

Instructions Call for Direct California Workers' Compensation Experience

Annual Call for Direct California Workers' Compensation Experience – Abridged (CA-NC-20xx)

The information reported must be in accordance with the following:

- (a) All data reported on this call must be on a calendar year basis, which means that premiums and losses from all transactions that occurred during year xx must be included, regardless of the effective year of policies or year of accident of claims involved.
- (b) Include experience (premium and losses) from:
 - Deductible policies on a gross (first dollar) basis
 - Standard workers' compensation policies
 - Employers liability increased limits
 - Minimum premiums
 - Salvage and subrogation
- (c) Exclude experience (premium and losses) from:
 - Ceded reinsurance
 - Reinsurance assumed
 - Excess insurance
 - USL&H insurance
 - Private residence employee insurance
 - National Defense Project insurance
- (d) Exclude the impact of the following items from all reported premiums:
 - Application of any deductible credits
 - Application of any retrospective rating plan adjustments
 - California Insurance Guarantee Association (CIGA) assessments
 - California Workers' Compensation Revolving Fund assessments
 - California Workers' Compensation fraud surcharges
 - Uninsured Employers Trust Fund Assessment
 - Subsequent Injuries Benefits Trust Fund Assessment
 - Occupational Safety & Health Fund assessments
 - Labor Enforcement & Compliance Fund assessments
 - Any charge for terrorism coverage pursuant to the Terrorism Risk Insurance Act of 2002 as amended by the Terrorism Risk Insurance Extension Act of 2005, or the Terrorism Risk Insurance Program Reauthorization Act of 2007<u>and 2015</u>.
- (e) Premiums must be reported in accordance with the definition of "Final Premium" in Part 4, Section II of the *California Workers' Compensation Uniform Statistical Reporting Plan – 1995* (USRP), available on the WCIRB website at http://www.wcirb.com/document/123.
- (f) Indemnity and medical losses must be reported in accordance with the definitions of "Indemnity Losses" and "Medical Losses" in Part 4, Section II of the *California Workers' Compensation Uniform Statistical Reporting Plan – 1995* (USRP), available on the WCIRB website at http://www.wcirb.com/document/123.
- (g) Paid Indemnity Losses must include indemnity payments made during calendar year 20xx on all indemnity claims. Paid Medical Losses must include medical payments made during calendar year 20xx on all claims (indemnity claims and medical-only claims).
- (h) Total Loss Reserves must include indemnity and medical case reserves, the reserve for incurred but not reported cases, the reserve for reopened cases, and any other reserves to meet specific contingencies. Other voluntary reserves must be excluded.

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- (i) Insurers who are members of an affiliated group are encouraged to file on a combined group ("consolidated") basis. However, <u>all members of the group must be individually listed</u>. All data calls for the same evaluation period submitted to the WCIRB must be made under the same grouping structure. Any changes to the reporting group must be communicated to and approved by WCIRB prior to reporting data under the new grouping.
- (j) Use of the eSCAD[®] web-based application to submit data is highly encouraged. Insurers with access to the eSCAD[®] web-based application should submit this data call online via eSCAD[®]. Non-eSCAD submissions using only WCIRB forms and/or templates are permitted for insurers who do not yet have access to eSCAD[®], subject to a \$100 processing fee for each submission of this Abridged Calendar Year Call. For all non-eSCAD submissions: (i) reported amounts must be rounded to <u>whole dollars</u>; (ii) <u>Negative amounts</u> must be displayed enclosed within parentheses; and (iii) the totals must equal their corresponding sum of rounded details shown on the forms, not the rounded sum of actual details.
- (k) Abridged calls are subject to the SCAD Program (program for Submission of California Aggregate Data). Refer to the <u>SCAD Program</u> effective July 1, 2010 for details. Please contact the WCIRB's Actuarial Department for a comprehensive listing of the edits used to check accuracy of submitted data. This listing of edits is also available by clicking on the Help link in eSCAD.