

For Policies Effective 05/01/2017

The Workers' Compensation Rating and Inspection
Bureau of Massachusetts

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Section I - Scope of the Data Reporting Guide

Section I - Scope of the Policy Data Reporting Guide

This guide is intended for use by data reporters. It should not be relied upon by insurers, employers, or producers for purposes of determining their respective obligations under the Massachusetts Workers' Compensation insurance statute (MA WC statute) or regulations. Nor should it be used as a replacement for Massachusetts filed and approved Workers' Compensation insurance programs and manuals.

The intent of this guide is to:

- Clarify the reporting of Massachusetts Workers' Compensation policy and coverage data to the Workers' Compensation Rating and Inspection Bureau of Massachusetts ("WCRIBMA").
- Inform data reporters of the WCRIBMA's processes.
- Promote consistency in policy data reporting which facilitates consistent processing results.

Section II – Business Needs for Workers' Compensation Policy & Coverage Reporting

Section II - Business Needs for Workers' Compensation Policy & Coverage Reporting

The Massachusetts Workers' Compensation policy requirements are described in detail in the Massachusetts Workers Compensation and Employers Liability Insurance Manual (MA WC & EL Manual).

Massachusetts Workers' Compensation policy and coverage data must be reported to the WCRIBMA in order for the WCRIBMA to perform its authorized functions, as described in the MA WC statute (M.G.L. Chapter 152) and MA WC & EL Manual.

A. Coverage Verification/Proof of Coverage

WCRIBMA is the organization authorized to collect proof of coverage data for MA Workers Compensation insurance, on behalf of the Commissioner of Insurance and provide the data to the Massachusetts Department of Industrial Accidents (DIA). The DIA has the ability to view policy and coverage information online, excluding classifications and premiums. The DIA's Online Proof of Coverage application receives a daily update of policy data. The DIA receives a list of policies that were cancelled or nonrenewed during the previous month. The list shows policies that were not reinstated and where no other policies were received to show continuation of coverage as of the cancellation or nonrenewal effective date.

B. Experience Rating

WCRIBMA is the rating organization authorized and responsible for the calculation and distribution of intrastate experience rating modifications and MA All Risk Adjustment Program (ARAP) factors, for policies with Massachusetts exposure. (NCCI calculates and distributes interstate experience ratings and the MA ARAP, for interstate rated policies with Massachusetts exposure.) Policy data is necessary to determine: combinability of risks, the experience rating modification effective date, the appropriate carrier to receive the rating and the statistical data needed in the rating calculation. Refer to the Experience Rating Plan Manual for Workers' Compensation and Employers Liability Insurance and the Massachusetts Special Rules for experience rating.

C. Unit Statistical Reporting

WCRIBMA is the designated statistical agent and licensed rating organization for Massachusetts Workers' Compensation. Policy and coverage data are necessary to determine what unit statistical data is expected and when it is due. Timely and complete unit statistical reporting is necessary for both the ratemaking process, and promulgation of the experience rating modifications. Refer to Part I of the Massachusetts Workers' Compensation Statistical Plan.

D. Assigned Risk

WCRIBMA is the designated administrator of the Massachusetts Assigned Risk Pool. Policy and coverage data are necessary to determine employer eligibility for assigned risk coverage, distribution of assigned risks among assigned risk carriers, carrier compliance with the Assigned Risk Pool Plan of Operations and directional movement of Residual Market Share.

Section II – Business Needs for Workers' Compensation Policy & Coverage Reporting

E. Rating Effective Date

For policies effective on or after 5/1/2017, WCRIBMA establishes the Rating Effective Date of all risks with Massachusetts exposure, except for risks that are subject to interstate experience rating. This includes risks that are not experience rated. Policy and coverage data are required to determine the combinability of risks and their Rating Effective Date.

F. Classification

WCRIBMA is authorized to determine the proper classification of risks covered by workers compensation insurance. Policy data is necessary to review the classification of risks, as well as respond to questions from insureds and carriers.

G. Actuarial Analysis

Policy and Coverage data is used to monitor emerging trends

H. Federal Proof of Coverage Service

The US DOL has authorized WCRIBMA to act on the industry's behalf to collect, translate and electronically transmit reports of policy issuance, endorsement, and notices of cancellation in the approved format to the National Council on Compensation Insurance, Inc. (NCCI), which NCCI will use for the sole purpose of electronic retransmission to the US DOL. **Note:** This guide will not address US DOL reporting requirements.

I. Workers Compensation Analyst Tool (WCAT)

WCAT allows carrier users to create premium and loss reports for the industry in total or for their carrier or carrier group. Reports can also be created for the industry in comparison to their carrier or carrier group.

Section III - MA Proof of Coverage Reporting Requirements

Section III - MA Proof of Coverage Reporting Requirements

The WCRIBMA provides advice and tools for effective reporting of Massachusetts coverage. The WCRIBMA does not enforce the coverage reporting obligations of the carriers. Coverage reporting obligations remain with the insuring carrier.

In order to meet statutory reporting requirements (M.G.L. Chapter 152), WCRIBMA recommends that coverage data be submitted to WCRIBMA at least twice a week.

See Appendix IV – Cancellation/Reinstatement Processing and Policy Status, for additional information.

A. Summary of Coverage Verification Reporting Requirements

| Type of Notice | Must be received by WCRIBMA | Type of Documentation (<u>via Electronic</u> <u>Transaction only</u>) |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Proof of Coverage | Within 5 days of policy issuance. | Policy – anytime MA is in Item 3A Notice of Policy issuance - only if policy cannot be sent in time to meet statutory requirement). Withdrawal of Notice of Nonrenewal (i.e. Reinstatement). |
| Cancellation | At least 10 days before the cancellation effective date. | Notice of Cancellation • Also required when MA is deleted from a multi-state policy. |
| Reinstatement | No specific statutory requirement. HOWEVER WCRIBMA expectation is within 5 days of issuance, because it represents notice of coverage. | Notice of Reinstatement Required when: |
| Nonrenewal | At least 10 days before the nonrenewal effective date. | Notice of Nonrenewal Also required when MA is not included on renewal of a multi-state policy. |

Section III - MA Proof of Coverage Reporting Requirements

B. Proof of Coverage Notes

Notice of Policy Issuance/Proof of Coverage

Whenever possible, WCRIBMA should receive the policy or a Notice of Policy Issuance, by the policy effective date. This will help to avoid Stop Work Orders being issued to employers, by the DIA.

Refer to Section VII.A. Transaction 16 – Proof of Coverage a/k/a Notice of Policy Issuance

Shell Policies

If the WCRIBMA does not have a policy, but receives policy transactions that are not complete policies (e.g. issue notice, cancellation, individual endorsement), the transaction is entered as a "shell" policy to show coverage. For example, if we receive a cancellation effective 03/01/16, for a policy effective 01/01/16, but do not have the policy, the WCRIBMA shows coverage from 01/01/16 to 01/01/17, cancelled effective 03/01/16. The policy is still required.

Carriers may search for un-replaced shell transactions on Manage Policy, by searching on Policy Source.

C. Termination of Coverage (Cancellation or Nonrenewal) Notes

All cancellation and nonrenewal notices received by WCRIBMA are legal notices of coverage termination.

If a notice of cancellation is reported to WCRIBMA, but that cancellation was rescinded or did not otherwise go into effect, a reinstatement must be reported to WCRIBMA.

Reminder: Statutory requirements also specify reasons for mid-term cancellation.

Note: Deletion of MA from Item 3A is considered to be termination of coverage. As such, the requirements of M.G.L. Chapter 152 apply.

D. Reinstatement of Coverage Notes

The reinstatement effective date must match the cancellation effective date.

Reinstatements reported with effective dates subsequent to a cancellation date are processed as if a prior reinstatement and subsequent cancellation had been reported. The WCRIBMA displays the actual cancellation(s) and reinstatement(s) that were reported, but the policy status does not reflect any lapse in coverage.

Reinstatements must be submitted for cancellations that were reported, but were rescinded or did not otherwise go into effect.

Section IV – Terminology Overview

Section IV - Terminology Overview

Electronic reporting terminology is used throughout this document, because policy data is reported electronically and most policy edits use electronic reporting terminology. Electronic terminology is also found on online applications such as Manage Policy and PEEP.

Although fairly close, there are differences between the data as displayed on hard copy documents or forms that are issued to the insured and the electronic reporting of that data.

Terminology and Hard Copy Equivalent

| Term | Description | Hard Copy Equivalent |
|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| Policy Key | Carrier Code Policy Number And Policy Effective Date | Insuring Company's 5 Digit NCCI Carrier Code Number Policy Number And Policy Effective Date |
| Transaction | Policy document Transactions consist of one or more records | Policy Endorsement Cancellation Reinstatement, etc. |
| Transaction Code | Specific type of policy document Transactions are often referred to in terms of their code, for example: "transaction 01" instead of "new policy" | New Policy Renewal Policy Cancellation Endorsement Replacement Reissue, etc. |
| Record | Collection of related data items, within a transaction, that are treated as a unit | Named Insured Address Exposure Endorsement, etc. |
| Record Type Code | Specific type of policy data Records are often referred to in terms of their code, for example: "record 01" instead of "header record" | Named Insured Address Exposure Endorsement, etc. |

Section IV – Terminology Overview

Terminology and Hard Copy Equivalent (cont'd)

| Term | Description | Hard Copy Equivalent |
|------------|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Link Data | Used to identify to which specific policy transaction an individual record belongs | Policy identifying information on documents issued to insured, such as: |
| | Required on each record of each transaction | Insuring Company's 5 Digit NCCI Carrier Code Number |
| | Consists of: | Policy Number |
| | Camian Cada | Policy Effective Date |
| | Carrier Code Policy Number | Document Type (New Policy, Reissue, Cancellation, etc. |
| | Policy Effective Date | Issue Date of Document |
| | Transaction Code | |
| | Transaction Issue Date | |
| | | |
| Submission | Data file that is sent to a data collection organization (WCRIBMA, NCCI, etc.). | One or more hard copy policy documents mailed to a data collection organization. |
| | A policy data submission contains one or more policy data transactions. | |

Section IV – Terminology Overview

Terminology and Hard Copy Equivalent (cont'd)

| Term | Description | Hard Copy Equivalent |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| Replacement | Policy transaction that is used to change previously reported data. | Reissue, rewrite or replacement of a previously issued policy. |
| | Includes all record types that are required, or could be reported, on a new or renewal policy. | The terms reissue, rewrite and replacement have different meanings for different carriers and DCO's. |
| | policy. | All are reported to WCRIBMA as replacements. |
| | | All, except changes to the policy key, are processed by WCRIBMA, as replacements. |
| Endorsement | Document that amends the policy conditions. | Item 3D Individual endorsement form. |
| | For purposes of this Guide, the term "endorsement" will be used primarily in relation to endorsement form numbers. | WC200601 A – example of non-variable data endorsement. |
| | Endorsement form numbers that have no variable data are reported only as part of a list. | WC000308 – example of variable data endorsement to be reported in electronic equivalent of Item 3D and reported in electronic |
| | Variable data endorsement form numbers are reported as part of a list and, in many cases, are reported on the electronic equivalent of the form, as well. | equivalent of the hard copy form. |

Section V - MA WC Policy Data Reporting General Requirements

Section V. MA WC Policy Data Reporting General Requirements

This section addresses overall policy reporting requirements. Refer to Appendix II – Transaction Codes and Records for additional information about transaction codes.

