

## STATE WORKERS' COMPENSATION OVERVIEW – COLORADO

I s s u e	R e g u l a t i o n	C o m m e n t s
Employee's Notice to Employer	Within four days	Any other person who has notice of said injury may submit a written notice to the employer, relieving the injured employee of the obligation to provide the required notice. Employers must display a notice with the requirements employees must follow to report any injury.
Employee's Claim Filing Requirements	Within two years	
Employer's Report of Accident	Within 10 days	The report must be made if death occurs because of a work-related injury or if three or more employees are harmed because of an accident.
Waiting Period	Three days	Retroactively paid if disability exceeds two weeks.
Temporary Total Disability (TTD) Benefits	<u>July 1, 2019 to June 30, 2020</u> Max: \$1,022.56 per week <u>July 1, 2018 to June 30, 2019</u> Max: \$987.84 per week	An employee's weekly benefit rate is 66 and two thirds percent of his or her average weekly wage (AWW), subject to limits in effect on the date of injury.
Death Benefits	<u>July 1, 2019 to June 30, 2020</u> Max: \$1,022.56 per week Min: \$255.64 per week <u>July 1, 2018 to June 30, 2019</u> Max: \$987.84 per week Min: \$246.96 per week	Death benefits are payable to a deceased employee's surviving spouse and dependents. Employers must also pay funeral expenses of up to \$7,000 for a deceased employee.
Permanent Partial Disability (PPD) Benefits for Scheduled injuries	<u>July 1, 2019 to June 30, 2020</u> Max: \$561.86 per week Min: \$150.00 per week <u>July 1, 2018 to June 30, 2019</u> Max: \$542.78 per week Min: \$150.00 per week	PPD benefits are payable to an impaired worker for the number of weeks corresponding to the type and extent of injury.
Coverage of Minors	Yes	Compensation to minors for permanent disability or death benefits to a minor's dependents must be paid at the maximum rate of compensation.
Coverage of Occupational Disease	All diseases	Silicosis, anthracosis or asbestosis included – employer liable if exposure lasts 60 days or more. Disease must be traced to the employment as a proximate cause.

Occupational Hearing Loss	Yes	
State OSHA Program	No	

### **ADDITIONAL INFORMATION**

#### **Resources:**

Colorado Department of Labor and Employment – Workers' Compensation Division [website](#)

#### **Mailing Address:**

Division of Workers' Compensation  
633 17th St., Suite 400  
Denver, Colorado 80202

#### **Heffernan Insurance Brokers**

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