



LINDNER & MARSACK, S.C.

411 E. Wisconsin Avenue, Suite 1800
 Milwaukee, WI 53202
 (414) 273-3910
 www.lindner-marsack.com

Year	Max Average Weekly Wage	Weekly TTD/PTD	MAXIMUM WEEKLY PPD	MAXIMUM MONTHLY PPD
2020	\$1,576.50	\$1,051	\$362	\$1,568.67
2019	\$1,524.00	\$1,016	\$362	\$1,568.67
2018	\$1,491.00	\$994	\$362	\$1,568.67
2017	\$1,441.50	\$961	\$362	\$1,568.67
2016 (3/2/16-12/31/16)	\$1,404.00	\$936	\$342	\$1,482.00
2016 (1/1/16-3/1/16)	\$1,404.00	\$936	\$322	\$1,395.33
2015	\$1,366.50	\$911	\$322	\$1,395.33
2014	\$1,338.00	\$892	\$322	\$1,395.33
2013	\$1,318.50	\$879	\$322	\$1,395.33
2012 (4/17/12-12/31/12)	\$1,281.00	\$854	\$312	\$1,352.00
2012 (1/1/12-4/16/12)	\$1,281.00	\$854	\$302	\$1,308.67
2011	\$1,230.00	\$820	\$302	\$1,308.67
2010 (5/1/10 – 12/31/10)	\$1,222.50	\$815	\$292	\$1,265.33
2010 (1/1/10 – 4/30/10)	\$1,222.50	\$815	\$282	\$1,222.00
2009	\$1,212.00	\$808	\$282	\$1,222.00

SCHEDULED INJURIES – NUMBER OF WEEKS FOR 100% LOSS
 (§ 102.52, Wis. Stats.)

Arm	Finger – Middle and metacarpal bone..... 45	Palm – thumb remaining325
at shoulder.....500	at proximal joint.....35	Thumb
at elbow.....450	at second joint.....20	at metacarpal one.....160
Deafness – Occupational	at distal joint..... 8	at proximal joint.....120
Bilateral.....216	Finger – Ring and metacarpal bone.....26	at distal joint..... 50
Unilateral..... 36	at proximal joint.....20	Toe – Great w/metatarsal bone.....83 1/3
Deafness – Traumatic	at second joint.....15	at proximal joint..... 25
Bilateral.....330	at distal joint..... 6	at distal joint.....12
Unilateral..... 55	Finger – Little and metacarpal bone.....28	Toe – Second w/metatarsal bone.....25
Eye	at proximal joint.....22	at proximal joint..... 8
Enucleation or evisceration.....275	at second joint.....16	at second joint..... 6
Total impairment.....250	at distal joint..... 6	at distal joint..... 4
Fingers, all on one hand	Foot at ankle.....250	Toe – 3 rd , 4 th or little w/metatarsal bone.....20
at proximal joints.....225	Hand.....400	at proximal joint..... 6
Finger – Index and metacarpal bone..... 60	Leg	at 2 nd or distal joint.....4
at proximal joint..... 50	at hip joint.....500	
at second joint.....30	at knee.....425	
at distal joint.....12		

WISCONSIN PPD CALCULATOR (in weeks)

PPD Rating By Doctor	Scheduled						Unscheduled
	Shoulder	Elbow	Wrist	Hip	Knee	Ankle	Head, Neck, Back, Lung, Torso
5%	25	22.5	20	25	21.25	12.5	50
10%	50	45	40	50	42.5	25	100
15%	75	67.5	60	75	63.75	37.5	150
20%	100	90	80	100	85	50	200
25%	125	112.5	100	125	106.25	62.5	250
30%	150	135	120	150	127.5	75	300
35%	175	157.5	140	175	148.75	87.5	350
40%	200	180	160	200	170	100	400
45%	225	202.5	180	225	191.25	112.5	450
50%	250	225	200	250	212.5	125	500
55%	275	247.5	220	275	233.75	137.5	550
60%	300	270	240	300	255	150	600
65%	325	292.5	260	325	276.25	162.5	650
70%	350	315	280	350	297.5	175	700
75%	375	337.5	300	375	318.75	197.5	750
80%	400	360	320	400	340	200	800
85%	425	382.5	340	425	361.25	212.5	850
90%	450	405	360	450	382.5	225	900
95%	475	427.5	380	475	403.75	237.5	950
100%	500	450	400	500	425	250	1000/life



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WISCONSIN WORKER'S COMPENSATION ACT (As of January 1, 2020 – subject to amendments)