A. Required Documents

The electronic equivalent of the policy documents that were issued to the insured must be submitted to WCRIBMA. This includes:

| Hard Copy Document | Corresponding Electronic Transaction Code (Refer to Appendix II – Transaction Codes and Records) |
|--------------------|--------------------------------------------------------------------------------------------------|
| New policies | 01 – New Policy |
| Renewal Policies | 02 – Renewal Policy |
| Policy changes | 03, 06, 08, 10, 14, 15 – Depends on situation |
| Cancellations | 05 – Cancellation/Reinstatement |
| Reinstatements | 05 – Cancellation/Reinstatement |
| Nonrenewals | 05 – Cancellation/Reinstatement |

As Needed

| NonCompliance/Compliance | 17 – NonCompliance/Compliance of Policy Terms |
|----------------------------|-----------------------------------------------|
| Notifications | and Conditions |
| Notices of Policy Issuance | 16 – Proof of Coverage |

When a change affects multiple items on the policy, particularly with respect to coverage and premium, then all affected items need to be changed and reported. For example, an exposure change on a class code generally affects the premium for other class codes (for example, employers' liability, deductible, construction credit, expense constant) as well as standard premium. The change to all affected class codes and premiums must be reported.

B. Endorsements

All of the standard endorsements (national and MA specific endorsement numbers) that apply to the entire policy and only to Massachusetts must be reported to WCRIBMA, on the Endorsement Identification Record 07, which is the equivalent to Item 3D. For multi-state policies, endorsements that apply only to other states are optional.

Certain variable data endorsement data is also required. Refer to Appendix II - Transaction Codes and Records, item D - Endorsement Record Types for variable data endorsement requirements.

Carrier filed endorsements may be reported, but will be ignored. Exception: Carrier filed Deductible Endorsements applicable to MA. Refer to item J. Policies Subject to Deductibles, below.

Refer to the Tools And Services section of the WCRIBMA's website, for a list of all standard endorsements that have been filed and approved for use in Massachusetts.

Section V – MA WC Policy Data Reporting General Requirements

C. Issue Date

The reported issue date should be the date that the document was issued to the insured. Accurate issue dates allow WCRIBMA to process data in the same order as the carrier.

Cancellations and Reinstatements - The WCRIBMA system determines policy status based, primarily, on the issue date of cancellations and reinstatements. Refer to Appendix IV – Cancellation/Reinstatement Processing and Policy Status.

Policy changes – If a transaction is received with an issue date that is earlier than a transaction that is already stored in the WCRIBMA's database, the transaction will be accepted, but the changes might not be applied.

D. Policy Key

The policy key must be consistent on all documents that are associated with the policy, including unit statistical data.

Multi-state Policies

For multi-state policies that have multiple insuring carriers, refer to Section VII.D. Multi-State Policies.

E. Type of Plan ID Code/Plan Indicator/Plan Type

Type of Plan ID Code is required. It is a code used to identify the type of plan (a/k/a market) used to underwrite the policy.

Type of Plan ID Code is reported in Header Record Type 01.

Assigned risk policies (a/k/a Residual Market) must be reported with the assigned risk Type of Plan ID Code that was assigned by the Massachusetts Workers Compensation Assigned Risk Pool. The MA assigned risk Type of Plan ID Codes are:

- 02 Normal Assigned Risk Policy (a/k/a Servicing Carrier Assigned Risk Policy)
- 05 Assigned Risk Policy written under MA Voluntary Direct Assigned Risk Program (a/k/a VDAC Policy or VDAR Policy)

Section V - MA WC Policy Data Reporting General Requirements

F. Anniversary Rating Date

Effective May 1, 2017 for all new and renewal policies, the Anniversary Rating Date is eliminated. With this change, the classifications, rates and rules of the Massachusetts Workers' Compensation and Employers' Liability Insurance Manual that apply to a policy are those that are in effect as of the policy effective date, unless otherwise specified. Refer to the Massachusetts Workers' Compensation and Employers' Liability Insurance Manual for specific information.

G. Rating Effective Date

Effective May 1, 2017 for all new and renewal policies, the Rating Effective Date (RED) is the effective date of an experience rating (experience modification, merit rating or MA ARAP). Experience rated policies are policies that are subject to experience modification, merit rating or MA ARAP. When multiple rating effective dates apply to a policy, the policy must be reported with split exposures and premiums. Refer to Section VII.G Multiple Rating Effective Dates, for examples.

Exception: If the rating type(s) and rating factor(s), effective on the RED, are the same as the rating type(s) and rating factor(s) that were applied to the policy effective on the policy effective date, then split premiums and exposures are not required.

Below are guidelines for split reporting, when multiple REDs apply to a policy.

- No change in type of merit split reporting not required
- Change from one type of merit to another type of merit split reporting required
- Change from DNQ to any type of merit rating or to experience modification split reporting required
- Change from any type of merit rating or experience modification to DNQ split reporting required
- No change to experience modification and ARAP split reporting not required
- Change to experience modification or ARAP split reporting required

H. Experience Modification, Merit Rating and ARAP

Experience Modification

Experience modifications may only be reported in state premium record 04. Class code 9898 is not acceptable in MA.

Merit Rating

Merit ratings may only be reported in exposure record 05, using the applicable merit rating classification code. The experience modification/merit field in state premium record 04 must be 1.00 (reported as 1000)

ARAP

ARAP data must be reported in two records:

- ARAP factor state premium record 04
- ARAP premium exposure record 05, using classification code 0277

Refer to Section VII.G Multiple Rating Effective Dates, for reporting examples.

Section V - MA WC Policy Data Reporting General Requirements

I. Experience Modification Effective Date

The experience modification effective date is used to report the date that an experience rating (modification, merit or ARAP) is applied (endorsed) to the policy. It might be the same as, or different from, the policy effective date or the Rating Effective Date.

When multiple state premium records are reported, the experience modification effective date must be different for each state premium record. The experience modification effective date for the first record may be 0 or equal to the policy effective date. An experience modification effective date of 0 is considered to be equal to the policy effective date. Refer to Section VII.G. Multiple Rating Effective Dates and Section VII.H. Late Application of Experience Modification/ARAP/Merit Rating, for examples.

J. Policies Subject to Deductibles

The appropriate deductible endorsement must be reported to WCRIBMA.

The appropriate endorsement depends on the actual deductible program applied to the MA portion of the policy and must clearly identify that the endorsement applies to MA.

For electronic reporting, refer to Section VII.I. Deductible Endorsements.

Small and Medium Deductible Programs

Massachusetts has two filed and approved deductible programs. One program includes small and medium deductibles. One program is a medium deductible program.

For program requirements, refer to the MA WC & EL Manual, Part 1-Special Programs and to the WCRIBMA website home page, Program Overviews.

The endorsements, for the MA filed and approved small and medium deductible programs are:

- WC200602 Massachusetts Benefits Deductible Endorsement (small and medium deductibles)
- WC200603 Massachusetts Benefits Claim and Aggregate Deductible Endorsement (medium deductible)

Other small or medium deductible programs and associated endorsements must receive approval, from the Massachusetts Division of Insurance (DOI).

Large Deductible Programs

Carriers must receive approval for large deductible programs and the associated endorsements, from the Massachusetts Division of Insurance (DOI).

For program requirements, refer to the WCRIBMA website home page, Program Overviews.

WCRIBMA does not keep a record of carrier filed deductible endorsements. WCRIBMA identifies carrier deductible endorsements, as such, when they are reported, on the electronic Deductible Endorsement Record (Record 43). WCRIBMA stores the endorsement data applicable to MA, as generic endorsement WC990603

Section V – MA WC Policy Data Reporting General Requirements

K. Policy Greater than One Year and Sixteen Days in Length

If the complete policy period is not a multiple of 12 months, either the first unit or the last unit may be less than 12 months. When there are three periods, the middle unit may <u>not</u> be less than 12 months. Use the Policy Period Endorsement (WC000405) to specify whether the first unit or last unit is less than 12 months.

Policy reporting of the second or third period is not required. However, when reported, the second or third period must be reported on Transaction 04.

The Policy Period Endorsement (WC000405) may not be used for standard one year policies (policies up to and including one year and sixteen days in length).

L. Employee Leasing/PEO/Temporary Employment Agencies and Staffing Firms

Employee Leasing Companies (ELCs), as defined by MA Regulation 211 CMR 111, are employers who enter into Employee Leasing Arrangements with their Clients that retain for the ELC a substantial portion of management functions. In accordance with MA Manual Rule IX-E, ELCs are required to purchase a separate policy for each client to whom they lease employees.

Professional Employer Organizations (PEOs), as defined by MA Regulation 454 CMR 30, are co-employers who enter into Professional Employer Agreements that allocate employer responsibilities like workers' compensation insurance to either the PEO or the Client. In accordance with MA Manual Rule IX-F, when the PEO is allocated that responsibility, they must obtain coverage as an employee leasing company does, but when the Client is allocated that responsibility, the Client obtains the coverage.

Temporary employment agencies and staffing firms provide employees to other businesses but these arrangements are short-term or seasonal and not Employee Leasing Arrangements as defined by 211 CMR 111.03 or Professional Employer Agreements as defined by 454 CMR 30.

The basic requirements for ELCs, PEOs and Temporary/Staffing firms are listed below.

Refer to the MA WC & EL Manual, Rules IX-E and IX-F, as well as Circular Letter No. 2367, for complete policy issuance requirements.

Refer to Section VII.F. Employee Leasing/PEO/Temporary Employment Agency and Staffing Firm Policies, for electronic reporting requirements.

Section V – MA WC Policy Data Reporting General Requirements

a. <u>Policies Obtained by an ELC or PEO for Employees Leased to a Client Company</u> (<u>PEO Responsible for Policy</u>)

- A separate policy must be issued for each ELC or PEO client.
- The named insured, FEIN and mailing address on the policy must be those of the employee leasing company/PEO.
- WC200304 Massachusetts Employee Leasing Endorsement must be included with the policy and must provide the client's name, FEIN and MA address.
- Refer to Section VII. F., for the specific reporting requirements applicable to these
 policies.

Note: The experience of the leasing client is combined with the experience of the client's direct-pay employees for experience rating. It is <u>not</u> combined with the experience of the employee leasing company or PEO.

Policies Obtained by PEO Client for Leased Employees (PEO Client Responsible for Policy)

- A policy must be issued to provide coverage only to the employees that the client leases from the PEO.
- The named insured, FEIN and mailing address on the policy must be those of the PEO client.
- Refer to Section VII. F., for the specific reporting requirements for these policies.
- WC200308 Massachusetts Professional Employer Organization (PEO) Extension Endorsement must be included with the policy and must provide the PEO's name, FEIN and address.
- Refer to Section VII. F., for the specific reporting requirements applicable to these policies.

Note: The experience of the leasing client is combined with the experience of the client's direct-pay employees for experience rating. It is not combined with the experience of the employee leasing company or PEO.

c. Employee Leasing/PEO Client Policies for the Employees the Client Pays Directly

Some ELC/PEO clients lease some of their employees from an ELC or PEO and pay some of their employees directly. Those two groups of employees cannot be insured on the same policy.

- A policy must be issued to provide coverage only to the client's direct-pay employees.
- The named insured and FEIN, on the policy, must be those of the employer (the ELC/PEO client).
- WC000322 Professional Employer Organization (PEO) Client Exclusion Endorsement, which excludes coverage for leased employees, must be on the policy.
- WC000322 must include the name and address of the ELC/PEO.
- The coverage for the leased employees must be insured on a separate policy, with

Section V - MA WC Policy Data Reporting General Requirements

either WC200304 or WC200308 attached, as described above.

