

2009 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

Acknowledgements

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Botao Shi managed the project, conducted the analyses, interpreted the results, and co-authored the final report. Summer Intern Yue Yu contributed immensely by converting statistical results into tabular and graphical output. REG Director DC Campbell provided methodological support, conducted the data management, and co-authored the final report.

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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 33 networks covering 234 Texas counties are certified to provide workers' compensation health care services to insurance carriers. Among the certified networks, 23 were treating injured workers as of February 1, 2009. Since the formation of the first network, a total of 88,900 injured workers have been treated in networks. One certified network accounted for 53 percent of all claims that were treated in networks.

Certain public entities and political subdivisions (such as counties, municipalities, school districts, junior college districts, housing authorities, and community centers for mental health and mental retardation services) have the option to: 1) use a workers' compensation health care network certified by TDI under Chapter 1305, Insurance Code; 2) continue to allow their injured employees to seek health care as non-network claims; or 3) contract directly with health care providers if the use of a certified network is not "available or practical," essentially forming their own health care network.

This report includes Alliance, a joint contracting partnership of five political subdivisions (authorized under Chapter 504, Texas Labor Code) that chose to directly contract with health care providers. While not required to be certified by the Department under Chapter 1305, Insurance Code, the Alliance network must meet TDI's workers' compensation reporting requirements.

The Alliance intergovernmental pools are:

- Texas Association of Counties Risk Management Pool
- Texas Association of School Boards Risk Management Fund
- Texas Municipal League Intergovernmental Risk Pool
- Texas Council Risk Management Fund
- Texas Water Conservation Association Risk Management Fund

The results presented in this annual report card show a comparison of injured workers treated in Alliance (5,709 injured workers), Texas Star (20,892), Corvel Corcare (2,027), Liberty HCN (2,898), Coventry (1,495), Travelers (1,617) and other networks (4,747) relative to injured workers treated outside of the workers' compensation health care network context. Corvel Corcare was left out of the cost and utilization measures due to unresolved data issues.

The "other network" category is comprised of networks too small, in terms of the number of injured workers treated in each network as of February 2009, to have their results analyzed separately. These networks are:

Aetna Workers' Compensation Access	GENEX
Bunch & Associates, Inc. TX	International Rehabilitation Assoc
Bunch-Coventy TX HCN	Interplan Health Group dba
Bunch-First Health TX HCN	Intracorp/LOCKHEED MARTIN
CompKey Plus	SPECIALTY RISK SERVICES
Dallas County Schools	The Hartford WC HCN-First
FIRST HEALTH/CSS HCN	The Lone Star Network/CorVel
First Health HCN	Zenith
First Health/AIGCS Texas HCN	Zurich Services Corporation

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 REG in February 2009 to 34 workers' compensation health care networks. Results from the data call showed that 23 networks had treated 88,900 injured workers as of February 1, 2009. Of these, 39,385 were injured during the analysis period June 1, 2007 to May 31, 2008. The report card examines only new claims and excludes legacy claims from the analysis.

How were medical costs and utilization measures calculated?

All medical cost and utilization measures were calculated for all 8 groups at 6 months post-injury for new injuries occurring between June 1, 2007 and May 31, 2008. Utilization measures represent the services that were billed by health care 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. Cost and utilization measures were examined separately by type of medical service (professional, hospital, and pharmacy). Dental services were excluded in the medical cost analysis because the amount of dental services rendered in each network was too small.

Health care costs and utilization were examined across professional health care services, hospital services, and pharmacy services. Professional cost and utilization measures were also analyzed by eleven sub-categories of services (evaluation and management services, physical medicine modalities, other physical medicine services, CT scans, MRI scans, nerve conduction studies, other diagnostic tests, spinal surgeries, other surgeries, pathology and lab services, and other professional services). Similarly, hospital cost and utilization measures were examined separately for in-patient, out-patient hospital services and other types of hospital services. Other hospital services include a broad range of services such as skilled nursing, home health, clinic, and special facilities (including ambulatory service centers). Finally, pharmacy prescription cost and utilization were examined by five drug groups (opioid prescriptions, anti-inflammatory prescriptions, musculoskeletal therapy drug prescriptions, mood stabilizers, and other therapeutic drug prescriptions).

To improve the comparability of individual network and non-network claims, health care cost and utilization figures were adjusted for injury type and type of claim differences (i.e., proportion of medical only vs. lost-time claims) that may exist between the groups. These adjustments were done using generalized linear models which are recommended when examining health care utilization and expenditures.¹ Such data are often characterized by a skewed non-linear distribution. Data with such a skewed distribution cannot be modeled using the traditional methods because the data violate one of the assumptions of the traditional linear regression model (i.e., data being modeled are characterized as having a normal

1. P. Diehr, D. Yanez, A. Ash, M. Hornbrook, D. Y. Lin. 1999. Methods for Analyzing Health Care Utilization and Costs. *Annual Review of Public Health* 20:125-44.

distribution). As a result, any differences that exist between each individual network and non-network claims cannot be attributed to injury type or type of claim differences that may exist between the two groups.

How was the injured worker survey conducted?

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.

The findings presented in this report are based on completed telephone surveys of 3,018 injured workers with new lost-time claims. Since network claims only represented approximately 9 percent of the total lost-time claim population for the analysis period, REG utilized a disproportionate random sample and over-sampled network claims. In order to analyze the outcomes of individual networks, REG could not incorporate the duration of the injury into the survey design as was done in the 2007 report card. In other words, injured workers of all injury durations (1-24 months post-injury) were surveyed and an age-of-injury control was included in the regression analyses.

The survey results presented in this report card were tested and accounted for injury type, type of claim, race/ethnicity, gender, age, education, age-of-injury, existence of health insurance coverage, and self-rated health differences that may exist between the groups. This was to ensure that differences that exist between each individual network and non-network claims cannot be attributed to those factors.

Summary of Findings

Health Care Costs

- Overall, networks had higher average medical costs than Non-networks.
- Texas Star's average medical costs were lower than Non-networks in 8 of 19 categories, including all pharmacy groups.
- Alliance's average medical costs were lower than Non-networks in 7 of 19 categories.
- Travelers' average medical costs were lower than Non-networks in 7 of the 19 categories.
- Liberty's average medical costs were lower than Non-networks in 4, Coventry in 3, and Other Networks in 2 of the 19 categories.
- Four networks (Alliance, Liberty, Other Networks, Texas Star) had lower average medical costs in Physical Medicine Modalities.
- Four networks (Alliance, Coventry, Liberty, Texas Star) had lower average medical costs in Nerve Conduction diagnostic testing.
- Three networks (Alliance, Liberty, Travelers) had lower average Spinal Surgery costs than Non-networks.
- Only Travelers had lower Hospital Inpatient average medical costs than Non-networks.

Health Care Utilization

- Overall, networks tended to have higher utilization of Professional services and Pharmaceuticals than Non-networks.
- Networks tended to have lower utilization of Hospital services than Non-networks.
- Texas Star's average utilization of services was lower than Non-networks in 3 of 18 categories. Only Texas Star had Hospital utilization higher than Non-networks.
- Alliance's average utilization rates were lower than Non-networks in 8 of 18 categories.
- Travelers' average utilization of services was lower than Non-networks in 6 of the 18 categories.
- Liberty's average utilization of services was lower than Non-networks in 3, Coventry in 3, and Other Networks in 4 of the 18 categories.
- Three networks (Alliance, Liberty, Travelers) had lower utilization of Spinal Surgery services than Non-networks.

2. D. K. Blough and S. D. Ramsey. 2000. Using Generalized Linear Models to Assess Medical Care Costs. *Health Services & Outcomes Research Methodology* 1:2: 185-202.

Access to Care and Satisfaction with Care

- Overall, with some exceptions, Non-network injured workers reported higher levels of access to, and satisfaction with care.
- Injured workers from four network groups (Travelers, Alliance, Texas Star, and Other Networks) reported higher or equal levels of receiving needed care as compared to Non-network injured workers.
- Non-network injured workers reported quicker care and higher satisfaction with their treating doctors than did network injured workers.
- A higher percentage of Alliance's injured workers than Non-network injured workers reported that they agreed with the care they received from their treating doctors.
- Texas Star's injured workers reported higher overall levels of satisfaction while Alliance's injured workers reported equal levels of satisfaction when compared with Non-networks.

Return-to-Work

- Overall Network injured workers reported higher return-to-work rates than Non-network injured workers.
- Among network injured workers, only Texas Star reported a slightly lower return-to-work rate (77%) when compared to Non-network (79%).
- Among injured workers who were released to return to work by their treating doctors, a higher percentage of Non-network injured workers reported that they were not yet back to work when compared to four networks (Alliance, Corvel CorCare, Liberty, Travelers).

Health Outcomes

- The SF-12 survey was used to calculate the physical and mental health status of injured workers at the time of the survey.
- The average scores in the population for both outcomes are 50 and scores that are more than 10 points lower than this reference point are considered significant.
- All network injured workers had higher physical functioning scores than non-network injured workers.
- All network injured workers had higher physical functioning scores in 2009 than in 2008.
- Overall, the mental functioning scores of network injured workers are higher than Non-network injured workers.
- Alliance's injured workers had higher mental functioning scores than the general US population.

NOTE: *Medical cost and utilization results not reported for the Corvel CorCare network due to unresolved data issues.*

Network performance summary compared to non-network

Note: Blanks indicate that there is no difference between the network and non-network.

Health care costs

▲ Higher than non-network ▼ Lower than non-network

	Alliance (Political Subs.)	Coventry	Liberty HCN	Other Networks	Travelers	Texas Star
OVERALL	▲	▲	▲	▲	▲	▲
PROFESSIONAL	▲	▲	▲	▲	▲	▲
Evaluation & Management	▲	▲	▲	▲	▲	▲
Physical medicine modalities	▼	▲	▼	▼	▲	▼
Other physical medicine	▲	▲	▲	▲	▲	▼
DT-CT scans	▲	▲	▲	▲	▲	▲
DT-MRI scans	▲	▲	▲	▲	▲	▲
DT-Nerve Conduction studies	▼	▼	▼	▲	▲	▼
DT-Other diagnostic testing	▲	▲	▲	▲	▲	▲
Spinal Surgery	▼	▲	▼	▲	▼	▲
Other Surgery	▲	▲	▲	▲	▲	▲
Pathology and lab services	▲	▲	▲	▲	▼	▲
Others services	▼	▲	▲	▲	▼	
HOSPITAL	▲	▲	▲	▲	▲	▲
In-patient	▲	▲	▲	▲	▼	▲
Out-patient	▲	▲	▲	▲	▲	▲
Other	▲	▲	▼	▼	▲	▲
PHARMACY	▲	▲	▲	▲	▼	▼
Analgesics-Opioid	▼	▲	▲	▲	▼	▼
Analgesics-anti-inflammatory	▲	▲	▲	▲	▲	▼
Musculoskeletal therapy agents	▲	▼	▲	▲	▼	▼
Mood stabilizers	▼	▼	▲	▲	▲	▼
Other therapeutic groups	▼	▲	▲	▲	▲	▼

NOTE: Medical cost and utilization results not reported for the Corvel CorCare network due to unresolved data issues.

Medical utilization

Note: Utilization is defined as the percentage of injured workers receiving each type of medical service.

