCNet@tdi.state.tx.us**.

Questions or requests for hard copies of this report should be directed to the REG at **WCResearch@tdi.state.tx.us**. This report is also available on the Department's website: <http://www.tdi.state.tx.us/wc/regulation/roc/index.html>.

Data Sources

The measures presented in this report card were created using data gathered from a variety of sources:

- Medical cost, utilization of care, and administrative access to care measures were calculated using the Division of Workers' Compensation's medical billing data.
- Access to care, satisfaction with care, return-to-work and health outcomes measures were calculated using the results of an injured worker survey conducted by the University of North Texas, Survey Research Center on behalf of the Workers' Compensation Research and Evaluation Group (REG).
- The identification of network claims was ascertained through a data call issued by TDI in February 2007 to 27 workers' compensation health care networks certified by TDI. Results from the data call showed that eight networks had treated 6,307 injured workers as of February 1, 2007. Of these 6,307 injured workers, 5,532 were identified as being new injuries.

How were medical costs and utilization measures calculated?

All medical cost and utilization measures were calculated for network and non-network claims at 6 months post-injury for new injuries occurring between March 29, 2006 and February 1, 2007. Utilization measures represent the services that were billed by providers, regardless of whether those services were ultimately paid by insurance carriers. Duplicate medical bills and bills that were denied due to extent of injury or compensability issues as well as other outlier medical bills were excluded from the analyses. To improve the comparability of network and non-network claims, results are presented by injury types (i.e., nerve compression injuries, soft tissue injuries and all other injuries) as well as by type of medical service (i.e., professional services, hospital services, pharmacy services and dental services). Overall, network medical billing lines represented only about three percent of all medical billings lines for the study period.

How was the injured worker survey conducted?

The findings presented in this report are based on a telephone survey of 1,819 injured workers with new lost-time claims surveyed at approximately 5-10 months post-injury. The REG developed the injured worker survey instrument using a series of standardized questions from the Consumer Assessment of Health Plans Study, Version 3.0 (CAHPS™ 3.0), the Short Form 12, Version 2 (SF-12™), the URAC Survey of Worker Experiences and previous surveys conducted by the REG.

Since network claims only represented approximately 3 percent of the total lost time claim population for the analysis period, the REG utilized a disproportionate random sample of network and non-network injured workers and oversampled network claims.

Survey results were subsequently adjusted to account for differences in injury type and other demographic variables such as age, level of education, existence of health insurance coverage, and self-rated health differences between network and non-network workers using an analysis of covariance (ANCOVA) linear regression method.

Key Findings

Health Care Costs

- Average medical costs for network injured workers with “nerve compression” injuries (e.g., herniated disc injuries and carpal tunnel injuries) were lower than the medical costs for non-network injured workers with similar injuries.
- Average medical costs for network injured workers with “soft-tissue” and “other” injuries were slightly higher than the medical costs for non-network injured workers with similar injuries.

Utilization

- Relatively the same percentage of network and non-network injured workers with “nerve compression” injuries received professional and hospital services; however, a higher percentage of network injured workers with “nerve compression” injuries received pharmacy services.
- Relatively the same percentage of network and non-network injured workers with “soft tissue” and “other” injuries received professional services; however a higher percentage of non-network injured workers with “soft tissue” and “other” injuries received hospital and pharmacy services.
- Overall, network workers generally received fewer physical medicine services and fewer spinal surgery services than non-network injured workers.
- Network injured workers with “nerve compression” injuries received more CT and MRI scans and other professional services and fewer doctor visits, physical medicine, nerve conduction studies, other diagnostic testing, spinal surgery, other surgery, and pathology services than non-network injured workers.
- Network injured workers with “soft tissue” and “other” injuries received more doctor visits, other surgical services, other diagnostic testing and other professional services and fewer physical medicine, nerve conduction studies, CT scans, spinal surgery and pathology services than non-network injured workers.

Satisfaction with Care

- Overall, network injured workers surveyed were less satisfied with the medical care they received than non-network injured workers.
- A lower percentage of network injured workers (47 percent) reported that they were “extremely satisfied” with the quality of the medical care received from their treating doctor compared with non-network injured workers (54 percent).
- A lower percentage of network injured workers (32 percent) reported that they were extremely satisfied with the quality of the medical care received for their work-related injury than non-network injured workers (39 percent).

Access to Care

- Overall, network injured workers’ perceptions regarding their access to care were worse than non-network injured workers; however, network injured workers were able to receive non-emergency care faster than non-network injured workers (on average within 11 days from the date of injury for network workers with nerve compression injuries and 17 days for non-network workers).
- A slightly lower percentage of network injured workers (47 percent) reported that they had gotten their medical care quickly than non-network injured workers (49 percent).
- Approximately the same percentage of network injured workers (72 percent) and non-network injured workers (73 percent) indicated that they saw their first provider for their injuries either on the same day or within one week of their injury.
- A lower percentage of network injured workers (59 percent) reported that they had “no problem” getting the medical care they needed than non-network injured workers (66 percent).

