

Section	Policy
40	44.90.10

Section Title: Benefits Administration - *Adjudication & Compensation*
 Subject: Permanent Impairment Rating
 Effective Date: *Schedule A*, Permanent Impairment Rating, applies to all impairment ratings or re-ratings to December 31, 2022, except for impairment of hearing, conducted on or after September 1, 2017.
Schedule B, Impairment of Hearing, applies to all impairment of hearing ratings or re-ratings conducted on or after July 1, 2016, the rating method of which is determined by the accident date as set out in Schedule B.

A. GENERAL INFORMATION

The Workers Compensation Act of Manitoba, sections 4(9) and 38, addresses impairment benefits. These benefits are calculated by determining a rating that represents the percentage of impairment as it relates to the whole body. The benefit is not related to loss of earning capacity nor is it a proxy for loss of earning capacity.

B. POLICY

1. The degree of impairment will be established by the WCB's Healthcare Services Department in accordance with this policy. The degree of impairment established by this Department can only be altered on review and approval by the WCB Director responsible or his/her designate, subject to the normal appeal process.
2. Whenever possible, and reasonable, impairment ratings will be established strictly in accordance with the PPI Schedules attached as Schedule A and Schedule B.
3. The appropriate time to assess an injured worker for a permanent impairment rating will be established by the PPI Schedules.
4. Healthcare Services Department will assign impairment ratings based on file information, or information from the attending physician, if such information is applicable and the impairment rating is less than 20%.

Impairment ratings of 20% or greater can be confirmed without an examination if it is apparent from objective evidence, such as an x-ray of an amputated limb, what the rating should be.

In other cases, a clinical assessment of the injured worker by a WCB Healthcare Advisor or a healthcare advisor chosen by the WCB will be required.

If the impairment rating is appealed, a re-assessment will be performed by the Healthcare Services Department or a physician ordered by the Appeal Commission.

5. Permanent impairment ratings in excess of 20% must be reviewed and approved by the WCB Director responsible or his/her designate.

In the event that the WCB Healthcare Services Department determines that:

- a. strict adherence would create an injustice, or
- b. an impairment exists that is not covered by the PPI Schedules, or
- c. the clinical examination or medical file assessment does not allow for the determination of a valid impairment rating by a WCB Healthcare Advisor,

then the WCB Healthcare Advisor may deem it just and fair to establish an impairment rating that is not specifically covered by the PPI Schedules.

In such cases, the WCB Healthcare Advisor may use information other than the PPI Schedules, such as The American Medical Association's *Guides to the Evaluation of Permanent Impairment*.

Impairment ratings in these cases must be reviewed and approved by the the WCB Director responsible or his/her designate. The Healthcare Services Department will document these cases and explain the justification for the non-scheduled rating.

6. The existence of a pre-existing condition will not negate an injured worker's entitlement to an impairment benefit arising from a WCB accepted injury. If a worker has a pre-existing condition, the worker is eligible for an impairment rating based on the difference between the total rating and the rating assigned to the pre-existing condition. The WCB Healthcare Advisor will assign a fair rating to the pre-existing condition based on the best information available.

When it is reasonable to do so, the assigned rating for the pre-existing condition will be based on the schedules. However, when this is not practical, the impairment rating assigned to the pre-existing condition will be determined in accordance with WCB policy 44.10.20.10, *Pre-existing Conditions*, the applicable portions of which are repeated in the schedule.

The presence of a co-existing condition will be treated the same as a pre-existing condition for the purpose of the PPI determination. A co-existing condition is a medical condition that occurs after the date of a compensable injury

7. In order to maintain consistency in ratings for disfigurement, and to make the ratings as objective as possible, medical staff will make reference to the folio of previous disfigurement ratings established as policy by WCB Order No. 67/89 and maintained by the WCB's Healthcare Services Department as prescribed in WCB Order 67/89.

C. REFERENCES

The Workers Compensation Act, sections 4(9) and 38.

