INDIANA COMPENSATION RATING BUREAU

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January 5, 2017

Informational Circular 2017-01

Second Injury Fund Assessment & Policy Surcharge Factor

Second Injury Fund Assessment

The Workers Compensation Board of Indiana ("Board") issued its notice dated December 22, 2016 titled "2017 Second Injury Fund Calculation of Funding Level". The Board certification forms indicate the combined total assessment amount for carriers and self-insureds in 2016 is \$6,337,814. Based on combined total paid losses in 2015 (latest data available) of \$462,255,545, the assessment rate is 1.37% which is within the statutory limit of 2.5%. [Reference IC § 22-3-3-13 (c)]

Payment of Assessment to WC Board

The Board has set up two installments to pay half the annual sum due in each installment. Payments are due by January 30, 2017 and June 30, 2017 and *payable to the Worker's Compensation Board of Indiana*. Online payments to the Board are now available.

Policy Surcharge Factor

The 2017 statewide average policy surcharge factor is 0.0061 compared to the last year's average factor 0.0071. As in the past, the ICRB does not file an advisory policy surcharge factor with the Indiana Department of Insurance (IDOI). Each carrier must calculate and apply its own factor to its policies. This circular and the factors being provided herein are for informational purposes only. For assigned risk policies, servicing carriers should use the 0.0061 factor.

At-a-Glance Summary

- Carrier may now pay its assessment to the WC Board online. Here's a link to the Board's online payment options page: http://www.in.gov/wcb/2516.htm
- Carrier prints and attaches online payment receipt to the completed Certification form and mails to the Board at this address:

Worker's Compensation Board of Indiana 402 West Washington Street, Room W-196 Indianapolis, Indiana 46204

- Carrier must show assessment on policies as "a surcharge based on the employer's premium."
- The surcharge is not premium, as defined by statute. So, the surcharge amount must be excluded for purposes of computation of agent commission and premium taxes.
- Statistical Code 0935 Second Injury Fund Surcharge is appropriate to record the amount.

- Because each carrier's premium is different, then each carrier's assessment payable to the Board will be different. So, each carrier's policy surcharge factor may also be different.
- Carriers are not required to file their policy surcharge factors with the IDOI.
- The statewide average surcharge factor of 0.0061 is for informational purposes only to assist members.

Statute Changes in 2006

House Enrolled Act (HEA) 1307 effective July 1, 2006 made a few changes in IC § 22-3-3-13 to the calculation of the Second Injury Fund. Here's a summary:

- Assessment limit of 2.5% is based on total paid losses instead of only indemnity losses.
- Total losses are from all entities (carriers, other insuring entities, and self-insureds).
- As of November 1, if the SIF balance exceeds 135% of the prior year's disbursement, no assessment will occur for the next year.
- Assessment applies to "all employers." Assessment is split between self-insured employers and insured employers based on each group's portion of total paid losses. For 2015, the split is 13% self-insureds and 87% insured employers.
- Assessment for insured employers (carriers) is calculated by determining the percentage share of an individual carrier's premium to all carriers premium.
- Assessment for self-insureds is calculated by determining the percentage share of a self-insured's paid losses to all self-insureds' paid losses.
- The Board will calculate the recommended funding level by December 1. This study will determine if an assessment is necessary. The Board "may employ a qualified employee or enter into a contract with an actuary or another qualified firm that has experience in calculating worker's compensation liabilities."

For More Information

You may also access the Board's website to view the "2nd Injury Fund Forms" web page.

You may access this and previous ICRB circulars about the "Second Injury Fund" on our website at www.icrb.net. We hope this information helps in your understanding of the Second Injury Fund assessment process.

Sincerely,

Ronald W. Cooper, CWCP, WCP President

Attachments:

- ✓ 2017 Second Injury Fund Calculation of Funding Level dated December 22, 2016
- ✓ Certification for Worker's Compensation Carriers, State Form 12386-b
- ✓ Indiana SIF for 2017 Stepping Through the Process

WORKERS COMPENSATION BOARD OF INDIANA

2016 SECOND INJURY FUND CALCULATION OF FUNDING LEVEL

December 22, 2016

Please note assessments greater than \$1,000 may be paid in two installments. The due dates are:

January 30, 2017 June 30, 2017



WORKERS COMPENSATION BOARD

402 West Washington Street, Room W196 Indianapolis, Indiana 46204-2753 Telephone: (317) 232-3808 http://www.in.gov/workcomp

SECOND INJURY FUND REPORT

By the Chair

AND ASSESSMENT FOR 2017

December 22, 2016

As 2016 comes to a close, I am happy to report the Second Injury Fund will end the year with over \$2 million in the bank. We collected approximately \$469,000 less than the assessment goal, due in part to the loss of some self-insured companies. Because we have to use two-year-old data, our figures cannot always accurately reflect the current business climate. This is one reason the prudent reserve is necessary.