Return-to-Work

- A slightly higher percentage of network injured workers surveyed (65 percent) reported that they were currently working compared to non-network injured workers (63 percent).
- Network injured workers reported that they were off of work an average of 13 weeks while non-network injured employees reported that they were off work an average of 16 weeks.

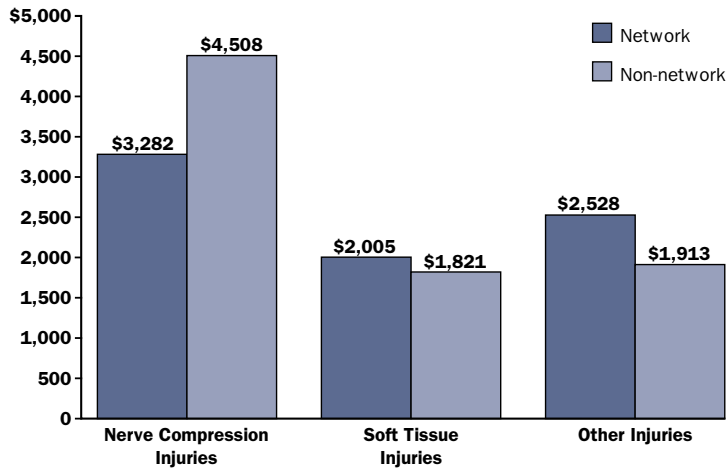
Health Outcomes

- There were no significant differences in the physical or mental functioning outcomes of network and non-network injured workers.
- Relative to the average for the U.S. population, the physical and mental functioning of injured workers is lower regardless of network status.

Health Care Costs

Average Medical Cost Per Claim

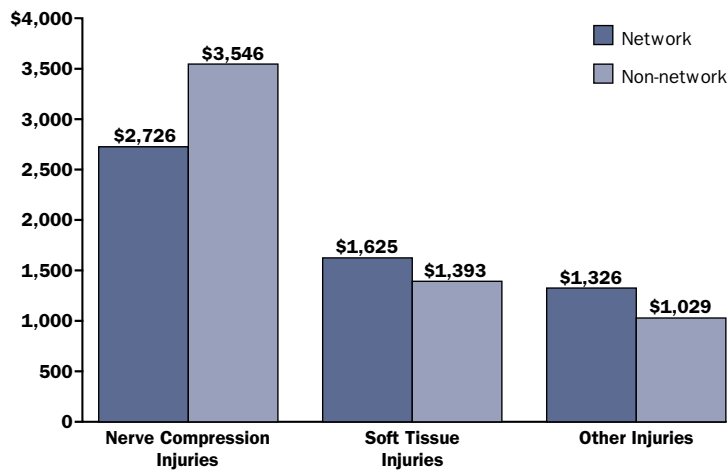
Network and Non-Network Claims, 6 Months Post Injury



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Average Medical Cost Per Claim for Professional Services

Network and Non-Network Claims, 6 Months Post Injury

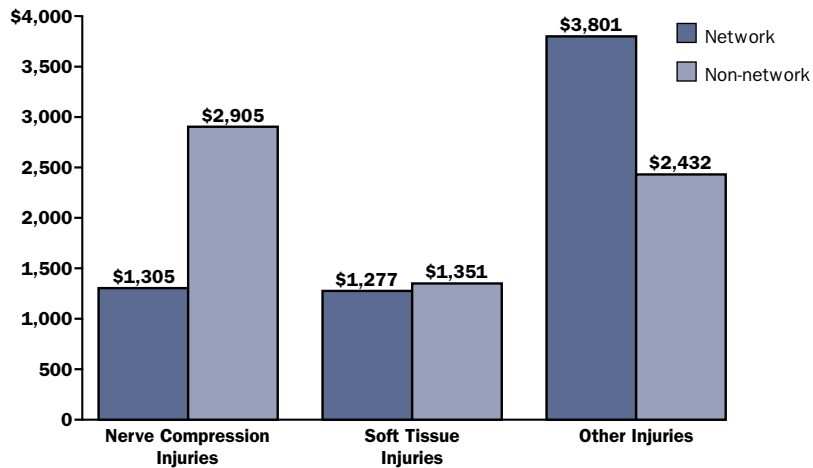


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Health Care Costs

Average Medical Cost Per Claim for Hospital Services

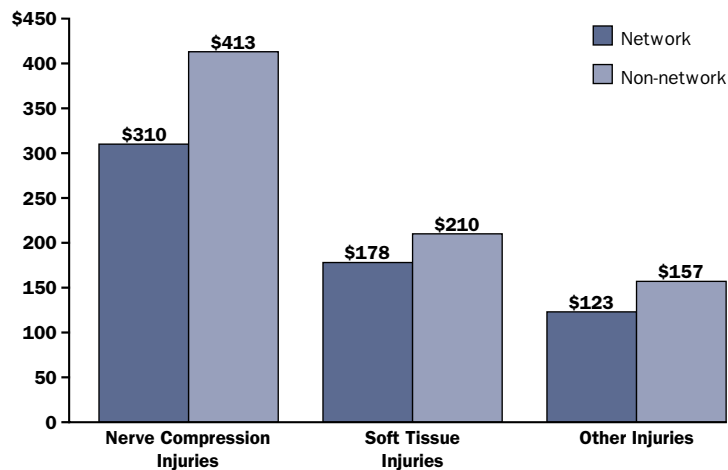
Network and Non-Network Claims, 6 Months Post Injury



