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NEBRASKA – 2006

Workers' Compensation
Table of Benefits

Medical and hospital allowance.....Pursuant to Nebraska Fee Schedule
Burial December 13, 1997 to present.....\$6,000.00

Maximum/Minimum Compensation Benefits

Injury Occurring Between

	<u>Min</u>	<u>Max</u>
08/24/79 to 08/25/83	\$180.00	\$49.00
08/26/83 to 09/05/85	\$200.00	\$49.00
09/06/85 to 05/29/87	\$225.00	\$49.00
05/30/87 to 06/30/88	\$235.00	\$49.00
07/01/88 to 07/09/90	\$245.00	\$49.00
07/10/90 to 06/30/91	\$255.00	\$49.00
07/01/91 to 05/31/94	\$265.00	\$49.00
06/01/94 to 12/31/94	\$310.00	\$49.00
01/01/95 to 12/31/95	\$350.00	\$49.00
01/01/96 to 12/31/96	\$409.00	\$49.00
01/01/97 to 12/31/97	\$427.00	\$49.00
01/01/98 to 12/31/98	\$444.00	\$49.00
01/01/99 to 12/31/99	\$468.00	\$49.00
01/01/00 to 12/31/00	\$487.00	\$49.00
01/01/01 to 12/31/01	\$508.00	\$49.00
01/01/02 to 12/31/02	\$528.00	\$49.00
01/01/03 to 12/31/03	\$542.00	\$49.00
01/01/04 to 12/31/04	\$562.00	\$49.00
01/01/05 to 12/31/05	\$579.00	\$49.00
01/01/06 to present	\$600.00	\$49.00

CALCULATION OF AVERAGE WEEKLY WAGE*

Continuous employment: include wage earned for same employer over 26 weeks preceding injury; include overtime hours at the straight time rate. Weeks with abnormally low earnings should be excluded.
Seasonal employment: One fiftieth of total wages earned from all occupations over year preceding accident.

* This is a general guideline only; we recommend consultation with attorney to discuss specific fact situations.

SCHEDULED BENEFITS

	<u>Weeks Payable</u>
Thumb	60
Index finger	35
Middle finger	30
Ring finger	20
Little finger	15
First phalange – ½ of finger for amputation of first phalange	
½ first phalange – ¼ of finger for amputation of ½ of first phalange	
Over 1 phalange – whole finger for amputation of over one phalange	
Big toe	30
Any other toe	10
First phalange – ½ of toe for amputation of first phalange	
Over 1 phalange – whole toe for amputation of over one phalange	
Hand below elbow joint	175
Arm above elbow joint	225
Foot below knee joint	150
Leg above knee joint	215
Eye	125
Ear	25
Hearing, one ear	50
Nose	50

Week Expressed as Decimal

1/7... .14	5/7... .71
2/7... .29	6/7... .86
3/7... .43	7/7... 1.00
4/7... .57	

Mileage

07/01/99... \$0.31	01/01/04... \$0.375
01/01/01... \$0.345	01/01/05-08/03/05... \$0.405
01/01/02... \$0.365	09/01/05-12/31/05... \$0.485
01/01/03... \$0.36	01/01/06-Present ... \$0.445

COMPUTATION OF BENEFITS

Wrist Injury Example

Date of accident	2/1/04
Hand injury, weeks	175
Percent of disability	10%
Average weekly wage	\$600.00
Maximum TTD rate	\$562.00

\$ 600.00	Average Weekly Wage
<u>x .6667</u>	2/3
\$ 400.00	(Does not reach max of \$562.00, so use \$400.00)

175	Weeks, wrist injury
<u>x 10%</u>	Percent of disability
17.50	Weeks due for PPD

17.50	PPD weeks
<u>x 400.00</u>	PPD rate
\$7,000.00	Gross value

Body Injury Example

Date of accident	2/1/04
Body injury, weeks	300
Percent of LOE	25%
Average weekly wage	\$1200.00
Maximum TTD rate	\$ 562.00

\$1200.00	Average Weekly Wage
<u>x .6667</u>	2/3
\$ 800.00	(TTD rate exceeds max so use \$562.00)

\$800.00	Rate (2/3 of AWW)
<u>x 25%</u>	Percent of LOE
\$200.00	PPD rate

300	PPD weeks
<u>- 91</u>	Less weeks pd in TTD,TPD
209	PPD weeks due

209	PPD weeks due
<u>x \$ 200.00</u>	PPD rate
\$41,800.00	Gross value