The good news is that the assessment for 2016 was less than that of 2015, and the 2017 assessment is lower still. Direct written premiums were up and losses paid by carriers down.

Included with this report are the Certification forms used to calculate individual assessment obligations. These forms use numbers provided by the ICRB as well as self-insured factors taken from new and renewal applications for 2015. Historical data regarding Fund payouts can be found on the last page.

We expect indemnity payments from the Fund to increase slightly in 2017 as new injured workers are added to the rolls at wages greater than those

of the deceased recipients. There was a net change of eight to the positive in the number receiving wage replacement benefits.

As always, we continue to replace limbs with the "Chevy" not "Cadillac" model. With all of the uncertainty, our prudent reserve for prosthetics is a total of the three highest months in 2016.

A few years ago, the Board began tracking the quarterly time commitment of each staff member who works on SIF issues, as well as other factors such as IT expenses, postage and printing. The administrative expense assessed has remained constant for the past 3 year.

Payments will be due on January 30th and June 30th. You may choose to use the installment option only if your assessed total is greater than \$1,000. This option is no longer available if your total assessment is less than \$1,000 and a penalty will be assessed if the whole amount is not received by the January payment date. No reminder will be sent before the June due date. We also encourage you to take advantage of the State's new electronic payment system, which you can access at http://www.in.gov/wcb. This will be mandatory at some time in the future. Please be aware, you may obtain a "unique identifier" by contacting the Board. This will allow a debit transaction directly from your company's bank account for a \$1.00 State user fee.

Please call Mary Taivalkoski or me if you have questions or comments regarding the assessment, report, or the Fund.

Wishing you good health, happiness, peace, and prosperity in the 2017.

Yours very truly,

Linda Peterson Hamilton

Linda Hamilton

2nd INJURY FUND REPORT

December 22, 2016

Available Fund Balance 12/31/15	2,131,482
Revenue from 2016 Assessment	6,517,430
Total Available Monies 2016	8,648,912
Expenditures 2016:	
Indemnity (308 Recipients)	5,168,737
Prosthetics (74 Recipients)	1,128,061
Administrative Fees	107,926
SWCAP-Statewide Cost Allocation Plan	<u>1,549</u>
Total	6,298,675
Available Fund Balance 12/31/2016	2,242,639
2017 Assessment Factors	
Indemnity (3 month expense)	1,314,443
Prosthetics (3 month expense)	<u>607,866</u>
Total Prudent Reserve	1,922,309
Estimated Expenditures	
Indemnity	5,375,486
Prosthetics	1,173,183
Administrative Fees	107,926
SWCAP-Statewide Cost Allocation Plan	<u> 1,549</u>
Projected Expenditures	6,658,144
Estimated Need	8,580,453

Final Assessment Amount 6,337,814

* 7.4.2.1 State-Wide Cost Allocation Plan (SWCAP)