Refer to Section VII. F., for the specific reporting requirements for these policies.

d. Policies for Employee Leasing Company's/PEO's Non-leased Employees

- A single policy is required for all of the employee leasing company's/PEO's non-leased employees. If the ELC or PEO does employee leasing and provides temporary employees, then this policy will provide coverage for the temporary employees.
- WC200305 Massachusetts Exclusion of Coverage for Leased Employees Endorsement (Labor Contractors) must be included on the policy.
- Refer to Section VII. F., for the specific reporting requirements applicable to these policies.

e. Temporary Employment Agency/Staffing Firm Policies

Policies for temporary employment agencies and staffing firms are issued as non-employee leasing policies. WC200305 Massachusetts Exclusion of Coverage for Leased Employees Endorsement (Labor Contractors) is mandatory on assigned risk policies of such employers. Use of the endorsement is optional on voluntary policies of such employers.

Refer to Section VII. F., for the specific reporting requirements applicable to these policies.

M. Multi-state Policies

Multi-state policies that include MA in Item 3A, at any time during the policy period, must be reported and must include all of the states that are in Item 3A. WCRIBMA tracks the addition and deletion of states in Item 3A.

WCRIBMA considers a policy to be multi-state, as long as the policy included at least one other state in Item 3A, for any part of the policy term.

Refer to Section VII.D. Multi-State Policies, for multi-state policy reporting requirements.

Section V – MA WC Policy Data Reporting General Requirements

N. Wrap-Up/OCIP Policies

Policies issued to two or more legal entities, engaged in a large construction or demolition project, may be combined for premium discount purposes, when they meet the specific requirements in the MA WC & EL Manual, Rule VII-G. These projects are also known as wrapups or OCIPs (Owner Controlled Insurance Program). Basic requirements are below.

- A separate policy must be issued for each subcontractor.
- Experience from wrap-up policies is combined with the subcontractor's other policies for experience rating.
- Wrap-up policies are not used to determine the insured's rating effective date, unless the insured only has wrap-up policies.
- · Wrap-up policies must include:
 - Wrap-up coding to identify the policy as a wrap up/OCIP policy (wrap up type code 1).
 - Wrap project description (address type 4).
 - WC000302 (Record 25) Designated Workplaces Exclusion Endorsement Exclude coverage for all operations, except the particular project or contract.
 - WC000301 (Record 24) Alternate Employer Endorsement Name the appropriate entity that is in control of the project.

Note: WCRIBMA will append the term "wrap-up" to the primary named insured for easy identification within our system

Section VI - Policy Changes

Section VI. Policy Changes

This section addresses certain requirements for reporting policy changes.

Refer to Appendix II – Transaction Codes and Records for transaction code descriptions.

A. Changes Reported as Policy Replacement Transactions

Transaction codes 06, 08, 10, 14 and 15 are policy replacement transactions.

Policy replacement transactions are complete policy transactions. They include the data that is not changing, as well as, the changed data.

WCRIBMA processes transaction code 06 as a new policy. The original policy is not updated.

WCRIBMA processes transaction codes 08, 10, 14 and 15 as updates to the existing policy, unless they are the first reporting of the policy. These transactions are basically treated as interchangeable. However, transaction code 15 is the preferred method for reporting the addition and deletion of Item 3A states.

Transaction code 04 (Annual Rerate Endorsement) is sometimes referred to as a policy replacement transaction, but it is not. It contains the same record types as a complete policy, but is used only to report the premiums and exposures for the second and third periods of policies that are greater than 1 year and 16 days in length. It does not replace the policy.

B. Changes Reported as Individual Endorsements

The addition of variable data endorsements, or changes to the data in a previously issued variable data endorsement, may be reported in one of two ways:

- Policy replacement transaction code 08, 10, 14
- Change transaction code 03

In either case, the variable data endorsement record and the endorsement effective date are required.

Endorsement deletions, as well as, the addition of endorsements that are not variable data endorsements are handled via Endorsement Identification Record 07, using policy replacement transactions 08, 10 or 14.

Section VI - Policy Changes

C. Changes Effective On the Policy Effective Date

If the changes were not part of the original reporting, then a change transaction 03, 06, 08, 10, 14 or 15 is reported.

If changes occur on the same issue date as a new policy, renewal policy or policy key change transaction, either:

• (Preferred) Report the transaction 01, 02 or 06, without the changes and report the changes on transaction 08, 10, 14 or 15.

OR

• Report only change transaction 08, 10, 14 or 15.

D. Changes Effective After the Policy Effective Date (a/k/a Mid-Term Changes)

Changes effective after the policy effective date are reported on a change transaction 03, 06, 08, 10, 14 or 15.

E. Policy Changes Effective Date and Policy Changes Expiration Date

1. Policy Changes Effective Date

The policy changes effective date is used on policy replacement transaction codes 08, 10, 14 and 15 to report the effective date(s) of changes, when data is added or when previously reported data is changed. It is on records 01 through 07.

If the record is not changing and the data never changed in the past, then the policy changes effective date may be 0 or the policy effective date. If the record is not changing, but the record was added in the past, or the record changed in the past, then the date should be the policy changes effective date that was reported on the previous transaction.

2. Policy Changes Expiration Date

The policy changes expiration date is used on policy replacement transaction codes 08, 10, 14 and 15 to delete a record when the deletion is after the policy effective date. The policy changes expiration date is the effective date of the deletion. It is on records 01 through record 07.

When the deletion is effective on the policy effective date, then the change transaction must not include the record to be deleted. (Note that policy changes effective date is also reported on records to be deleted. It is the policy effective date or the date the record was previously added.)

If the record is not to be deleted, the policy changes expiration date may be 0 or the policy expiration date.

Section VI – Policy Changes

Example - Policy Effective 5/21/15- 5/21/16, transaction 10, issued 8/30/15

| Change | Record | Effective Date of Change | Policy Changes Effective Date | Policy Changes Expiration Date |
|----------------------------------------------------------------|-----------------------|--------------------------------|----------------------------------------|-----------------------------------------|
| Add Additional Named Insured EFG Corp | Name Record 02 | 8/30/15 | 8/30/15 | 5/21/16 or all zeros |
| Delete Additional Named Insured ABC Corp | Name Record 02 | 8/30/15 | 5/21/15 or all zeros | 8/30/15 |
| Add Class Code 7380 | Exposure Record 05 | 5/21/15 | 5/21/15 or all zeros | 5/12/16 or all zeros |
| Delete Class Code 8742 | Exposure Record 05 | 5/21/15 | N/A * | N/A* |
| Change Street on Previously Reported Additional Location | Address Record 03 | 8/15/15 | 8/15/15 | 5/21/16 or all zeros |

^{*}Class 8742 is not reported on the change transaction, because it is being deleted as of the policy effective date.

F. Policy Key Changes

Changes to the policy key must be reported. The required transactions are:

- Cancellation (Transaction Code 05) for the policy that is being replaced, with cancellation reason of rewrite (code 07).
- The replacement policy:
 - If the replacement policy effective date is the same date as the cancellation effective date of the original policy, then Transaction Code 06 - Policy Key Change may be used
 - If the replacement policy effective date is different from the cancellation effective date of the original policy, then Transaction Code 01 or 02 must be used.

Section VI - Policy Changes

G. Experience Modification, Merit Rating or ARAP Changes

Changes to experience modifications, merit ratings or ARAPs require the reporting of a complete policy replacement transaction 08, 10 or 14.

Based on Experience Rating Plan Rules, it might be necessary to split a policy due to late application of an experience modification, merit rating or ARAP. These policies must be reported with split exposures and premiums.

Refer to Section VII.H. Late Application of Experience Modification/ARAP/Merit Rating, for examples.

H. Split Policies due to Miscellaneous Changes

Policies that are split for reasons, other than a change in rating effective date or late application of an experience modification, merit rating or ARAP, should be reported using exposure records (Record Type 05), when appropriate. Also, the final audit and unit statistical reporting require the exposure to be split. Examples of such policies are mid-term changes to Employers' Liability limits.

Note that neither the header record (Record Type 01) nor the state premium record (Record Type 04) may be split for these types of changes

I. Rate Changes

Rate changes that are applied as the result of an approved rate filing require the reporting of a complete policy replacement transaction code 08, 10 or 14.

J. Common Policy Changes and Corresponding Transactions

Below are some common types of policy changes and the transactions selected in WCPOLS to make those changes.

| For Change in: | WCRIBMA Recommends the Use of Transaction Type: | Optionally Use Transaction Type 03 using Endorsement: |
|------------------------|-----------------------------------------------------|----------------------------------------------------------------|
| Address - Mailing | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |
| Additional Location | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |
| Agent/Producer-Address | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |
| Agent/Producer-Name | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |

Section VI - Policy Changes

Common policy changes and corresponding transactions (cont'd)

| For Change in: | WCRIBMA Recommends the Use of Transaction Type: | Optionally Use Transaction Type 03 using Endorsement: |
|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------|
| ARAP | 08-Rating Change or | N/A |
| | 14-Miscellaneous Change | |
| Carrier-Address (Issuing/Servicing Office) | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |
| Carrier Code | 06-Policy Replacement Key Field Change | N/A |
| Classification Code | 08-Rating Change or | N/A |
| | 14-Miscellaneous Change | |
| Endorsements - Add Non- Variable or Delete any Endorsements where other changes to the policy are not required | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |
| Endorsements - Add Variable Data Endorsements where other changes to the policy are not required | 10-Non-Rating Change or 14- Miscellaneous Change | The applicable endorsement record – refer to Appendix II – D |
| Exposure | 08-Rating Change or | N/A |
| | 14-Miscellaneous Change | |
| Experience Modification | 08-Rating Change or | N/A |
| | 14-Miscellaneous Change | |
| Item 3A - Add State | 15-Add/Delete State Change | N/A |
| Item 3A - Delete state Other than MA | 15-Add/Delete State Change | N/A |
| Item 3A - Delete MA | 05-Cancellation/Reinstatement | N/A |
| Item 3C - Add State | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |
| Item 3C - Delete State | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |
| Legal Nature of Insured | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |
| Limits of Liability | 08-Rating Change or 14-Miscellaneous Change | N/A |

Section VI - Policy Changes

Common policy changes and corresponding transactions (cont'd)

| For Change in: | WCRIBMA Recommends the Use of Transaction Type: | Optionally Use Transaction Type 03 using Endorsement: |
|-------------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------|
| Merit Rating | 08-Rating Change or 14-Miscellaneous Change | N/A |
| Multiple non-key field changes that change premium and non-premium data | 08-Rating Change or 14-Miscellaneous Change | N/A |
| Named Insureds | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |
| Policy Effective Date | 06-Policy Replacement Key Field Change | N/A |
| Policy Expiration Date | 10-Non-Rating Change or 14- Miscellaneous Change | N/A |
| Policy Number | 06-Policy Replacement Key Field Change | N/A |
| Premium Discount | 08-Rating Change or 14-Miscellaneous Change | N/A |
| Rating Effective Date | 08-Rating Change or 14-Miscellaneous Change | N/A |
| Rates | 08-Rating Change or 14-Miscellaneous Change | N/A |

Section VII - Question and Error-Prone Areas

Section VII. Question and Error-Prone Areas

This section addresses reporting situations that tend to result in questions or errors. Electronic format requirements, additional information on electronic transactions and records are addressed in the appendices.