▲ Higher than non-network ▼ Lower than non-network

	Alliance (Political Subs.)	Coventry	Liberty HCN	Other Networks	Travelers	Texas Star
PROFESSIONAL	▲	▲	▲	▲	▲	▲
Evaluation & management	▲	▲	▲	▲	▲	▲
Physical medicine modalities	▲	▲	▲	▲	▲	▼
Other physical medicine	▲	▲	▲	▲	▲	▲
DT-CT scans		▲	▲			▲
DT-MRI scans	▲	▲	▲	▲	▲	▲
DT-Nerve Conduction studies	▼	▲	▲	▲	▲	▼
DT-Other diagnostic testing	▲	▲	▲	▲	▲	▲
Spinal Surgery	▼	▲	▼	▲	▼	
Other Surgery	▼	▲	▲	▲	▲	▲
Pathology and lab services	▼	▲	▼	▲	▲	
Other services	▲	▲	▲	▲	▲	▲
HOSPITAL	▼	▼	▼	▼	▼	▲
In-patient	▼	▲	▼	▲	▲	▲
Out-patient	▲	▼	▲	▲	▲	▲
PHARMACY	▲	▲	▲	▲	▲	▲
Analgesics-Opioid	▼	▲	▲	▲	▼	▲
Analgesics-Anti-inflammatory	▲	▲	▲	▲	▼	▲
Musculoskeletal therapy agents	▲	▲	▲	▲	▼	▼
Mood stabilizers	▼	▲	▲	▲		▲
Other therapeutic groups	▼		▲	▲	▼	▲

NOTE: Medical cost and utilization results not reported for the Corvel CorCare network due to unresolved data issues.

Medical utilization

Note: Utilization is defined as the average number of services per claim.

▲ Higher than non-network ▼ Lower than non-network

	Alliance (Political Subs.)	Coventry	Liberty HCN	Other Networks	Travelers	Texas Star
PROFESSIONAL						
Evaluation & management	▲	▲	▲	▲	▲	▲
Physical medicine modalities	▼	▲	▼	▼	▼	▼
Other physical medicine	▼		▲	▼	▲	▼
DT-CT scans	▲	▲	▲	▲		▲
MRI scans				▼	▲	
DT-Nerve conduction studies	▲	▼	▲	▼	▲	▲
DT-Other diagnostic testing		▲	▲	▲	▲	▲
Spinal Surgery	▼	▲	▼	▲	▼	▲
Other Surgery	▲	▲	▲	▲	▲	▲
Pathology and lab services	▲	▼	▲	▲	▼	▲
Others services	▼	▲	▲	▲	▲	▲
PHARMACY						
Analgesics-Opioid	▼	▲	▲	▲	▼	▲
Analgesics-Anti-inflammatory		▲	▲	▲	▲	▲
Musculoskeletal therapy agents	▼	▲	▲	▲	▼	▲
Mood stabilizers	▼	▼	▼	▲	▲	▲
Other therapeutic groups	▼	▲		▲	▼	▼

NOTE: Medical cost and utilization results not reported for the Corvel CorCare network due to unresolved data issues.

Access to care

▲ Higher than non-network ▼ Lower than non-network

	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Getting needed care		▲	▼	▼	▼		▲	▲
Getting care quickly		▼	▼	▼	▼	▼	▼	▼

Satisfaction with care

▲ Higher than non-network ▼ Lower than non-network

	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Satisfaction with treating doctor		▼	▼	▼	▼	▼	▼	▼
Agreement with treating doctor		▲	▼	▼	▼	▼		▼
Overall satisfaction			▼	▼	▼	▼	▼	▲

Return-to-work

▲ Higher than non-network ▼ Lower than non-network

	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Working at the time of the survey		▲	▲	▲	▲	▲	▲	
Returned to work at some point after the injury		▲	▲	▲	▲	▲	▲	▼
Doctor release to RTW		▼	▼	▲	▼	▲	▼	▲
Average number of weeks off from work		▼	▲	▲	▲	▼	▼	▲

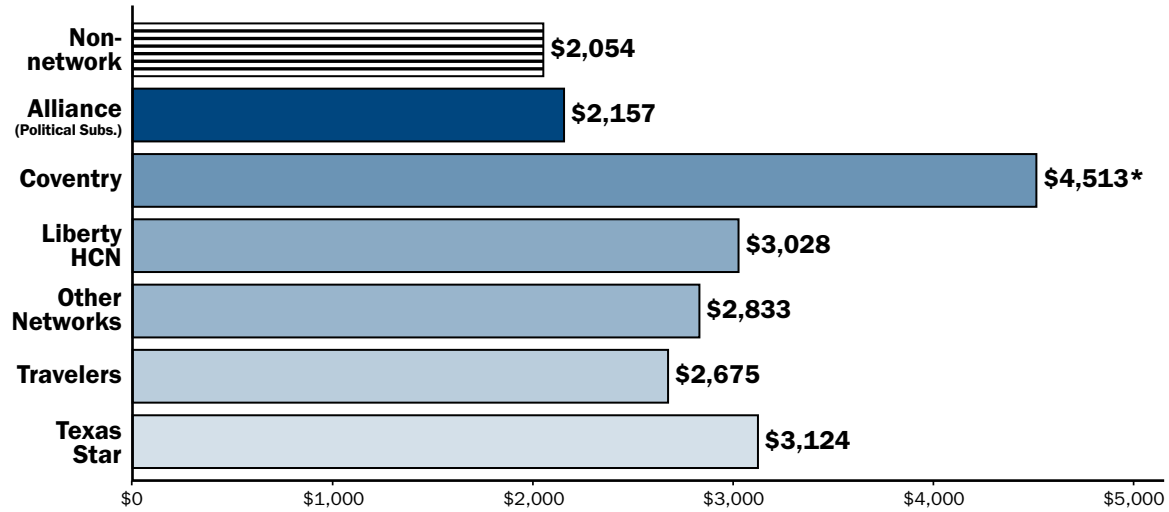
Health status

▲ Higher than non-network ▼ Lower than non-network

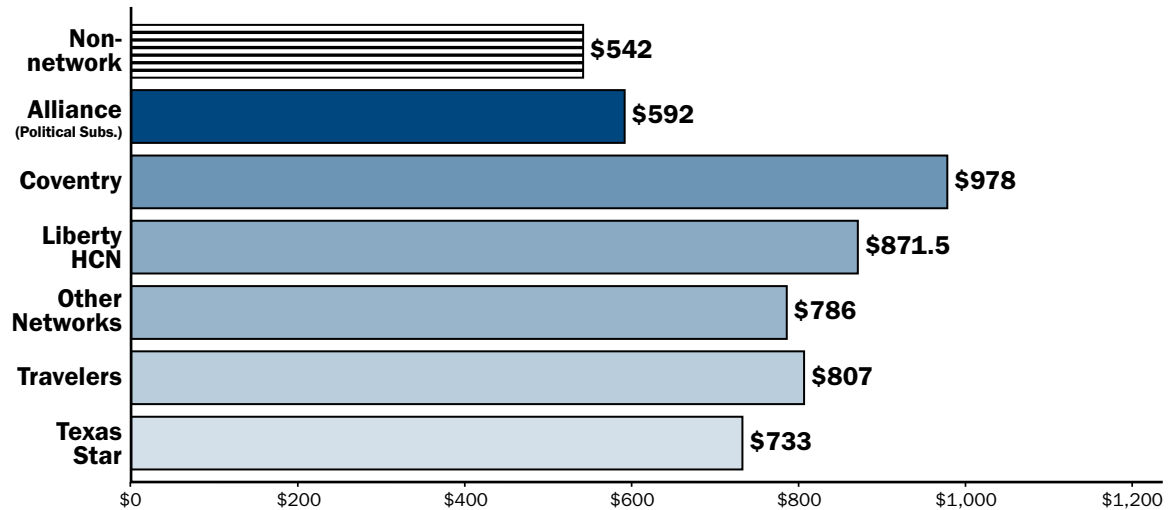
	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Physical functioning		▲	▲	▲	▲	▲	▲	▲
Mental functioning		▲	▲	▼	▼	▲	▲	▼

Health care costs

Average overall medical cost per claim, six months post injury



Median overall medical cost per claim, six months post injury



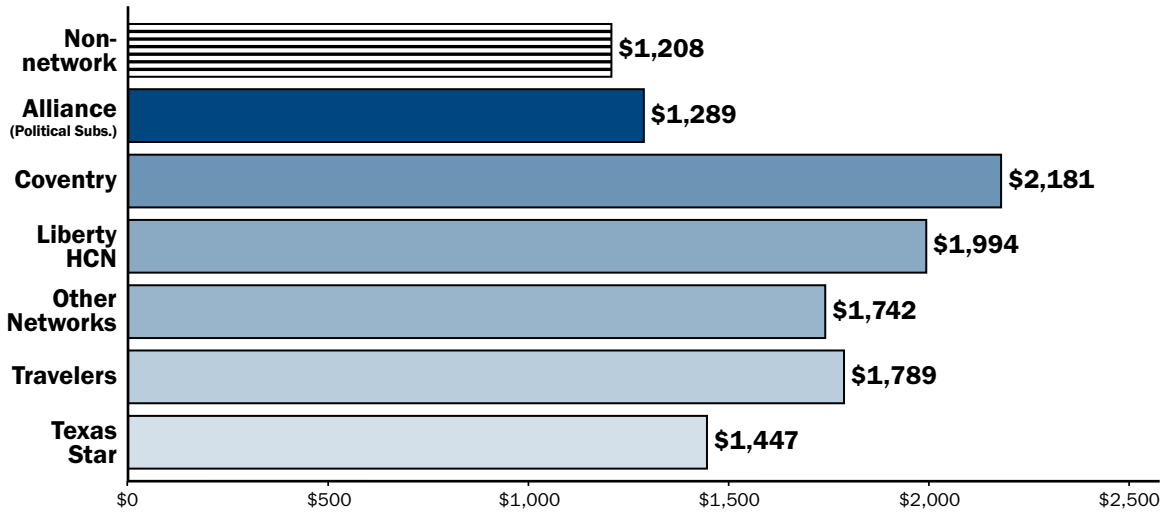
Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

- Notes:**
1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
 2. Medical cost and utilization results not reported for the Corvel CorCare network due to unresolved data issues.

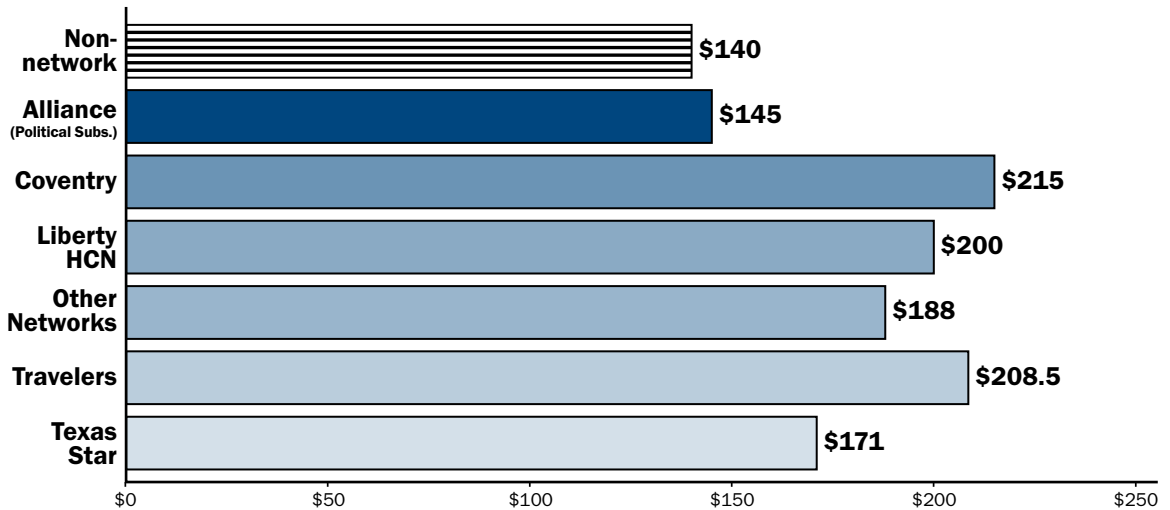
* Coventry, the analyzed network with the lowest claim count (1,495) has a relatively high percentage of outlying claims that impact overall medical and hospital costs.