Reported and Historical Data Utilized in Assessment of Fund

(Reported in dollars) Reported by ICRB for 2015: Total Losses Paid	206 775 000
	396,775,000
Total Premiums Written	889,525,000
Reported by ICRB for 2014:	
Total Losses Paid	416,215,000
Total Premiums Written	847,794,000
Reported by ICRB for 2013:	
Total Losses Paid	457,915,000
Total Premiums Written	829,907,000
Reported by ICRB for 2012:	
Total Losses Paid	445,461,000
Total Premiums Written	782,614,000
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Self-Insured Factors 2015:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Self-Insured Factors 2015: Total Indemnity Paid	17,429,358
	17,429,358 48,051,187
Total Indemnity Paid	
Total Indemnity Paid Total Medical Paid	48,051,187
Total Indemnity Paid Total Medical Paid Total Self Insured Factors	48,051,187
Total Indemnity Paid Total Medical Paid Total Self Insured Factors Self-Insured Factors 2014:	<u>48,051,187</u> 65,480,545
Total Indemnity Paid Total Medical Paid Total Self Insured Factors  Self-Insured Factors 2014: Total Indemnity Paid	48,051,187 65,480,545 14,341,345
Total Indemnity Paid Total Medical Paid Total Self Insured Factors  Self-Insured Factors 2014: Total Indemnity Paid Total Medical Paid	48,051,187 65,480,545 14,341,345 50,020,132
Total Indemnity Paid Total Medical Paid Total Self Insured Factors  Self-Insured Factors 2014: Total Indemnity Paid Total Medical Paid Total Self Insured Factors	48,051,187 65,480,545 14,341,345 50,020,132
Total Indemnity Paid Total Medical Paid Total Self Insured Factors  Self-Insured Factors 2014: Total Indemnity Paid Total Medical Paid Total Self Insured Factors  Self-Insured Factors 2013:	48,051,187 65,480,545 14,341,345 50,020,132 64,361,477
Total Indemnity Paid Total Medical Paid Total Self Insured Factors  Self-Insured Factors 2014: Total Indemnity Paid Total Medical Paid Total Self Insured Factors  Self-Insured Factors 2013: Total Indemnity Paid	48,051,187 65,480,545 14,341,345 50,020,132 64,361,477
Total Indemnity Paid Total Medical Paid Total Self Insured Factors  Self-Insured Factors 2014: Total Indemnity Paid Total Medical Paid Total Self Insured Factors  Self-Insured Factors 2013: Total Indemnity Paid Total Medical Paid	48,051,187 65,480,545 14,341,345 50,020,132 64,361,477 14,779,695 51,710,746

Total Medical Paid	43,575,323
Total Self Insured Factors	61,642,103

### Historical Second Injury Fund Data re.

## **Total Expenditures Reported By the WCB**

### (Reported in dollars)

Jan/Dec 2015	
Prosthetics (74 Recipients)	1,128,061
Indemnity (308 Recipients)	5,168,737
Jan/Dec 2014	
Prosthetics (74 Recipients)	1,298,573
Indemnity (325 Recipients)	5,143,074
Jan/Dec 2013	
Prosthetics (65 Recipients)	780,300
Indemnity (312 Recipients)	4,794,848
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Jan/Dec 2012	
Prosthetics (68 Recipients)	1,019,258
Indemnity (302 Recipients)	4,735,990
Jan/Dec 2011	
Prosthetics (67 Recipients)	585,801
Indemnity (293 Recipients)	4,375,287
Jan/Dec 2010	
Prosthetics (62 Recipients)	561,247
Indemnity (291 Recipients)	4,227,113
Jan /Dan 2000	
Jan/Dec 2009	624 744
Prosthetics (63 Recipients)	624,711
Indemnity (289 Recipients)	4,099,537
Jan/Dec 2008	
Prosthetics (50 Recipients)	527,506
Indemnity (281 Recipients)	3,413,452
machine, (201 heapteries)	5,715,752

### **CERTIFICATION FOR WORKER'S COMPENSATION CARRIERS**

STATE OF	
COUNTY OF	
I,, hereby CF	ERTIFY that I am
	(Official Title)
of( Carrier)	and that I have knowledge of the
	r CERTIFY that the amount of direct written premiums
above number representing Carrier's Direct Written Pre direct written premiums for all worker's compensation by 5,437,844 (which, in dollars represents the amount f	217 assessment for the Second Injury Fund by dividing the miums by 889,525,000 (which, in dollars represents the total carriers in Indiana in 2015), and then multiplying that figure for all carriers portion of the 2017 assessment for the Second, which in dollars represents Carrier's total annual
assessment due by January 30, 2017 and payable to the	represents one half of Company's er than \$1,000), which is the first installment of the statutory ne Worker's Compensation Board of Indiana for the Second nent of the second half of Company's assessment for 2017
ORI further CERTIFY that the enclosed sum of \$	represents the entire assessment of Company.
PLEASE PAY ELECTRONICALLY VIA http://www.	in.gov/wcb.
I hereby verify, subject to penalties of perjury,	that the facts contained herein are true.
Signature	Date
Carrier Name	Federal ID Number
Telephone Number	E-mail Address
Mailing Address	City, State, Zip

^{*}Please note that IC§22-3-3-13(j) requires each company subject to this assessment to provide to the Board the name, address, and E-mail address of a representative authorized to receive the notice of assessment.



