**C-2 Date :** This is the date when the Employer's Report of Work-Related Injury/Illness (formerly known as Form C-2) was received. This form is usually submitted by the employer to report details about a work-related injury or illness. It provides information to the worker's compensation board and is essential for initiating the claims process for the employee's injury.

**C-3 Date:** This is the date when Form C-3 (Employee Claim Form) was received. This form is filed by the employee to officially report their work-related injury or illness. The C-3 form usually includes the employee’s description of the incident, details about the injury, and information on any medical treatment received. It’s an essential document for the worker’s compensation board to evaluate the claim and process benefits.

**Both dates are tracked in workers' compensation cases to monitor when the employer and employee each reported the incident, which is important for claim processing timelines and determining the eligibility for benefits.**

**First Hearing Date:** This refers to the date of the first hearing for a worker's compensation claim at a Workers' Compensation Board (WCB) hearing location. In the workers' compensation process, a hearing may be scheduled if there's a dispute or if further clarification is needed on the details of a claim. Here’s a breakdown:

* First Hearing Date: This is the date when the initial hearing regarding a worker’s compensation claim took place. During this hearing, the Workers' Compensation Board (WCB) reviews the case, examines evidence, and may hear testimonies from both the employee and the employer to make decisions on the claim.
* Blank Date: If the date is blank, it indicates that no hearing has yet been held for the claim. This could mean the claim is still under initial review, has been approved without the need for a hearing, or is awaiting scheduling for a hearing.

**IME-4 Count:**

* IME-4 Form Purpose: This form is completed by an Independent Medical Examiner (IME) who conducts an examination of an employee's injury or illness. The IME is typically a neutral third-party doctor who provides an objective evaluation of the claimant’s medical condition. This examination helps to verify the extent of the injury, the necessity of treatment, and the degree of any disability resulting from the work-related incident.
* Number of IME-4 Forms Per Claim: The number of IME-4 forms associated with a claim reflects how many times an independent medical examination has been conducted for that specific claim. Multiple IME-4 forms might be filed if follow-up examinations are required to monitor the injury’s progress, assess recovery, or verify ongoing disability claims

**Medical Fee Region:** The Medical Fee Region in the context of workers' compensation typically refers to a designated geographic area (in this case, New York) where the injured worker is expected to receive medical treatment. These regions are defined for the purpose of setting standardized medical reimbursement rates and guidelines for services rendered to workers with job-related injuries or illnesses. Here’s how it works:

* Purpose of the Medical Fee Region: Workers' compensation boards often categorize areas into different regions to standardize the costs of medical care based on local cost-of-living factors. Each region has its own set of fee schedules that outline maximum reimbursement rates for medical procedures, examinations, and treatments provided under workers' compensation.

**Agreement Reached:**

* Value of 'Yes': If the variable is “Yes,” it means that the worker and the employer were able to come to an agreement regarding the claim—such as compensation, medical coverage, or settlement—without needing the intervention or formal adjudication by the WCB. This typically suggests a resolution that both parties accepted outside of the formal hearings or decisions process conducted by the WCB.
* Value of ‘No’ without an agreement (0), the claim is likely to go through a formal and potentially lengthy WCB process to ensure that the dispute is resolved fairly and in accordance with workers' compensation laws.
* Unknown Status at the Start of a Claim: At the beginning of a claim, it's generally unknown whether the claim will be resolved with or without the WCB’s involvement. This status will be determined over time based on how the claim proceeds and whether both parties reach a satisfactory agreement early on. If they don’t, the claim may proceed to involve the WCB for mediation, hearings, or rulings.

**Target variable-> Claim Injury Type:** serves as a way to classify injuries by severity, and it reflects the benefits awarded as determined by the WCB based on this classification. This variable is crucial for analyzing how the WCB allocates resources and awards benefits based on the nature and severity of each injury

Severity Numbering: The numbering associated with Claim Injury Type likely indicates different levels of severity for injuries, with each level corresponding to a range of benefits. For example:

* Lower Numbers might represent minor injuries that may result in minimal benefits (such as short-term medical care).
* Higher Numbers may represent more severe injuries, which might lead to more substantial benefits, such as long-term medical treatment, rehabilitation, or disability compensation**.**