Schedule A, Permanent Impairment Rating

Schedule B, Impairment of Hearing

History:

1. Initial adoption of a permanent disability rating schedule in March, 1946.
2. Permanent Impairment Rating Schedule approved by Board Order 152/86 as a compilation/recording of past policies, directives and practices, effective August 20, 1986.
3. Board Order 152/86 revised by Board Order 42/89 on March 15, 1989 to incorporate "minimum awards".
4. Permanent Partial Disability Awards for Disfigurement adopted by Board Order 67/89 on April 24, 1989.
5. Policy 44.70.10 - *Permanent Impairment Rating Schedule* approved by Board Order 12/92 on March 31, 1992, effective immediately for the rating of impairments after that date. Schedule revised to incorporate previously approved changes and recommendations of healthcare professionals. The majority of changes expand upon and clarify the original schedule, and reflect amendments to *The Workers Compensation Act* effective January 1, 1992.
6. Policy re-numbered to 44.90.10 on issue to Policy Manual.

7. Policy updated for current position and division titles, May 2, 1994.
8. Permanent Impairment Rating Schedule amended by Board Order 32/96, on September 25, 1996 to correct specific omissions/errors and incorporate two amendments (partial loss of movement of finger, impairment of shoulder mobility) for all decisions (initial, reconsideration, and appeal) effective October 1, 1996.
9. Permanent Impairment Rating Schedule amended by Board Order 6/2000 on February 22, 2000, which replaces the Hearing Impairment section for claims arising from accidents on or after April 1, 2000. Former policy re-issued as 44.90.10.01.
10. Permanent Impairment Rating Schedule – Appendix A “Impairment of Hearing” section amended by Board Order 03/03 effective January 31, 2003. Former Policy reissued as 44.90.10.01 and 44.90.10.02
11. The degree of expected plantar ankle flexion has been updated on Page 13 of the PPI Schedule to 40 degrees.
12. June 1, 2009 – Hand Chart – The diagrams were replaced.
13. September 1, 2009 policy updated to clarify effective date.
14. January 1, 2015, policy updated for decision making by designates, rating by Healthcare Advisors, rating when pre or co-existing conditions are present, and revisions to the Permanent Impairment Schedule.
15. Policy amended by Board Order No. 21/16 on June 28, 2016 effective July 1, 2016. Policies 44.90.10.01, 44.90.10.02 and 44.90.10.03 are rescinded effective July 1, 2016. The PIR policies have been amalgamated into one policy with two Rating Schedules - Schedule A Permanent Impairment Rating will apply to all impairment ratings or re-ratings, except for impairment of hearing conducted on or after July 1, 2016. Schedule B Impairment of Hearing amalgamates all the Impairment of Hearing sections from previous policies and will apply to all impairment of hearing ratings or re-ratings conducted on or after July 1, 2016. The rating method used to rate hearing loss would continue to be based on accident date. The rating method used for other impairments would be the same regardless of accident date.
16. Policy amended by Board Order 24/17 on October 26, 2017 effective September 1, 2017. Schedule A, Chapters 18 Myocardial Infarctions Impairment Rating and Chapter 19 Respiratory (Industrial Lung Disease) Impairment Rating. The changes to Chapters 18 and 19 are based on the AMA Guides to the Evaluation of Permanent Impairment, Sixth Edition, Fourth Printing, October 2016, with specific modifications including the addition of specific rating for Occupational Asthma as noted in Table 19-3 from the AMA Guides.
17. Policy amended by Board Order 15/18 on April 19, 2018 effective September 1, 2017.
18. Schedule A, Chapter 20 - Mental Health is updated with clear and currently accepted medical assessment tools which are based on the American Medical Association Guides (AMA)(6th ed.). These guides to allow for greater transparency in the impairment evaluation process.
19. Minor formatting changes were made to the policy, July 2021.
20. Policy was archived December 31, 2022.