**WCIO Workers Compensation Data
Specifications Manual**

**WORKERS COMPENSATION
CONSTRUCTION PREMIUM ADJUSTMENT
PROGRAM (WCCPAP)**

WCIO Workers Compensation Data Specifications Manual   **WCCPAP**
Effective: May 10, 2023
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Field No.	Field Title/Description	Class	Position	Bytes

LINK DATA COMMON TO ALL RECORDS

1	**STATE CODE**	N	1-2	2

Report the state code.

2	**CARRIER CODE**	N	3-7	5

Report the code assigned to the reporting company by NCCI or other DCO.

3	**BRANCH CODE**	N	8-10	3

NOT APPLICABLE: DE, MA, MN, NJ, NY, PA, WI

Report the 3-digit code assigned.

4	**POLICY NUMBER IDENTIFIER**	AN	11-28	18

NOT APPLICABLE: NJ

Report the unique identifier used for identifying the policy.

This is the policy covering the insured for which the CPAP was promulgated.

5	**POLICY EFFECTIVE DATE**	N	29-36	8

NOT APPLICABLE: NJ

Report the policy effective date for the CPAP factor.

Format: CCYYMMDD.

6	**COVERAGE ID NUMBER**	AN	37-46	10

NOT APPLICABLE: DE, NCCI, PA

Report the identifier used for a specific employer's coverage for which the CPAP factor pertains.

7	**COMBINABLE ID NUMBER**	AN	47-55	9

NOT APPLICABLE: DE, MA, NCCI, PA

Report the unique identifier assigned by the DCO for all coverage that is combined for experience rating.

Field No.	Field Title/Description	Class	Position	Bytes
8	**PERIOD EFFECTIVE DATE**	N	56-63	8

NOT APPLICABLE: MA, NCCI

Report the CPAP factor period effective date.

Format: CCYYMMDD.

Field No.	Field Title/Description	Class	Position	Bytes
9	**FACTOR REVISION CODE**	N	64-65	2

NOT APPLICABLE: DE, PA

Report the code number that indicates the original or revision/reapplication of the CPAP factor.

Code	Description
0	Original Application
1-99	Revision/Reapplication

Contact your DCO for code applicability.

Field No.	Field Title/Description	Class	Position	Bytes
10	**RESERVED FOR FUTURE USE**	AN	66-72	7

Field No.	Field Title/Description	Class	Position	Bytes

HEADER RECORD

| 1 | **LINK DATA** | AN | 1-72 | 72 |

Link Data is a collection of data elements that are common to all records in the data specification. These common data elements allow the applicable records to be joined. For presentation purposes only, Link Data is shown as Record Type 0 or 00 and should not be considered a separate record but rather a sub-record within each record.

| 2 | **RECORD TYPE CODE** | N | 73-73 | 1 |

Report "1". Record Type Code 1 indicates a Header Record.

Record Type Code 1 will contain CPAP application and additional information used to produce the final CPAP factor page.

Submit one Header Record per CPAP file.

| 3 | **NAME OF INSURED** | AN | 74-163 | 90 |

Report the insured's primary name on the policy.

| 4 | **FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN)** | N | 164-172 | 9 |

NOT APPLICABLE: NJ, NY, WI

Report the Federal Employer Identification Number (FEIN) corresponding to the name being reported.

| 5 | **RISK ID NUMBER** | N | 173-181 | 9 |

NOT APPLICABLE: MN, NJ, NY

Report the unique risk identification number assigned by NCCI or the risk identification number given by the independent DCO assigned to the state where applicable.

For interstate risks, report the NCCI assigned number.

For intrastate risks, report the DCO assigned number.

For non-rated risks, report zeros.

Field No.	Field Title/Description	Class	Position	Bytes
6	**CREDIT EFFECTIVE DATE**	N	182-189	8

NOT APPLICABLE: NCCI

Report the CPAP credit effective date.

Format: CCYYMMDD.

7	**CREDIT EXPIRATION DATE**	N	190-197	8

NOT APPLICABLE: MN, NCCI, NY

Report the CPAP credit expiration date.

8	**LETTER ISSUE DATE**	N	198-205	8

NOT APPLICABLE: NCCI, NJ

Report the date the CPAP correspondence/letter was created by the DCO.

