



Indemnity Rates
Benefits Schedules
Mileage Rates
& More
2021

Temporary Disability Rates – See SOC § 8.3

DOI (on or after)	Weekly Earnings	Temporary Disability Rate	DOI (on or after)	Weekly Earnings	Temporary Disability Rate
01/01/05 – 12/31/06	Below \$189 \$189-\$1,260 Above \$1260	\$126 2/3 Weekly Earnings \$840	01/01/14	Below \$241.78 \$241.78 – \$1,611.96 Above \$1,611.96	\$161.19 2/3 Weekly Earnings \$1,074.64
01/01/07	Below \$198.37 \$198.37-\$1,322.49 Above \$1,322.49	\$132.25 2/3 Weekly Earnings \$881.66	01/01/15	Below \$248.24 \$248.24 – \$1,654.94 Above \$1,654.94	\$165.49 2/3 Weekly Earnings \$1,103.29
01/01/08	Below \$206.18 \$206.18- \$1,374.50 Above \$1,374.49	\$137.45 2/3 Weekly Earnings \$916.33	01/01/16	Below \$253.89 \$253.89 - \$1,692.64 Above \$1,692.64	\$169.26 2/3 Weekly Earnings \$1,128.43
01/01/09	Below \$215.55 \$215.55 - \$1,437.02 Above \$1,437.02	\$143.70 2/3 Weekly Earnings \$958.01	01/01/17	Below \$263.82 \$263.82 - \$1,758.85 Above \$1,758.85	\$175.88 2/3 Weekly Earnings \$1,172.57
01/01/10 – 12/31/11	Below \$222 \$222 - \$1,480.04 Above \$1,480.04	\$148.00 2/3 Weekly Earnings \$986.69	01/01/18	Below \$273.44 \$273.44 - \$1,822.92 Above \$1,822.92	\$182.29 2/3 Weekly Earnings \$1,215.28
01/01/12	Below \$227.36 \$227.36 - \$1,515.75 Above \$1,515.75	\$151.57 2/3 Weekly Earnings \$1,010.50	01/01/19	Below \$281.71 \$281.71 – \$1,877.07 Above \$1,877.07	\$187.71 2/3 Weekly Earnings \$1,251.38
01/01/13	Below \$240 \$240 - \$1,600.08 Above \$1,600.08	\$160 2/3 Weekly Earnings \$1,066.72	01/01/20	Below \$292.36 \$292.36 – \$1,949.15 Above \$1,949.15	\$194.41 2/3 Weekly Earnings \$1,299.43
DOI (on or after)		Weekly Earnings		Temporary Disability Rate	
01/01/2021		Below \$305.16 \$305.16 - \$2,034.47 Above \$2,034.47		\$203.44 2/3 Weekly Earnings \$1,356.31	

SJDB Vouchers – See SOC § 11.3 and § 11.4

% of PD	DOI prior to 1/1/13	DOI 1/1/13 to Present	
Less than 15%	\$4,000	\$6,000	For injuries prior to 1/1/13, the employer must offer modified or alternative work within 30 days of the termination of TD to avoid liability for the voucher. For injuries on or after 1/1/13, the employer must offer work no later than 60 days after receipt of the physician's return-to-work & voucher report.
15% - 25%	\$6,000	\$6,000	
26% - 49%	\$8,000	\$6,000	
50% - 99%	\$10,000	\$6,000	

