

**FREQUENTLY ASKED QUESTIONS:**  
**WORKERS COMPENSATION FORMS AND ENDORSEMENTS**

The North Carolina Rate Bureau (NCRB, Bureau) has a Workers Compensation Underwriting Subcommittee that reviews forms on behalf of all member companies. The Committee's review occurs before any form is submitted to the North Carolina Department of Insurance (DOI).

This document answers the following questions regarding Workers Compensation Forms:

1. Does the Bureau or the Insurer file forms with the Department of Insurance?
2. What needs to be submitted by a member company to the Bureau when submitting a request for a new form to be reviewed and/or filed?
3. What Workers Compensation endorsement forms are currently approved for use in North Carolina?
4. How does the form review process work?
5. What statutes are available regarding forms in North Carolina?
6. Why was the Workers Compensation Underwriting Subcommittee initiated?
7. Who serves on the Workers Compensation Underwriting Subcommittee?

If you have additional questions on the process or form filings for Workers Compensation, please submit your questions to [WCFilings@ncrb.org](mailto:WCFilings@ncrb.org).

**QUESTION: 1**

Does the Bureau or the Insurer file forms with the DOI?

**ANSWER: 1**

The Bureau files with the DOI any form that affects the Standard Workers Compensation Policy, including changes, amendments, broadening of, or reduction of coverage. This includes all endorsements as well as policy language changes.

The Insurer should file all other items directly with the DOI for review. These items include (but are not limited to):

Billing Forms/Notices  
Applications  
Binders  
Policy Jackets (that do not contain coverage)  
Declarations Pages/Information Pages  
Dividend Forms  
Forms with Logo changes only  
Certificates of Insurance  
Notice of Reinstatement  
Cancellation Notices  
Non-Renewal Notices  
Terrorism Disclosure Notices  
Signature Pages  
Stuffers/Fliers

In the case of forms related to Large Deductibles or the Large Risk Alternative Rating Option (LRARO) in the retrospective rating plan, the Bureau has worked with the DOI to develop a "cover sheet" to be filed with those items. The carrier should include the approved cover sheet as applicable (See Exhibit 2 and Exhibit 3), and attach the cover sheet with their filing to the DOI.

**QUESTION: 2**

What does a member company need to submit to the Bureau when they are submitting a new form for review and/or filing?

**ANSWER: 2**

Because most items filed with the Bureau go to the Workers Compensation Underwriting Subcommittee for review, the member company should submit:

- a) one copy of the proposed form in paper or electronic format, and
- b) a written explanation that explains the need for the form and how the form differs from currently approved North Carolina forms (if applicable).

These forms may be electronically submitted to [WCFilings@ncrb.org](mailto:WCFilings@ncrb.org).

Note that upon review by the subcommittee, changes/alterations may be made to make the form applicable to all member companies. These changes may include changes to the form number (to be consistent with North Carolina specific form numbering format), changes to the language (so that any member company may use), and/or other changes as deemed necessary by the subcommittee. Staff will give the submitting carrier the opportunity to review any form approved by the subcommittee prior to filing the form with the DOI.

**QUESTION: 3**

What Workers Compensation endorsement forms are currently approved for use in North Carolina?

**ANSWER: 3**

A listing of approved endorsement forms is maintained on the NCRB website. For NCCI subscribers, a listing can also be obtained through the NCCI website.

The form listing can be found at:

<http://www.ncrb.org/ncrb/WorkersCompensation/FormsandEndorsements/tabid/474/Default.aspx>

**QUESTION: 4**

How does the form review process work?

**ANSWER: 4**

Once a form filing is received by the Bureau, staff will review the form to determine

- 1) if a similar item has already been approved by the Department of Insurance,
- 2) whether the appropriate explanations were included, and
- 3) whether the company should be advised to file the item directly with the Department of Insurance.

Once a form passes the initial review, Rate Bureau staff acknowledges receipt of the form and adds the form to the agenda for the next available Workers Compensation Underwriting Subcommittee meeting. Once the form is reviewed by the Workers Compensation Underwriting Subcommittee, Rate Bureau staff makes any applicable changes to the form and takes the appropriate action (which may include editing to discuss further at the next subcommittee meeting, filing with the DOI, and/or responding to the submitting carrier that the form will not be filed.) As new forms are approved by the DOI, the Rate Bureau will send a circular to member companies and update form listing on our website.