Health care costs

Average professional cost per claim, six months post injury



Median professional cost per claim, six months post injury

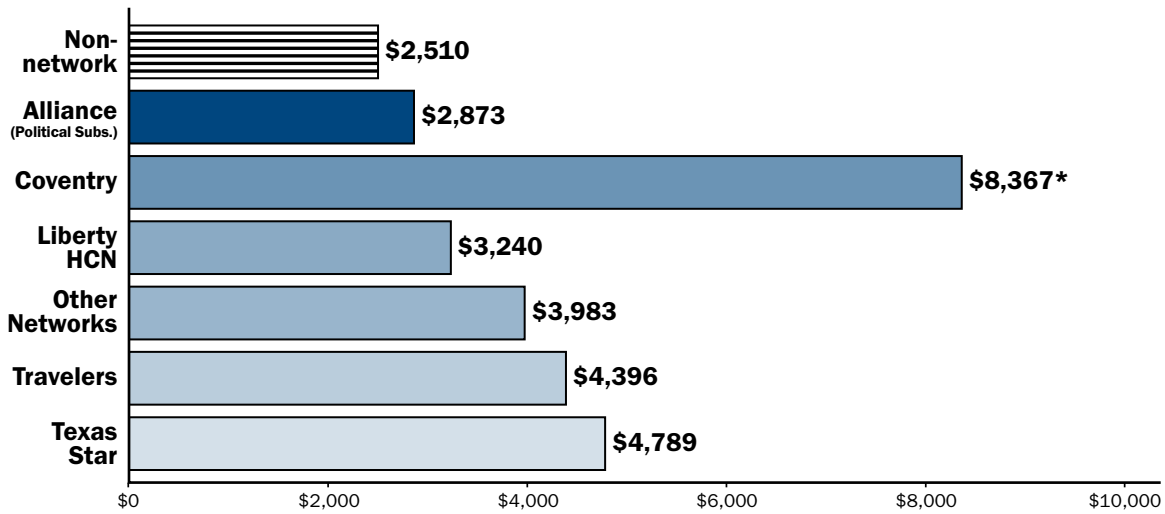


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

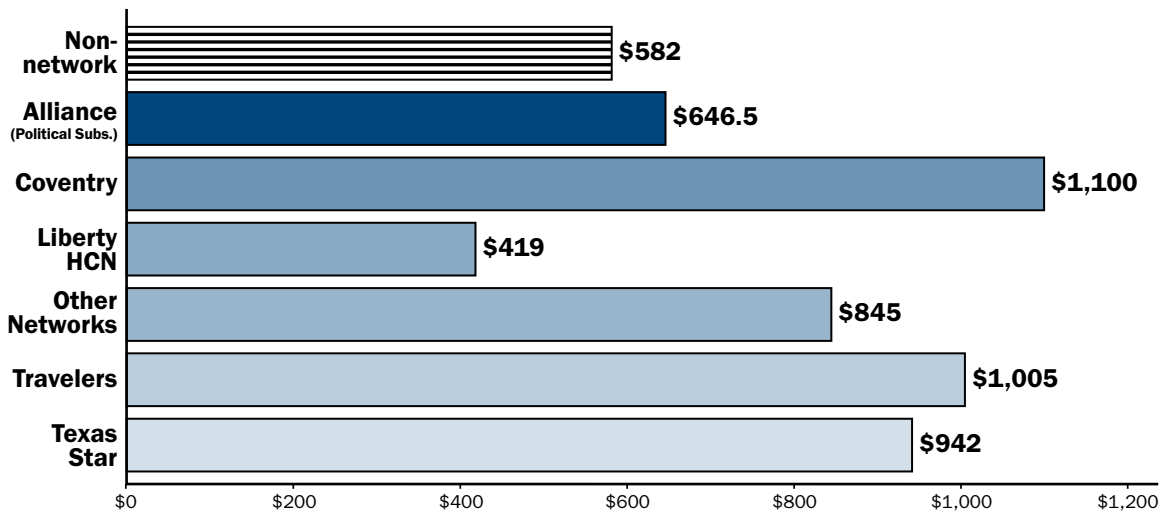
- Notes:**
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Health care costs

Average hospital cost per claim, six months post injury



Median hospital cost per claim, six months post injury



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

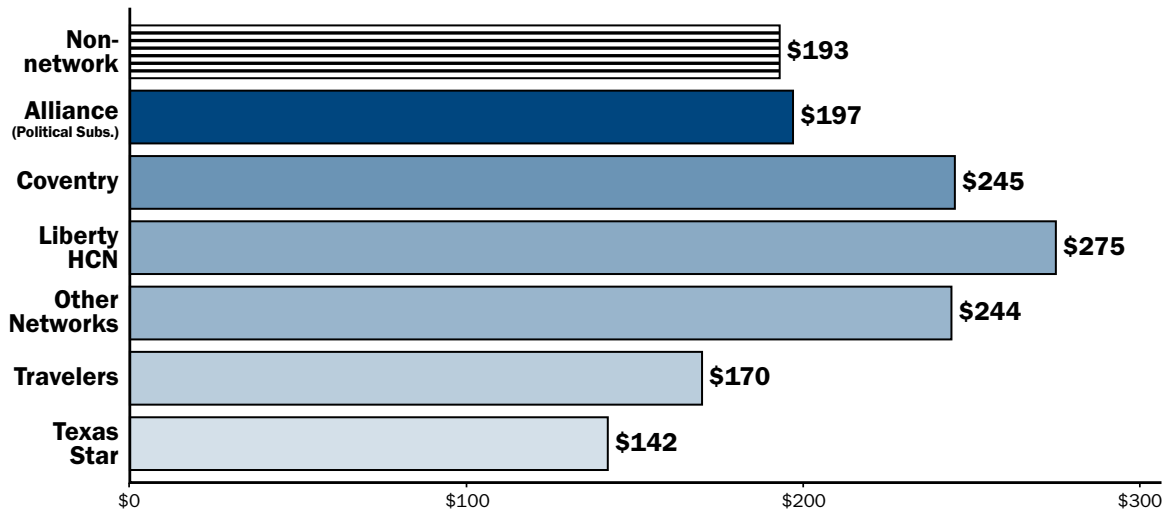
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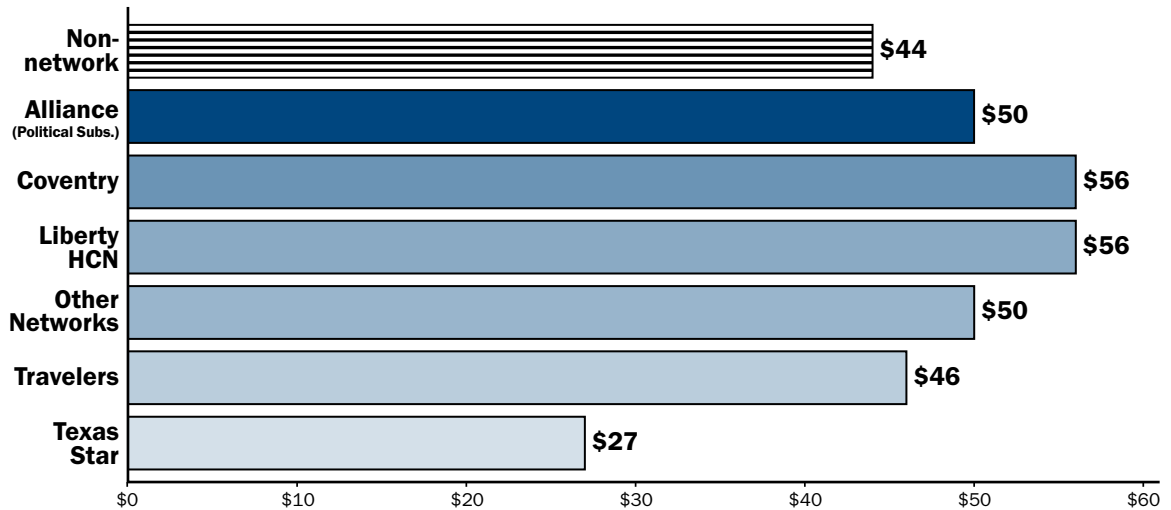
* Coventry, the analyzed network with the lowest claim count (1,495) has a relatively high percentage of outlying claims that impact overall medical and hospital costs.

