# Instructions for Completing the Maine Self-Insurer Annual Payroll Report Required by 39-A § 409

#### **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 all individual and group self-insurers licensed to do workers' compensation business in Maine. The report must specify the annual standard premium that would have been paid during the previous calendar year. This form facilitates the reporting of payroll data by employment classification so annual standard premium can be calculated by the Bureau.

All fields must be completed Blank fields may cause a load failure and the report will be returned for correction

Our reporting method no longer supports filing on a group basis.

- **Licenses beginning with GSD** Self-insurers licensed as a group will continue to file as they have in the past individual group members will NOT be required to obtain a license and file separately.
- **Licenses beginning with SID** Affiliated companies that have historically filed one report including each licensed individual self-insurer must now file separate reports for each licensed entity. *To achieve the former group filing results* -- Enter the aggregate data on one company report and complete zero reports for the other affiliated entities. Always use the same lead company from year to year.

## Sections I & II: Company and Contact Information

- Complete sections I and II with the company's full name and license number. Include the contact person's name (first and last) and contact information (Email and phone number).
- 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. Payroll and Financial Information

- If the self-insurance plan ended during the reporting year, provide the effective date the self- insurance plan terminated. Payroll information must be reported for the period January 1st of the reporting year until the date of termination.
  - Enter the termination date as (mm/dd/yy) (Active plans may leave this field blank without causing a load failure)
- Enter the Payroll method from the drop-down box
  - o If estimating payroll, please enter a brief explanation in the field provided
- Enter the Experience Modification Factor (if no experience mod has been developed for you, enter 1.000)
- Complete the table with:
  - WC Classification Code Number (The code should be that used by the National Council)
  - o Gross Payroll in whole dollars. **Do not truncate to thousands or millions etc. Truncating will create discrepancies in data from year to year.**
  - Payroll Modifications (The basis for computing workers' compensation premium is remuneration, which means all salary, wages and bonuses. However, there are some exceptions or so-called modifications (reductions) of payroll regarding overtime paid and the salaries of executive officers that can and should be made pursuant to the rules of the National Council on Compensation Insurance (NCCI). Please refer to the NCCI Basic Manual for Workers' Compensation and Employer's Liability section for Premium Basis and Payroll modifications.)
  - Total Payroll (Total payroll will be calculated as gross payroll minus payroll modifications.)
    - DO NOT calculate and enter totals in the data columns on <u>Section IV. Payroll</u>
       Financial Information. The database automatically calculates data.
    - (<u>In this table only</u> enter the number of lines necessary not all lines need to be populated, a blank field in this table will not cause a load failure)

### **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 Payroll.xlsx) -Files saved in any format other than Excel (.xlsx) 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 will not load and will be sent back
- You may contact Alex Bourne at 207-624-8447 or electronically at <u>William.A.Bourne@maine.gov</u> with questions.
- Email completed reports to Barbra.L.Garboski@maine.gov