A. Transaction Code 16 - Proof of Coverage a/k/a Notice of Policy Issuance

Also a/k/a: Coverage Notice; Massachusetts Notice of Policy Issuance; Notice of Issuance; Issue Notice

Transaction 16 requires the records and fields, below.

| Required Records | Required Fields |
|---------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| 01 – Header Record | Policy Expiration Date |
| | Employee Leasing Policy Type Code * |
| | Type of Plan ID Code |
| 02 – Name Record | Name Link Identifier |
| | Name of Insured |
| | Continuation Sequence Number |
| | If employee leasing/PEO policy: |
| | Follow the name reporting and coding requirements in Section VII. F.Employee Leasing/PEO/Temporary Employment Agency and Staffing Firm Policies |
| 03 – Address Record | Type of Address Code |
| | Mailing Address-Street City, State, Zip Code * |
| | Issuing Office Address – Street, City, State, Zip Code |
| 04 – State Premium Record | State Code 20 |

Section VII – Question and Error-Prone Areas

B. Discrepancy Between Policy & Proof of Coverage/Issue Notice

If the policy is different from the Issue Notice, the discrepancy must be resolved. The resolution of the discrepancy depends on the situation.

| Discrepancy | Electronic Requirement |
|-----------------------|--------------------------------------------------------------------------------------------------------|
| Carrier Code | Transaction Code 05 |
| Policy Number | (Cancellation/Reinstatement) |
| Or | With |
| Policy Effective Date | Cancellation/Reinstatement ID Code 4 (Cancellation of Issue Notice) |
| | Complete Policy Transaction with the correct data |
| | 01 (New Policy) |
| | 02 (Renewal Policy) |
| | 15 (Add/Delete State) |
| | New Transaction Code 16 (Proof of Coverage) - only If necessary to meet proof of coverage requirements |
| Expiration Date | Complete Policy Transaction |
| Insured's name* | 01 (New Policy) |
| Mailing Address | 02 (Renewal Policy) |
| Or | 15 (Add/Delete State) |
| FEIN | |

^{*}After an issue notice has been sent to WCRIBMA, if an additional name has been added for MA, but the policy cannot be issued yet, then notify WCRIBMA and send a new Proof of Coverage Transaction that includes all names.

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C. Experience Rating Code and Interstate Risk ID

The experience rating code and Interstate Rating ID are reported in Header Record 01. The code that applies to a policy depends on the type of experience rating that applies to the insured and the Item 3A states on the policy. Refer to the Experience Rating Plan(s) applicable to the Item 3A state(s).

Experience Rating Code and Interstate Risk ID Reporting Requirements

| Code | Text | When to Use | What to Report in Interstate RIsk ID field |
|------|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| 1 | Interstate Rated Only | Insured qualifies for Interstate Rating and all Item 3A states participate in Interstate Rating | Interstate Risk ID NCCI Risk ID when another state's experience modification is applied to MA |
| 2 | Inter- and Intrastate Rated | Same as for Code 1, except some Item 3A states do not participate in Interstate Rating | Interstate Risk ID NCCI Risk ID when another state's experience modification is applied to MA |
| 3 | Intrastate Rated Only | Insured does not qualify for Interstate Rating, but does qualify for MA experience rating (experience modification or merit rating) | Zeros |
| 5 | Not Rated | Insured does not qualify for Interstate Rating or MA experience rating | Zeros |

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Section VII - Question and Error-Prone Areas

D. Multi-State Policies

When the MA carrier is different from the Information Page carrier, the Information Page carrier must always be reported in the link data and the MA carrier must always be reported on State Premium Record 04. The MA carrier must also be reported on unit statistical reports.

Reminder: Deletion of MA from Item 3A is subject to the statutory requirements for termination of coverage. Refer to Section III.

Multi-state Policy reporting requirements

| Add/Delete Situation | Hard Copy Equivalent | Electronic Requirements* |
|--------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| New/renewal policy - Item 3A includes MA | New or Renewal Policy | Transaction 01 (New Policy) or Transaction 02 (Renewal Policy) |
| and other states | | Record 04 (State Premium) for each state that is included in Item 3A |
| Add MA to Item 3A after policy issuance | Policy replacement/reissue | Transaction 15 (Add/Delete State Change) |
| | | Record 04 (State Premium) for each state that is included in Item 3A |
| | | MA Record 04 must include: State Add/Delete Indicator = "A" Policy Changes Effective Date = Effective date that MA is added to the policy |
| Delete MA from Item 3A after policy | MA Cancellation Notice | Transaction 05 (Cancellation/Reinstatement) |
| issuance | | Cancellation Effective Date = Effective Date that MA is deleted from the policy |
| | | Do Not use Txn 15 to notify MA that MA is being deleted |
| | | |
| Add MA back to Item 3A after MA was | Reinstatement of the previous MA cancellation | Transaction 05 (Cancellation/Reinstatement) |
| deleted – adding back with the same date that MA was deleted | | Reinstatement Effective Date = Effective Date that MA was <u>originally</u> <u>deleted</u> from the policy |
| | | Txn 15 with Add/Delete Indicator = "A" may also be reported, but reinstatement is still required |

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Multi-state Policy reporting requirements (cont'd)

| Add/Delete Situation | Hard Copy Equivalent | Electronic Requirements* |
|--------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Change the date that MA was added | Policy Replacement | Contact WCRIBMA Data Operations (Carrier's Data Operations contact, if known) |
| MA was on expiring policy, but will not be on renewal policy | Nonrenewal to MA on the expiring policy | Transaction 05 (Cancellation/Reinstatement) With Transaction ID Code 3 Nonrenewal |
| MA is in Item 3A – Add another state | Policy Replacement/Reissue/ Endorsement | Transaction 15 (Add/Delete State Change) Record 04 (State Premium) for each state that is included in Item 3A Record 04 of State being added: State Add/Delete Indicator = "A" Policy Changes Effective Date = Effective date that the state is added to the policy |
| MA is in Item 3A – Delete another state | Policy Replacement/Reissue/ Endorsement | Transaction 15 (Add/Delete State Change) Record 04 (State Premium) for each state that is included in Item 3A Record 04 of State being Deleted: Effective on Policy Effective Date OR on the date originally added. • Do not report Record 04 for that state. Effective Mid-term: • State Add/Delete Indicator = "D" • Policy Changes Expiration Date = effective date that the state is deleted from the policy. |

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Section VII – Question and Error-Prone Areas

E. Wrap-Up/OCIP Policies

Electronic reporting requirements for wrap-up/OCIP policies are below.

| Electronic Requirement | How to Report Requirement |
|----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| Identify policy transaction as a wrap up policy | Header Record 01: Wrap-Up Code = 1 (Wrap- Up Policy) |
| Wrap up project description | Address Record 02: Address Type Code 4 (Wrap-Up/OCIP Project Description) |
| Exclude other states coverage | Other States Coverage Record 06: Inclusion/Exclusion Code 3 (No other states coverage afforded.) |
| WC000302 Designated Workplaces Exclusion Endorsement - Exclude coverage for all operations, except the particular project or contract | Record Type Code 25 Designated Workplaces Exclusion Endorsement |
| WC000301 Alternate Employer Endorsement - Name the appropriate entity that is in control of the project | Record Type Code 24 Alternate Employer Endorsement |

Note: WCRIBMA will append the term "wrap-up" to the primary named insured for easy identification within our system.

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Section VII - Question and Error-Prone Areas

F. Employee Leasing/PEO/Temporary Employment Agency and Staffing Firm Policies

Below are the electronic reporting requirements for employee leasing/PEO policies: employee leasing clients – leased employees; employee leasing company's/PEO's non-leased employees; and employee leasing client – client's direct-pay employees. Also included are the electronic reporting requirements for temporary employment agency/staffing firm policies.

For Employee Leasing/PEO policy issuance information refer to Section V. L. Employee Leasing/PEO/Temporary Employment Agencies and Staffing Firms

Policies Obtained by an ELC or PEO for Employees Leased to a Client Company (PEO Responsible for Policy

| Electronic Requirement | How to Report Requirement |
|--------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Identify policy as client policy | Header Record 01: |
| | Employee Leasing Policy Type Code = 5 (Employee Leasing Policy for Leased Workers of a Single Client Company) |
| Named insured/FEIN - Must be the | Name Record 02: |
| Employee Leasing Company/PEO | Name Link Code = 001 |
| | Continuation Sequence Code = 001 |
| | PEO/Client Company Code = P |
| | Additional PEO names (e.g. PEO dba name): |
| | PEO/Client Company Code = P |
| Client name(s) (e.g. client legal name and | Name Record 02: |
| client dba – only one legal client entity is allowed per policy) | Name link Code > 001 |
| | Continuation Sequence Code =>001 |
| | PEO/Client Company Code = C |
| Mailing Address – must be that of the | Address Record 03: |
| Employee Leasing Company/PEO | Address Type Code = 1 (Mailing Address) |
| WC200304 Massachusetts Employee Leasing Endorsement Must include Leasing Client Name, FEIN and Address | Record FA - Massachusetts Employee Leasing Endorsement Record: |
| | Endorsement Number WC200304 |
| | State Code 20 |
| | Record 07 (Endorsement Identification Record): |
| | State Code 20 (or 00 for MA single state policy) |
| | Include WC200304 |

Note: Multiples of Record FA should be reported, as needed, to report long client names or additional client locations. Leasing Client Name, FEIN and Address on each Record FA must be completed.

Section VII – Question and Error-Prone Areas

2. Policies Obtained by PEO Client for Leased Employees (PEO Client Responsible for Policy)

| Electronic Requirement | How to Report Requirement |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Identify policy as Client policy | Header Record 01: |
| | Employee Leasing Policy Type Code = 9 (Employee Leasing Policy for Leased Workers of a Single Client Company Where the Policy is Purchased by the Client) |
| Named insured/FEIN - Must be that of the | Name Record 02: |
| PEO Client | Name Link Code = 001 |
| | Continuation Sequence Code = 001 |
| | PEO/Client Company Code = C |
| | Additional Client names (e.g. client dba name): |
| | PEO/Client Company Code = C |
| PEO name(s) (e.g. PEO legal name and PEO dba) | Name Record 02: |
| | Name link Code > 001 |
| | Continuation Sequence Code =>001 |
| | PEO/Client Company Code = P |
| Mailing Address – must be that of the Client | Address Record 03: |
| | Address Type Code = 1 (Mailing Address) |
| WC200308 Massachusetts Professional Employer Organization (PEO) Extension Endorsement | Record FA - Massachusetts Employee Leasing Endorsement Record: |
| | Endorsement Number WC200308 |
| Must include PEO Name, FEIN and Address | State Code 20 |
| | Record 07 (Endorsement Identification Record): |
| | State Code 20 (or 00 for MA single state policy) |
| | Include WC200308 |

Section VII – Question and Error-Prone Areas

3. Employee Leasing/PEO Client Policies for the Employees the Client Pays Directly

| Electronic Requirement | How to Report Requirement |
|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Identify policy as Client policy for non-leased employees | Header Record 01: |
| | Employee Leasing Policy Type Code = 6 (Client Company Policy For Non-Leased Workers of Client Company) |
| Named insured/FEIN – Client Company | Name Record 02: |
| must be the primary name. | Name Link Code = 001 |
| | Continuation Sequence Code = 001 |
| | PEO/Client Company Code = C |
| Additional named insureds (additional | Name Record 02: |
| combinable client companies or combinable non-client companies) | Name Link Code > 001 |
| non-olient companies) | Continuation Sequence Code > = 001 |
| | PEO/Client Company Code = blank or C |
| | (PEO name must not be reported on Record 02) |
| Address – Client Company address must be | Address Record 03 |
| mailing address and/or location of operations | Address Type Code = 1 (Mailing Address) |
| operations | As needed: |
| | Address Type Code = 2 (Location of Operations) |
| WC000322 Professional Employer Organization (PEO) Client Exclusion Endorsement | Record FA - Massachusetts Employee Leasing Endorsement Record: |
| | Endorsement Number WC000322 |
| | State Code 20 |
| | Record 07 (Endorsement Identification Record): |
| | State Code 20 (or 00 for MA single state policy) |
| | Include WC000322 |

Section VII – Question and Error-Prone Areas

4. Policies for Employee Leasing Company's/PEO's Non-leased Employees

| Electronic Requirement | How to Report Requirement |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| Identify policy as policy for employee | Header Record 01: |
| leasing company's/PEO's non-leased employees | Employee Leasing Policy Type Code = 3 (Employee Leasing Policy for Non-Leased Workers of Employee Leasing Company) |
| Named insured/FEIN - Must be the | Name Record 02 |
| Employee Leasing Company/PEO | Employee Leasing Company/PEO – Name Link Code 001 |
| | Continuation Sequence Code 001 |
| | PEO/Client Company Code P |
| | Additional PEO names (e.g. PEO dba name): |
| | PEO/Client Company Code = P |
| WC200305 | Record 07 (Endorsement Identification Record): |
| Massachusetts Exclusion of Coverage for Leased Employees Endorsement (Labor | State Code 20 (or 00 for MA single state policy) |
| Contractors) | Include WC200305 |

Note: Proper leasing coding and endorsements are so important to processing of the policy the WCRIBMA may start to reject improperly submitted leasing policies.

