



TOM GALLAGHER
CHIEF FINANCIAL OFFICER
STATE OF FLORIDA

INFORMATIONAL BULLETIN
DFS-04-004B
ISSUED
June 24, 2004

All Carriers, Assessable Mutual Insurance Companies, Self-Insurance Funds and Self-Insured Employers

Orders Setting Assessment Rates for the Workers' Compensation Administration Trust Fund and Special Disability Trust Fund

Attached are copies of the Order Setting Assessment Rates for the Workers' Compensation Administration Trust Fund for Calendar Year 2005, and the Order Setting Assessment Rates for the Special Disability Trust Fund for Fiscal Year 2004-2005.

At the end of each calendar quarter, carriers, assessable mutual insurance companies and self-insurance funds will be provided with their Carrier and Self-Insurance Fund Quarterly Premium Report form and a copy of the Premium Documentation Spreadsheet. The carriers, assessable mutual insurance companies and self-insurance funds must complete and return both forms to the Assessments Unit, Division of Workers' Compensation, along with any applicable assessment payment due, within 30 days after the end of the calendar year quarter.

The Division will compute self-insurer assessments and provide each self-insurer with a copy of their Assessment Computation Sheet and invoices reflecting the four quarterly installments due, each within 30 days after the end of the self-insurer's assessment quarter.

If you have any questions or need additional information, please call Evelyn Vlasak, Assessments Coordinator, at (850) 413-1644.

Attachments

- TANNER HOLLOWAN, DIRECTOR
- DIVISION OF WORKERS' COMPENSATION
- 200 EAST GAINES STREET • TALLAHASSEE, FLORIDA 32399-4220
- TEL. 850-413-1600 • SC 293-1600 • FAX 850-922-7119
- EMAIL • HOLLOWANT@DFS.STATE.FL.US



TOM GALLAGHER
CHIEF FINANCIAL OFFICER
STATE OF FLORIDA

IN THE MATTER OF:

ASSESSMENT RATE FOR WORKERS'
COMPENSATION ADMINISTRATION TRUST
FUND FOR CALENDAR YEAR 2005

CASE No. 04-76814-WC

_____ /

ORDER

THIS CAUSE came on for consideration pursuant to the provisions of Section 440.51(1), Florida Statutes, which require the Department of Financial Services (hereinafter referred to as the "Department") to annually notify carriers and self-insurers of the assessment rate necessary for the administration of Chapter 440, Florida Statutes. The Department, having considered the amounts necessary for the administration of Chapter 440, Florida Statutes, for calendar year 2005, and being otherwise fully advised in the premises, hereby finds and orders as follows:

1. Section 440.51(1), Florida Statutes, requires the Department to estimate annually in advance the amounts necessary for the administration of Chapter 440, Florida Statutes. Pursuant to Section 440.51(1)(a), Florida Statutes, the Department shall, by July 1 of each year, notify carriers and self-insurers of the assessment rate, which shall be based on the anticipated expenses of the administration of Chapter 440, Florida Statutes, for the next calendar year.

2. With respect to calendar year 2005, the Department of Financial Services has estimated the amount necessary for the administration of Chapter 440, Florida Statutes, for calendar year 2005.

IT IS THEREFORE ORDERED:

Each insurance company writing workers' compensation insurance in the State of Florida, each group self-insurance fund under Section 624.4621, Florida Statutes, each commercial self-insurance fund under Section 624.462, Florida Statutes, and each assessable mutual insurer under Section 628.6011, Florida Statutes, shall pay an assessment for deposit into the Workers' Compensation Administration Trust Fund in the amount of seventy-five hundredths of one percent (.75%) of the net premiums collected (or earned, as per Division of Workers' Compensation Bulletin Number 228) on workers' compensation insurance issued by the company in the State of Florida. Pursuant to Chapter 2000-150, Laws of Florida, the net premiums assessed for the calendar quarter shall be adjusted to include the deductible premium credits or discounts the company has applied to its deductible policies.