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Average Medical Cost Per Claim for Pharmacy Services

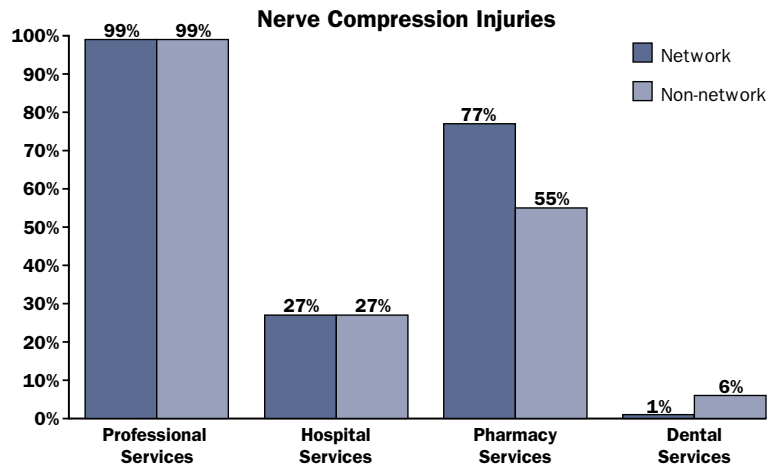
Network and Non-Network Claims, 6 Months Post Injury



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

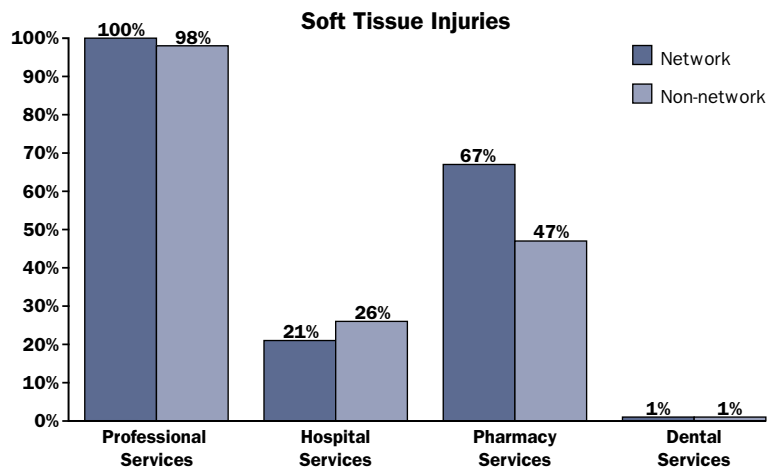
Utilization of Care

Percent of Workers Receiving Medical Care



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

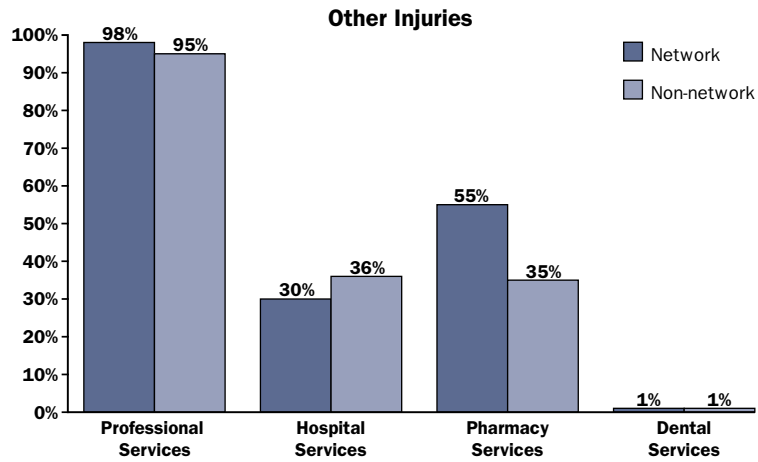
Percent of Workers Receiving Medical Care



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Utilization of Care

Percent of Workers Receiving Medical Care

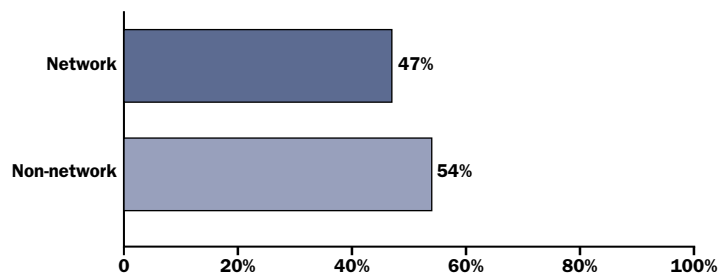


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Satisfaction with Medical Care