Health care costs

Average pharmacy cost per claim, six months post injury



Median pharmacy cost per claim, six months post injury

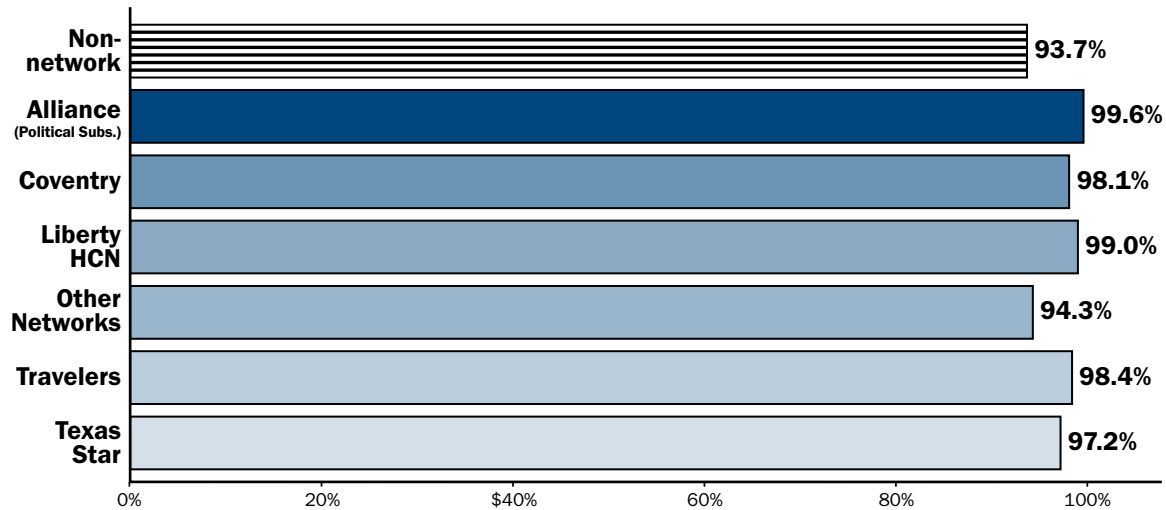


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

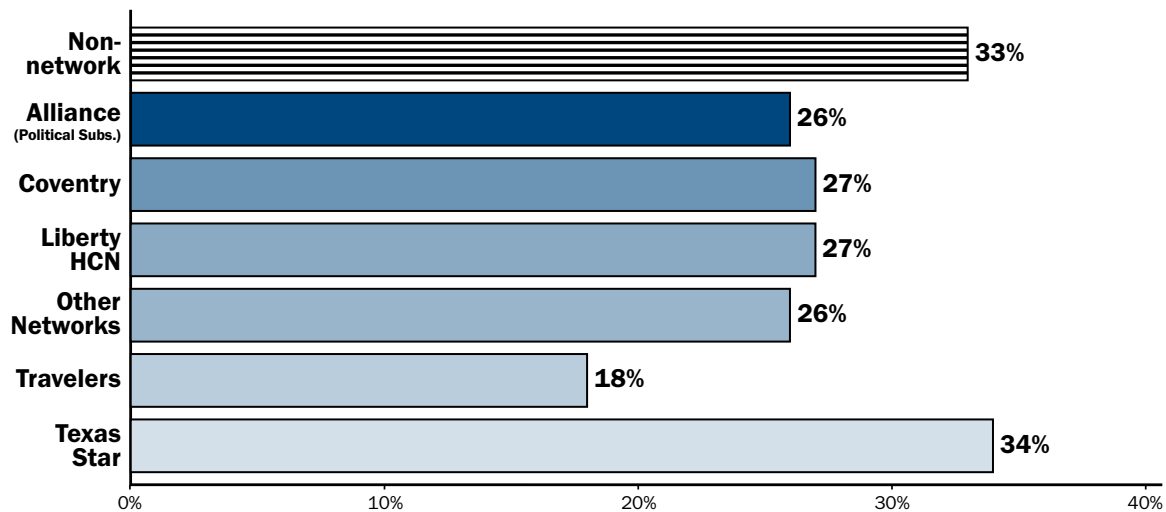
- Notes:**
1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
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Utilization of care

Percentage of injured workers who received professional services, six months post injury



Percentage of injured workers who received hospital services, six months post injury

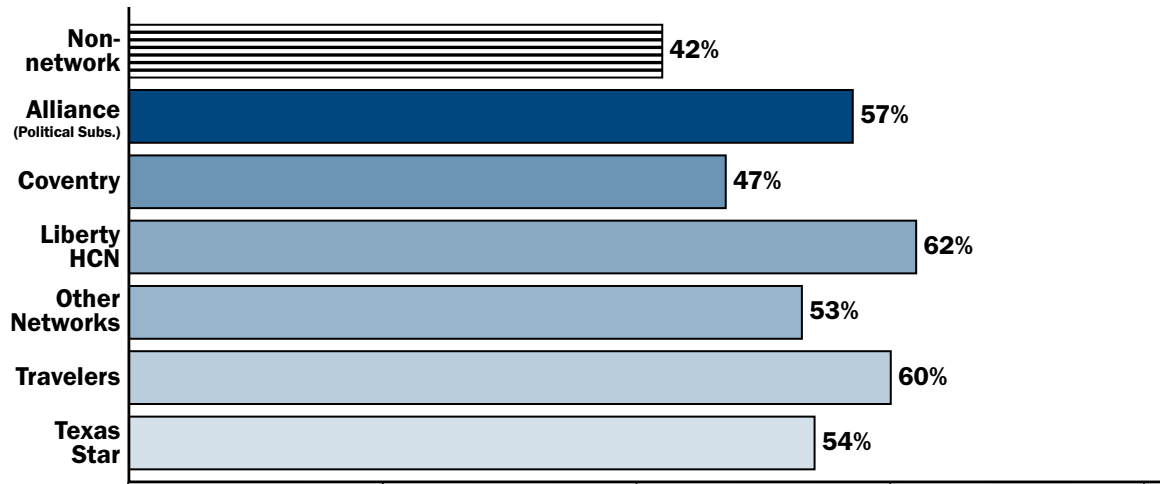


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

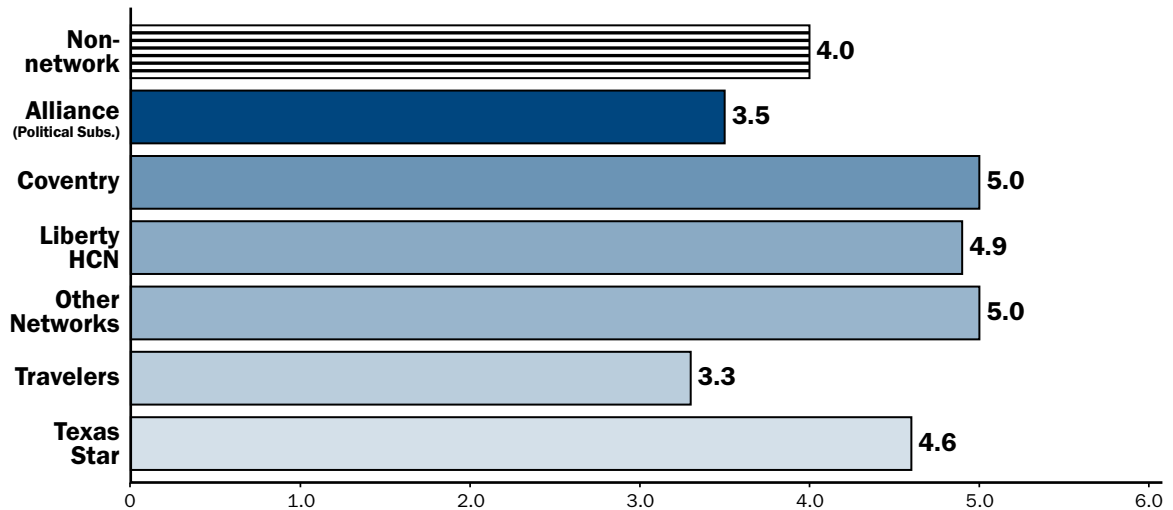
- Notes:**
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Utilization of care

Percentage of injured workers who received pharmacy services, six months post injury



Average number of prescriptions per injured worker, six months post injury

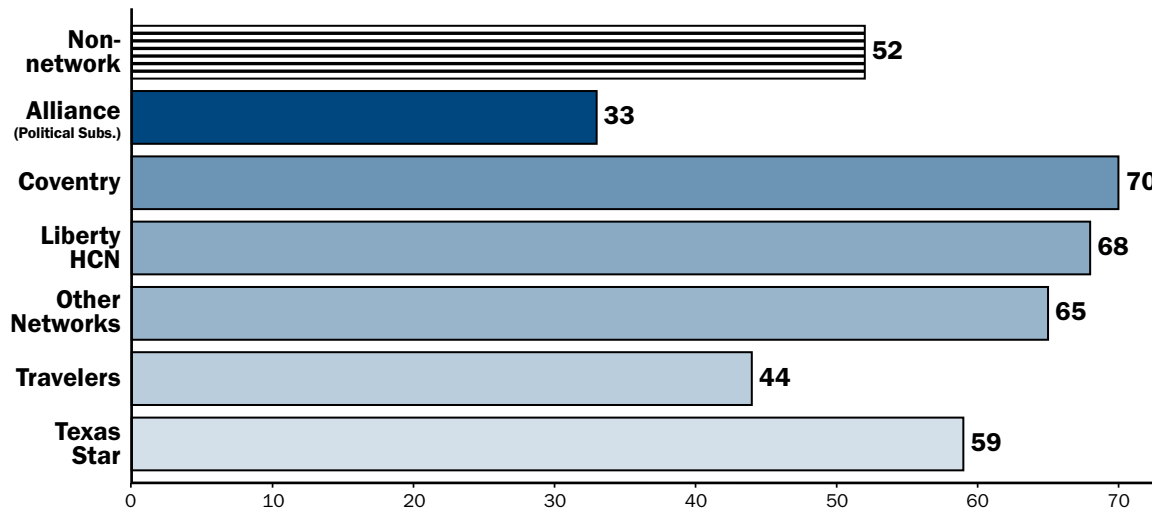


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

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Utilization of care

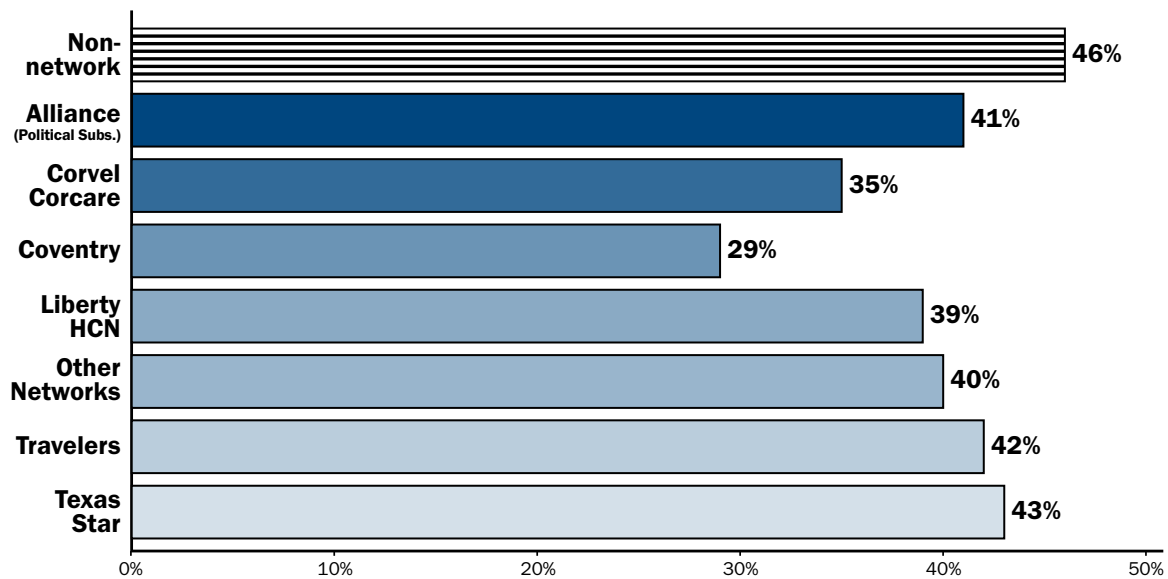
Average number of prescription days per injured worker, six months post injury



