



NYCIRB

**New York Compensation
Insurance Rating Board**

733 Third Avenue
New York, NY 10017
Tel: (212) 697-3535

December 22, 2017

R.C. 2458

Re: New York Workers Compensation Statistical Plan Revision

Members of the Rating Board:

I write to inform you that the New York State Department of Financial Services approved a change to the New York Workers Compensation Statistical Plan ("Plan"). The revision is applicable to reporting data on policies effective on or after January 1, 2018.

Specifically, the approved change clarifies that for permanent partial claims involving both a Scheduled Loss of Use award and a Non-Scheduled award, the reported injury type code should be the one that generated the higher incurred indemnity loss amount.

The modified and final versions of page R-28 of the Plan, reflecting the approved change, are attached for your convenience.

Very truly yours,

Ziv Kimmel

Ziv Kimmel
Senior Vice President
and Chief Actuary

Enclosures

c. Permanent Partial Disability — Scheduled Loss of Use — Code 10

A Scheduled Loss of Use permanent partial loss is defined as any permanent injury that does not involve permanent total disability and has been classified, or is expected to be classified, by the New York State Workers' Compensation Board as a Scheduled Loss of Use, or if a claim has settled prior to such classification but was expected to be classified as such.

The amount entered as incurred indemnity must include specific benefits and compensation for temporary disability, as well as scheduled loss of use award.

NOTE: For Permanent Partial claims that include or are expected to include both a Scheduled Loss of Use award and a Non-Scheduled award, report the injury type that generated the higher incurred indemnity loss amount.

d. Permanent Partial Disability — Non-Scheduled — Code 11

A non-scheduled permanent partial loss is defined as any permanent injury that does not involve permanent total disability and has been classified, or is expected to be classified, by the New York State Workers' Compensation Board as a non-scheduled permanent partial disability claim, or if a claim has settled prior to such classification but was expected to be classified as such.

The amount entered as incurred indemnity must include specific benefits and compensation for temporary disability, as well as loss of earning capacity.

Refer to Section h. below for rules concerning the computation of permanent partial claim loss amounts that are payable to the Aggregate Trust Fund.

NOTE: For Permanent Partial claims that include or are expected to include both a Scheduled Loss of Use award and a Non-Scheduled award, report the injury type that generated the higher incurred indemnity loss amount.

e. Temporary Injury—Code 05

Report as temporary every case that involves, or is expected to involve, indemnity benefits, but does not constitute a death case, permanent total disability or any permanent partial disability as defined above.

f. Medical Only—Code 06

Report as medical-only, claims that involve medical costs only and for which no indemnity costs have been incurred or are expected to be incurred as of the valuation date.

Medical losses must include surcharges on hospital and related medical services imposed pursuant to the New York Health Care Reform Act.

When reporting claims involving medical-only losses, incurred and paid indemnity loss amounts must be \$0.

Incurred medical losses from claims not required to be reported to the Workers' Compensation Board, as defined in Section 110 of the New York Workers' Compensation Law, provided that the employer pays the claim in the first instance or immediately reimburses the carrier for the treatment rendered to the employee, should **not** be reported to the Rating Board.

Note: An employer is not required to file a claim notice with the Workers' Compensation Board if the accident or illness requires ordinary first aid or causes loss of time from work of only one day beyond the working day or shift on which the accident or illness occurred.

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