Satisfaction with Treating Doctor

percent of injured workers who indicated that they were "extremely satisfied" with the quality of the medical care received by their treating doctor

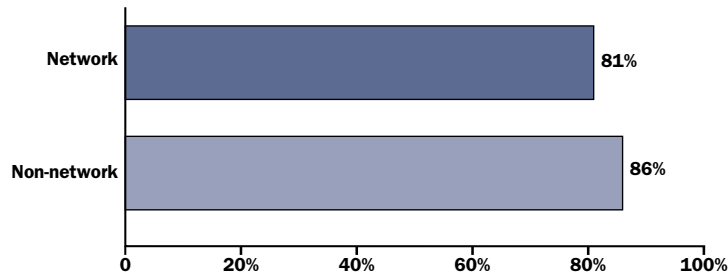


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Satisfaction with Medical Care

Agreement with Treating Doctor

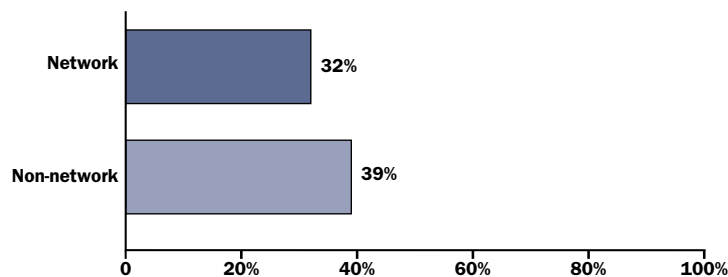
percent of injured workers who indicated that they “agreed” or “strongly agreed” that their treating doctor: took their medical condition seriously • gave them a thorough exam • explained medical condition • was willing to answer questions • talked to them about a RTW date • provided good medical care that met their needs



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Overall Satisfaction with Medical Care

percent of injured workers who indicated that they were “extremely satisfied” with the quality of the medical care received for their work-related injury



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Satisfaction with Care

Satisfaction with Medical Care

injured workers' perceptions regarding medical care for their work-related injuries compared to the medical care they normally receive when injured or sick

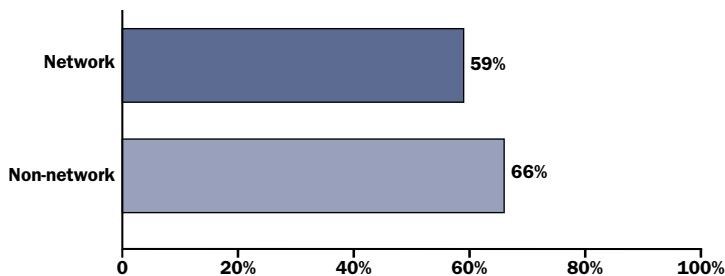
Percentage of injured workers indicating that the medical care for their work-related injuries was:	Network	Non-network
Better	24%	24%
About the same	50%	57%
Worse	26%	19%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Access to Care

Getting Needed Care

percent of injured workers who reported no problem getting: a personal doctor like
• to see a specialist • necessary tests or treatment • timely approvals for care

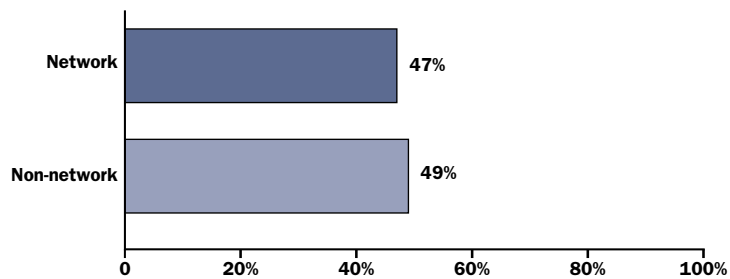


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Access to Care

Getting Care Quickly

percent of injured workers who reported always: receiving care as soon as they wanted • getting an appointment as soon as they wanted • taken to the exam room within 15 minutes of their appointment



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Ability to Schedule a Doctor's Appointment

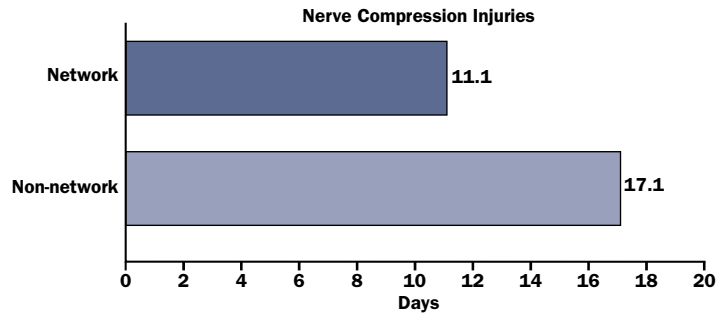
injured workers' perceptions regarding their ability to schedule a doctor's appointment for their work-related injuries compared to the medical care they normally received when injured or sick

Percentage of injured workers indicating that their ability to schedule a doctor's appointment was:	Network	Non-network
Better	24%	21%
About the same	60%	63%
Worse	16%	16%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