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Section VII – Question and Error-Prone Areas

5. Policies for Temporary Employment Agency/Staffing Firm Policies

| Electronic Requirement | How to Report Requirement |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| Identify policy as non-employee leasing policy | Header Record 01: Employee Leasing Policy Type Code = 1 (Non-Employee Leasing Policy) |
| Named insured/FEIN – Must be the Temporary Employment Agency or Staffing Firm, either as primary name or as additional named insured | Name Record 02: Name Link Code = >001 Continuation Sequence Code = 001 PEO/Client Company Code = blank |
| Address – Temporary Employment Agency or Staffing Firm address must be included; mailing address and/or location of operations | Address Record 03: Address Type Code = 1 (Mailing Address) As needed: Address Type Code = 2 (Location of Operations) |
| WC200305 Massachusetts Exclusion of Coverage for Leased Employees Endorsement (Labor Contractors) (mandatory for residual market policies; optional for voluntary market policies) | Record 07 (Endorsement Identification Record): State Code 20 (or 00 for MA single state policy) Include WC200305 |

Section VII - Question and Error Prone Areas

G. Multiple Rating Effective Dates

The examples below are illustrative of how policies should be split, when multiple rating effective dates apply. They only include some of the required fields and records and are not in WCPOLS format.

Note: When multiple record 04s are reported, the rating effective date must be different for each record 04. The rating effective date in the record 04 for the first split must be all zeros or equal to the policy effective date. All zeros will be considered to be equal to the policy effective date. For each record 05 of the first split, the exposure period effective date may be all zeros or equal to the policy effective date. If there are no changes to any factors, effective on the rating effective date, a split is not required.

1. Experience Modification - RED

Transaction Codes 01, 02, 04, 06

No change in experience modification and no change in ARAP on RED Policy 8/25/17 – 8/25/18

REDs applicable to policy 5/15/17 and 5/15/18

Rate Revision that applies as of 8/25/17 (policy effective) applies to entire policy

Split reporting not required, because no change in any rating type or any rating factor

| State Premium Record 04 | ARD | Experience Mod Factor | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|-------|---------------------------|--------------------------|---------|-------------------|-------------------|
| 1st record | 0 | .98 | 0 | 1.00 | 0 | 0 |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 1400 | 0 | 0 |

2. Experience Modification - RED

Transaction Codes 08, 10, 14, 15

No change in experience modification and no change in ARAP on RED

Policy 8/25/17 - 8/25/18

REDs applicable to policy 5/15/17 & 5/15/18

Rate Revision that applies as of 8/25/17 (policy effective) applies to entire policy

Split reporting not required, because no change in any rating type or any rating factor

| State Premium Record 04 | ARD | Experience Mod Factor | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|-------|---------------------------|--------------------------|---------|-------------------|-------------------|
| 1st record | 0 | .98 | 0 | 1.00 | 8/25/17 or 0 | 8/25/18 or 0 |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 1400 | 8/25/17 or 0 | 8/25/18 or 0 |

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Section VII - Question and Error Prone Areas

3. Experience Modification and ARAP - RED

Transaction Codes 01, 02, 04, 06

No change in experience modification on RED; Change in ARAP on RED

Policy 8/25/17 - 8/25/18

REDs applicable to policy 5/15/17 & 5/15/18; no change in experience modification, but change in ARAP on RED effective 5/15/18

Rate Revision that applies as of 8/25/17 (policy effective) applies to entire policy

| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|-------|---------------------------|--------------------------|---------|-------------------|-------------------|
| 1st record | 0 | 1.02 | 0 | 1.03 | 0 | 0 |
| 2nd record | 0 | 1.02 | 5/15/18 | 1.01 | 0 | 0 |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 1400 | 0 | 0 |
| 2nd record | 0277 | 0 | 0 | 43 | 0 | 0 |
| 3rd record | 0010 | 5/15/18 | .07 | 700 | 0 | 0 |
| 31d record | 8810 | 3/13/10 | .01 | 700 | U | 0 |

4. Experience Modification and ARAP - RED

Transaction Codes 08, 10, 14, 15

No change in experience modification on RED; Change in ARAP on RED

Policy 8/25/17 - 8/25/18

REDs applicable to policy 5/15/17 & 5/15/18; no change in experience modification, but change in ARAP, on RED effective 5/15/18

Rate Revision that applies as of 8/25/17 (policy effective) applies to entire policy

| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|--------------|---------------------------|--------------------------|------------|--------------------|--------------------|
| 1st record | 0 | 1.02 | 0 | 1.03 | 8/25/17 | 5/15/18 |
| 2nd record | 0 | 1.02 | 5/15/18 | 1.01 | 5/15/18 | 8/25/18 |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| | | | | | | |
| 1st record | 8810 | 0 | .07 | 1400 | 8/25/17 | 5/15/18 |
| 1st record 2nd record | 8810 0277 | 0 | .07 0 | 1400 43 | 8/25/17 8/25/17 | 5/15/18 5/15/18 |
| | | | | | | |

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Section VII – Question and Error Prone Areas

5. Merit Rating - RED

Transaction Codes 01, 02, 04, 06

Change from credit merit to DNQ on RED

Policy 8/25/17 - 8/25/18

REDs applicable to policy 5/15/17 & 5/15/18; change from credit merit to DNQ on RED 5/15/18

Rate Revision that applies as of 8/25/17 (policy effective) applies to entire policy

| State Premium | | Experience | Experience | | Pol Chg | Pol Chg |
|-----------------------|-------|---------------------------|------------|---------|-------------------|-------------------|
| Record 04 | ARD | Mod | Mod Eff Dt | ARAP | Eff Dt | Exp Dt |
| 1st record | 0 | 1.000 | 0 | 1.00 | 0 | 0 |
| 2nd record | 0 | 1.000 | 5/15/18 | 1.00 | 0 | 0 |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 1400 | 0 | 0 |
| 2nd record | 9885 | 0 | 0 | 70 | 0 | 0 |
| 3rd record | 8810 | 5/15/18 | .07 | 700 | 0 | 0 |

6. Merit Rating - RED

Transaction Codes 08, 10, 14, 15

Change from credit merit to DNQ on RED

Policy 8/25/17 - 8/25/18

REDs applicable to policy 5/15/17 & 5/15/18; change from credit merit to DNQ on RED effective 5/15/18

| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|-------|---------------------------|--------------------------|---------|-------------------|-------------------|
| 1st record | 0 | 1.000 | 0 | 1.00 | 8/25/17 | 5/15/18 |
| 2nd record | 0 | 1.000 | 5/15/18 | 1.00 | 5/15/18 | 8/25/18 |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 1400 | 8/25/17 | 5/15/18 |
| 2nd record | 9885 | 0 | 0 | 70 | 8/25/17 | 5/15/18 |
| 3rd record | 8810 | 5/15/18 | .07 | 700 | 5/15/18 | 8/25/18 |

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Section VII - Question and Error Prone Areas

H. Late Application of Experience Modification/ARAP/Merit Rating

The examples below are illustrative of how late application of experience modifications, ARAPs or merit ratings, in accordance with Experience Rating Plan rules, should be reported. They only include some of the required fields and records and are not in WCPOLS format

Note: When multiple record 04s are reported, the rating effective date must be different for each record 04. The rating effective date in the record 04 for the first split must be all zeros or equal to the policy effective date. All zeros will be considered to be equal to the policy effective date. For each record 05 of the first split, the exposure period effective date may be all zeros or equal to the policy effective date.

1. Experience Modification Increase (more than 90 days) - No RED

Transaction Codes 08, 10, 14, 15

Policy 8/25/17 - 8/25/18

RED effective 8/25/17, no ARAP

Experience Modification, effective 8/25/17 - change from .92 to .98; endorsed to policy 12/1/17

| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|-------|---------------------------|--------------------------|---------|-------------------|-------------------|
| 1st record | 0 | .92 | 0 | 1.00 | 8/25/17 | 12/1/17 |
| 2nd record | 0 | .98 | 12/1/17 | 1.00 | 12/1/17 | 8/25/18 |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 700 | 8/25/17 | 12/1/17 |
| 2nd record | 8810 | 12/1/17 | .07 | 1400 | 12/1/17 | 8/25/18 |

Experience Modification Increase (within 90 days; Or decrease endorsed at any time) No RED

Transaction Codes 08, 10, 14, 15

Policy 8/25/17 - 8/25/18

RED effective 8/25/17, no ARAP

Experience Modification, effective 8/25/17 - change from .92 to .98; endorsed to policy 11/20/17

| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|-------|---------------------------|--------------------------|---------|-------------------|-------------------|
| single record | 0 | .98 | 0 | 1.00 | 8/25/17 | 8/25/18 |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 2100 | 8/25/17 | 8/25/18 |

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3. ARAP Increase (more than 90 days) - No RED

Transaction Codes 08, 10, 14, 15

Policy 8/25/17 - 8/25/18

RED effective 8/25/17

ARAP, effective 8/25/17 - change from 1.02 to 1.04; endorsed to policy 12/1/17 (no change

to experience mod)

| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|-------------------|-------------------|--------------------------|-------------|-----------------------|-------------------|
| 1st record | 0 | 1.06 | 0 | 1.02 | 8/25/17 | 12/1/17 |
| 2nd record | 0 | 1.06 | 12/1/17 | 1.04 | 12/1/17 | 8/25/18 |
| | | | | | | |
| Exposure | | Exposure | | | Pol Chg | Pol Chg |
| Record 05 | Class | Period Eff Dt | Rate | Premium | Eff Dt | Exp Dt |
| Record 05 1st record | Class 8810 | | Rate .07 | Premium 700 | _ | |
| | | Period Eff Dt | | | Eff Dt | Exp Dt |
| 1st record | 8810 | Period Eff Dt | .07 | 700 | Eff Dt 8/25/17 | Exp Dt 12/1/17 |

4. ARAP Increase (within 90 days; Or decrease at any time) - No RED

Transaction Codes 08, 10, 14, 15

Policy 8/25/17 - 8/25/18

RED effective 8/25/17

ARAP, effective 8/25/17, change from 1.02 to 1.04; endorsed to policy 11/20/17 (no

change to experience mod)

| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|-------|---------------------------|--------------------------|---------|-------------------|-------------------|
| single record | 0 | 1.06 | 0 | 1.04 | 8/25/17 | 8/25/18 |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 2100 | 8/25/17 | 8/25/18 |
| 2nd record | 0277 | 0 | 0 | 89 | 8/25/17 | 8/25/18 |

Section VII – Question and Error Prone Areas

5. Merit Rating Increase (more than 90 days) - No RED

Transaction Codes 08, 10, 14, 15

Policy 8/25/17 - 8/25/18

RED effective 8/25/17

Merit, effective 8/25/17 - credit merit changed to unity merit; endorsed to policy 12/1/17

| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|-------|---------------------------|--------------------------|---------|-------------------|-------------------|
| 1st record | 0 | 1.000 | 0 | 1.00 | 8/25/17 | 12/1/17 |
| 2nd record | 0 | 1.000 | 12/1/17 | 1.00 | 12/1/17 | 8/25/18 |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 700 | 8/25/17 | 12/1/17 |
| 2nd record | 9885 | 0 | 0 | 35 | 8/25/17 | 12/1/17 |
| 3rd record | 8810 | 12/1/17 | .07 | 1400 | 12/1/17 | 8/25/18 |
| 4th record | 9884 | 12/1/17 | 0 | 0 | 12/1/17 | 8/25/18 |

6. Merit Rating Increase (within 90 days; Or decrease at any time) - No RED

Transaction Codes 08, 10, 14, 15

Policy 8/25/17 - 8/25/18

RED effective 8/25/17

Effective 8/25/17 - No Merit or experience modification (DNQ) changed to debit merit;

endorsed to policy 11/20/17

| | e peneg . | | | | | |
|-------------------------------|-----------|---------------------------|--------------------------|---------|-------------------|-------------------|
| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 0 | 1.000 | 0 | 1.00 | 8/25/17 | 8/25/18 |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 2100 | 8/25/17 | 8/25/18 |
| 2nd record | 9886 | 0 | 0 | 105 | 8/25/17 | 8/25/18 |

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7. Experience Modification and ARAP Increase (more than 90 days) - RED Transaction Codes 08, 10, 14, 15

Policy 11/5/17 – 11/5/18; RED 7/9/17 and 7/9/18

RED, effective 7/9/17 - experience mod change from .98 to 1.03 and ARAP from 1.00 to ARAP 1.01, endorsed to policy 2/21/18.

