

Instructions for Completing the Maine Workers' Compensation Paid Benefits Report Required by 26 M.R.S. § 61

Due Date:

March 1st of each year

ALWAYS OBTAIN A CURRENT VERSION OF THE REPORT FORM FROM OUR WEBSITE AND USE A FRESH FORM FOR EACH ADDITIONAL COMPANY.

OLD VERSIONS WILL FAIL TO LOAD INTO OUR DATABASE AND WILL BE RETURNED

WHO FILES THIS REPORT:

This report must be filed by each group and individual self-insured employer authorized to make workers' compensation payments directly to their employees. Information is to be reported for workers' compensation payments in Maine for the most recent calendar year.

All fields must be completed

Blank fields may cause a load failure and the report will be returned for correction
Null reports are acceptable when Sections I & II (company and contact information) are completed

SECTIONS I & II: COMPANY AND CONTACT INFORMATION

Section I:

- **Self-Insurers** enter the full name and license number (this is included in the report notification email sent in January, you may also find it using our Licensee Lookup feature <http://www.maine.gov/pfr/insurance/licensee-search>).

Section II:

- Include the contact person's name (first and last) and contact information (Email and phone number).

Note: Using an Email address that goes to a central inbox will ensure that future notices are received by the company in the event of staffing changes.

SECTION III. WORKERS' COMPENSATION AGGREGATE BENEFITS PAID INFORMATION

- Total Actual Paid Workers' Compensation Benefits must be whole number \geq \$0 (*includes both indemnity and medical payments*)
- Total Actual Paid Workers' Compensation Medical Benefits must be whole number \geq \$0.
 - This number is the amount of workers' compensation medical payments.
- Total Benefits Less Medical Payments (Calculated field – locked from editing):
 - The number is calculated by taking Line 1 minus Line 2

SUBMITTING YOUR REPORT

- Save the report as an Excel document with the following naming convention:
 - **Self-Insured Name and Report Type.xlsx** (example: ABC Self-Insurer ABP.xlsx) - *Files saved in any format other than .xlsx (Excel) will fail to load into our database.*
 - **Do not use acronyms** — We need to be able to easily identify your company as having filed the report. If the full name is very long abbreviating is acceptable as is omitting WC Trust Fund or similar.
 - **PDFs are not permitted, will not load, and will be sent back**
- You may contact Alex Bourne at 207-624-8447 or electronically at William.A.Bourne@maine.gov with questions regarding the required data.
- Email completed reports to Barbra.L.Garboski@maine.gov.
 - **Do not encrypt/secure Email** - Due to the number of insurers that are required to file our annual reports, we do not accept encrypted emails that compel signing up for an account to view them. ALL reports submitted to the Bureau of Insurance are kept confidential and any information shared in our legislative reports is aggregated and does not identify any single carrier. *When encryption happens automatically and cannot be turned off; you may contact us to discuss options to resolve the problem.*
 - You may contact Barbra Garboski at 207-624-8440 or electronically at the above email if we need to discuss other options to successfully submit your report.