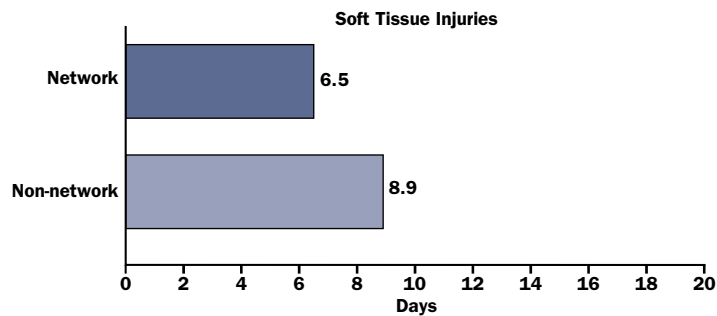
Access to Care

Average Duration from Date of Injury to Date of First Non-Emergency Treatment



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

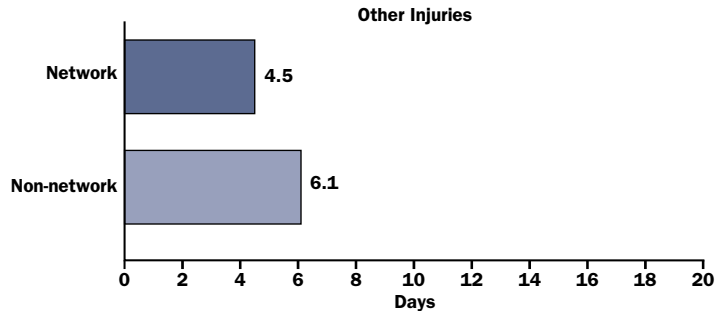
Average Duration from Date of Injury to Date of First Non-Emergency Treatment



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Access to Care

Average Duration from Date of Injury to Date of First Non-Emergency Treatment



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

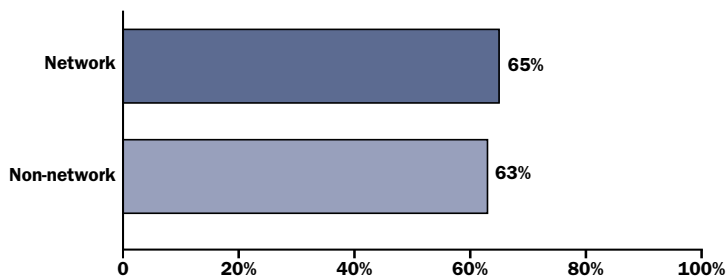
Average Duration from Date of Injury to Date of First Non-Emergency Service

Number of Days	Network	Non-network
Same Day	37%	37%
1-7 Days	45%	43%
8-14 Days	9%	8%
15-21 Days	4%	4%
22-28 Days	2%	2%
28 + Days	4%	6%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

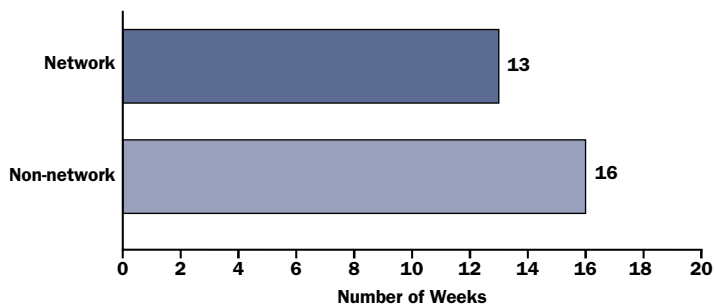
Return-to-Work

Percent of Injured Workers Who Indicated That They Were “Currently Working” at the Time They Were Surveyed



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

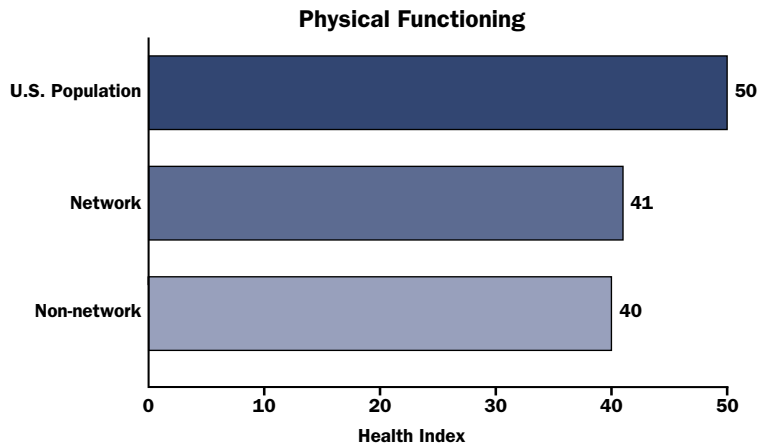
Average Number of Weeks Injured Workers Reported Being Off of Work Because of Their Work-Related Injury