RED, effective 7/9/18 - experience mod 1.05 and ARAP 1.02, endorsed to policy 8/19/18

| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-----------------------------------|-------------------|---------------------------|--------------------------|----------------|------------------------------|-----------------------|
| 1st record | 0 | .98 | 0 | 1.00 | 11/5/17 | 2/21/18 |
| 2nd record | 0 | 1.03 | 2/21/18 | 1.01 | 2/21/18 | 8/19/18 |
| 3rd record | 0 | 1.05 | 8/19/18 | 1.02 | 8/19/18 | 11/5/18 |
| | | | | | | |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| | Class 8810 | | Rate .07 | Premium 800 | _ | _ |
| Record 05 | | Period Eff Dt | | | Eff Dt | Exp Dt |
| Record 05 1st record | 8810 | Period Eff Dt | .07 | 800 | Eff Dt 11/5/17 | Exp Dt 2/21/18 |
| Record 05 1st record 2nd record | 8810 8810 | 0 2/21/18 | .07 .07 | 800 1300 | Eff Dt 11/5/17 2/21/18 | 2/21/18 8/19/18 |

8. Merit Rating Increase (more than 90 days) - RED

Transaction Codes 08, 10, 14, 15

Policy 11/5/17 – 11/5/18, RED 7/9/17 and 7/9/18

RED, effective 7/9/17 - change from credit merit to unity merit; endorsed to policy 2/21/18.

RED, effective 7/9/18 – change from merit credit to merit debit; endorsed to policy 08/19/18

| State Premium Record 04 | ARD | Experience Mod | Experience Mod Eff Dt | ARAP | Pol Chg Eff Dt | Pol Chg Exp Dt |
|-------------------------------|-------|---------------------------|--------------------------|---------|-------------------|-------------------|
| 1st record | 0 | 1.00 | 0 | 1.00 | 11/5/17 | 2/21/18 |
| 2nd record | 0 | 1.00 | 2/21/18 | 1.00 | 2/21/18 | 8/19/18 |
| 3rd record | 0 | 1.00 | 8/19/18 | 1.00 | 8/19/18 | 11/5/18 |
| | | | | | | |
| Exposure Record 05 | Class | Exposure Period Eff Dt | Rate | Premium | Pol Chg Eff Dt | Pol Chg Exp Dt |
| 1st record | 8810 | 0 | .07 | 800 | 11/5/17 | 2/21/18 |
| 2nd record | 9885 | 0 | 0 | 40 | 11/5/17 | 2/21/18 |
| 3rd record | 8810 | 2/21/18 | .07 | 1300 | 2/21/18 | 8/19/18 |
| 4th record | 9884 | 2/21/18 | 0 | 0 | 2/21/18 | 8/19/18 |
| 5th record | 8810 | 8/19/18 | .07 | 500 | 8/19/18 | 11/5/18 |
| 6th record | 9886 | 8/19/18 | 0 | 25 | 8/19/18 | 11/5/18 |

Section VII - Question and Error Prone Areas

I. Deductible Endorsements

Deductible endorsements that apply to MA must be reported on Record 43 – Deductible Endorsement Record, with state code 20 (MA). They must also be reported on record 07, state code 20 or state code 00. On multi-state policies, the deductible endorsement that applies to the MA portion of the policy should be reported on record 07, state code 20.

When record 43 is reported with state code 20, WCRIBMA accepts the endorsement and stores the endorsement data.

When the record 43, state code 20 endorsement number is not a recognized deductible endorsement number (refer to Appendix II.D Endorsement Record Types), WCRIBMA stores the Deductible Endorsement Number, as generic endorsement number WC990603

If the endorsement is not reported on record 43, state code 20, but the endorsement number is a recognized endorsement number on record 07, state code 20 or 00, the endorsement number will be stored from record 07. No data will be stored from record 43.

Deductible Endorsement Coding

Deductible Endorsement Record 43 includes two types of codes that describe the deductible program and must be reported.

Below are the codes and descriptions that are approved for use, in Massachusetts.

| Losses Subject to Deductible Code | Code | Description |
|-----------------------------------------|------|----------------------------------------------------------------------------------------------------------------|
| Medical & Indemnity | 03 | Deductible applies to the total of medical and indemnity portions of the loss. |
| Basis of Deductible Calculation Code | Code | Description |
| Per Claim | 01 | The deductible amount applies to each claim arising from the Policy and there is no aggregate deductible. |
| Per Policy and Accident (Aggregate) | 09 | The deductible amount applies to each accident up to an aggregate limit and there is no per claim deductible. |
| Per Claim and Policy (Aggregate) | 10 | The deductible amount applies to each claim up to an aggregated limit and there is no per accident deductible. |
| Variable | 12 | Carrier program not described above. |

The codes (and data) to be reported depend upon the specific deductible program:

- MA Benefits Deductible Endorsement WC200602
 - Losses Subject to Deductible Code 03
 - Basis of Deductible Calculation Code 01

Section VII – Question and Error Prone Areas

- MA Benefits Claim and Aggregate Deductible Endorsement WC200603
 - Losses Subject to Deductible Code 03
 - Basis of Deductible Calculation Code 10
- Other Small or Medium Deductibles (Must be filed with and approved by the MA DOI)
 - Losses Subject to Deductible Code 03
 - Basis of Deductible Calculation Code depends on the approved carrier filing
- Large Deductibles (Must be filed with and approved by the MA DOI)
 - Losses Subject to Deductible Code 03
 - Basis of Deductible Calculation Code depends on the approved carrier filing

J. Noncompliance/Compliance (Transaction 17) a/k/a Eligibility

For a given policy and a given transaction 17 issue date, the transaction sequence number must be unique for each NonCompliance and Compliance transaction and the issue date for each NonCompliance and Compliance transaction for that transaction 17 issue date must be in sequential order. This includes previously accepted NonCompliance and Compliance transactions, as well as, the Noncompliance and Compliance transactions that are in the process of being submitted.

Appendix I – General Electronic Reporting Requirements

Appendix I - General Electronic Reporting Requirements

A. Format

The required electronic format is the WCPOLS format (WCPOLS), which is found in the WCIO Workers' Compensation Data Specifications Manual.

Refer to WCPOLS for specific technical requirements and data requirements.

Options for creating WCPOLS files:

- Carrier system
- Third party data reporters (Data submitted through a third party is ultimately the carrier's responsibility.)
- PEEP (Policy Edit and Entry Program) a web based software available on the Compensation Data Exchange (CDX) website.

PEEP allows carriers to manually enter policy transactions or import policy data in order to create, correct and submit WCPOLS files. Refer to the CDX website at www.cdxworkcomp.org.

 Manage Policy - a web based software in the Secure Online Services Account (SOSA) area of WCRIBMA's website www.wcribma.org.

Manage Policy allows carriers to manually enter policy transactions in order to create, correct and submit WCPOLS files. (The Manage Policy User Guide is available within Manage Policy and in the Policy and Proof of Coverage Data section of WCRIBMA's website (www.wcribma.org).

B. Medium

All electronic files, except those created in Manage Policy, must be sent via Compensation Data Exchange (CDX). After being processed at WCRIBMA, the data will be transferred to Manage Policy in the SOSA area of WCRIBMA's Website. Below is basic information for obtaining access to CDX and SOSA.

- Apply for a CDX Account Go to www.cdxworkcomp.org and complete the Insurer User Management Group (UMG) Primary Administrator Application.
 - Assistance with Existing CDX Account Contact CDX Central Support at cdxcentralsupport@farragut.com.
 - Apply for a SOSA account Go to https://www.wcribma.org/mass/MemberShip/Login.aspx and complete the Carrier's Group Administrator Web Account Application.
 - Assistance with existing SOSA account Contact WCRIBMA-TechSuppor@wcribma.org.

Appendix II – Policy Data Status and Errors

Appendix II - Policy Data Status and Errors

A. Submission Status and Submission Errors

1. Submission Status and Errors

The status of policy data submissions is available in the Processed Submissions area of WCRIBMA's Manage Policy Product, in the Secure Online Services Account (SOSA) area of the WCRIBMA's web site (www.wcribma.org).

Submission level errors are available in WCRIBMA's Error Reports Product, which can be accessed through Manage Policy or directly from the SOSA login page.

Submissions received on business days, by 5:00 PM Eastern, will be processed and available, in Manage Policy and Error reports, within 1 hour (occasionally longer, if overall submission volume is high). Otherwise, submissions will be processed and available the next business day."

Note: Some submission rejections do not result in a Submission Reject report. In such instances, if the reason is not in SOSA Error Reports or is not on CDX, contact WCRIBMA Technical Support (WCRIBMA-TechSupport@wcribma.org).

2. Causes for Submission Rejections at WCRIBMA:

- a. Record count discrepancy with reported submission control record count
- b. Incorrectly formatted records
- c. Directed to the wrong DCO
- d. Invalid policy effective date on any transaction in the file

Refer to CDX documents for submission rejections at CDX

B. Transaction Status and Transaction Errors

1. Transaction Status and Errors

Errors for each policy transaction are available in WCRIBMA's Error Reports Product, either directly or through WCRIBMA's Manage Policy Product. Refer to Manage Policy and Error Reports, in the Secure Online Services Account (SOSA) area of the WCRIBMA's web site (www.wcribma.org).

2. Common causes for transaction rejections:

- a. Missing required records on the transaction
- b. Duplicate transactions
- c. Carrier Code not valid in MA
- d. Carrier not approved for the transaction code

C. Explanation Capture System

The Explanation Capture System is available to submit acceptable explanations for finable data quality edit failures. Refer to Explanation Capture System in the Secure Online Services Account (SOSA) area of the WCRIBMA's web site (www.wcribma.org). Refer to Data Quality Compliance Programs in the Data Reporting area of WCRIBMA's web site (www.wcribma.org).

Appendix II – Policy Data Status and Errors

D. Edits List

A list of all policy, coverage and submission edits is available on the WCRIBMA's web site (www.wcribma.org), in the Policy and Proof of Coverage Data area, under Data Reporting.

