

# WORKERS' COMPENSATION ATTORNEYS SERVING CALIFORNIA

ADMINISTRATIVE OFFICE (818) 206-9222 WWW.FLOYDSKERENLAW.COM

# BENEFIT RATES CHART

	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	1/01/21 - 12/31/21	1/01/22 - 12/31/22
Minimum Weekly Temporary Disability*	\$160	\$161.19	\$165.49	\$169.26	\$175.88	\$182.29	\$187.71	\$194.91	\$203.44	\$230.95
Maximum Weekly Temporary Disability*+	\$1,066.72	\$1,074.64	\$1,103.29	\$1,128.43	\$1,172.57	\$1,215.27	\$1,251.38	\$1,299.43	\$1,356.31	\$1,539.71
Minimum Weekly Permanent Partial Disability++	\$160	\$160	\$160	\$160	\$160	\$160	\$160	\$160	\$160	\$160
Maximum Weekly Permanent Partial Disability++	1-54% = \$230 55-69% = \$270 70-99% = \$290	\$290	\$290	\$290	\$290	\$290	\$290	\$290	\$290	\$290
Minimum Weekly Permanent Total Disability++	\$160	\$161.19	\$165.49	\$169.26	\$175.88	\$182.29	\$187.71	\$194.91	\$203.44	\$230.95
Maximum Weekly Permanent Total Disability++	\$1,066.72	\$1,074.64	\$1,103.29	\$1,128.43	\$1,172.57	\$1,215.27	\$1,251.38	\$1,299.43	\$1,356.31	\$1,539.71

<sup>\*</sup>For injuries occurring on or after 1/01/2005, payments commencing on 1/01/2007 (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).

# 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++

<sup>++</sup>For injuries occurring on or after 1/01/2003, an employee who becomes entitled to receive a life pension or total permanent disability indemnity shall have that payment increased annually commencing on 1/01/2004 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	WESTLAKE	ORANGE	RIVERSIDE	LONG BEACH	FRESNO	SAN DIEGO	SACRAMENTO	BAY AREA	PASADENA	ı
OAKS OFFICE	OFFICE	OFFICE	OFFICE	OFFICE	OFFICE	OFFICE	OFFICE	OFFICE	OFFICE	ı
(818) 206-9222	(818) 715-0018	(714) 558-8892	(951) 684-6870	(562) 200-7400	(559) 244-0959	(619) 491-0277	(916) 920-1100	(510) 452-9556	(626) 316-5720	ı

<sup>+</sup>For injuries occurring on or after 1/01/2006, 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).

<sup>++</sup>For injuries occurring on or after 1/01/2003, an employee who becomes entitled to receive a life pension or total permanent disability indemnity shall have that payment increased annually commencing on 1/01/2004 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).

# **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	\$115,000.00	\$125,000.00	\$125,000.00	\$250,000.00	\$250,000.00	
Dependents						
Two or More						
<b>Total Dependents</b>	\$135,000.00	\$145,000.00	\$145,000.00	\$290,000.00	\$290,000.00	
Three or More						
<b>Total Dependents</b>	\$150,000.00	\$160,000.00	\$160,000.00	\$320,000.00	\$320,000.00	
One Total Plus	\$115,000.00 plus 4x	\$125,000.00 plus 4x	\$125,000.00 plus 4x	\$250,000.00 plus 4x	\$250,000.00 plus 4x	
One or More	the annual amount					
Partial	spent to support any					
<b>Dependents</b> partial dependen		partial dependents	partial dependents	partial dependents	partial dependents	
	not to exceed					
	\$125,000.00	\$145,000.00	\$145,000.00	\$290,000.00	\$290,000.00	
One or More	4x the annual	4x the annual	4x the annual	8x the annual	8x the annual	
Partial	amount spent to					
Dependents	support the partial					
	dependents not to					
	exceed \$115,000.00	exceed \$125,000.00	exceed \$125,000.00	exceed \$250,000.00	exceed \$250,000.00	
No Total or	Department of					
Partial	Industrial Relations					
Dependents	Labor Code §4706.5					

<u>NOTE</u>: 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.

<u>NOTE</u>: For dates of injury after 1/01/1990, 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 1/01/1990, 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 1/01/2003, 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
2022	\$1,570.00	13.5213%
2021	\$1,383.00	4.3774%
2020	\$1,325.00	3.84013%
2019	\$1,242.78	2.971%
2018	\$1,206.92	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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