Workers Compensation Insurance Organizations, Inc.

WCIO

WCIO Workers Compensation Data Specifications

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

Summary of Changes: No changes in this version.

TOPIC/ FIELD NAME	SUBJECT HEADING	POSITION

TOPIC/ FIELD NAME	SUBJECT HEADING	POSITION
P		
PERIOD EFFECTIVE DATE	Link Data Common to All Records	56-63
POLICY CREDIT	Calculation of Offset and Net Credit Record	141-144
POLICY CREDIT FACTOR	Calculation of Offset and Net Credit Record	145-147
POLICY EFFECTIVE DATE	Link Data Common to All Records	29-36
POLICY NUMBER IDENTIFIER	Link Data Common to All Records	11-28
PREMIUM AMOUNT	CPAP Contributing Classification Codes and Wages Record	114-127
PREMIUM AMOUNT TOTAL	Calculation of Offset and Net Credit Record	98-109
PRODUCTION DATE	Header Record	233-240
R		
RATING EFFECTIVE DATE	Calculation of Offset and Net Credit Record	122-129
	Header Record	246-253
RATING ISSUE DATE	Calculation of Offset and Net Credit Record	130-137
RECORD TOTALS	File Control Record	74-83
RECORD TYPE CODE	Calculation of Offset and Net Credit Record	73-73
	CPAP Contributing Classification Codes and Wages Record	73-73
	File Control Record	73-73
	Header Record	73-73
RESERVED FOR FUTURE USE	Calculation of Offset and Net Credit Record	245-300
	CPAP Contributing Classification Codes and Wages Record	154-300
	File Control Record	1-72
	File Control Record	92-300
RESERVED FOR FUTURE USE	Header Record	255-300
	Link Data Common to All Records	66-72
RISK ID NUMBER	Header Record	173-181
S		
SPLIT POINT AMOUNT	Calculation of Offset and Net Credit Record	164-172
STATE ACCIDENT LIMIT AMOUNT	Calculation of Offset and Net Credit Record	173-178
STATE CODE	Link Data Common to All Records	1-2
STATUS OF CPAP CODE	Header Record	254-254
T		
TOTAL CREDIT PER CLASS/TOTAL CREDIT AMOUNT	Calculation of Offset and Net Credit Record	110-121
TOTAL HOURS WORKED	Calculation of Offset and Net Credit Record	86-97
TOTAL PAYROLL/WAGES AMOUNT	Calculation of Offset and Net Credit Record	74-85
TOTALS - EXPECTED	Calculation of Offset and Net Credit Record	179-190
U		
UNITED STATES LONGSHORE AND HARBOR WORKERS' PERCENTAGE CHANGE INCREASE/DECREASE CODE	CPAP Contributing Classification Codes and Wages Record	79-79
W		
WAGES/PAYROLL AMOUNT	CPAP Contributing Classification Codes and Wages Record	80-91
WEIGHT FACTOR	Calculation of Offset and Net Credit Record	203-208
Z		
Z FACTOR	Calculation of Offset and Net Credit Record	221-223

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 is combined for experience rating.

8	**PERIOD EFFECTIVE DATE**	N	56-63	8

NOT APPLICABLE: MA, NCCI

Report the CPAP factor period effective date.

Format: CCYYMMDD.

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.

Field No.	Field Title/Description	Class	Position	Bytes
	Contact your DCO for code applicability.			
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
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.

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.

Format: CCYYMMDD

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

NOT APPLICABLE: NCCI, NJ

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

Format: CCYYMMDD

Field No.	Field Title/Description	Class	Position	Bytes
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

12	**APPLICATION RECEIVED DATE**	N	225-232	8

Report the date application was received from employer.

Format: CCYYMMDD.

13	**PRODUCTION DATE**	N	233-240	8

NOT APPLICABLE: MA, NY

Report the date the worksheet/factor was produced.

Format: CCYYMMDD.

14	**EXPERIENCE MODIFICATION FACTOR**	N	241-245	5

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.

15	**RATING EFFECTIVE DATE**	N	246-253	8

NOT APPLICABLE: MA, MN, WI

Report the effective date of the Experience Rating Modification Factor.

Field No.	Field Title/Description	Class	Position	Bytes
	For non-rated risks, report zeros.			
	Format: CCYYMMDD			
16	**STATUS OF CPAP CODE**	A	254-254	1
	NOT APPLICABLE: DE, MA, MN, NJ, NY, PA, WI			
	Report the code status of the CPAP factor.			