**QUESTION: 5**

What statutes are available for filings and/or forms in North Carolina?

**ANSWER: 5**

Some of the statutes which relate to forms include:

- N.C.G.S. 58-1-10
- N.C.G.S. 58-2-40 to 58-2-90
- N.C.G.S. 58-3-150 to 58-3-151
- N.C.G.S. 58-36
- N.C.G.S. 58-41 (Excess WC)
- N.C.G.S. 58-47 (Self Insurance)
- N.C.G.S. 97

North Carolina General Statutes can be found online via the following website:

<http://www.ncleg.net/gascripts/Statutes/Statutes.asp>

The administrative code also has specific language related to form filings in the following locations:

- 11 N.C.A.C. 10.12xx
- 11 N.C.A.C. 10.11xx

The above references may not be exhaustive, but represent the statutes and administrative code most frequently referenced.

**QUESTION: 6**

Why was the Workers Compensation Underwriting Subcommittee initiated?

**ANSWER: 6**

When the Rate Bureau files a form with the DOI, that form is filed *on behalf of all member companies* pursuant to N.C.G.S. 58-36-55. Thus, every form approved by the DOI (that has been filed by the Rate Bureau) can be used by all member carriers writing Workers Compensation insurance in North Carolina. The Workers Compensation Underwriting Subcommittee was initiated to review all Workers Compensation forms filed with the Rate Bureau as well as provide input to the Bureau on Basic Manual rules and procedures. This subcommittee consists of representatives from member companies who are currently writing Workers Compensation insurance in North Carolina. These experts review the forms for criteria such as whether there is a need for a new North Carolina specific form, whether a proposed form has broad industry appeal, and other standards. A copy of the guidelines used to review forms, as established by the Rate Bureau's Workers Compensation Committee, is attached as Exhibit 1.

**QUESTION: 7**

Who serves on the Workers Compensation Underwriting Subcommittee?

**ANSWER: 7**

This subcommittee is made up of representatives from nine member companies as appointed by the Workers Compensation Committee. In addition, Rate Bureau staff and legal counsel provide administrative and legal assistance.

**Guidelines for Forms Review**

Guidelines to be considered by the **Workers Compensation Underwriting Subcommittee** in deciding whether to recommend adoption and filing of Company proposals:

- (1) Does the proposal come under the jurisdiction of the North Carolina Rate Bureau?
- (2) Does the proposal have broad industry appeal?
- (3) Does the proposal have broad public appeal?
- (4) Are there any legal problems in connection with the proposal?
- (5) Would the proposal present unnecessary administrative burdens for the industry?
- (6) Would the proposal have a potential adverse effect on the maintenance of an actuarially sound data base for existing or proposed Rate Bureau programs?
- (7) Would the Rate Bureau be able to price the proposal properly?
- (8) Is a similar product readily available under approved or proposed filings?
- (9) Should industry input be sought when developing a new proposal or should the first proposal submitted be considered for adoption?
- (10) Are there existing or potential alternative solutions that would better meet the objectives of the proposal?
- (11) Would the proposal present any adverse effect on the administration of the workers compensation insurance residual markets?
- (12) Would the proposal broaden insurance availability?
- (13) Are there any other relevant considerations?

**LARGE DEDUCTIBLE PROGRAM FILING - - - COVER SHEET**

Completion of this form is MANDATORY for all Large Deductible Programs.

With all Large Deductible Programs, the following must be included in the filing:

1. A copy of this completed cover sheet.
2. A summary and explanation of the entire Large Deductible Program.
3. The company-specific large deductible endorsement proposed
4. All rates and rules associated with the Large Deductible Program must also be filed using this cover sheet, but rates and rules filings must be made separately from forms filings. If already filed, provide reference filing number below.