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



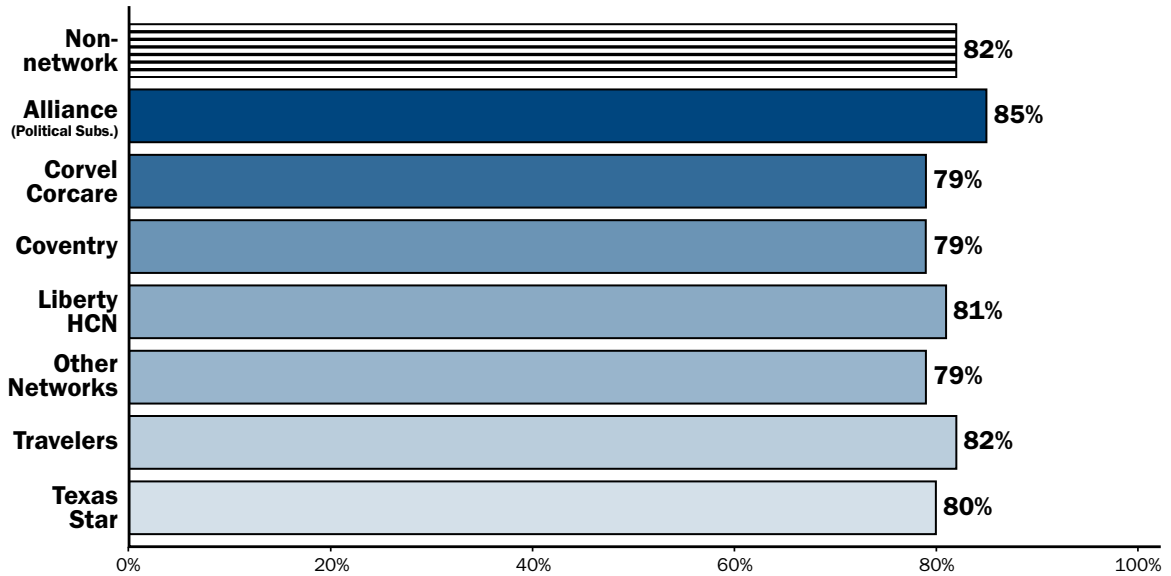
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Satisfaction with medical care

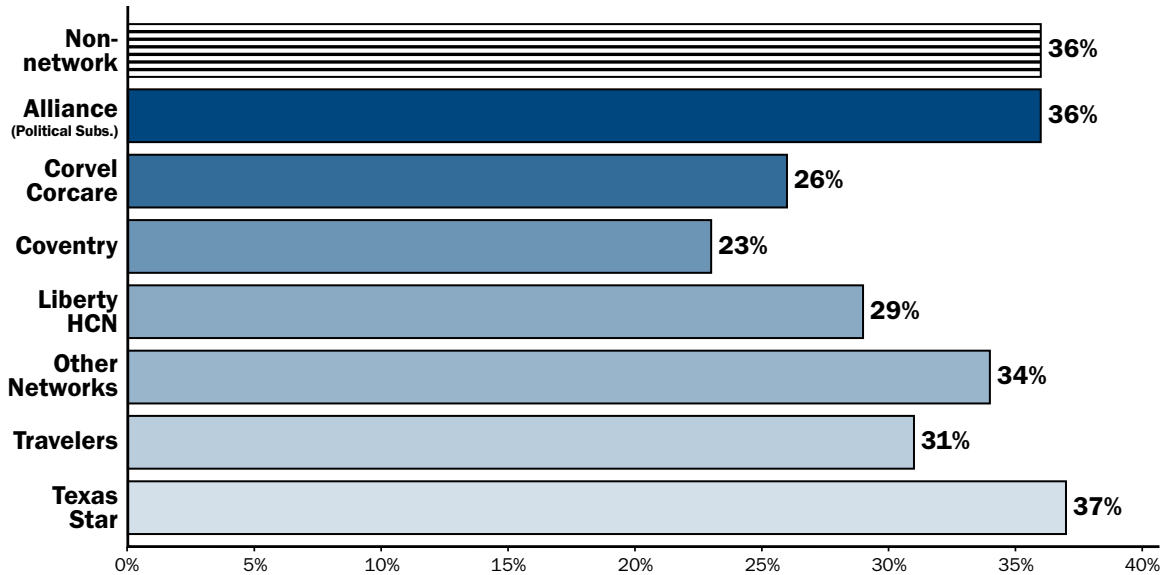
Agreement with treating doctor

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



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, 2009.

Note: The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.

Satisfaction with medical care

Satisfaction with medical care

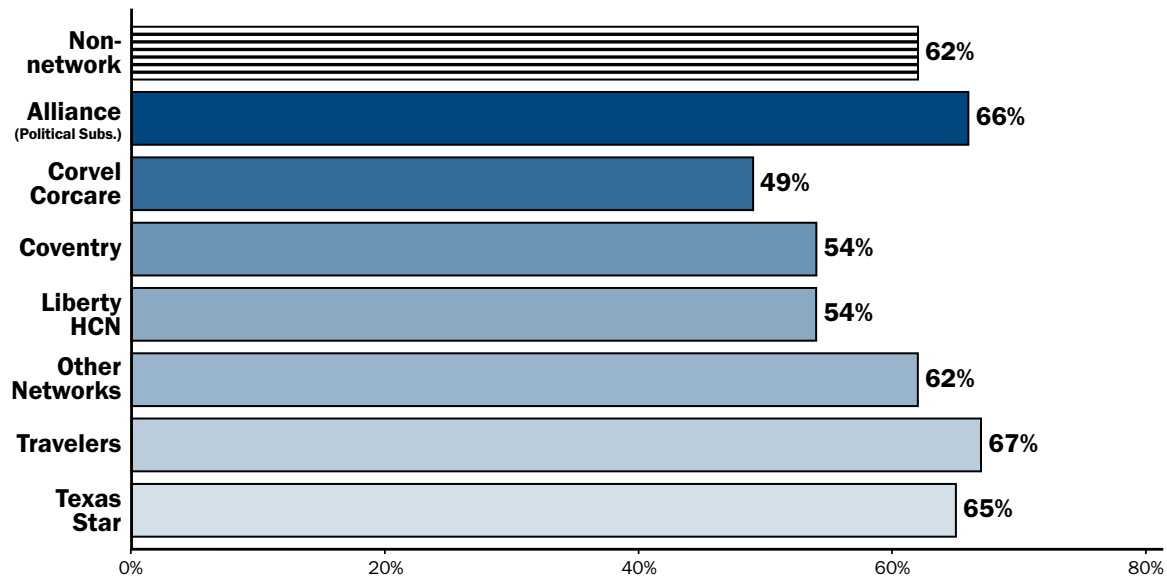
Injured workers' perceptions regarding medical care for their work-related injuries compared to the medical care they normally receive when injured or sick

Percentage of injured workers indicating that the medical care for their work-related injuries was:	BETTER	ABOUT THE SAME	WORSE
Non-network	26%	52%	21%
Alliance (Political Subs.)	19%*	62%*	19%
Corvel Corcare	13%*	55%	32%*
Coventry	23%*	54%	24%*
Liberty HCN	23%	49%	28%*
Other Networks	24%	53%	22%
Travelers	25%	54%	21%
Texas Star	27%	51%	21%

Access to care

Getting needed care

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



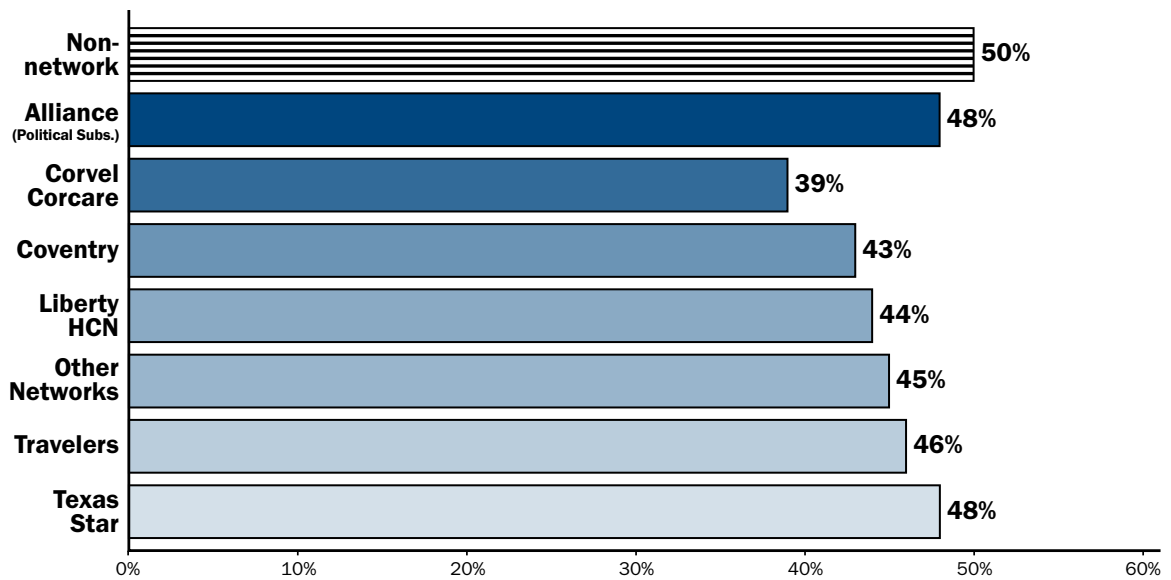
Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

- Notes:**
1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
 2. (*) Asterisk indicates that the differences between the network and non-network are statistically significant.

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



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 receive when injured or sick

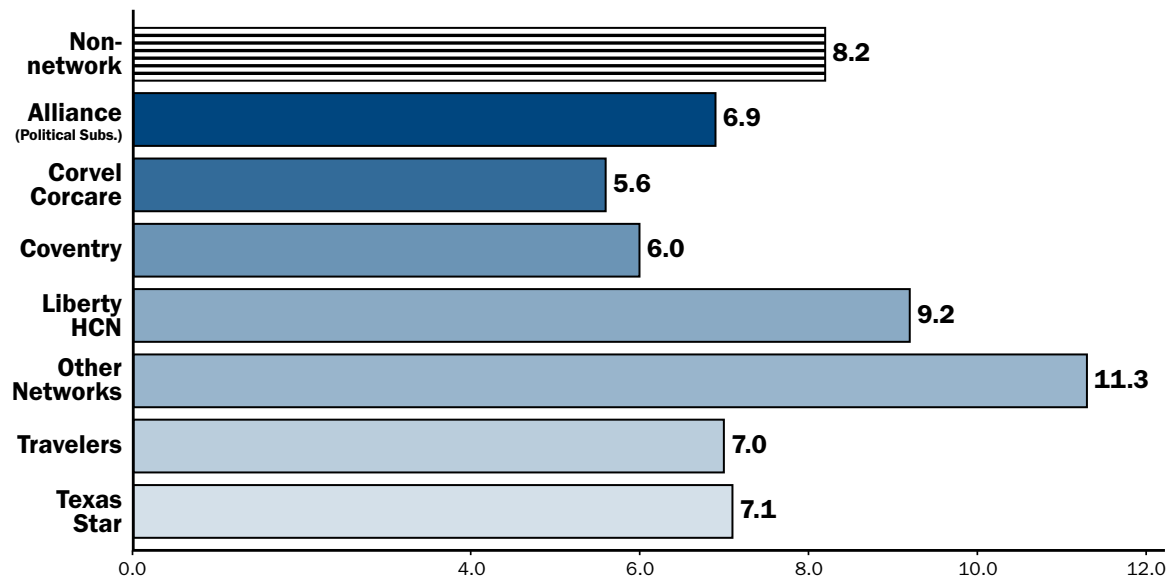
Percentage of injured workers indicating that their ability to schedule a doctor's appointment was:	BETTER	ABOUT THE SAME	WORSE
Non-network	23%	64%	13%
Alliance (Political Subs.)	18%	67%	15%
Corvel Corcare	15%*	54%*	31%*
Coventry	19%*	66%	15%
Liberty HCN	17%*	68%	15%*
Other Networks	22%	66%	13%
Travelers	25%	61%	15%
Texas Star	23%	64%	13%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

- Notes:**
1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
 2. (*) Asterisk indicates that the differences between the network and non-network are statistically significant.

