



**ILLINOIS WORKERS COMPENSATION RATE CHART**

**TEMPORARY TOTAL DISABILITY**

	01/15/18 through 07/14/18	07/15/18 through 01/14/19	01/15/19 through 07/14/19	07/15/19 through 01/14/20	01/15/20 through 07/14/20	07/15/20 through 01/14/21	01/15/21 through 07/14/21	07/15/21 through 01/14/22
<b>MAX</b>	\$1,463.80	\$1,480.12	\$1,506.81	\$1,529.84	\$1,549.07	\$1,572.01	\$1,613.93	\$1,693.76

**MINIMUM TTD RATE:**

No. of children and/or spouse	01/15/18 through 07/14/18	07/15/18 through 01/14/19	01/15/19 through 07/14/19	07/15/19 through 01/14/20	01/15/20 through 07/14/20	07/15/20 through 01/14/21	01/15/21 through 07/14/21	07/15/21 through 01/14/22
<b>0</b>	\$220.00	\$220.00	\$220.00	\$220.00	\$246.67	\$266.67	\$293.33	\$293.33
<b>1</b>	\$253.00	\$253.00	\$253.00	\$253.00	\$283.67	\$306.67	\$337.33	\$337.33
<b>2</b>	\$286.00	\$286.00	\$286.00	\$286.00	\$320.67	\$346.67	\$381.33	\$381.33
<b>3</b>	\$319.00	\$319.00	\$319.00	\$319.00	\$357.67	\$386.67	\$425.33	\$425.33
<b>4+</b>	\$330.00	\$330.00	\$330.00	\$330.00	\$370.00	\$400.00	\$440.00	\$440.00

**PERMANENT PARTIAL DISABILITY**

	07/1/14 through 06/30/15	07/1/15 through 06/30/16	07/1/16 through 06/30/17	07/1/17 through 06/30/18	07/1/18 through 06/30/19	07/1/19 through 06/30/20	07/1/20 through 06/30/21	07/01/21 through 06/30/21
<b>MAX</b>	\$735.37	\$755.22	\$775.18	\$790.64	\$813.87	\$836.69	\$871.73	\$914.85

**MINIMUM PPD RATE:**

No. of children and/or spouse	01/15/18 through 07/14/18	07/15/18 through 01/14/19	01/15/19 through 07/14/19	07/15/19 through 01/14/20	01/15/20 through 07/14/20	07/15/20 through 01/14/21	01/15/21 through 07/14/21	07/15/21 through 01/14/22
<b>0</b>	\$220.00	\$220.00	\$220.00	\$220.00	\$246.67	\$266.67	\$293.33	\$293.33
<b>1</b>	\$253.00	\$253.00	\$253.00	\$253.00	\$283.67	\$306.67	\$337.33	\$337.33
<b>2</b>	\$286.00	\$286.00	\$286.00	\$286.00	\$320.67	\$346.67	\$381.33	\$381.33
<b>3</b>	\$319.00	\$319.00	\$319.00	\$319.00	\$357.67	\$386.67	\$425.33	\$425.33
<b>4+</b>	\$330.00	\$330.00	\$330.00	\$330.00	\$370.00	\$400.00	\$440.00	\$440.00



# HARRIS DOWELL FISHER & YOUNG L.C.

Management Labor-Employment Law/  
Workers Compensation Defense

<u>SCHEDULE OF INJURIES</u>	<u>No. of Weeks Paid</u>
Hand	205
Hand (Carpal Tunnel Only)	190
Thumb	76
Index finger	43
Middle finger	38
Ring finger	27
Pinky finger	22
Arm	253
Arm amputated above elbow	270
Arm amputated at shoulder joint	323
Foot	167
Big Toe	38
Any non-big toe	13
Leg	215
Leg amputated above knee	242
Leg amputated at hip joint	296
Loss of sight in one eye	162
Loss of one eye	173
Hearing loss in 1 ear due to Occ. Disease	100
Hearing loss in 1 ear due to accident/trauma	54
Loss of hearing in both ears	215
Kidney, spleen, or lung removal	10
Loss of one testicle	54
Loss of both testicles	162
Skull fracture	6 (min.)
Fracture of facial bone	2 (min.)
Fracture of a vertebra	6 (min.)
Fracture of spine or transverse process	3 (min.)

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