Instructions for Completing the Assessment Base Factor Report

General Instructions
1. The Assessment Base Factor Report (GA 1.6) must be completed and submitted by the due date from every active and inactive private self-insured entity who have open claims from their period of self-insurance with paid indemnity during the stated calendar year.

2. Questions about the form or process should be directed to WCBFinanceOffice@wcb.ny.gov.

Submit completed form via e-mail to: Assessments@wcb.ny.gov

Private Self-Insurer Information
1. The WCB Identification Number or “W Number” as assigned to the private self-insurer when approved to self-insure.

2. The Name of the Private Self-insured Employer must be the full legal name of the employer approved to self-insure.

3. The FEIN, or Federal Employer Identification Number, should be reported for the private self-insurer. If you do not know the FEIN number leave blank.

4. The full mailing address of the private self-insurer.

Paid Indemnity
1. Paid Indemnity (gross) for the calendar year stated. The payments are only for the claims that were incurred during the period of self-insurance. Paid indemnity includes the following:
   • Payments of compensation as defined in Section 2, subdivision 6 of the New York State Workers’ Compensation Law in disability and death claims including advances, lump sum awards, Section 32 agreements, facial disfigurement awards, no-dependency death awards and funeral expenses.
   • Amounts paid in death and disability claims into the Aggregate Trust Fund.
   • Payments made by excess carriers directly to claimants on behalf of private self-insured employers.
   • Do not include payments on claims subject to compensation acts of jurisdictions other than New York State.

2. Allowable reimbursements to be deducted from the gross paid indemnity include indemnity reimbursements received during the calendar year from Workers’ Compensation Law Section 15 Subdivision 8 (Special Disability Fund); Section 25 a Subdivision 9 (Supplemental Benefits).

Do not include the following:
• Reimbursements from an excess or reinsurance policy.
• Third party lien recoveries, or reimbursements of the insurer by the policy holder for applicable deductible amounts or for any reimbursements under Section 49-ee (loss of hearing).

3. The form will calculate the net paid indemnity that will be used for the 50(5) assessment.
   • If the net paid indemnity results in a negative assessment base, a refund or credit will not be issued.

GA 1.6 (1/22) Instructions