1	Will the Basic Manual Rules apply, without change, to policies written under the Large Deductible Program?	YES / NO
2	Will the Experience Rating Plan apply, without change, to policies written under the Large Deductible Program?	YES / NO
3	Will the premium and losses associated with the Large Deductible Program continue to be reported under the North Carolina Statistical Plan?	YES / NO
4	Will the insurer (or TPA, on its behalf) handle defense and settlement of all claims associated with the Large Deductible Program as if no deductible applies?	YES / NO
5	Is the proposed form an endorsement to the standard WC policy? (Please answer NO if this form is intended to replace the standard policy - WC 00 00 00 A).	YES / NO
6	Are there applicable rates and/or rules associated with this program filing? Please note that Rates and Forms must be submitted in separate filings. For the Rate and Rule filing, please provide the reference filing: Reference Number: <span style="background-color: #cccccc; display: inline-block; width: 200px; height: 1.2em; vertical-align: middle;"></span>	YES / NO
7	Will the loss costs filed by the North Carolina Rate Bureau be used in pricing the policy? If not, please provide the reference filing number for the loss costs to be used. Reference Number: <span style="background-color: #cccccc; display: inline-block; width: 200px; height: 1.2em; vertical-align: middle;"></span>	YES / NO
8	What is the minimum deductible size that will apply under this program?	\$
9	What is the minimum size of risk (in terms of Standard Premium) that will be eligible for this program?	\$

If the answers to Questions 1-5 are "YES" and the minimum deductible size in Question 8 is greater than or equal to \$25,000 per accident, this program, including this Cover Sheet, should be filed directly with the North Carolina Department of Insurance with a copy to the North Carolina Rate Bureau.

**By my signature below, I affirm on behalf of (Carrier) that this filing is for a Large Deductible Program only, and is not being done in conjunction with or concurrent with any other filing for Workers Compensation and Employers Liability Insurance. I also verify that all items contained in the filing attached apply solely to the Large Deductible Program and do not impact policies other than those for which we intend to apply this Large Deductible Program, and that this filing has no impact on uniform policy form filed by the North Carolina Rate Bureau.**

Company Name: \_\_\_\_\_

Filer Name: \_\_\_\_\_

Filer Signature: \_\_\_\_\_

Date \_\_\_\_\_

**RETROSPECTIVE RATING PLAN  
LARGE RISK ALTERNATIVE RATING OPTION (LRARO) PROGRAM FILING  
COVER SHEET**

Completion of this form is MANDATORY for all LRARO Programs.

With all LRARO Programs, the following must be included in the filing:

1. A copy of this completed cover sheet.
2. A summary and explanation of the entire LRARO Program.
3. The company-specific LRARO endorsement proposed
4. All rates and rules associated with the LRARO Program must also be filed using this cover sheet, but rates and rules filings must be made separately from forms filings. If already filed, provide reference filing number below.

1	Will the Basic Manual Rules apply, without change, to policies written under the LRARO Program?	YES / NO
2	Will the Experience Rating Plan apply, without change, to policies written under the LRARO Program?	YES / NO
3	Will the premium and losses associated with the LRARO Program continue to be reported under the North Carolina Statistical Plan?	YES / NO
4	Will the insurer (or TPA, on its behalf) handle defense and settlement of all claims associated with the LRARO Program?	YES / NO
5	Is the proposed form an endorsement to the standard WC policy? (Please answer NO if this form replaces or amends standard policy language - WC 00 00 00 C).	YES / NO
6	Are there applicable rates and/or rules associated with this program filing? Please note that Rates and Forms must be submitted in separate filings. For the Rate and Rule filing, please provide the reference filing: Reference Number: _____	YES / NO
7	Will the loss costs filed by the North Carolina Rate Bureau be used in pricing the policy? If not, please provide the reference filing number for the loss costs to be used. Reference Number: _____	YES / NO
8	What is the minimum size of risk (in terms of Standard Premium) that will be eligible for this program?	\$

If the answers to Questions 1-5 are "YES" and the minimum size of risk in Question 8 is greater than or equal to \$250,000 in Standard Premium, the LRARO program, including this Cover Sheet, should be filed directly with the North Carolina Department of Insurance with a copy to the North Carolina Rate Bureau.

**By my signature below, I affirm on behalf of (Carrier) that this filing is for a LRARO Program only, and is not being done in conjunction with or concurrent with any other filing for Workers Compensation and Employers Liability Insurance. I also verify that all items contained in the filing attached apply solely to the LRARO Program and do not impact policies other than those for which we intend to apply this LRARO Program, and that this filing has no impact on the uniform policy form filed by the North Carolina Rate Bureau.**

Company Name: \_\_\_\_\_

Filer Name: \_\_\_\_\_

Filer Signature: \_\_\_\_\_

Date \_\_\_\_\_