E. Testing for Electronic Submission of Data

Refer to Electronic Submission Testing Requirements in the Data Reporting area of the WCRIBMA's web site (www.wcribma.org).

Appendix III – Transaction Codes and Records

Appendix III - Transaction Codes and Records

A. Summary of Record Requirements for Each Transaction Code.

| Transaction (Across) Record (Down) | New (01) | Rene W (02) | Variab le Data Endt (03) | Annu al Rerat e (04) | Canc/ Rein (05) | Policy Key Chan ge (06) | Ratin g Chan ge (08) | Non- Ratin g Chan ge (10) | Misc Non- Key Chan ge (14) | Add/ Delete State (15) | Proof of Cover age (16) | Non Comp liance (17) |
|---------------------------------------------|-------------|-------------------|--------------------------------------|----------------------------------|-----------------------|-------------------------------------|----------------------------------|------------------------------------------|-------------------------------------------|---------------------------------|-------------------------------------|-------------------------------|
| Link Data | R | R | R | R | R | R | R | R | R | R | R | R |
| Header (01) | R | R | N/A | R | N/A | R | R | R | R | R | R | N/A |
| Name (02) | R | R | N/A | R | N/A | R | R | R | R | R | R | N/A |
| Address (03) | R | R | N/A | R | N/A | R | R | R | R | R | R | N/A |
| State Premium (04) | R | R | N/A | R | N/A | R | R | R | R | R | R | N/A |
| Exposure (05) | R | R | N/A | R | N/A | R | R | R | R | R | N/A | N/A |
| Other States Coverage (06) | R | R | N/A | R | N/A | R | R | R | R | R | N/A | N/A |
| Endt ID (07) | R | R | N/A | R | N/A | R | R | R | R | R | N/A | N/A |
| Cancellation/ Reinstatement (08) | N/A | N/A | N/A | N/A | R | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Non- Compliance (Z1) | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | R |
| Variable Data Endts | Α | А | R | Α | N/A | Α | Α | Α | Α | Α | Α | N/A |

R = Required

A = As needed

N/A = Not Applicable

Appendix III – Transaction Codes and Records

B. Transactions for Electronic Reporting

| Transaction Code and Name | Description |
|----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 01-New Policy | New policy issued by the carrier. |
| 02-Renewal Policy | Renewal policy issued by the same carrier or another carrier within the same group that issued the expiring policy. |
| 03-Endorsement | Individual endorsement(s) issued after the policy is issued. For example, WC000301 Alternate Employer Endorsement. Only allowed for endorsements that have a specific endorsement record type to report variable data. Only one endorsement Record Type is allowed per Transaction Code 03 |
| 04-Annual Re-rate Endorsement | Policy data issued for the second and/or third policy period of a policy that is longer than a year and 16 days. |
| 05-Cancellation/Reinstatement | Must be reported on Record Type 08. Notification to the DCO that a policy has been cancelled, reinstated or nonrenewed. Other situations where it is used: 1) Notify a DCO that the policy is being replaced by a transaction code 06 (Policy Replacement due to Key Field Change), The transaction code 06 should be reported in the same submission as the transaction code 05. 2) Notify the DCO that a Proof of Coverage Notice is being cancelled, when the Proof of Coverage Notice was issued electronically and the policy was not and will not be issued. 3) Notify WCRIBMA that MA is being deleted from a multi-state policy. |
| 06-Policy Replacement Key Field Change | The replacement of a previously issued policy for the purpose of changing the carrier, policy number or policy effective date. The transaction 06 policy effective date must be equal to the cancellation effective date, of the policy being replaced. |
| 08-Rating Change | The replacement of a policy for the purpose of changing data that results in a change in premium, except if the change is also a policy key change. |
| 10-Non-Rating Change | The replacement of a policy for the purpose of changing data that does not result in a change in premium, except if the change is also a policy key change. |

Appendix III - Transaction Codes and Records

B.Transactions for Electronic Reporting (cont'd)

| Transaction Code and Name | Description |
|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 14-Miscellaneous Change | The replacement of a policy for the purpose of changing any data except policy key data. This may be used in place of 08-Rating Change and 10-Non-Rating Change. |
| 15-Add/Delete State Change | The replacement of a policy for the purpose of adding or deleting a state to Item 3A of the Policy Information Page. Note: Transaction 15 may not be used to notify WCRIBMA that MA is being deleted from a multi-state policy. A cancellation transaction code 05 must be used to notify WCRIBMA that MA is being deleted from a multi-state policy. |
| 16-Coverage Notice | Used to notify a Data Collection Organization (DCO) that a policy will be issued, or that a policy has been issued, but the policy is not available yet to send to the DCO. For WCRIBMA purposes, it is the equivalent of the MA Notice of Issuance. |
| 17-Noncompliance | Must be reported on Record Type Z1. Used to notify a DCO that the insured is not complying with certain policy terms and conditions (e.g. outstanding premium, uncooperative on audit, etc.) or that a previous noncompliance has been resolved. |

Notes:

- Transaction Code 06 is processed as a new/renewal policy. Transaction codes 08, 10, 14 and 15
 are processed as updates to the existing policy, unless they are the first reporting of the policy to
 MA.
- For transactions 08, 10, 14 and 15, only one such transaction is allowed per policy per policy issue date. If multiple changes occur for a single policy on a given issue date, all changes should be submitted on a single transaction.
- If changes occur on the same issue date as a new policy (transaction 01), renewal policy (transaction 02), annual rerate (transaction 04) or policy key change (transaction 06), either:
 - (Preferred) Report the transaction 01, 02, 04 or 06, without the changes, and report the change transaction 08, 10, 14 or 15, with the same issue date as the transaction 01, 02 or 06.

OR

- Report only change transaction 08, 10, 14 or 15.
- WCRIBMA processes transactions 08, 10, 14 and 15 in the same manner. That is, they are treated as interchangeable in processing.

Appendix III - Transaction Codes and Records

C. Records for Electronic Reporting (excludes Endorsement Record Types)

| Record Type Code and Title | Description |
|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| 01-Header | Provides for the reporting of policy level information. |
| 02-Name | Provides for the reporting of the named insureds. |
| 03-Address | Provides for the reporting of addresses associated with the policy. For wrap-up policies, also used to report the description of the project or contract. |
| 04-State Premium Record | Provides for the reporting of the premium amount and policy charges per Item 3A state |
| | Note: Record 04 is required for Transaction 16 in MA |
| 05-Exposure Record | Provides for the reporting of classifications, rates, estimated exposures and estimated class premiums. |
| 06 – Other States Coverage Record | Provides for the reporting of Item 3C Other States Insurance |
| | Note: Record 06 is ignored on Transaction 16 in MA |
| 07-Endorsement Identification Record | Provides for the reporting of all endorsement form numbers included in Item 3D of the policy. |
| 08-Cancellation/Reinstatement Record | Provides for the reporting of cancellation, reinstatement and nonrenewal information, as well as other termination information. |
| | May only be reported on a transaction 05. |
| Z1- Noncompliance of Policy Terms and Conditions Record | Provides for the reporting of noncompliance and compliance information. |
| | May only be reported on transaction 17. |

Appendix III – Transaction Codes and Records

D. Endorsement Record Types

Record 07 Endorsement Identification Record must include all endorsements on the policy that are applicable to MA.

In addition, the individual endorsement record type for some variable data endorsements must be reported. If WCRIBMA does not require a variable data endorsement record, carriers may still report it as a convenience, on full policy change transactions.

The individual record types for which WCRIBMA stores the detail data may also be reported via Transaction Code 03, when added to the policy after policy issuance.

Variable Data Endorsements Required or Accepted by WCRIBMA

Endorsement Number and Endorsement Effective Date are required on all.

| Endorsement Number | Record Type Code and Title | Detail Record Required? | Required Fields | Detail Information Stored? |
|-----------------------|-------------------------------------------------------------|-------------------------------|-------------------------------------------------------------------|----------------------------------|
| WC200304 | FA - | Yes | State Code | Yes |
| WC200308 WC000322 | Massachusetts Employee | | Client or PEO Name | |
| | Leasing | | WC200304-Client | |
| | Endorsement | | WC200308, WC000322 - PEO | |
| | | | Client or PEO FEIN | |
| | | | WC200304 - Client | |
| | | | WC200308, WC000322 - PEO | |
| | | | Client MA Address or PEO Address – Street, City, State, ZIP | |
| | | | WC200304 - Client | |
| | | | WC200308, WC000322 - PEO | |
| | | | Name of Employer WC200304 - must be Leasing Company/PEO | |
| | | | WC200308, WC000322 – must be Client | |
| WC200402 | FB - | Yes | State Code | Yes |
| | Massachusetts Qualified Loss Management Program Endorsement | | Name of Qualified Loss Management Program | |
| | | | Subscription Date | |
| | | | Eligibility Date | |
| | | | Credit Factor | |

Appendix III – Transaction Codes and Records

Variable Data Endorsements Required or Accepted by WCRIBMA (cont'd)

Endorsement Number and Endorsement Effective Date are required on all

| Endorsement Number | Record Type Code and Title | Detail Record Required? | Required Fields | Detail Information Stored? |
|----------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------|----------------------------------------------------------|----------------------------------|
| WC000405 | 13 - Policy Period Endorsement | Yes | Per Period: Period Effective Date Period Expiration Date | Yes |
| WC000503 WC000504 WC000505 WC000512 WC000513 WC000514 | 15 - Retrospective Premium Endorsements | No | None | No |
| Various | 16 - Other Policies Subject to Retrospective Rating or Premium | No | None | No |
| WC000101 | 17 - Defense Base Act Endorsement | No | None | Yes |
| WC000104 | 18 - Federal Employers Liability Act Coverage Endorsement | No | None | Yes |
| WC000106 | 19 – United States Longshore and Harbor Workers' Coverage Endorsement | No | None | Yes |
| WC000109 | 20 - Outer Continental Shelf Lands Act Coverage Endorsement | No | None | Yes |
| WC000201 | 21 - Maritime Coverage Endorsement | No | None | Yes |

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Appendix III - Transaction Codes and Records

Variable Data Endorsements Required or Accepted by WCRIBMA (cont'd) Endorsement Number and Endorsement Effective Date are required on all

| Endorsement Number | Record Type Code andTitle | Detail Record Required? | Required Fields | Detail Information Stored? |
|-----------------------|---------------------------------------------------------------------------------------|----------------------------|----------------------------------------------------------|----------------------------------|
| WC000203 | 23 - Voluntary Compensation Maritime Coverage Endorsement | No | None | Yes |
| WC000301 | 24 - Alternate Employer | Yes | Alternate Employer Name | Yes |
| | Endorsement | | Alternate Employer Address | |
| | | | State of Special Employment | |
| | | | Contract or Project Name | |
| | | | Endorsement Sequence Number | |
| WC000302 | 25 - Designated | Yes | Address Not Covered | Yes |
| | Workplaces Exclusion Endorsement | | Endorsement Sequence Number | |
| WC000102 | 27 - Federal Coal Mine Health & Safety Act Coverage Endorsement | No | None | No |
| WC000108 | 28 - Non- appropriated Fund Instrumentalities Act Coverage Endorsement | No | None | No |
| WC000311 | 29 - Voluntary | Yes | Identify Employees | Yes |
| | Compensation and Employers | | State of Employment | |
| | Liability Coverage Endorsement | | Designated Workers Compensation Law or Description | |
| | | | Endorsement Sequence Number | |

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Appendix III – Transaction Codes and Records