Statutory Limits on Permanent Partial Disability – See SOC § 10.61

Date of Injury	Percentage of Disability	Minimum PPD Rate	Maximum PPD Rate	Date of Injury	Percentage of Disability	Minimum PPD Rate	Maximum PPD Rate
1983	1.0 – 99.75	\$50	\$130	2003	1.0 – 69.0	\$100	\$185
1984 – 1990	1.0 – 99.75	\$70	\$140		70.0 – 99.0	\$100	\$230
1991 – 6/30-94	1.0 – 24.75	\$70	\$140	2004	1.0 – 69.0	\$105	\$200
	25.0 – 99.75	\$70	\$148		70.0 – 99.0	\$105	\$250
7/1/94 – 6/30-95	1.0 – 14.75	\$70	\$140	2005	1.0 – 69.0	\$105	\$220
	15.0 – 24.75	\$70	\$148		70.0 – 99.0	\$105	\$270
	25.0 – 69.75	\$70	\$158	1/1/06 – 12/31/12	1.0 – 69.0	\$130	\$230
	70.0 – 99.75	\$70	\$168		70.0 – 99.0	\$130	\$270
7/1/95 – 6/60/96	1.0 – 14.75	\$70	\$140	2013	1.0 – 54.0	\$160	\$230
	15.0 – 24.75	\$70	\$154		55.0 – 69.0	\$160	\$270
	25.0 – 69.75	\$70	\$164		70.0 – 99.0	\$160	\$290
	70.0 – 99.75	\$70	\$198	After 1/1/14	1.0 -99.0	\$160	\$290
7/1/96 – 2002	1.0 – 14.75	\$70	\$140	<i>Note that these are the statutory limits, the <u>correct rate</u> of PPD for a particular employee will depend on their earnings (2/3 of average weekly wage) and the percentage of disability sustained.</i>			
	15.0 – 24.75	\$70	\$160				
	25.0 – 69.75	\$70	\$170				
	70.0 – 99.75	\$70	\$230				

Statutory Limits on Permanent Total Disability – See SOC § 10.61

Date of Injury	Minimum PTD Rate	Maximum PTD Rate	Date of Injury	Minimum PTD Rate	Maximum PTD Rate
1983	\$84	\$196	2008	\$137.45	\$916.33
1984-1989	\$112	\$224	2009	\$143.70	\$958.01
1990	\$112	\$266	2010	\$148	\$986.69
1991 – 6/30/94	\$112	\$336	2011	\$148	\$986.69
7/1/94 – 6/30/95	\$112	\$406	2012	\$151.57	\$1010.50
7/1/95 – 6/30/96	\$112	\$448	2013	\$160	\$1066.72
7/1/96 – 2002	\$112	\$490	2014	\$161.19	\$1074.64
2003	\$126	\$602	2015	\$165.49	\$1103.29
2004	\$126	\$728	2016	\$169.26	\$1128.43
2005	\$126	\$840	2017	\$175.88	\$1172.57
2006	\$126	\$840	2018	\$182.29	\$1215.27
2007	\$132.25	\$881.66	2019	\$187.71	\$1251.38

**Statewide Average Weekly Wage
(SAWW)
See SOC § 8.6 – 8.10**

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

Year	SAWW	SAWW Increase
2005	\$806.11	1.97470%
2006	\$838.42	4.00814%
2007	\$880.00	4.95933%
2008	\$914.60	3.93182%
2009	\$956.20	4.54844%
2010	\$984.83	2.99410%
2011	\$979.90	0.00000%
2012	\$1,003.55	2.41351%
2013	\$1,059.38	5.56325%
2014	\$1,067.25	.742887%
2015	\$1,095.70	2.66666%
2016	\$1,120.67	2.2789%
2017	\$1,164.51	3.9119%
2018	\$1,206.92	3.6420%
2019	\$1,242.78	2.9710%
2020	\$1,325.00	3.84013%
2021	\$1,383.00	4.377%

Mileage Rates

An injured worker is entitled to reimbursement of reasonable expenses of transportation for travel to get treatment for a work injury. Reasonable expenses include mileage, parking, and tolls. Mileage calculations for travel are as follows:

Date	Cents Per Mile
7/1/2006 - 1/1/2007	\$.445
1/1/2007 - 12/31/2007	\$.485
1/1/2008 - 6/30/2008	\$.505
7/1/2008 - 12/31/2008	\$.585
1/1/2009 - 12/31/2009	\$.550
1/1/2010 - 12/31/2010	\$.500
1/1/2011 - 7/1/2011	\$.510
On or after 7/1/2011	\$.555
On or after 1/1/2013	\$.565
On or after 1/1/2014	\$.560
On or after 1/1/2015	\$.575
On or after 1/1/2016	\$.540
On or after 1/1/2017	\$.535
On or after 1/1/2018	\$.545
On or after 1/1/2019	\$.580
On or after 1/1/2020	\$.575
On or after 1/1/2021	\$.560

Burial Expenses – See SOC § 12.17

The employer is liable for the reasonable burial expenses of an employee who has died as a result of an industrial injury. The maximum burial expenses are as follows:

Date	Burial Expenses
<i>Before Jan. 1, 1991*</i>	\$2,000
<i>On or After Jan. 1, 1991</i>	\$5,000
<i>On or After Jan. 1, 2013</i>	\$10,000

