***All reports must be filed by November 1st***

**Required Forms**

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**Note regarding Financial Reports and Excess Policies:**

- If not already submitted, the most recent certified, independently audited financial statement or Form 10K, must be submitted with your 2018 Annual Reports. This report is due no later than three months after the close of the self-insurer’s fiscal year.

- If you have not already renewed your Form SI-21 Excess Carrier Policy, due annually, you must submit it with your 2018 Annual Reports.

- The SI-22 Certificate of Excess Carrier Evidencing Payment of Claims under Excess Contract should be submitted for any claims for which the Excess Carrier has accepted liability and is paying. This form is available upon request by emailing selfinsurance@wcb.ny.gov

**Extension Requests**

- Only granted under unusual or extraordinary circumstances.
- Must be requested by the self-insured employer, not the third-party administrator.
- Chronic late filers will not be granted an extension.

**Initial Review by Board Staff**

- Board staff conduct a preliminary review of all reports to ensure reports are complete and affirmed by an officer of the self-insured employer.
- If there are missing reports, or missing data from any report, the self-insured employer will be contacted and/or reports returned for completion.
Tips for Completion of SI-6, SI-10.1, SI-10.1M & Annual Update Forms

SI-6 – Payroll for All Operations

- Use most recent 12 months of payroll (or most recently completed fiscal year). Provide the period ending date.
- Make sure class codes and descriptions match, and are currently active codes from the New York Compensation Insurance Rating Board. (http://www.nycirb.org)
- Executive Officers salaries capped at $2,050 per week, per employee.


- Current year amount (for each accident year) should be equal to or greater than last year’s amount for each corresponding accident year. This amount cannot decrease.
- Be sure to include only current report year recoveries from 15-8 and excess insurance claims.

Self-Insurer’s Records Update Form

- Must include all active self-insured subsidiaries.
- Must include current TPA information (or note self-administered if no TPA is being utilized). If more than one TPA is currently administering claims for different time periods of self-insurance, must include breakdown of TPAs and dates of claims administered.

Tips for Completion of SI-4 & SI-4.1

- If using computer generated report instead of prescribed SI-4 & SI-4.1, they must mirror the prescribed form and must include all information requested on the SI-4 & SI-4.1 Forms.
- Succinct description of injury and current medical status is very important. Do not forget to include the body part(s) affected. Please review your reports for completeness and legibility – if portions of the description are missing, we cannot accurately assess the status of the claim.
- Claimant’s work status (working or still out of work) is important – remember to indicate if the claimant is working or out of work and the date that the claimant returned to work.
- Be sure that each column is completed.
- Make sure to list the established CCP rate in the “Weekly Comp Rate” column, not the AWW rate.
- SI-4 Report of Death Claims
  - Reserves for death claims are set by Board staff, to be included with the adjusted claims report (if any) to the self-insured employer.
  - Dates of birth for deceased and dependents must be noted on SI-4.
  - Staff uses Special Bulletins to determine award.

Please refer to Form SI-4.11 for further details on the completion of the SI-4 & SI-4.1 Forms
General Reserving Information

- Virtually every case is reviewed and adjusted, if necessary.
- Board will cross check the information submitted with the Board’s Claims Information System database.
- Year to year consistency is important, prior year’s adjustments should be considered when preparing this year’s report.
- Claim reserves do not have to match self-insurer’s financial statement reserves.
- The Office of Self-Insurance will increase indemnity reserves for any number of reasons, which include but are not limited to the following:
  - Not enough information about the claim is provided in the description, and so a minimum of one year’s (or more) lost time reserve will be held.
  - For claims incurred prior to March 13, 2007, if a claimant is out of work more than 104 weeks (2 years), a life award will be held as a reserve.
  - For claims incurred on or after March 13, 2007, a reserve will be held based on the established findings of the claim, not to exceed the maximum amount of CAPS weeks allowed by the WC Law (525).
  - If duration of caps weeks and LWEC% has been established, indicate filing date of decision in which CAPS finding was made and how many weeks of the established duration have been paid at the time of reporting. If there is no indication of how many weeks have been paid, we will reserve for the full duration of caps weeks awarded.
  - When a claimant is classified as permanently partially disabled, and has not returned to work, a reserve based on the date of accident and the established findings of the claim will be held.
  - No new claims for 15-8 reimbursement can be filed for claims occurring on or after July 1, 2007.
  - When a Section 15-8 judgment has been established, a reserve equal to at least 52 weeks lost time should be held.
  - If a Section 15-8 judgment has been established, include the filing date of the decision 15-8 liability was established, and the percentage of 15-8 liability.
  - When a Section 15-8 judgment is pending, no reserve relief is granted. Reserves are set as if 15-8 does not apply. A reserve based on the established findings of the claim, including the date of accident, will be applied. This will be adjusted if/when 15-8 is established.
  - When a Section 32 settlement is pending, no reserve relief is granted. A reserve based on the established findings of the claim will be applied. The reserve will be removed if/when the Section 32 is finalized.
  - If a claimant is currently out of work less than 52 weeks, a reserve equal to 52 weeks of lost time will be held.
  - When the nature of the injury is such that a reserve should be held for the possibility of intermittent lost time, a reserve of 52 weeks is held.
  - When awards have been suspended due to a finding of voluntary removal from the labor market or incarceration, a reserve equal to 52 weeks of lost time will be held.