Variable Data Endorsements Required or Accepted by WCRIBMA (cont'd) Endorsement Number and Endorsement Effective Date are required on all

| Endorsement Number | Record Type Code andTitle | Detail Record Required? | Required Fields | Detail Information Stored? |
|-----------------------|----------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------|----------------------------------|
| WC000406 | 30 - Premium Discount Endorsement | No | None | Yes |
| WC000508 | 31 - Retrospective Premium Endorsement Aviation Exclusion | No | None | No |
| WC000509A | 32 - Retrospective Premium Endorsement Changes | No | None | No |
| WC000510A | 33 - Retrospective Premium Endorsement Non-ratable Catastrophe Element or Surcharge | No | None | No |
| WC000511 | 34 - Retrospective Premium Adjustment Short- Form Record | No | None | No |
| WC000313 | 36 - Waiver of Our Right to Recover from Others Endorsement | Yes | Name of Person Name of Organization | Yes |
| WC000310 | 37 - Sole Proprietors, Partners, Officers & Others Coverage Endorsement | Yes | Descriptor Code Name of Person to be Included State Code | Yes |

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Appendix III – Transaction Codes and Records

Variable Data Endorsements Required or Accepted by WCRIBMA (cont'd)

Endorsement Number and Endorsement Effective Date are required on all

| Endorsement Number | Record Type Code andTitle | Detail Record Required? | Required Fields | Detail Information Stored? |
|------------------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------------|----------------------------------|
| WC000308 | 38 - Partners, | Yes | Descriptor Code | Yes |
| | Officers & Others Exclusion Endorsement | | Name of Person to be Excluded | |
| WC000315 | 41- Domestic and Agricultural Workers' Exclusion Endorsement | No | None | No |
| WC000412 | 42 - Contingent Experience Rating Modification Factor Endorsement | No | None | Yes |
| WC200602 | 43 - Deductible | Yes | State Code | Yes |
| WC200603 WC000603** Carrier filed program endorsement numbers | Endorsement | | All fields applicable to the specific endorsement number being reported | |
| WC000424 | 44 – Audit | Yes | State Abbreviation | Yes |
| | Noncompliance Charge Endorsement | | Basis of Audit Noncompliance Charge | |
| | | | Maximum Audit Noncompliance Charge Multiplier | |

- Endorsement record types 10, 11, 87, 88 and 89 are not applicable in MA. They may result in an error.
- Endorsement record types 27, 40, 41, 84, 85, 86, AA-EF, and GA-HC are not applicable in MA.
 They are ignored in processing.
- **WC000603 is not an approved MA endorsement, but is accepted as a carrier filed endorsement, for reporting carrier filed <u>small or medium</u> deductible programs that were approved, by MA DOI

Appendix IV – Cancellation/Reinstatement Processing and Policy Status

Appendix IV - Cancellation/Reinstatement Processing and Policy Status

This section describes how the WCRIBMA's system determines policy status. The algorithm and examples are to show how the status is determined. The examples and algorithm are for illustrative purposes only and do not present examples that meet the carriers' coverage reporting requirements to the state.

A. Cancellation/Reinstatement Processing

The WCRIBMA processing system is programmed to determine the policy status based on the combinations of:

- Policy effective date
- · Cancellation effective date
- · Reinstatement effective date
- · Issue date of policy, cancellation, and reinstatement
- Electronic cancellation/reinstatement sequence number

The resulting policy statuses are:

- Active
- Cancelled
- Flat cancelled
- Reinstated
- Nonrenewed

The system processes cancellations and reinstatements for a particular policy, in the order of issue date and transaction sequence number within issue date.

"Paired transactions" means a cancellation and reinstatement pertaining to the same policy with equal effective dates and the reinstatement issued subsequent to the cancellation.

The system either pairs transactions or not, depending on the data being reported and previously reported cancellations and reinstatements. For example, the system will not pair a reinstatement with a previously stored and unpaired cancellation that has the same effective date, if the reinstatement issue date is before the cancellation issue date. In that case, the reinstatement would be stored as unpaired and the cancellation remains unpaired.

Appendix IV – Cancellation/Reinstatement Processing and Policy Status

B. WCRIBMA's Policy Status Algorithm

After the cancellations and reinstatements are processed, the system determines the policy status as described below.

Paraphrased from Supplementary Specification – SS 3C Appendix B – Policy Status Rules last revised 03/25/09 ©Spectrum Partners LLC

- 1. The system looks for an unpaired cancellation or a reinstatement (paired or unpaired) with the highest issue date. If more than one unpaired cancellation and/or reinstatement is found with the same issue date, the system uses the one with the highest unique sequence number in the canc_rein table. The highest sequence number will be the most recently stored cancellation/reinstatement with that issue date.
- 2. If the system finds a cancellation, then the status date is set to the cancellation effective date.
 - If the cancellation effective date is the same as the policy effective date, then the status is set to Canceled Flat.
 - b. If the cancellation effective date is the same as the policy expiration date, then the status is set to Non Renewal.
 - c. If the cancellation effective date is between the policy effective date and the policy expiration date, then the status is set to Canceled.
 - d. If the cancellation effective date is before the policy effective date or after the policy expiration date, then the cancellation is rejected.
- 3. If the system finds a reinstatement, then the status date is set to the reinstatement effective date.
 - a. If the reinstatement effective date is within the policy period, the status is set to Reinstated.
 - b. If the reinstatement effective date is before the policy effective date or after the policy expiration date, then the reinstatement is rejected.
- 4. If the system does not find any cancellation or reinstatement, then the status is set to 'Active'.

Appendix IV - Cancellation/Reinstatement Processing and Policy Status

C. Examples of Policy Status

The examples illustrate the status determination in the WCRIBMA's system and contain examples of incorrect or incomplete reporting. The examples do not address status based on statutory requirements. Statutory requirements also take into account the date that the cancellation was received at the WCRIBMA.

1. Active policy - No cancellations or reinstatements

| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Period |
|-------------------------------------------------------------------|---------------|--------------------------------|-----------------------------------------------------------------------------------------------------|
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 | Active | Policy effective date 01/01/16 | Coverage from the first minute of the effective date until the first minute of the expiration date. |

2. Flat cancelled - Cancellation effective date = policy effective date

| Z. Hat carroched | Ouricemunion en | octive date policy | encouve date |
|-------------------------------------------------------------------|-----------------|--------------------------------|---------------------------|
| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Effective Period |
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 | Flat Cancelled | Policy effective date 01/01/16 | No Coverage. |
| CA eff dt 01/01/16 CA issued 12/20/15 | | | |

3. Nonrenewed - Cancellation effective date = policy expiration date

| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Effective Period |
|-------------------------------------------------------------------|---------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 | Non Renewed | Cancellation effective date 01/01/17 | Coverage from the first minute of the effective date until the first minute of the expiration date. |
| CA eff dt 01/01/17 CA issued 11/29/16 | | | |

4. Mid term cancel - Cancellation effective date after policy effective date and before policy expiration date

| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Effective Period |
|---------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 CA eff dt 03/01/16 CA issued 02/17/16 | Cancelled | Cancellation effective date 03/01/16 | Coverage from the first minute of the effective date until the first minute of the cancellation effective date. |

Appendix IV – Cancellation/Reinstatement Processing and Policy Status

5. Reinstate mid term cancel – Reinstatement Effective Date = Mid-term Cancellation Effective Date

| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Effective Period |
|---------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 CA eff dt 03/01/16 CA issued 02/17/16 | Reinstated | Reinstatement effective date 03/01/16 | Coverage from the first minute of the effective date until the first minute of the expiration date. |
| RE eff dt 03/01/16 RE issued 03/06/16 | | | |

6. Reinstate flat cancel – Reinstatement Effective Date = Policy Effective Date

| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Effective Period |
|-------------------------------------------------------------------|---------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 | Reinstated | Reinstatement effective date 01/01/16 | Coverage from the first minute of the effective date until the first minute of the expiration date. |
| CA eff dt 01/01/16 CA issued 12/20/15 | | | |
| RE eff dt 01/01/16 RE issued 01/02/16 | | | |

7. Reinstate nonrenewal – Reinstatement Effective Date = Policy Expiration Date

| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Effective Period |
|---------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 CA eff dt 01/01/17 CA issued 11/29/16 | Reinstated | Reinstatement effective date 01/01/17 | Coverage from the first minute of the effective date until the first minute of a new policy expiration date for this policy, or the first minute of the policy effective date of a new policy. |
| RE eff dt 01/01/17 RE issued 01/03/17 | | | |

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Appendix IV – Cancellation/Reinstatement Processing and Policy Status

8. Multiple cancellations without reinstatement - different issue dates Incomplete Reporting

| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Effective Period | |
|---------------------------------------------------------------------------------------------------------------|---------------|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 CA eff dt 05/30/16 CA issued 05/15/16 | Cancelled | Cancellation effective date 05/10/16, the cancellation with the latest issued date | Coverage from the first minute of the effective date until the first minute of the cancellation effective date of the most recently issued cancellation | |
| CA eff dt 05/10/16 CA issued 06/25/16 | | | | |

9. Multiple cancellations without reinstatement - same issue date Incomplete or incorrect reporting

| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Effective Period |
|------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 CA eff dt 03/09/16. | Cancelled | Cancellation effective date 03/04/16, the cancellation that was stored most | Coverage from the first minute of the effective date until the first minute of the cancellation effective date for the most recently received cancellation |
| CA issued 2/15/16 CA Received 02/17/16 | | recently | |
| CA eff dt 03/04/16 CA issued 02/15/16 CA Received 02/20/16 | | | |

10. Unmatched cancellations and reinstatements
Incomplete or incorrect reporting

| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Effective Period |
|---------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 CA eff dt 03/01/16 CA issued 02/14/16 | Reinstated | Reinstatement effective date 06/01/16, the transaction with the most recent issue date | Coverage from the first minute of the effective date until the first minute of the expiration date |
| RE eff dt 06/01/16 RE issued 06/02/16 | | | |

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Appendix IV – Cancellation/Reinstatement Processing and Policy Status

11. Unmatched cancellations and reinstatements Incomplete or incorrect reporting

| Data | Policy Status | WCRIBMA Policy Status Date | Coverage Effective Period |
|-------------------------------------------------------------------|---------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| Pol eff dt 01/01/16 Pol exp dt 01/01/17 Pol issued 12/15/15 | Cancelled | Cancelled cancellation effective date 03/01/16, the | Coverage from the first minute of the effective date until the first minute of the cancellation effective date |
| CA eff dt 03/01/16 CA issued 02/18/16 | | transaction with the most recent issue date | |
| RE eff dt 03/01/16 RE issued 02/15/16 | | | |

Appendix V – Contacts and References

Appendix V – Contacts and References

A. Who to Contact

| Topic | Contact | Address |
|----------------------------------|---------------------------------------|----------------------------------------------------------------------------------------|
| Coverage issues with DIA | MA Department of Industrial Accidents | http://www.mass.gov/lwd/workers- compensation/ |
| | industrial Accidents | compensation/ |
| Testing for electronic reporting | Data Operations | DataOperations@wcribma.org |
| CDX Submission Problems | WCRIBMA Technical Support | WCRIBMA-TechSupport@wcribma.org |
| Routine reporting questions | Data Operations | Individual Data Operations Contact for Carrier, if known OR DataOperations@wcribma.org |

B. References

Massachusetts Workers' Compensation and Employers' Liability Insurance Manual

Massachusetts Workers' Compensation Statistical Plan

Experience Rating Plan Manual

Massachusetts Exceptions to the Experience Rating Plan Manual

WCIO Workers' Compensation Data Specifications Manual

WCIO Data Reporting Handbook

Policy and Proof of Coverage Data in Data Reporting Area of the WCRIBMA's web site

Massachusetts General Law Chapter 152

NCCI Forms Manual of Workers' Compensation and Employers' Liability Insurance