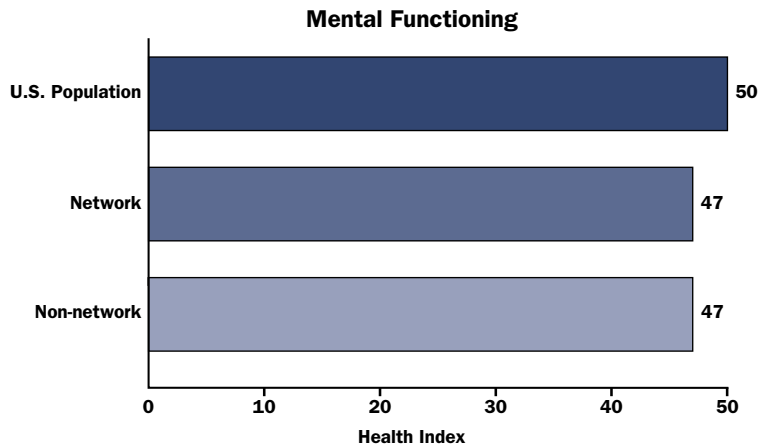
Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Health Outcomes

Comparison of Network and Non-Network Claims with General U.S. Population



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Appendices
Additional Network and Non-Network
Comparisons

HEALTH CARE COSTS

Average Cost per Claim for Professional Services by Service Type, Network and Non-Network Claims, 6 Months Post Injury

TYPE OF PROFESSIONAL SERVICE	NERVE COMPRESSION INJURIES		SOFT TISSUE INJURIES		OTHER INJURIES	
	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK
Evaluation & Management	\$729	\$813	\$501	\$439	\$394	\$327
Physical Medicine Modalities	\$178	\$194	\$101	\$141	\$89	\$136
Other Physical Medicine	\$1,002	\$1,498	\$681	\$775	\$901	\$981
CT Scans	\$183	\$286	\$258	\$211	\$213	\$177
MRI Scans	\$895	\$736	\$730	\$640	\$694	\$592
Nerve Conduction Studies	\$594	\$828	\$759	\$773	\$583	\$786
Other Diagnostic Testing	\$115	\$130	\$82	\$78	\$89	\$80
Spinal Surgery	\$1,902	\$1,927	\$1,835	\$2,044	\$1,798	\$2,925
Other Surgery	\$977	\$1,211	\$1,211	\$844	\$883	\$700
Pathology and Lab Services	\$61	\$70	\$30	\$37	\$66	\$61
Other Services	\$323	\$574	\$256	\$255	\$285	\$263

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

UTILIZATION

Percent of Workers Receiving Professional Services by Service Type, Network and Non-Network Claims, 6 Months Post Injury

TYPE OF PROFESSIONAL SERVICE	NERVE COMPRESSION INJURIES		SOFT TISSUE INJURIES		OTHER INJURIES	
	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK
Evaluation & Management	97%	96%	97%	94%	99%	97%
Physical Medicine Modalities	39%	46%	13%	11%	29%	28%
Other Physical Medicine	81%	68%	25%	18%	60%	46%
CT Scans	4%	4%	3%	2%	2%	2%
MRI Scans	47%	45%	12%	10%	27%	22%
Nerve Conduction Studies	21%	33%	1%	2%	5%	5%
Other Diagnostic Testing	77%	70%	55%	51%	73%	68%
Spinal Surgery	4%	5%	<1%	<1%	1%	<1%
Other Surgery	37%	34%	38%	31%	16%	17%
Pathology and Lab Services	10%	13%	18%	13%	18%	10%
Other Services	93%	92%	89%	78%	94%	85%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

UTILIZATION

Average Number of Professional Services Billed Per Claim that Received Services by Type of Professional Service, Network and Non-Network Claims, 6 Months Post Injury

TYPE OF PROFESSIONAL SERVICE	NERVE COMPRESSION INJURIES		SOFT TISSUE INJURIES		OTHER INJURIES	
	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK
Evaluation & Management	8.9	9.7	5.4	4.9	4.0	3.6
Physical Medicine Modalities	11.9	17.1	8.9	12.3	7.7	11.8
Other Physical Medicine	45.5	58.0	23.5	28.4	32.6	35.2
CT Scans	2.0	1.6	1.2	1.5	1.8	1.6
MRI Scans	1.9	1.6	1.5	1.5	1.3	1.4
Nerve Conduction Studies	11.4	15.2	12.9	14.1	9.0	14.5
Other Diagnostic Testing	3.1	3.2	2.2	2.2	2.8	2.5
Spinal Surgery	1.8	3.5	2.9	3.8	4.5	5.6
Other Surgery	3.7	4.3	3.7	3.3	3.0	2.5
Pathology and Lab Services	3.4	5.8	2.0	2.5	4.4	5.6
Other Services	29.0	27.2	13.2	12.0	12.7	10.3

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

UTILIZATION

Mean Number of Drug Days by Therapeutic Drug Group, Network and Non-Network Claims, 6 Months Post Injury