Code	Description
F	Final
P	Preliminary

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
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 CHANGE INCREASE/DECREASE CODE**	N	79-79	1

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

Please contact the DCO for their wages/payroll reporting requirement.

7	**HOURS/HOURS WORKED**	N	92-103	12

Report the hours for the corresponding classification code.

Field No.	Field Title/Description	Class	Position	Bytes
	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.			
	There is an assumed decimal point between positions 109 and 110.			
	Enter the loss cost for each classification code. N/A: DE, MN, NY, PA, WI			
	Enter the charged manual rate for each classification code. N/A: DE, MN, NY, PA, WI			
	Enter the pure premium for each classification code. N/A: DE, MA, NJ, NY, PA, WI			
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 (CPAP) 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			
12	**CREDIT PER CLASS AMOUNT**	N	142-153	12
	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			
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
2	**RECORD TYPE CODE**	N	73-73	1

NOT APPLICABLE: NJ

Report "3".

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

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 hours worked. N/A: NCCI

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

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.

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

6	**TOTAL CREDIT PER CLASS/TOTAL CREDIT AMOUNT**	N	110-121	12

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

7	**RATING EFFECTIVE DATE**	N	122-129	8

NOT APPLICABLE: MN, NCCI, NJ, WI

Report the date that the rating is effective.

Format: CCYYMMDD

8	**RATING ISSUE DATE**	N	130-137	8

NOT APPLICABLE: MN, NCCI, NJ, WI

Report the date the rating was calculated.

Format: CCYYMMDD

Field No.	Field Title/Description	Class	Position	Bytes
9	**LATE PENALTY ADJUSTMENT AMOUNT**	N	138-140	3
	NOT APPLICABLE: DE, MA, NCCI, NJ, NY, PA, WI			
	Report the late penalty adjustment amount for applications received after the enrollment deadline.			
10	**POLICY CREDIT**	N	141-144	4
	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			
11	**POLICY CREDIT FACTOR**	N	145-147	3
	Report the whole percentage (1.00 – policy Credit = Policy Credit Factor).			
12	**EXPERIENCE RATING MODIFICATION OFFSET FACTOR**	N	148-151	4
	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
	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	164-172	9
	NOT APPLICABLE: CA, MA, MI, MN, NC, NJ, WI			
	Report the amount used in the experience modification factor.			
15	**STATE ACCIDENT LIMIT AMOUNT**	N	173-178	6
	NOT APPLICABLE: DE, MA, MN, NCCI, NJ, NY, PA, WI			
	Report the amount of the State Accident Limit.			
16	**TOTALS - EXPECTED**	N	179-190	12
	NOT APPLICABLE: DE, MN, NJ, NY, PA, WI			
	Report the total expected losses from experience rating used in the calculation of experience modification factor.			

Field No.	Field Title/Description	Class	Position	Bytes
17	**EXPECTED EXCESS LOSS TOTALS**	N	191-202	12
	NOT APPLICABLE: DE, MN, NJ, PA, WI			
	Report the expected excess from experience rating used in the calculation of experience modification factor.			
18	**WEIGHT FACTOR**	N	203-208	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 205 and 206.			
19	**BALLAST AMOUNT**	N	209-220	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	221-223	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	224-226	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	227-230	4
	Report the percentage amount of the credit factor.			
	Enter the whole percentage of the credit factor. N/A: NCCI			
	There is an assumed decimal point between positions 229 and 230. N/A: DE, MA, MN, NJ, NY, PA, WI			
23	**NET CREDIT AMOUNT**	N	231-242	12
	Report the amount of the credit.			
	There is an assumed decimal point between positions 240 and 241.			
24	**DID NOT QUALIFY (DNQ) CODE**	N	243-244	2
	NOT APPLICABLE: DE, MN, NJ, PA, WI			
	Report the 2-digit reason code for the DNQ.			

Code   Description

01   No Eligible Codes Reported

Field No.	Field Title/Description	Class	Position	Bytes
	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	245-300	56

Field No.	Field Title/Description	Class	Position	Bytes

FILE CONTROL RECORD

Field No.	Field Title/Description	Class	Position	Bytes
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** | N | 84-91 | 8 |

Report the total number of Header Records for CPAP.

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