



## YOUR WORKSAFE POLICY GUIDE Georgia

We look forward to serving you and thank you for your business. If you have any questions about your WorkSafe workers' compensation policy – or any other matter related to Builders Mutual – please contact your Agent or our Company.

Enclosed is valuable information related to your policy. Please read carefully and retain with your policy.

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<b>Also enclosed in this policy jacket:</b>	
Your Policy	
Post Injury Drug/Alcohol Policy (post for employees)	
BMIC Drug Testing Acknowledgement	
Estimated Billing (invoice for any premium due)	

## **PREMIUM ACCOUNTING – 800-809-4860**

### **Payment Plans**

Builders Mutual offers the following payment plans; policyholders may change plans at renewal only:

#### **Monthly Reporting**

Policyholders who are on the monthly self-reporting payment plan will receive a Monthly Self-Reporting Worksheet. This worksheet provides an opportunity for maximum control of cash flow, and projects a more realistic final audit as a result of **accurate** monthly reporting. All policyholders must submit the Monthly Self-Reporting Worksheet together with the appropriate premium regardless of account size. Instructions to calculate premium are also included on each Worksheet.

To complete the Worksheet(s), enter GROSS payroll by classification(s) for the period during the month coverage was in effect and compute monthly premium following the instructions on the report(s). The completed report(s) should be returned with the appropriate premium payment to Builders Mutual no later than the 20<sup>th</sup> of the month. Checks should be made payable to Builders Mutual.

For complete directions to aid in filling out your Monthly Self-Reporting Worksheet, visit [www.buildersmutual.com](http://www.buildersmutual.com) and click on Workers' Comp Worksheet Instructions under Hot Topics.

#### **Monthly Bill 10-Pay**

For those whose annual premium is greater than \$1,000, have steady payroll and want a fixed payment plan. This plan allows for 20% of the total amount (premium + expense constant) to be due at application and we will bill for the remaining 9 installments.

#### **4-Pay, Quarterly**

For those whose annual premium is greater than \$1,000. This plan allows for 25% of the total amount (premium + expense constant) to be due at application. We will bill for the remaining 3 installments.

#### **2-Pay, Semi-Annual**

For those whose annual premium is greater than \$1,000. This plan allows for %50 of the total amount (premium + expense constant) to be due at application. We will bill for the remaining installment.

#### **Annual**

Policies that are less than \$1,000 in annual premium are required to be on the annual pay plan. In addition, policyholders who wish to pay one annual premium may select this plan. No deposit is required.

### **Returned Checks**

All checks that are returned for insufficient funds or any other reasons will subject the policyholder to a \$25.00 charge per check.

**Renewals**

The policy will renew on the renewal date listed on the declaration page. However, policies that incur losses are subject to review by BMIC's Underwriting department for continued acceptability.

**Cancellation**

Should a policyholder request the cancellation of its workers' compensation policy prior to its renewal date, there will be a short rate penalty assessed according to the National Council on Compensation Insurance (NCCI) table. Please contact your agent for more details.

**Termination - Policyholder's Request**

Requests for termination of coverage must be received in writing by BMIC and must include:

- Signature of an Owner or Officer
- Reason for Termination

**Termination - Duplicate Coverage**

In the event that a policyholder replaces coverage with a new carrier, the policyholder must send proof of coverage (letter of assumption or copy of new policy) in order to cancel the BMIC policy on the effective date of the new coverage.

## **PREMIUM AUDIT – 800-809-4860**

The premium shown on your policy is an estimate based on your business's classifications and premium basis at the time your policy is issued. An audit will be conducted at the conclusion of the policy period to determine the "final" audited premium using the actual premium basis and classifications that apply to your business covered by this policy. You may be contacted by a BMIC representative to conduct a physical onsite audit of your financial records or you may be requested to voluntarily submit information to BMIC to determine the "final" premium. WorkSafe policyholders with policies less than \$5,000 may qualify for voluntary audits. Premium Audit staff will determine accounts that qualify based on the previous year's audit and the current year's monthly reporting forms, and will mail forms to qualified policyholders. Your failure to cooperate with any audit request may result in BMIC estimating your final premium.

### **Variables affecting your audit**

#### *Classifications*

If at any time you have questions about properly classifying your operations, please contact Premium Audit at 800-809-4860.

#### *Subcontractors*

Subcontractors can represent an additional exposure to loss for you and the insurance company. Policyholders are required to pay premiums for all uninsured subcontractors, whether or not they have fewer than three employees. The following information outlines premium determination for subcontractors.

#### *Workers' Comp*

Policyholders will not be charged for the payroll of subcontractors if they provide Certificates of Insurance for all subcontractors to Builders Mutual. Without a Certificate of Insurance the amount paid to the subcontractors will be treated as remuneration and a premium charge will be made. This requirement includes subcontractors who do not have employees.

Subcontractor waivers are *not* accepted.

### **Your records**

As a business owner, you know the importance of keeping accurate records. After the expiration of each policy period, a Builders Mutual auditor will contact you for an appointment. Completing the audit helps to ensure you are paying the right price for your Builders Mutual insurance coverage. Remember, records that are properly maintained allow for a fair audit to be completed.