Access to care

Average duration from date of injury to date of first non-emergency treatment



Duration from date of injury to date of first non-emergency service among the networks and non-network

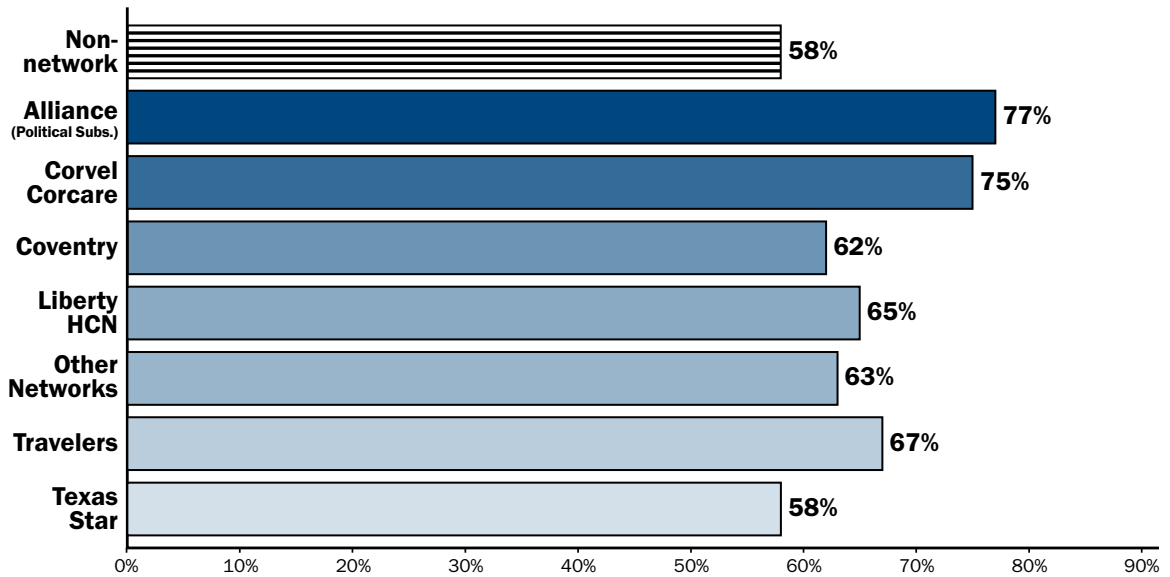
Duration	SAME DAY	1-7 DAYS	8-14 DAYS	15-21 DAYS	22+ DAYS
Non-network	41%	35%	10%	6%	9%
Alliance (Political Subs.)	46%*	37%	7%	3%*	6%*
Corvel Corcare	51%*	32%	9%	1%*	6%
Coventry	47%*	21%*	10%	3%	18%*
Liberty HCN	43%	30%	7%*	7%	13%*
Other Networks	45%	30%	11%	3%*	11%
Travelers	45%	34%	10%	3%*	8%
Texas Star	41%	35%	10%	5%	9%*

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

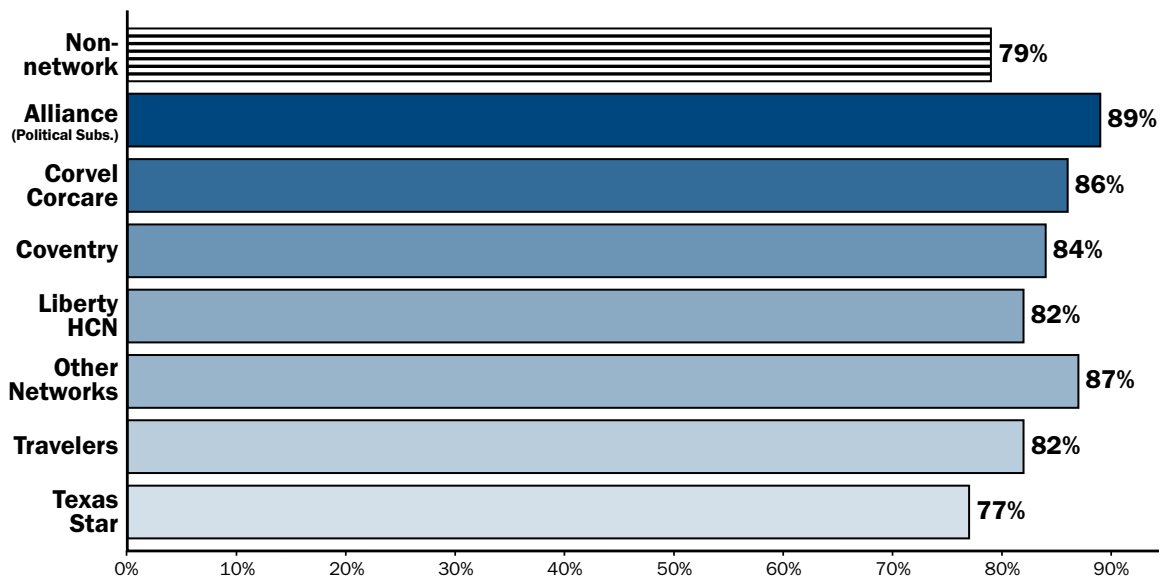
- Notes:**
1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
 2. (*) Asterisk indicates that the differences between the network and non-network are statistically significant.

Return-to-work

Percentage of injured workers who indicated that they were currently working at the time they were surveyed



Percentage of injured workers who indicated that they went back to work at some point after their injury

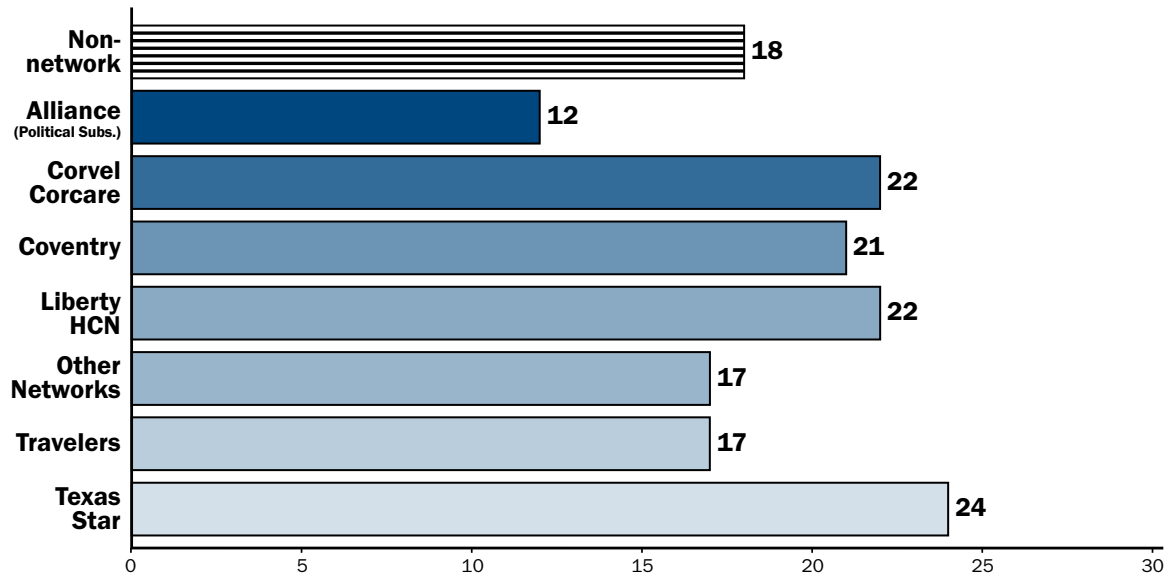


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

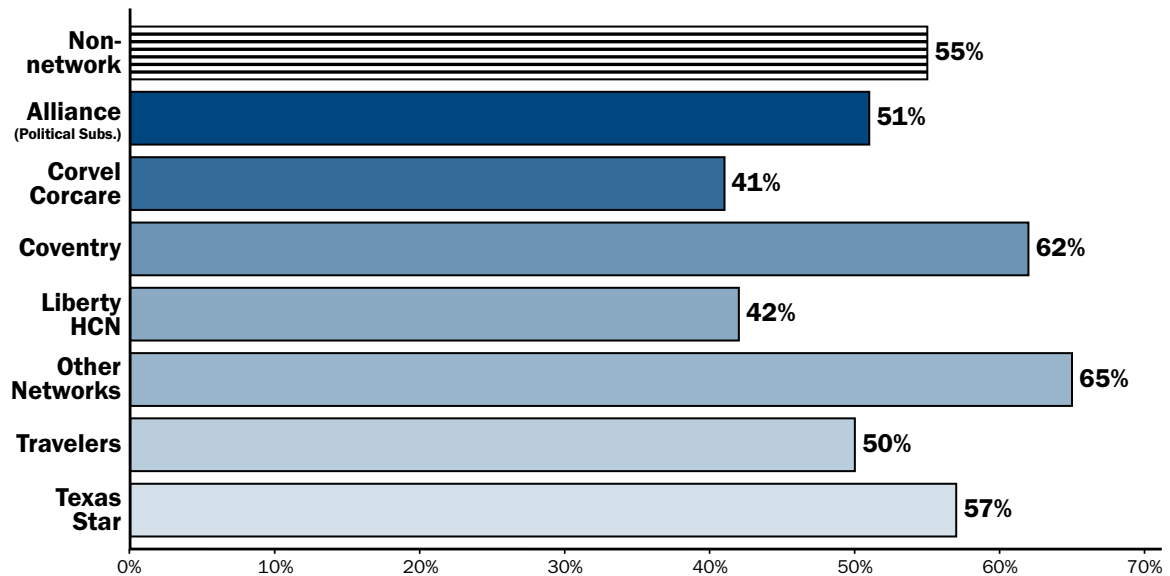
- Notes:**
1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
 2. (*) Asterisk indicates that the differences between the network and non-network are statistically significant.

