Tommy G. Thompson
Governor

Linda Stewart Secretary

Gregory KrohmDivision Administrator



WORKER'S COMPENSATION

201 East Washington Avenue P.O. Box 7901 Madison, WI 53707-7901 Telephone: (608) 266-1340 FAX: (608) 267-0394 http://www.dwd.state.wi.us/wc/

State of Wisconsin Department of Workforce Development

February 17, 1997

INS Letter 368

Worker's Compensation Insurance Carriers Insuring Wisconsin Employers & Wisconsin Self-Insurers

FROM: Gregory Krohm

Administrator

Worker's Compensation Administrative Assessment -- FY97

The Department of Workforce Development is authorized per Section 102.75, Wis. Stats., to assess and collect the cost of administering the Wisconsin Worker's Compensation Act from worker's compensation insurance carriers and self-insured employers. Each company's assessment is based on the indemnity amount the company paid in the previous calendar year.

Your company's indemnity amount is determined by summing the amounts paid or payable for each "first closed" claim. Indemnity includes payments for temporary total and partial disability, permanent total and partial disability, compromises, death benefits and funeral expenses, paid holidays, supplemental benefits, disfigurement, and vocational rehabilitation.

The department's worker's compensation administration assessment rate is computed by dividing the current fiscal year's net operating cost by the total indemnity payments by carriers and self-insurers for claims closed in the previous calendar year. The indemnity paid in 1995 was \$195,173,372. The worker's compensation division net operating revenue to be collected for fiscal year 1997 is \$9,427,796. Based on this calculation (\$9,427,796 -:- \$195,173,372), the assessment rate is 0.0483 or 4.83%. Self-insured employers are paying an additional 0.41 percent to cover the administrative cost of operating the self-insured employers program. The self-insured employers' invoice also includes the \$200 self-insured renewal fee for July 1, 1996 through June 30, 1997.

Each company's assessment amount was determined by multiplying your 1995 "first closed" claims' total indemnity payments by the rate indicated. A listing of your company's 1995 claims with indemnity amounts is enclosed. Your company's claim detail listing is available on the division's internet web site (see letterhead for address) under "Promptness/Assessment".

The invoice for your company's worker's compensation assessment for fiscal year 1997 is enclosed. Payment is due by April 1, 1997. Please make your check or money order payable to DWD-Worker's Compensation and mail it to the address indicated on the invoice.

If you have questions about your company's assessment, please contact Jean Culbert at (608) 266-6898.