When it's time for your annual audit, the following records will be required by your auditor:

- Cash disbursement journal showing monthly totals for:
  - (1) materials
  - (2) subcontractors
  - (3) casual labor
- Payroll journal and summary showing:
  - (1) monthly and quarterly totals
  - (2) separate totals by type of work
  - (3) separate overtime records
  - (4) check register
  - (5) federal quarterly reports and NC employer's quarterly tax & wage report
  - (6) W2s and W3s, 1099s and 1096s
- Also necessary for payroll are individual earning records showing:
  - (1) type of work performed
  - (2) gross payroll by month and quarter
  - (3) overtime by month and quarter.

Basis of premium is the entire remuneration, cash or non-cash. This can include overtime, bonuses, vacation pay, commissions, and sick pay. Exceptions to remuneration include the premium portion of overtime, tips, severance pay, and payment to group insurance or pension plans.

## **RISK MANAGEMENT - 800-809-4858**

The Risk Management personnel at Builder Mutual are focused on safety and the prevention of injury and other business-related losses. Emphasis is placed on education so owners can develop their own approach to integrated safety and risk management.

### **Available classes**

#### *Fall Protection (bilingual)*

According to the most current statistics from OSHA, falls are the number one killer of construction workers. Also, fifty cents of each dollar paid in claims by Builders Mutual is paid due to fall-related claims. These statistics led Builders Mutual to create a class designed specifically around the prevention of falls. The two-hour fall protection class explains why fall protection is needed in residential construction and demonstrates how to properly use common fall protection. Training manuals and a Risk Management diskette or CD are provided to each attendee.

#### *OSHA 4- and 10-hour Construction Industry Safety Courses*

OSHA recently increased focus on safety guidelines and targeted metropolitan areas that have a high concentration of construction activity. Many contractors were either unaware or uneducated on these guidelines and received large fines due to non-compliance. Builders Mutual Insurance Company provides these classes to educate contractors so they are aware of the OSHA guidelines and to provide guidelines on how to develop a safety program. Each attendee receives a class workbook, a Risk Management CD and a course completion card from Federal OSHA. Builders Mutual instructors are authorized by Federal OSHA as Outreach Instructors for this course.

### **Risk Management**

Visit the Builders Mutual Risk Management micro-site and find numerous resources to help you develop your own safety program. Navigate to [www.buildersmutual.com/RM](http://www.buildersmutual.com/RM); all the tools you need are right at your fingertips. Resources include:

- Selection of Tool Box talks to use during safety meetings.
- Sample safety policy to use as a baseline and customize to meet your needs.
- Selection of sample safety program modules to customize.
- Details on BMIC's Fall Protection Program and educational opportunities.
- Safety STUFF - Builders Mutual's online ordering site allows you to purchase necessary safety equipment at discounted prices.

## CLAIMS - 800-809-4861

### Reporting Claims

To report a claim, call 800-809-4861 or contact your agent.

### Drug testing

Individuals who have a drug or alcohol dependency may view the Workers' Compensation system as a means for sustaining an illegal or irresponsible lifestyle without accountability for returning to the workplace. The compensation rate of 66.7% of wages may tempt a deceptive employee to feign injury, particularly those which are difficult to prove such as costly back and muscle strains.

Drug or alcohol abuse poses a direct threat to the well being of the user, the workplace and to the public at large. As you know, the public expects that employees will not be diminished or impaired on the job as a result of drug or alcohol abuse. The public expects that all employees are coherent and have good motor-sensory coordination in any work environment or activity including but not limited to: the construction site, in a shop, operating machinery, carrying materials, driving vehicles, or working at dangerous heights.

Users of drugs and alcohol also present a threat to the security of person and property. Studies show that drug and alcohol use may be a precursor to criminal conduct. Assaults are the leading cause of death in the workplace.

Accordingly, BMIC has adopted a Policy requiring post-injury drug and alcohol testing arising out of any alleged work-related accident. In order to receive workers' compensation coverage, **BMIC expects each employer to notify its employees of this Policy in order that they may be potentially eligible to receive workers' compensation benefits.**

BMIC has enclosed a Notice of this Policy together with an Acknowledgment Form which should be made available to all employees. In the event of an alleged on-the-job injury arising out of an alleged work-related accident, the employee will be tested at the time medical treatment is first administered. Pursuant to our policy, BMIC shall pay the cost of this Drug and Alcohol Test as a reasonable expense incurred at BMIC's request.

If the provider refuses to administer a drug and alcohol test, contact the Claims department at 1-800-809-4862 while the injured is at the medical facility. This will enable the Claims department to contact the medical provider to make arrangements to have a drug and alcohol test administered.

## **FORMS AND THEIR PURPOSE**

The following information includes an outline of forms that are necessary to administer or change a policyholder's coverage.

**Notice of Election or Rejection of Workers' Compensation Coverage (WC 10)** - This form is required if a corporate officer or limited liability company member elects to reject coverage; if a sole proprietor or partner elects to be included as an employee; or if a farm labor employer elects to provide coverage for farm laborers.

**Confidential Request for Information (Form #ERM-14)** - This form is used for any change to the structure or nature of the business including but not limited to: combination of separate entities, change of ownership, merger or consolidation. Policyholders should also submit an additional Entity/Location Inclusion form (Form #WCA-6).

### **Claim Forms:**

**Workers' Compensation Notice and Instructions to Employers and Employees (WC-P1)**

**Employer's First Report of Injury or Occupational Disease (WC-1)**

**Wage Statement (WC-6)**

**Notice of Payment/Suspension of Benefits (WC-2)**

**Notice to Employee of Medical Release to Return to Work with Restrictions or Limitations (WC-104)**