**For a brief, three-year period, from Jan. 1, 1986, to Jan. 1, 1989, the death benefit for public employees was limited to \$1,500, and to \$2,000 for everyone else.*

Death Benefits – See SOC § 12.18

Death benefits are payments to a spouse, children, or other dependents if an employee dies from a work-related injury or illness. The amount of the death benefit depends on the number of total and/or partial dependents. In the case of one or more totally dependent minors, after payment of amounts specified below, death benefits will continue until the youngest minor turns 18 years old (disabled minors receive benefits for life). Death benefits are paid at the total temporary disability rate, but not less than \$244.00 per week. The period within which to commence proceedings for the collection of death benefits vary depending on the circumstances, but cannot be commenced more than 240 weeks from the Date of Injury.

Dates	1 total dependent	2 total dependents	3 or more total dependents	1 total plus 1 or more partial dependents	1 or more partial dependents
<i>Before Jan. 1, 1991</i>	\$70,000	\$95,000	\$150,000	\$70,000, plus 4x annual support for partial dependents, not to exceed \$95,000	4x annual support for partial dependents, not to exceed \$70,000
<i>Jan. 1, 1991 to June 30, 1994</i>	\$95,000	\$115,000	\$150,000	\$95,000 plus 4x annual support for partial dependents, not to exceed \$115,000.	4x annual support for partial dependents, not to exceed \$95,000
<i>July 1, 1994 to June 30, 1996</i>	\$115,000	\$135,000	\$150,000	\$115,00 plus 4x annual support for partial dependents, not to exceed \$125,00	4x annual support for partial dependents, not to exceed \$115,000
<i>July 1, 1996 to Dec. 31, 2005</i>	\$125,000	\$145,000	\$160,000	\$125,000 plus 4x annual support for partial dependents, not to exceed \$145,000	4x annual support for partial dependents, not to exceed \$125,000
<i>On or After Jan. 1, 2006</i>	\$250,000	\$290,000	\$320,000	\$250,000 plus 4x annual support for partial dependents, not to exceed \$290,000	8x annual support of partial dependents, not to exceed \$250,000

**Note as discussed in SOC § 12.25. If there are no dependents, then payment must be made to the DIR in the amount to be paid is equal to the total dependency death benefit that would be payable to a surviving spouse with no dependent minor children. For injuries after 1/1/06, this is \$250,000.*

Life Pension – See SOC § 10.61

PD %	Date of Injury (on or after)				
	7/1/94	7/1/95	7/1/96	1/1/03	1/1/06
70	\$23.65	\$31.15	\$38.65	\$38.65	\$77.31
71	\$26.02	\$34.27	\$42.52	\$42.52	\$85.04
72	\$28.38	\$37.38	\$46.38	\$46.38	\$92.77
73	\$30.75	\$40.50	\$50.25	\$50.25	\$100.50
74	\$33.11	\$43.61	\$54.11	\$54.11	\$108.23
75	\$35.48	\$46.73	\$57.98	\$57.98	\$115.96
76	\$37.85	\$49.85	\$61.85	\$61.85	\$123.69
77	\$40.21	\$52.96	\$65.71	\$65.71	\$131.42
78	\$42.58	\$56.08	\$69.58	\$69.58	\$139.15
79	\$44.94	\$59.19	\$73.44	\$73.44	\$146.88
80	\$47.31	\$62.31	\$77.31	\$77.31	\$154.61
81	\$49.67	\$65.42	\$81.17	\$81.17	\$162.34
82	\$52.04	\$68.54	\$85.04	\$85.04	\$170.08
83	\$54.40	\$71.65	\$88.90	\$88.90	\$177.81
84	\$56.77	\$74.77	\$92.77	\$92.77	\$185.54
85	\$59.13	\$77.88	\$96.63	\$96.63	\$193.27
86	\$61.50	\$81.00	\$100.50	\$100.50	\$201.00
87	\$63.86	\$84.11	\$104.36	\$104.36	\$208.73
88	\$66.23	\$87.23	\$108.23	\$108.23	\$216.46
89	\$68.60	\$90.35	\$112.10	\$112.10	\$224.19
90	\$70.96	\$93.46	\$115.96	\$115.96	\$231.92
91	\$73.33	\$96.58	\$119.83	\$119.83	\$239.65
92	\$75.69	\$99.69	\$123.69	\$123.69	\$247.38
93	\$78.06	\$102.81	\$127.56	\$127.56	\$255.11
94	\$80.42	\$105.92	\$131.42	\$131.42	\$262.84
95	\$82.79	\$109.04	\$135.29	\$135.59	\$270.57
96	\$85.15	\$112.15	\$139.15	\$139.15	\$278.31
97	\$87.52	\$115.27	\$143.02	\$143.02	\$286.04
98	\$89.88	\$118.38	\$146.88	\$146.88	\$293.77
99	\$92.25	\$121.50	\$150.75	\$150.75	\$301.50