Format: CCYYMMDD

9	**LETTER ID**	N	206-219	14

NOT APPLICABLE: NCCI, NJ

Report the CPAP correspondence/letter ID number assigned to the letter.

10	**DATA YEAR**	N	220-223	4

NOT APPLICABLE: NCCI

Report the year of the actual wages.

Format: YYYY.

11	**DATA QUARTER**	N	224-224	1

NOT APPLICABLE: MN, NCCI

Report the code that describes which quarter wages were used.

Code	Description
1	First Quarter
2	Second Quarter
3	Third Quarter
4	Fourth Quarter

Field No.	Field Title/Description	Class	Position	Bytes
12	**APPLICATION RECEIVED DATE** Report the date application was received from employer. Format: CCYYMMDD.	N	225-232	8
13	**PRODUCTION DATE** *NOT APPLICABLE: MA, NY* Report the date the worksheet/factor was produced. Format: CCYYMMDD.	N	233-240	8
14	**EXPERIENCE MODIFICATION FACTOR** *NOT APPLICABLE: MN, WI* Report the factor based on the past experience of the insured that is used to modify an insured's premium. There is an assumed decimal point between positions 242 and 243.	N	241-245	5
15	**RATING EFFECTIVE DATE** *NOT APPLICABLE: MA, MN, WI* Report the effective date of the Experience Rating Modification Factor. For non-rated risks, report zeros. Format: CCYYMMDD	N	246-253	8
16	**STATUS OF CPAP CODE** *NOT APPLICABLE: DE, MA, MN, NJ, NY, PA, WI* Report the code number that indicates the original or revision/reapplication of the CPAP factor.	A	254-254	1

Code	Description
P	Preliminary
F	Final

Field No.	Field Title/Description	Class	Position	Bytes
17	**RESERVED FOR FUTURE USE**	AN	255-300	46

Field No.	Field Title/Description	Class	Position	Bytes

CPAP CONTRIBUTING CLASSIFICATION CODES AND WAGES RECORD

| 1 | **LINK DATA** | AN | 1-72 | 72 |

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| 2 | **RECORD TYPE CODE** | N | 73-73 | 1 |

Report "2".

This is a recurring record. Repeat as needed.

| 3 | **CLASSIFICATION CODE** | N | 74-77 | 4 |

Report the code corresponding to the classification.

| 4 | **CLASSIFICATION INDICATOR CODE** | N | 78-78 | 1 |

Report the code that describes the classification indicator.

Code	Description
1	Contracting/Eligible Classifications
2	Non-Contracting Classifications

| 5 | **UNITED STATES LONGSHORE AND HARBOR WORKERS' PERCENTAGE INDICATOR INCREASE/DECREASE CODE** | N | 79-79 | 1 |

NOT APPLICABLE: DE, MN, NCCI, NJ, PA

Report the code that defines whether the United States Longshore and Harbors Workers' Percentage change is increased, decreased, or reported on a class code or rate basis.

Code	Description
0	Class Code and Rate Basis
1	Increase
2	Decrease

| 6 | **WAGES/PAYROLL AMOUNT** | N | 80-91 | 12 |

Report the wages/payroll for the quarter for each classification code.

There is an assumed decimal point between positions 89 and 90.
N/A: DE, MA, MN, NJ, NY, PA, WI

Enter the whole dollar wages/payroll amount. N/A: NCCI

Field No.	Field Title/Description	Class	Position	Bytes
7	**HOURS/HOURS WORKED**	N	92-103	12

Report the hours for the corresponding classification code.

There is an assumed decimal point between positions 101 and 102. N/A: DE, MA, MN, NJ, NY, PA, WI

Enter the whole hours worked. N/A: NCCI

8	**BASE RATE**	N	104-113	10

Report the base rate for each classification code.

Enter the loss cost for each classification code. N/A: MA, MN, NJ, WI

Enter the charged manual rate for each classification code. N/A: DE, MN, NY, WI, PA

Enter the pure premium for each classification code. N/A: DE, MA, NJ, NY, PA, WI

There is an assumed decimal point between positions 109 and 110.

9	**PREMIUM AMOUNT**	N	114-127	14

Report the premium amount for each class code.

There is an assumed decimal point between positions 125 and 126. N/A: DE, MA, MN, NJ, NY, PA, WI

Enter the whole dollar premium amount. N/A: NCCI

10	**AVERAGE HOURLY WAGE**	N	128-137	10

Report the average hourly wage.