# Indiana Second Injury Fund (SIF) Assessment for 2017 Stepping Through the Process (10 steps)

HEA 1307 effective July 1, 2006 Indiana Code § 22-3-3-13

### Step 1

IC § 22-3-3-13 (c)

WC Board sends notice by November 1 to

- (1) carriers and other insuring entities, and
- (2) self-insureds

that an assessment is necessary

### Step 2

IC § 22-3-3-13 (c)

Entities then send to the WC Board their statements of total paid losses and premium by January 31.

Note: Entities use 2015 year amounts since 2016 amounts are not yet available. Entities should report "direct premiums written" and "direct losses paid."

### Step 3

IC § 22-3-3-13 (c)

The assessment cannot exceed 2.5% of total losses (medical + indemnity). Note: Total losses are from all entities (carriers, other insuring entities, and self-insureds).

### Step 4

IC § 22-3-3-13 (c)

As of November 1, if the SIF balance exceeds 135% of the prior year's disbursement, no assessment will occur.

#### Step 5

IC § 22-3-3-13 (d)

WC Board assesses "all employers." The assessment calculation begins by determining the percentage share of two groups: self-insureds and insured employers.

The percentage is based upon each group's portion of "total paid losses."

#### Example:

In this example, the SIF assessment is \$\$6,337,814

Entity	2015 Total Paid Losses	Percent	Assessment Amt in Cert Form	Assessment Percentage
Self- insureds	\$65,480,545	14%	\$899,970	
Insured employers	\$396,775,000	86%	\$5,437,844	
Total	\$462,255,545	100%	\$6,337,814	1.37%



The example shows (using rounded figures) that self-insureds are responsible for 14% (\$899,970) of the \$6.3 million assessment and insured employers are responsible for 87% (\$5.4 million).

### Step 6

IC § 22-3-3-13 (d)(3)

The assessment for carriers is calculated by determining the percentage share of an individual carrier's premium to all carriers premium.

Carriers collect the assessment of insured employers via a SIF surcharge on the policy.

### Example:

In this example, we use Indiana 2015 statewide premium of \$890 million.

Entity	2015 Direct Premium Written	Percent	Assessment	Surcharge Factor
Carrier A	\$9,000,000	1.0%	\$55,019	0.0061
Total All Carriers	\$889,525,000	100%	\$5,437,844	0.0061

The example shows Carrier A writes \$9 million in premium and is responsible for 1% (\$55,019) of the insured employers portion (\$5.4 million).

### Step 7

IC § 22-3-3-13 (d)(4)

As noted above in Step 2, entities use 2015 year "direct premiums written."

#### Step 8

IC § 22-3-3-13 (d)(5)

The assessment for self-insureds is calculated by determining the percentage share of a self-insured's paid losses to all self-insureds' paid losses.

#### Step 9

IC § 22-3-3-13 (e)

The WC Board will calculate the recommended funding level by December 1. This study will determine if an assessment is necessary.



### Step 10

IC § 22-3-3-13 (f)

Carriers collect the assessment of insured employers via a SIF surcharge on the policy. Each carrier's surcharge can be different since a carrier's projected premium for 2017 may differ from the amount reported for 2015 (See Step 2).

### Example 1:

In this example, Carrier A wrote \$9 million in premium in 2015 and is responsible to pay a \$55,019 assessment. Carrier A projects 2017 premium to remain at \$9 million. It can recoup the cost of that assessment by applying a surcharge on its policies. It can calculate its surcharge on the policy as follows:

55,019 / 9,000,000 = 0.0061 or .61%

Let's assume that Employer X premium is \$10,000 and is insured by Carrier A which applies a 0.0061 surcharge factor to total estimated annual premium.

The example shows that Employer X with \$10,000 in estimated premium pays a SIF surcharge of \$61.

Entity	Total Estimated	Surcharge	Surcharge
	Annual Premium	Factor	Amount
Employer X	\$10,000	0.0061	\$61

### Example 2:

In this example, Carrier A wrote \$9 million in premium in 2015 and is responsible to pay a \$55,019 assessment. Carrier A projects 2017 premium to increase to \$12 million. It can recoup the cost of that assessment by applying a surcharge on its policies. It can calculate its surcharge on the policy as follows:

55,019 / 12,000,000 = 0.0046 or .46%

Let's assume that Employer X premium is \$10,000 and is insured by Carrier A which applies a 0.0046 surcharge factor to total estimated annual premium.

The example shows that Employer X with \$10,000 in estimated premium pays a SIF surcharge of \$46.

Entity	Total Estimated	Surcharge	Surcharge
	Annual Premium	Factor	Amount
Employer X	\$10,000	0.0046	\$46