Return-to-work

Average number of weeks injured workers reported being off work because of their work-related injury



Percentage of injured workers who had not returned to work and who reported that their doctor had released them to work with or without limitations

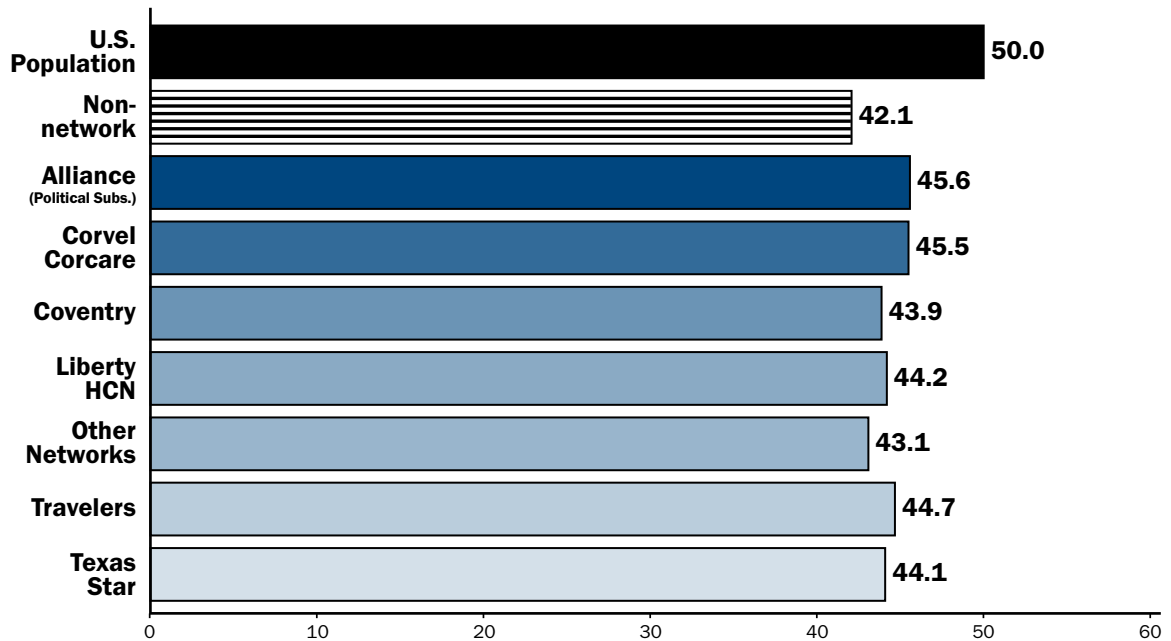


Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

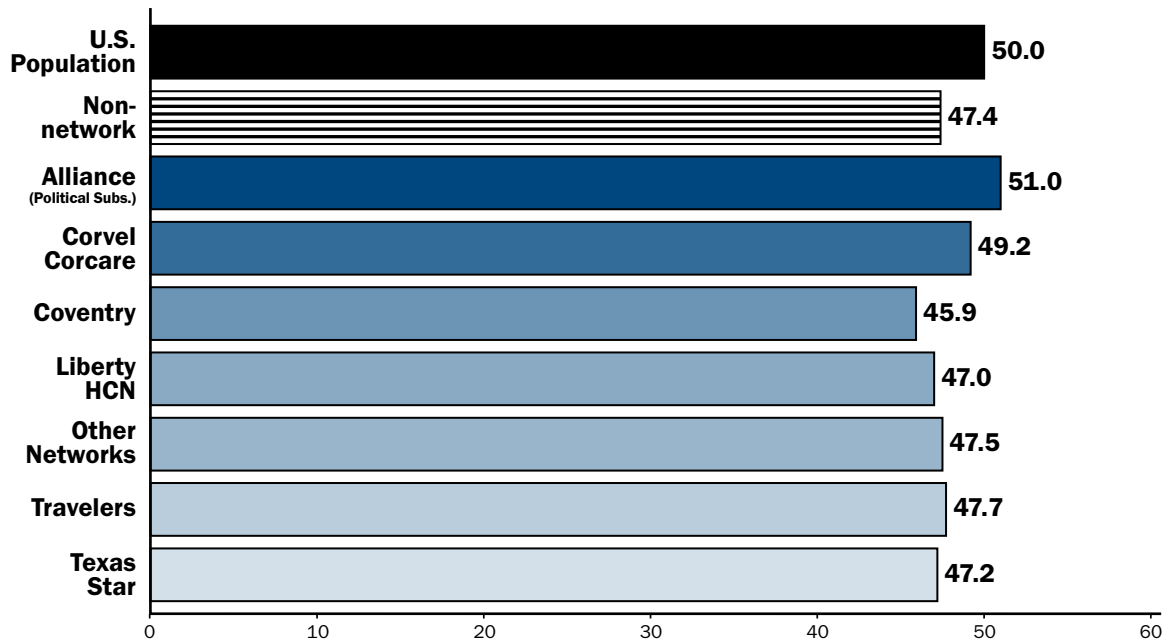
Note: The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.

Health outcomes

Average physical functioning scores for networks, non-network, and U.S. population



Average mental functioning scores for networks, non-network, and U.S. population



Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

Note: The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.

Appendix
Additional network and non-network
comparisons

Professional medical costs

Average Cost per Claim for Professional Services by Service Type, 6 Months Post Injury

Type of service	NON-NETWORK	ALLIANCE (Political Subs.)	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Evaluation & management	\$409	\$437*	\$617*	\$586*	\$501*	\$632*	\$469*
Physical Medicine Modalities	\$122	\$108*	\$134*	\$65*	\$107*	\$126	\$106*
Other Physical Medicine	\$865	\$869*	\$958*	\$1,100*	\$902*	\$974*	\$848*
DT-CT Scans	\$179	\$212*	\$242*	\$271*	\$227*	\$263*	\$207*
DT-MRI Scans	\$549	\$639*	\$615*	\$662*	\$614*	\$572	\$661*
DT-Nerve Conduction Studies	\$803	\$757	\$717	\$780	\$836	\$898	\$728*
Other Diagnostic Testing	\$80	\$83*	\$114*	\$95*	\$96*	\$110*	\$97*
Spinal Surgery	\$2,700	\$2,193	\$4,166*	\$1,907	\$3,666*	\$1,954	\$2,876
Other Surgery	\$766	\$982*	\$1,288*	\$916*	\$1,232*	\$1,059*	\$1,010*
Pathology & Lab Services	\$61	\$92*	\$68*	\$74*	\$77*	\$52*	\$63*
Other Services	\$291	\$230*	\$495*	\$437*	\$356*	\$257*	\$291*

Hospital costs

Average Cost per Claim for Professional Services by Service Type, 6 Months Post Injury

Type of service	NON-NETWORK	ALLIANCE (Political Subs.)	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
In-patient	\$20,402	\$35,921*	\$26,632*	\$30,586	\$27,134	\$16,314	\$32,226*
Out-patient	\$1,369	\$1,525*	\$2,657*	\$1,896*	\$2,231*	\$2,933*	\$2,008
Other Hospital Services	\$2,525	\$3,976	\$6,974*	\$0	\$1,326	\$5,816	\$4,301*

Pharmacy costs

Average Cost per Claim for Pharmacy Drug Types, 6 Months Post Injury

Type of service	NON-NETWORK	ALLIANCE (Political Subs.)	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Analgesics–Opioid	\$72	\$63*	\$78	\$83*	\$81*	\$64*	\$58*
Analgesics–Anti-inflammatory	\$93	\$108	\$104	\$124*	\$112*	\$97	\$61*
Musculoskeletal Therapy	\$116	\$119*	\$110*	\$160*	\$128	\$88*	\$82*
Mood stabilizers	\$189	\$188	\$184	\$202	\$200	\$249	\$137*
Other Therapeutic Groups	\$120	\$114*	\$169*	\$132*	\$127	\$136*	\$82*

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

- Notes:**
1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
 2. Medical cost and utilization results not reported for the Corvel CorCare network due to unresolved data issues.
 3. (*) Asterisk indicates that the differences between the network and non-network are statistically significant.

Professional medical utilization

Percent of Workers Receiving Professional Services by Service Type, 6 Months Post Injury

Type of service	NON-NETWORK	ALLIANCE (Political Subs.)	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Evaluation & management	94%	98%*	98%*	97%*	95%*	98%*	96%*
Physical Medicine Modalities	12%	14%*	20%*	16%*	17%*	17%*	11%*
Other Physical Medicine	26%	29%*	42%*	40%*	40%*	40%*	30%*
DT-CT Scans	2%	2%	4%*	3%	2%	2%	3%*
DT-MRI Scans	14%	18%*	21%*	24%*	18%*	16%	15%*
DT-Nerve Conduction Studies	3%	2%*	5%*	5%*	4%*	4%*	2%*
Other Diagnostic Testing	57%	60%*	67%*	69%*	59%*	62%*	60%*
Spinal Surgery	0.3%	0.2%	0.5%*	0.2%	0.5%*	0.2%	0.3%
Other Surgery	25%	19%*	32%*	32%*	28%*	29%*	29%*
Pathology & Lab Services	10%	7%*	13%*	7%*	13%*	23%*	10%*
Other Services	78%	90%*	91%*	92%*	87%*	94%*	82%*

Average Number of Professional Services Billed Per Claim that Received Services by Type of Professional Service, 6 Months Post Injury

Type of service	NON-NETWORK	ALLIANCE (Political Subs.)	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Evaluation & management	4.2	4.6	5.9*	6.2*	4.9	5.6*	4.8
Physical Medicine Modalities	11.3	9.7	11.8	8.4	9.6	10.8	9.8*
Other Physical Medicine	32.8	29.7	32.8	44.2*	31.9	37.4	30.3*
DT-CT Scans	1.6	1.7*	2.0	1.7	1.9	1.6	1.8
DT-MRI Scans	1.5	1.5	1.5	1.5	1.4	1.6	1.5
DT-Nerve Conduction Studies	15.0	15.1	11.9	15.2	14.0	15.6	15.5
Other Diagnostic Testing	2.4	2.4	2.8	2.7	2.5	2.6	2.9*
Spinal Surgery	5.0	2.8	6.9	3.2	6.0	3.3	6.2
Other Surgery	2.8	2.9	4.0	3.5	3.5	3.6	3.2
Pathology & Lab Services	5.1	8.5	4.9	6.5	5.5	3.6	5.5
Other Services	11.5	10.2	18.9*	19.7*	14.5	15.6	13.2

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

- Notes:**
1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
 2. Medical cost and utilization results not reported for the Corvel CorCare network due to unresolved data issues.
 3. (*) Asterisk indicates that the differences between the network and non-network are statistically significant.

Hospital utilization

Percent of Workers Receiving Hospital Services, 6 Months Post Injury

Type of service	NON-NETWORK	ALLIANCE (Political Subs.)	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
In-patient	5%	4%*	23%*	4%	7%*	9%*	9%*
Out-patient	88%	98%*	83%*	98%*	97%*	97%*	97%*
Other Hospital Services	10%	2%*	2%*	0%	0%*	1%*	2%*

Pharmacy utilization

Percent of Workers Receiving Pharmacy Drugs by Type, 6 Months Post Injury

Type of service	NON-NETWORK	ALLIANCE (Political Subs.)	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Analgesics–Opioid	51%	45%*	57%*	54%*	56%*	42%*	55%*
Analgesics–Anti-inflammatory	58%	63%*	64%*	72%*	66%*	55%	60%*
Musculoskeletal Therapy	30%	32%*	34%*	38%*	36%*	25%*	29%
Mood stabilizers	6%	5%*	9%*	8%*	8%*	6%	7%
Other Therapeutic Groups	47%	46%	47%	48%	49%*	39%*	49%*

Mean Number of Prescriptions, 6 Months Post Injury

Type of service	NON-NETWORK	ALLIANCE (Political Subs.)	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Analgesics–Opioid	2.3	2.0*	2.7	2.6	2.8*	2.2	2.9*
Analgesics–Anti-inflammatory	1.7	1.7*	1.9	2.0*	2.0*	1.8	2.0*
Musculoskeletal Therapy	1.9	1.7	2.0	2.1	2.2	1.7	2.2
Mood stabilizers	2.2	1.8	2.1	2.1	2.3	2.9	2.4
Other Therapeutic Groups	2.3	1.8	2.8	2.3	2.4	2.0	2.1

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

- Notes:**
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Pharmacy utilization

Mean Number of Drug Days, 6 Months Post Injury

Type of service	NON-NETWORK	ALLIANCE (Political Subs.)	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Analgesics–Opioid	22	17*	27	24	24	20	26
Analgesics–Anti-inflammatory	29	19	33	34	32	28	32
Musculoskeletal Therapy	28	15*	32	31	32	26	33
Mood stabilizers	52	26	49	50	52	59	55
Other Therapeutic Groups	27	19	37	29	29	25	25*

Satisfaction with care

Percent of Injured Workers Who Indicated That They Had Changed Treating Doctors

	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Percent of injured workers	23%	21%	30%*	26%	35%*	27%*	18%*	19%*

Most Frequent Reasons Why Injured Workers Said They Changed Treating Doctors

Percentage of injured workers indicating that they changed treating doctors because:	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Worker felt that the treatment was not helping	43%	53%	54%	48%	54%	52%	47%	41%
Worker was dissatisfied with the doctor's manner and caring	39%	44%	49%	52%	52%	49%	42%	34%
Worker saw an emergency or urgent care doctor for first visit	38%	38%	42%	30%	35%	41%	30%	39%
Worker saw a company doctor for first visit	31%	19%	25%	42%	48%	56%	42%	30%
Doctor released worker to go back to work and worker didn't feel ready to return	23%	22%	31%	37%	38%	38%	36%	20%
Doctor was no longer seeing workers' compensation patients	8%	5%	12%	2%	2%	9%	18%	9%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

- Notes:**
1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
 2. Medical cost and utilization results not reported for the Corvel CorCare network due to unresolved data issues.
 3. (*) Asterisk indicates that the differences between the network and non-network are statistically significant.