There is an assumed decimal point between positions 135 and 136.

11	**CONTRACTORS PREMIUM ADJUSTMENT PROGRAM FACTOR**	N	138-141	4

Report the credit percentage on the CPAP worksheet for each class code.

There is an assumed decimal point between positions 140 and 141. N/A: DE, MA, MN, NJ, NY, PA, WI

Enter the whole credit percentage. N/A: NCCI

Field No.	Field Title/Description	Class	Position	Bytes
12	**CREDIT PER CLASS AMOUNT**	N	142-153	12

NOT APPLICABLE:

Report the dollar amount on the CPAP worksheet for each class code.

There is an assumed decimal point between positions 151 and 152. N/A: DE, MA, MN, NJ, NY, PA, WI

Enter the whole dollar credit per class amount. N/A: NCCI.

Field No.	Field Title/Description	Class	Position	Bytes
13	**RESERVED FOR FUTURE USE**	AN	154-300	147

Field No.	Field Title/Description	Class	Position	Bytes

CALCULATION OF OFFSET AND NET CREDIT RECORD

1	**LINK DATA**	AN	1-72	72

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2	**RECORD TYPE CODE**	N	73-73	1

NOT APPLICABLE: NJ

Report "3".

3	**TOTAL PAYROLL/WAGES AMOUNT**	N	74-85	12

NOT APPLICABLE: MA, MN, NJ, NY, WI

Report the total payroll/wages amount for all class codes.

There is an assumed decimal point between positions 83 and 84.
N/A: DE, MA, MN, NJ, NY, PA, WI

Enter the whole dollar payroll/wages amount. N/A: NCCI

4	**TOTAL HOURS WORKED**	N	86-97	12

NOT APPLICABLE: N/A: MA, MN, NJ, NY, WI

Report the total hours worked for all class codes.

There is an assumed decimal point between positions 95 and 96.
N/A: DE, MA, MN, NJ, NY, PA, WI

Enter the whole hours worked. N/A: NCCI

5	**PREMIUM AMOUNT TOTAL**	N	98-109	12

NOT APPLICABLE: NJ

Report the total premium amount for all class codes.

There is an assumed decimal point between positions 107 and 108. N/A: DE, MA, MN, NJ, NY, PA, WI

Enter the whole dollar premium amount. N/A: NCCI

Field No.	Field Title/Description	Class	Position	Bytes
6	**TOTAL CREDIT PER CLASS/TOTAL CREDIT AMOUNT** *NOT APPLICABLE: NJ* Report the total credit for all class codes. There is an assumed decimal point between positions 119 and 120. N/A: DE, MA, MN, NJ, NY, PA, WI Enter the whole dollar total credit amount. N/A: NCCI	N	110-121	12
7	**RATING EFFECTIVE DATE (OFFSET)** *NOT APPLICABLE: DE, MN, NJ, PA, WI* Report the date that the rating is effective. Format: CCYYMMDD	N	122-129	8
8	**RATING ISSUE DATE** *NOT APPLICABLE: MN, NCCI, NJ, WI* Report the date the rating was calculated. Format: CCYYMMDD	N	130-137	8
9	**LATE PENALTY ADJUSTMENT AMOUNT** *NOT APPLICABLE: DE, MA, NCCI, NJ, NY, PA, WI* Report the late penalty adjustment amount for applications received after the enrollment deadline.	N	138-140	3
10	**POLICY CREDIT** *NOT APPLICABLE: NY* Report the percentage (the total credit amount per class/total premium amount on the CPAP worksheet. There is an assumed decimal point between positions 143 and 144. N/A: DE, MA, MN, NJ, NY, PA, WI Enter the whole policy credit percentage. N/A: NCCI	N	141-144	4
11	**POLICY CREDIT FACTOR** *NOT APPLICABLE: NCCI, NY* Report the whole percentage (1.00 – policy Credit = Policy Credit Factor).	N	145-147	3

Field No.	Field Title/Description	Class	Position	Bytes
12	**EXPERIENCE RATING MODIFICATION OFFSET FACTOR**	N	148-151	4

NOT APPLICABLE: MA, MN, NJ, WI

Report the percentage of the total manual premium represented by the experience rating offset amount.