THERAPEUTIC DRUG GROUP	NERVE COMPRESSION INJURIES		SOFT TISSUE INJURIES		OTHER INJURIES	
	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK
Analgesics-Anti-Inflammatory	38	50	33	31	29	30
Analgesics-Opioid	45	49	33	27	21	21
Anti-Anxiety Agents	16	40	18	20	16	21
Anti-Convulsants	95*	56	50	49	53	54
Anti-Depressants	60	59	45	48	45	57
Hypnotics	37	46	55	46	44	43
Musculo-skeletal Therapy agents	51	50	34	29	31	31
Other Therapeutic Drug Groups	26	62	20	31	21	27

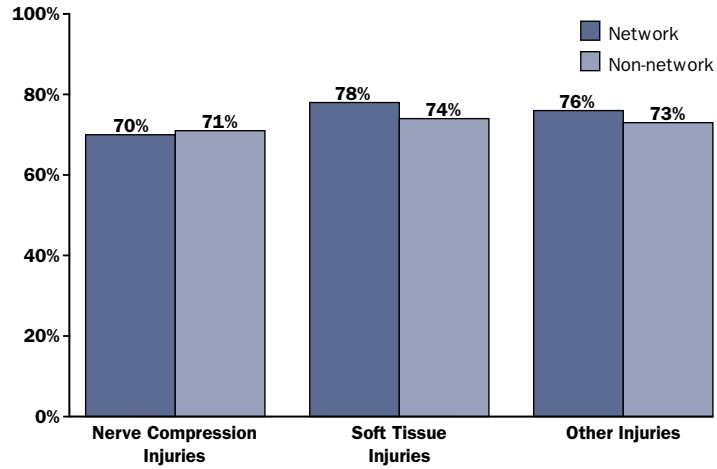
Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Note 1: * Please interpret this number with caution since the number of network claims with nerve compression injuries receiving anti-convulsants is small (N=13).

Note 2: Approximately 6 percent of claims (network and non-network claims combined) could not be classified into injury types and are excluded from this analysis.

Utilization

Percent of total drug days represented by Generics, by injury types Network and Non-network Claims, 6 months post injury

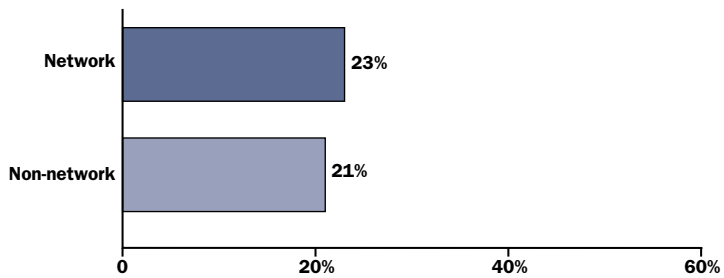


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Note: Approximately 6 percent of claims (network and non-network claims combined) could not be classified into injury types and are excluded from this analysis.

Satisfaction with Care

percent of injured workers who indicated that they had changed treating doctors



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

SATISFACTION WITH CARE

Most Frequent Reasons Why Injured Workers Said They Changed Treating Doctors

Percentage of Injured Workers Indicating That They Changed Treating Doctors Because:	Network	Non-Network
Worker felt that the treatment was not helping	39%	41%
Worker was dissatisfied with the doctor's manner and caring	33%	39%
Worker saw an emergency or urgent care doctor for first visit	36%	33%
Worker saw a company doctor for first visit	34%	29%
Doctor released worker to go back to work and worker didn't feel ready to return	18%	21%
Doctor was no longer seeing workers' compensation patients	5%	13%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007

Note: Totals may not add up to 100 percent because workers were allowed to select more than one reason.

ACCESS TO CARE

Individual Question Results for Composite “Getting Needed Care”

Overall for your work-related injury or illness, how much of a problem, if any, was it to get a treating doctor you were happy with? Was it...	Network	Non-Network
Not a problem	63%	74%
A small problem	13%	9%
A big problem	24%	17%

What was the problem?	Network	Non-Network
Insurance carrier didn't want the care provided	59%	60%
Couldn't receive care soon enough	51%	49%
Treating doctor was not willing to give care the worker believed was necessary	46%	35%
There was difficulty diagnosing the injury	43%	38%
Travel was too difficult to arrange	23%	19%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007.

Note: Totals may not add up to 100 percent because workers were allowed to select more than one reason.

ACCESS TO CARE

Individual Question Results for Composite “Getting Needed Care”

Overall for your work-related injury or illness, how much of a problem, if any, was it to get a specialist you needed to see? Was it...	Network	Non-Network
Not a problem	66%	74%
A small problem	11%	8%
A big problem	23%	18%

What was the problem?	Network	Non-Network
Insurance carrier didn't want the care provided	55%	46%
Couldn't see a specialist soon enough	35%	40%
Couldn't find a specialist that would accept workers' compensation patients	36%	38%
Treating doctor was not willing to send worker to a specialist	33%	24%
Travel was too difficult to arrange	25%	20%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007.

Note: Totals may not add up to 100 percent because workers were allowed to select more than one reason.

