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WORKERS' COMPENSATION ATTORNEYS
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BENEFIT RATES CHART

	1/01/12 - 12/31/12	1/01/13 - 12/31/13	1/01/14 - 12/31/14	1/01/15 - 12/31/15	1/01/16 - 12/31/16	1/01/17 - 12/31/17	1/01/18 - 12/31/18	1/01/19 - 12/31/19	1/01/20 - 12/31/20
Minimum Weekly Temporary Disability*	\$151.57	\$160	\$161.19	\$165.49	\$169.26	\$175.88	\$182.29	\$187.71	\$194.91
Maximum Weekly Temporary Disability*+	\$1010.50	\$1066.72	\$1074.64	\$1103.29	\$1128.43	\$1172.57	\$1215.27	\$1,251.38	\$1,299.43
Minimum Weekly Permanent Partial Disability++	\$130	\$160	\$160	\$160	\$160	\$160	\$160	\$160	\$160
Maximum Weekly Permanent Partial Disability++	1-69% = \$230 70-99% = \$270	1-54% = \$230 55-69% = \$270 70-99% = \$290	\$290	\$290	\$290	\$290	\$290	\$290	\$290
Minimum Weekly Permanent Total Disability++	\$151.57	\$160	\$161.19	\$165.49	\$169.26	\$175.88	\$182.29	\$187.71	\$194.91
Maximum Weekly Permanent Total Disability++	\$1010.50	\$1066.72	\$1074.64	\$1103.29	\$1128.43	\$1172.57	\$1215.27	\$1,251.38	\$1,299.43

*For injuries occurring on or after 1/01/05, payments commencing on 1/01/07 (and continuing each January 1 thereafter) shall be increased annually by an amount equal to the percentage increase in the State Average Weekly Wage per the U.S. Department of Labor. See *Labor Code* §4453(a)(10).

+For injuries occurring on or after 1/01/06, the maximum weekly temporary disability rate shall be the specified amount or two-thirds of 1.5 times the State Average Weekly Wage, whichever is greater. See *Labor Code* §4453(a)(10).

++For injuries occurring on or after 1/01/03, an employee who becomes entitled to receive a life pension or total permanent disability indemnity shall have that payment increased annually commencing on 1/01/04 and each January 1 thereafter, by an amount equal to the percentage increase in the State Average Weekly Wage as compared to the prior year. See *Labor Code* §4659(c).

LIFE PENSION MAXIMUM WEEKLY EARNINGS

Date of Injury	Maximum Average Weekly Earnings
7/01/94 – 6/30/95	\$157.69
7/01/95 – 6/30/96	\$207.69
7/01/96 – 12/31/02	\$257.69
1/01/03 – 12/31/05	\$257.69++
On or After 1/01/06	\$515.38++

++For injuries occurring on or after 1/01/03, an employee who becomes entitled to receive a life pension or total permanent disability indemnity shall have that payment increased annually commencing on 1/01/04 and each January 1 thereafter, by an amount equal to the percentage increase in the State Average Weekly Wage as compared to the prior year. See *Labor Code* §4659(c).

EVERY CASE IS DEFENSIBLE®

THOUSAND OAKS (818) 206-9222	SAN GABRIEL VALLEY (626) 316-5720	SAN FERNANDO VALLEY (818) 715-0018	ORANGE COUNTY (714) 558-8892	INLAND EMPIRE (951) 684-6870	LOS ANGELES COUNTY (562) 200-7400	SAN JOAQUIN VALLEY (559) 244-0959	SAN DIEGO COUNTY (619) 491-0277	SACRAMENTO COUNTY (916) 920-1100	BAY AREA (510) 452-9556
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DEATH BENEFITS

	7/01/94-6/30/96	7/01/96-12/31/03	1/01/04-12/31/05	1/01/06-12/31/12	1/01/13 ►
Burial Expense	\$5,000 maximum	\$5,000 maximum	\$5,000 maximum	\$5,000 maximum	\$10,000 maximum
One Total Dependent and No Partial Dependents	\$115,000.00	\$125,000.00	\$125,000.00	\$250,000.00	\$250,000.00
Two or More Total Dependents	\$135,000.00	\$145,000.00	\$145,000.00	\$290,000.00	\$290,000.00
Three or More Total Dependents	\$150,000.00	\$160,000.00	\$160,000.00	\$320,000.00	\$320,000.00
One Total Plus One or More Partial Dependents	\$115,000.00 plus 4x the annual amount spent to support any partial dependents not to exceed \$125,000.00	\$125,000.00 plus 4x the annual amount spent to support any partial dependents not to exceed \$145,000.00	\$125,000.00 plus 4x the annual amount spent to support any partial dependents not to exceed \$145,000.00	\$250,000.00 plus 4x the annual amount spent to support any partial dependents not to exceed \$290,000.00	\$250,000.00 plus 4x the annual amount spent to support any partial dependents not to exceed \$290,000.00
One or More Partial Dependents	4x the annual amount spent to support the partial dependents not to exceed \$115,000.00	4x the annual amount spent to support the partial dependents not to exceed \$125,000.00	4x the annual amount spent to support the partial dependents not to exceed \$125,000.00	8x the annual amount spent to support the partial dependents not to exceed \$250,000.00	8x the annual amount spent to support the partial dependents not to exceed \$250,000.00
No Total or Partial Dependents	Department of Industrial Relations Labor Code §4706.5	Department of Industrial Relations Labor Code §4706.5	\$250,000.00 paid to estate of the decedent#	\$250,000.00 paid to estate of the decedent#	\$250,000.00 paid to estate of the decedent#

Unconstitutional per *Six Flags, Inc. v. WCAB (Rackhamroon)* (2006) 145 Cal. App. 4th 91 [51 Cal. Rptr. 3d 377, 71 CCC 1759].

NOTE: Death benefits are paid in the same manner and at the same rate as temporary disability, unless otherwise ordered, with a modified minimum of \$224.00 per week. See Labor Code §4702(b) and §4703.5.

NOTE: For dates of injury after 1/01/90, a surviving spouse who earned \$30,000.00 or less in the twelve months immediately preceding decedent's death is conclusively presumed to be a total dependent.

NOTE: For dates of injury after 1/01/90, if there are one or more total dependent minors, payment continues until the youngest child reaches eighteen years of age. For dates of injury after 1/01/03, where the totally dependent minor is physically or mentally incapacitated from earning, payment continues until the death of the child.

STATEWIDE AVERAGE WEEKLY WAGE (SAWW)

Year	SAWW	SAWW increase
2020	\$1,325.00	3.84013%
2019	\$1,242.78	2.971%
2018	\$1206.92	3.642%
2017	\$1,164.51	3.9119%
2016	\$1,120.67	2.2789%
2015	\$1,095.70	2.6666%
2014	\$1,067.25	0.742887%
2013	\$1,059.38	5.56325%
2012	\$1,003.55	2.41351%
2011	\$979.90	0.00000%

Permanent total disability benefits (based on permanent disability of 100%) are paid for life at the temporary disability rate. For injuries on or after 1/1/2003, the benefit rate will be adjusted each year based on any increase in the state average weekly wage (SAWW).

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