There is an assumed decimal point between positions 150 and 151. N/A: DE, MA, MN, NJ, NY, PA, WI

Enter the whole percentage of the total manual premium. N/A: NCCI

13	**EXPERIENCE RATING OFFSET AMOUNT**	N	152-163	12

NOT APPLICABLE: MA, MN, NJ, NY, WI

Report the amount of offset calculated for experience rated risks.

There is an assumed decimal point between positions 161 and 162.

14	**SPLIT POINT AMOUNT**	N	164-169	6

NOT APPLICABLE: N/A: NCCI, NJ, MA, MN, WI

 Report the amount used in the experience modification factor.

15	**STATE ACCIDENT LIMIT AMOUNT**	N	170-175	6

NOT APPLICABLE: DE, MA, MN, NCCI, NJ, PA, WI

Report the amount of the State Accident Limit.

16	**TOTAL EXPECTED LOSSES AMOUNT**	N	176-187	12

NOT APPLICABLE: DE, MN, NJ, NY, WI

Report the total expected losses from experience rating used in the calculation of experience modification factor.

17	**EXPECTED EXCESS AMOUNT**	N	188-199	12

NOT APPLICABLE: DE, MN, NJ, NY, PA, WI

Report the expected excess from experience rating used in the calculation of experience modification factor.

18	**WEIGHTING VALUE FACTOR**	N	200-205	6

NOT APPLICABLE: DE, MN, NJ, NY, PA, WI

Report the weighting value from experience rating used in the calculation of experience modification factor.

There is an assumed decimal point between positions 202 and 203.

Field No.	Field Title/Description	Class	Position	Bytes
19	**BALLAST AMOUNT**	N	206-217	12

NOT APPLICABLE: DE, MN, NJ, NY, PA, WI

Report the ballast value from experience rating used in the calculation of mod factor.

20	**Z FACTOR**	N	218-220	3

NOT APPLICABLE: DE, MN, NCCI, NJ, PA, WI

Report the whole percentage from the calculation of offset and the net credit.

21	**CREDIT OFFSET**	N	221-223	3

NOT APPLICABLE: DE, MN, NCCI, NJ, PA, WI

Report the whole percentage of the credit offset. (CR*Z (Experience Rating Offset) = %).

22	**CREDIT PERCENTAGE/NET CREDIT**	N	224-227	4

NOT APPLICABLE: NJ

Report the percentage amount of the credit factor.

There is an assumed decimal point between positions 226 and 227. N/A: DE, MA, MN, NJ, NY, PA, WI

Enter the whole percentage of the credit factor. N/A: NCCI

23	**NET CREDIT AMOUNT**	N	228-239	12

NOT APPLICABLE: MA, MN, NJ, NY, WI

Report the amount of the credit.

There is an assumed decimal point between positions 237 and 238.

Field No.	Field Title/Description	Class	Position	Bytes

24 **DID NOT QUALIFY (DNQ) CODE** N 240-241 2
NOT APPLICABLE: DE, MN, NJ, PA, WI

Report the 2-digit reason code for the DNQ.

Code	Description
01	No Eligible Codes Reported
02	Did not meet the average hourly wage requirement
03	Not Experience Rated
04	Contracting premium less than 50% of total premium. N/A: MA, NY
05	Experience Modifier Above Maximum Allowed. N/A: MA, NY
06	Application received more than 180 days after policy effective date. N/A: MA, NY
07	Application received more than 3 years after policy expiration date. N/A: MA, NY

For NCCI, this code is applicable to Florida only.

25 **RESERVED FOR FUTURE USE** AN 242-300 59

Field No.	Field Title/Description	Class	Position	Bytes

FILE CONTROL RECORD

1	**RESERVED FOR FUTURE USE**	AN	1-72	72

2	**RECORD TYPE CODE**	N	73-73	1

Report "9".

One file record is required per submission.

3	**RECORD TOTALS**	N	74-83	10

Report the total number of records on the submission.

This field will show the total number of records on the submission, including the Electronic Transmittal Record if used, but excluding the File Control Record.

4	**HEADER RECORD TOTALS/NUMBER OF CPAPS**	N	84-91	8

Report the total number of Header Records (Record Type Code 01) included in a submission.

5	**RESERVED FOR FUTURE USE**	AN	92-300	209