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...

How much of a problem?	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Not a problem	67%	73%*	53%*	64%	63%*	64%	72%	67%
A small problem	11%	10%	16%	14%	11%	11%	10%	12%
A big problem	22%	17%*	31%*	22%	26%*	25%	19%	21%*

What was the problem?	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
There was not enough treating doctors to select from	44%	55%	47%	43%	56%	34%	50%	50%
You could not find a treating doctor that would take workers' compensation patients	43%	42%	39%	39%	30%	29%	39%	46%
Travel to the doctor's office was too difficult to arrange	20%	38%	21%	31%	22%	26%	26%	31%
Your treating doctor was not willing to give the care you believed was necessary	50%	58%	50%	39%	65%	57%	57%	54%

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...

How much of a problem?	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Not a problem	68%	68%	49%*	53%*	58%*	66%	68%	68%
A small problem	11%	11%	20%*	18%*	13%	10%	7%*	10%*
A big problem	20%	21%	31%*	28%*	29%*	24%	24%	21%

What was the problem?	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Couldn't see a specialist soon enough	49%	43%	46%	51%	38%	48%	43%	53%
Couldn't find a specialist that would accept workers' compensation patients	31%	31%	42%	29%	30%	24%	42%	43%
Travel was too difficult to arrange	23%	27%	19%	39%	15%	21%	19%	20%
Treating doctor was not willing to send worker to a specialist	24%	28%	35%	34%	38%	36%	31%	25%
Insurance carrier didn't want the care provided	53%	43%	58%	46%	64%	62%	65%	57%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

Notes: 1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
2. (*) Asterisk indicates that the differences between the network and non-network are statistically significant.

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 the kind of care, tests, or treatment you believed was necessary? Was it...

How much of a problem?	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Not a problem	60%	62%	50%*	53%*	50%*	62%	67%*	64%*
A small problem	14%	13%	17%	20%*	15%	10%*	14%	13%*
A big problem	26%	25%	33%*	27%	35%*	27%	19%*	24%*

What was the problem?	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
There was difficulty in diagnosing your work-related injury or illness	38%	48%	51%	56%	42%	51%	48%	44%
Travel to get medical care was too difficult to arrange	18%	26%	21%	34%	12%	20%	13%	26%
Your treating doctor was not willing to give the care you believed was necessary	33%	37%	38%	30%	37%	41%	36%	46%
The insurance company or health care network did not want this care provided	60%	64%	64%	62%	69%	69%	68%	65%
You could not get care soon enough	56%	52%	63%	68%	54%	54%	54%	61%

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...

How much of a problem?	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Not a problem	52%	62%*	44%*	47%	43%*	57%*	62%*	59%*
A small problem	18%	17%	22%	22%	28%*	19%	12%*	15%*
A big problem	30%	21%*	34%	31%	29%	24%*	26%	27%*

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

Notes: 1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
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Access to care

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?

How often did you get care?	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Always	55%	54%	43%*	50%	45%*	51%*	58%	55%
Usually	17%	21%*	22%	15%	20%	20%*	14%	16%
Sometimes/Never	28%	24%	35%*	35%	35%*	29%	28%	29%

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?

How often did you get an appointment?	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Always	59%	58%	46%*	55%	57%	53%*	58%	58%
Usually	19%	25%*	25%	22%	20%	25%*	20%	17%*
Sometimes/Never	21%	17%	29%*	23%	23%	22%	22%	25%*

Since you were injured, how often were you taken to the exam room within 15 minutes of your appointment?

How often were you taken to the exam room within 15 minutes?	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Always	35%	33%	28%*	23%*	29%*	30%*	23%*	31%*
Usually	21%	26%*	17%	19%	17%*	19%	22%	21%
Sometimes/never	44%	42%	54%*	57%*	54%*	52%*	54%*	47%*

Individual Question Results for Composite “Agreement with Treating Doctor”

The treating doctor for your work-related injury or illness took your medical condition seriously.

Treating doctor took your medical condition seriously	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Strongly agree or agree	85%	87%	81%*	80%*	85%	83%	82%	83%
Not sure	2%	2%	2%	7%*	1%	2%	3%*	1%
Strongly disagree or disagree	13%	11%	16%	13%	13%	15%	15%	16%

The treating doctor for your work-related injury or illness gave you a thorough examination.

Treating doctor gave you a thorough examination	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Strongly agree or agree	83%	83%	75%*	79%	85%	79%	82%	77%*
Not sure	2%	1%	1%	1%	0%*	3%*	3%*	2%
Strongly disagree or disagree	16%	16%	24%*	20%*	14%	18%	15%	21%*

Source: Texas Department of Insurance, Workers’ Compensation Research and Evaluation Group, 2009.

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Access to care

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

Treating doctor explained your medical condition	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Strongly agree or agree	85%	87%	83%	79%*	85%	86%	86%	84%
Not sure	2%	2%	1%	5%*	2%	1%	2%	2%
Strongly disagree or disagree	13%	11%	16%	16%	13%	13%	12%	14%

The treating doctor for your work-related injury or illness was willing to answer any medical or treatment questions that you had.

Treating doctor answered any medical or treatment questions	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Strongly agree or agree	87%	89%	85%	87%	86%	81%*	87%	85%*
Not sure	2%	1%*	2%	1%	2%	1%	1%	1%*
Strongly disagree or disagree	11%	11%	13%	12%	13%	17%*	12%	14%*

The treating doctor for your work-related injury or illness talked to you about a mutually agreed upon return-to-work date.

Treating doctor talked to you about a return-to-work date	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Strongly agree or agree	74%	84%*	75%	70%	71%	70%	72%	73%
Not sure	4%	2%	2%	2%	2%*	4%	3%	3%*
Strongly disagree or disagree	22%	14%*	23%	28%	27%*	26%	25%	24%

The treating doctor for your work-related injury or illness overall provided you with very good medical care that met your needs.

Treating doctor provided you with very good medical care	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Strongly agree or agree	79%	82%	72%*	78%	73%*	74%	81%	79%
Not sure	2%	3%	1%	3%	3%	3%	2%	1%*
Strongly disagree or disagree	19%	15%*	27%*	18%	24%*	23%	16%	20%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

- Notes:** 1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
2. (*) Asterisk indicates that the differences between the network and non-network are statistically significant.

Access to care

Distribution of Payments for Professional Services by Provider Type, 6 Months Post Injury

Type of provider		Medical Doctors	Chiropractors	Physical/ Occupational Therapists	Doctor of Osteopathy	Other Providers
NON-NETWORK	TOTAL PAYMENTS	\$122,659,827	\$16,904,598	\$31,325,519	\$12,977,795	\$50,280,612
	%	52%	7%	13%	6%	21%
ALLIANCE (Political Subs.)	TOTAL PAYMENTS	\$4,278,382	\$159,866	\$1,407,252	\$630,100	\$855,348
	%	58%	2%	19%	9%	12%
COVENTRY	TOTAL PAYMENTS	\$1,822,489	\$66,035	\$571,518	\$222,418	\$515,494
	%	57%	2%	18%	7%	16%
LIBERTY HCN	TOTAL PAYMENTS	\$3,117,860	\$227,115	\$1,040,705	\$477,462	\$858,697
	%	54%	4%	18%	8%	15%
OTHER NETWORK	TOTAL PAYMENTS	\$4,104,959	\$355,305	\$1,533,941	\$589,157	\$1,218,794
	%	53%	5%	20%	8%	16%
TRAVELERS	TOTAL PAYMENTS	\$1,568,009	\$100,833	\$608,101	\$265,329	\$304,039
	%	55%	4%	21%	9%	11%
TEXAS STAR	TOTAL PAYMENTS	\$17,022,357	\$567,457	\$5,361,284	\$2,140,923	\$4,283,292
	%	58%	2%	18%	7%	15%

Distribution of Injured Workers Receiving Professional Services by Provider Type, 6 Months Post Injury

Type of provider		Medical Doctors	Chiropractors	Physical/ Occupational Therapists	Doctor of Osteopathy	Other Providers
NON-NETWORK	Number of Injured Workers	167,117	10,543	39,608	33,624	62,422
	%	86%	5%	20%	17%	32%
ALLIANCE (Political Subs.)	Number of Injured Workers	5,185	189	1,416	1,495	1,361
	%	91%	3%	25%	26%	24%
COVENTRY	Number of Injured Workers	1,366	62	585	404	516
	%	93%	4%	40%	28%	35%
LIBERTY	Number of Injured Workers	2,645	202	1,015	917	1,313
	%	92%	7%	35%	32%	46%
OTHER NETWORK	Number of Injured Workers	4,135	217	1,745	1,159	1,400
	%	92%	5%	39%	26%	31%
TRAVELERS	Number of Injured Workers	1,472	67	628	448	448
	%	93%	4%	39%	28%	28%
TEXAS STAR	Number of Injured Workers	18,962	726	5,787	4,578	5,827
	%	93%	4%	29%	23%	29%

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

- Notes:**
1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
 2. Medical cost and utilization results not reported for the Corvel CorCare network due to unresolved data issues.

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	NON-NETWORK	ALLIANCE (Political Subs.)	CORVEL CORCARE	COVENTRY	LIBERTY HCN	OTHER NETWORKS	TRAVELERS	TEXAS STAR
Worker not physically able to perform job duties	56%	52%	70%*	47%*	58%	49%	61%	55%
Worker was laid off	29%	31%	18%	35%	36%	42%*	38%	34%*
Worker was fired	20%	26%*	13%	22%	29%*	32%*	39%*	21%
Retired	11%	8%	17%	3%*	12%	5%*	9%	8%*

Source: Texas Department of Insurance, Workers' Compensation Research and Evaluation Group, 2009.

Notes: 1. The figures presented above are adjusted for injury type and type of claim differences that may exist between the groups.
2. (*) Asterisk indicates that the differences between the network and non-network are statistically significant.

