

Bulletin No. B-5.02

Guidelines To Provide Information To Policyholders On Workers' Compensation Classifications

I. Background and Purpose

The purpose of this bulletin is to provide guidelines on workers' compensation classifications appeals and a suggested disclosure form for use by insurers.

Bulletins are the Division's interpretations of existing insurance law or general statements of Division policy. Bulletins themselves establish neither binding norms nor finally determine issues or rights.

II. Applicability and Scope

This bulletin applies to all licensed insurers in Colorado issuing workers' compensation insurance policies including Pinnacol Assurance.

III. Division Position

Insurers shall clearly and conspicuously inform policyholders of their rights to appeal employee classification designations, the procedures to be used for such an appeal, and the types of medical case management that insurers have available for employees to promote medical cost containment. To comply with the statutory requirements, any workers' compensation insurance policy shall contain a disclosure form with substantially the same information as in the form attached to this bulletin.

IV. Additional Division Resources

A. For More Information

Colorado Division of Insurance Actuarial Services Section 1560 Broadway, Suite 850 Denver, CO 80202 Tel. 303-894-7499 Internet: <u>http://www.dora.colorado.gov/insurance</u>

B. Related Division Regulations

None

- V. History
 - Originally issued as bulletin 02-01, June 9, 1989.
 - Re-issued as bulletin 06-06, April 10, 2003.



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 NCCI Contact Person and Address Updated: December 12, 2016.

WORKERS' COMPENSATION DISCLOSURE FORM

IMPORTANT NOTICE TO POLICYHOLDERS

1. Notice Of Change In Rate By Classification

If you desire information whenever there is a change in your workers' compensation insurance rate by classification, you must request such information from your insurer. This request for information must be in writing.

2. Notice of Policyholder's Right To Appeal Classification

Your insurer can charge and collect any additional amount of money not included in the initial premium charged as a result of job misclassification.

If you have any questions regarding the employee classification assigned to calculate your workers' compensation insurance premium, you need to direct your questions to your insurer or the insurer's authorized representative within either thirty (30) days after the anniversary date of the policy or the date of receipt by you of notice of a change in job classification. Within thirty (30) days after receipt of your request for information, your insurer or the insurer's authorized representative must explain to you why a particular employee classification was used.

If you disagree with your insurer or the insurer's authorized representative on the employee classification assignment, you may appeal to the Workers' Compensation Classification Appeal Board by filing written notice with said board within thirty (30) days after you have exhausted all appeal review procedures provided by the insurer. Your request should be sent to the Secretary of the Colorado Workers' Compensation Classification Appeals Board, Michael Craddock, c/o National Council on Compensation Insurance, 901 Peninsula Corporate Circle, Boca Raton, FL 33487. Written instructions for your appearance before the Colorado Workers' Compensation Classification Appeals Board will be furnished by the Secretary of the board. The board will render a decision as to whether a misclassification has occurred.

A decision by the board is final and not subject to appeal unless you, the insurer or Pinnacol Assurance provides written notice of appeal within thirty (30) days after the board's decision to the office of the Commissioner of Insurance, 1560 Broadway, Suite 850, Denver, CO 80202. The Commissioner shall review any decision of the board properly appealed.

3. Notice Of Availability Of Medical Case Management Services

Because there are different types of case management services available and prescribed by insurers, it is suggested that each insurer include the type of case management services available by the individual insurer.