ACCESS TO CARE

Individual Question Results for Composite “Getting Needed Care”

For your work-related injury or illness, how much of a problem, if any, were delays in health care while you waited for approval from the health care network or insurance carrier? Was it...	Network	Non-Network
Not a problem	51%	53%
A small problem	16%	16%
A big problem	33%	31%

Individual Question Results for Composite “Getting Care Quickly”

Since you were injured, how often did you get care as soon as you wanted when you needed care right away?	Network	Non-Network
Never or Sometimes	32%	28%
Usually	16%	19%
Always	53%	53%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007.

Note: Totals may not add up to 100 percent due to rounding.

ACCESS TO CARE

Individual Question Results for Composite “Getting Care Quickly”

Since you were injured, not counting the times you needed care right away, how often did you get an appointment for your health care as soon as you wanted?	Network	Non-Network
Never or Sometimes	22%	22%
Usually	23%	23%
Always	55%	56%

Individual Question Results for Composite “Getting Care Quickly”

Since you were injured, how often were you taken to the exam room within 15 minutes of your appointment?	Network	Non-Network
Never or Sometimes	48%	43%
Usually	18%	20%
Always	34%	37%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007.

Note: Totals may not add up to 100 percent due to rounding.

ACCESS TO CARE

Individual Question Results for Composite “Agreement with Treating Doctor”

The treating doctor for your work-related injury or illness took your medical condition seriously...	Network	Non-Network
Strongly Agree or Agree	84%	90%
Strongly Disagree or Disagree	16%	10%

Individual Question Results for Composite “Agreement with Treating Doctor”

The treating doctor for your work-related injury or illness gave you a thorough examination...	Network	Non-Network
Strongly Agree or Agree	76%	83%
Strongly Disagree or Disagree	24%	17%

Individual Question Results for Composite “Agreement with Treating Doctor”

The treating doctor for your work-related injury or illness explained your medical condition in a way that you could understand...	Network	Non-Network
Strongly Agree or Agree	86%	90%
Strongly Disagree or Disagree	14%	11%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007.

Note: Totals may not add up to 100 percent due to rounding.

ACCESS TO CARE

Individual Question Results for Composite "Agreement with Treating Doctor"

The treating doctor for your work-related injury or illness was willing to answer any medical or treatment questions that you had...	Network	Non-Network
Strongly Agree or Agree	85%	89%
Strongly Disagree or Disagree	15%	11%

Individual Question Results for Composite "Agreement with Treating Doctor"

The treating doctor for your work-related injury or illness talked to you about a mutually agreed upon return-to-work date...	Network	Non-Network
Strongly Agree or Agree	79%	82%
Strongly Disagree or Disagree	21%	18%

Individual Question Results for Composite "Agreement with Treating Doctor"

The treating doctor for your work-related injury or illness overall provided you with very good medical care that met your needs...	Network	Non-Network
Strongly Agree or Agree	76%	85%
Strongly Disagree or Disagree	25%	16%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007.

Note: Totals may not add up to 100 percent due to rounding.

ACCESS TO CARE

Distribution of Payments for Professional Services by Provider Type Network and Non-Network Claims, 6 Months Post Injury

Type of Provider	NETWORK		NON-NETWORK	
	TOTAL PAYMENTS	PERCENT	TOTAL PAYMENTS	PERCENT
Medical Doctors	\$4,512,000	54%	\$123,500,000	54%
Chiropractors	\$221,000	3%	\$24,422,000	11%
Physical/ Occupational Therapists	\$1,559,000	19%	\$30,237,000	13%
Doctor of Osteopathy	\$614,000	7%	\$14,270,000	6%
Other Providers	\$1,400,000	17%	\$36,431,000	16%

Distribution of Injured Workers Receiving Professional Services by Provider Type Network and Non-Network Claims, 6 Months Post Injury

Type of Provider	NETWORK		NON-NETWORK	
	NUMBER OF INJURED WORKERS	PERCENT	NUMBER OF INJURED EMPLOYEES	PERCENT
Medical Doctors	4,797	48%	167,999	53%
Chiropractors	227	2%	13,452	4%
Physical/ Occupational Therapists	1,726	17%	37,564	12%
Doctor of Osteopathy	1,411	14%	38,663	12%
Other Providers	1,876	19%	58,059	18%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007.

RETURN TO WORK

Most Frequent Reasons Given by Injured Workers Who Said They Were Not Currently Working at the Time of the Survey

Most Frequent Reasons	Network	Non-Network
Worker not physically able to perform job duties	60%	60%
Worker was laid off	24%	27%
Worker was fired	20%	21%
Retired	9%	13%

Percentage of Injured Workers Who Indicated That Their Current Treating Doctor Had Released Them to Go Back to Work with or Without Physical Restrictions

	Network	Non-Network
Released to go back to work with no physical restrictions	23%	28%
Released to go back to work with certain physical restrictions	22%	20%
Not released to go back to any type of work	55%	52%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2007.

Note: Totals may not add up to 100 percent because workers were allowed to select more than one reason.