Life Pension Earnings Rate – See SOC § 10.61

An employee with a permanent disability rating of 70% or more is entitled to a life pension of 1.5% of his or her actual weekly earnings for each 1% that the PD rating exceeds 60%. LC §4659.

Formula = (PD minus 60%) x (.015) x Average Weekly Earnings

DOI	Weekly Earnings Max
On or before 6/30/94	\$107.69
7/1/94-6/30-95	\$157.69
7/1/95-6/30/96	\$207.69
7/1/96 – 12/31/05	\$257.69*
On or after 1/1/06	\$515.38

*for injuries on or after 1/1/03, beginning on 1/1/04, all life pension awards are subject to a cost of living increase based on SAWW.

Life Expectancy - National Vital Statistics Report, Vol. 65, No. 8, November 28, 2016

Male				Female			
Age	Life Expectancy	Age	Life Expectancy	Age	Life Expectancy	Age	Life Expectancy
16	61.1	46	33.2	16	65.8	46	36.9
17	60.2	47	32.3	17	64.8	47	36.0
18	59.2	48	31.5	18	63.8	48	35.1
19	58.2	49	30.6	19	62.8	49	34.2
20	57.3	50	29.7	20	61.9	50	33.3
21	56.4	51	28.9	21	60.9	51	32.4
22	55.4	52	28.1	22	59.9	52	31.5
23	54.5	53	27.2	23	58.9	53	30.6
24	53.6	54	26.4	24	58.0	54	29.7
25	52.6	55	25.6	25	57.0	55	28.9
26	51.7	56	24.8	26	56.0	56	28.0
27	50.8	57	24.0	27	55.0	57	27.1
28	49.8	58	23.2	28	54.1	58	26.3
29	48.9	59	22.4	29	53.1	59	25.4
30	48.0	60	21.7	30	52.1	60	24.6
31	47.0	61	20.9	31	51.2	61	23.7
32	46.1	62	20.1	32	50.2	62	22.9
33	45.2	63	19.4	33	49.2	63	22.1
34	44.3	64	18.7	34	48.3	64	21.3
35	43.3	65	17.9	35	47.3	65	20.5
36	42.4	66	17.2	36	46.4	66	19.7
37	41.5	67	16.5	37	45.4	67	18.9
38	40.5	68	15.8	38	44.5	68	18.1
39	39.6	69	15.1	39	43.5	69	17.3
40	38.7	70	14.4	40	42.6	70	16.5
41	37.8	71	13.7	41	41.6	71	15.8
42	36.9	72	13.0	42	40.7	72	15.1
43	35.9	73	12.4	43	39.7	73	14.3
44	35.0	74	11.8	44	38.8	74	13.6
45	34.1	75	11.2	45	37.9	75	12.9

Official Medical Fee Schedule (OMFS)

The Official Medical Fee Schedule (OMFS) is promulgated by the DWC administrative director under Labor Code § 5307.1 and can be found in sections 9789.10 et seq. of Title 8, California Code of Regulations. It is used for payment of medical services required to treat work related injuries and illnesses.

Section 9789.111 provides the effective dates of fee schedule provisions. In addition, adjustments to the fee schedule, in the form of Administrative Director Orders, are posted on the fee schedule web pages to conform to relevant Medicare and Medi-Cal changes pursuant to Labor Code §5307.1 (g) and Title 8, California Code of Regulations, section 9789.110.

The fee schedules can be found at the following website:

<https://www.dir.ca.gov/dwc/OMFS9904.htm#1>



Workers' Compensation – Employment Law – General Liability

Subrogation – Estates & Trusts

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