- **Average Weekly Wage:** Based on wages earned in 52 weeks prior to the injury; \$30 minimum. Average annual earnings are equal to 50 times AWW (§102.11(1)(2)).
- **Burial Expenses:** Effective 05/01/10, maximum burial expense is \$10,000 (§102.50).
- **Death Benefit:** Up to four years' average annual wage (200 times average weekly wage, but see secs. 102.46-51 Wis. Stats. for specific conditions). Payments are paid weekly at TTD rate (§102.48(3)). 2020 maximum wage rate increases death benefit for fatal injuries occurring on or after January 1, 2020 to \$315,300; Un-estranged parents benefit remains at \$6,500.00; \$20,000 payment into State Fund (§102.49)
- **Disfigurement:** Up to one year's wages, subject to maximum (\$78,825 max as of 01/01/20, §102.56); only applicable if Applicant does not return to work.
- **Fractional Weeks:** TTD benefits are paid for each day except Sunday, at the daily rate of one-sixth of the weekly rate (§102.11).
- **Maximum Meal Allowance:** Breakfast - \$8; Lunch - \$9; Dinner - \$17.
- **Medical Records:** Health care providers must furnish certified copies of relevant records upon request. Charges may not exceed the greater of \$.45 per page or \$7.50 per request, plus actual postage, or \$26 per request for electronic records (§102.13(2)(b)).
- **Medical Treatment:** No limit on medical treatment reasonably and necessarily required to cure or relieve the injury (§102.42(1)). Please note that Wisconsin does not have a fee schedule.
- **Medicare Set Aside Thresholds:** If the Applicant has a "reasonable expectation" of Medicare entitlement within 30 months and the settlement exceeds \$250,000 OR if the Applicant is currently a Medicare beneficiary and the settlement exceeds \$25,000, a MSA can be submitted to CMS. "Reasonable expectation" includes Applicants that are 62 ½ years old, or on Social Security Disability, or appealing a Social Security Disability determination.
- **Mileage:** As of 7/1/12 = \$0.51 per mile
- **Multiple Injury Variations:** Benefits are increased if an injury causes more than one compensable permanent disability (see sec. 102.53, Wis. Stats.). Schedule applicable to proximal injuries is reduced by disability resulting from more distal injuries (see DWD 80.50).
- **Permanent Partial Disability (PPD):** Rate is set by statute. Maximum rate depends on injury date. Unscheduled injuries are measured by functional limitations or loss of earning capacity, whichever is greater. For injuries on or after January 1, 2020, maximum PPD rate is \$362.00.
- **Statute of Limitations:** * 6 years – prior to 01/01/78 * 10 years as of 01/01/78 * 12 years as of 05/13/80 * 6 years for traumatic injuries as of 3/2/16 (occupational injuries remain at 12 years)
The statute of limitations has been eliminated for injuries resulting in loss or total impairment of hand or any part of rest of arm proximal to hand, foot or any part of rest of leg proximal to foot, any loss of vision, any permanent brain injury or any injury causing need for total or partial knee or hip replacement. Said claims shall be covered under Work Injury Benefit Supplemental Fund under secs. 102.17(4) and 102.66(1)(2), Stats., if the last date of compensation or injury was before 4/1/06; otherwise it is the carrier's responsibility.
- **Supplemental Benefits:** Maximum benefit rate increased to \$450 per week as of 04/01/08 (§102.44(1)).
- **Temporary Partial Disability (TPD):** TPD rate is the ratio of actual wage loss during disability to average weekly wage times the TTD rate (i.e., an employee limited to half-time work receives one-half the TTD rate - §102.43(2)(3)).
- **Temporary Total and Permanent Total Disability (TTD & PTD):** Two-thirds of average weekly wage. Maximum rate depends on date of injury; PTD benefits are paid for life (§102.11 & 102.44).
- **Unreasonable Refusal to Rehire:** Maximum penalty of up to one year's wages. (§102.35(3)).
- **Vocational Rehabilitation:** TTD and travel expenses are paid during training. For claims after 4/16/12, also responsible for tuition, books, and fees. If training takes place away from the employee's residence, actual and necessary maintenance expenses are also paid (§102.61).
- **Vocational Rehabilitation Limit:** The maximum annual limit for services provided by private vocational rehabilitation specialists is \$1,736.00 (effective 01/01/20).
- **Waiting Period:** Three days. If disability (temporary or permanent) exists after 7-calendar days from the date the employee leaves work as a result of the injury, benefits are paid for the waiting period (§102.43).