Beginning on the self-insurer's anniversary date falling within the calendar year, each self-insured employer under Section 440.38, Florida Statutes, shall pay an assessment for deposit into the Workers' Compensation Administration Trust Fund in the amount of seventy-five hundredths of one percent (.75%) of net premiums computed by the Division of Workers' Compensation, as if the company had purchased workers' compensation insurance in the State of Florida.

The Workers' Compensation Administration Trust Fund assessment shall become due

and be paid to the Division of Workers' Compensation quarterly, within thirty (30) days of receipt of notice.

DONE and ORDERED this _____ day of June 2004.

TOM GALLAGHER

NOTICE OF RIGHTS

You have a right to administrative review of this action under sections 120.569 and 120.57, Florida Statutes.

To obtain review, you must file a written petition requesting review. If you dispute a material fact contained in this action, you are entitled to a hearing under sections 120.569 and 120.57(1), Florida Statutes, at which you may be represented by counsel, present evidence and argument on the issue(s), examine witnesses, submit a proposed recommended order, and file exceptions to the recommended order of the administrative law judge. If you do not dispute a material fact contained in this action, you are entitled to a hearing under sections 120.569 and 120.57(2), Florida Statutes, at which you may be represented by counsel, present documentary evidence, and present a written statement in opposition to this action.

A petition for a hearing under section 120.57, Florida Statutes, must conform to rules 28-106.201(2) and 28-106.301(2), Florida Administrative Code. The petition shall contain a) the name and address of each agency affected and each agency's file or identification number, if known; b) the name, address, and telephone number of the petitioner; the name, address, and telephone number of the petitioner's representative, if any, and an explanation of how the petitioner's substantial interests will be affected by the agency determination; c) a statement of when and how the petitioner received notice of the agency decision; d) if you dispute a material fact, a statement of all disputed issues of material fact (if there are none, then the petition must so indicate), and if you do not dispute a material fact, a concise statement of ultimate facts alleged, including the specific facts the petitioner contends warrant reversal or modification of the agency's proposed action; e) a concise statement of the ultimate facts alleged, including the specific facts the petitioner contends warrant reversal or modification of the agency's proposed action; f) a statement of the specific rules or statutes the petitioner contends require a reversal or modification of the agency's proposed action; and g) a statement of the relief sought by the petition with respect to the agency's proposed action.

You must file the petition for hearing so that it is received by the Department within twenty-one (21) days of your receipt of this action. Any hearing request must be forwarded to the General Counsel, acting as the Agency Clerk, Florida Department of Financial Services, 200 East Gaines Street, Tallahassee, Florida 32399-0300. **FAILURE TO FILE A PETITION WITHIN THE TWENTY-ONE (21) DAYS CONSTITUTES A WAIVER OF YOUR RIGHT TO ADMINISTRATIVE REVIEW OF THIS ACTION.**

Mediation under section 120.569, Florida Statutes, is not available.



TOM GALLAGHER
CHIEF FINANCIAL OFFICER
STATE OF FLORIDA

IN THE MATTER OF:

ASSESSMENT RATE FOR SPECIAL
DISABILITY TRUST FUND
FOR FISCAL YEAR BEGINNING
JULY 1, 2004

CASE NO. 04-76815-WC

_____ /

ORDER

THIS CAUSE came on for consideration pursuant to the provisions of Section 440.49(9), Florida Statutes, which requires the Department of Financial Services (hereinafter referred to as the "Department") to estimate annually in advance the amount necessary for the administration of the Special Disability Trust Fund and make such assessment in the manner provided therein. The Department, having considered the amounts necessary for the administration of the Special Disability Trust Fund for the fiscal year beginning July 1, 2004, and being otherwise fully advised in the premises, hereby finds and orders as follows:

1. Pursuant to Section 440.49(9)(b)1., Florida Statutes, the Special Disability Trust Fund shall be maintained by annual assessments upon the insurance companies writing compensation insurance in the State of Florida, the commercial self-insurers under Sections 624.462 and 624.4621, Florida Statutes, the assessable mutuals under Section 628.6011, Florida Statutes, and the self-insurers under Chapter 440, Florida Statutes. Further, Section 440.49(9)(b)1., Florida Statutes, requires the Department to estimate annually in advance the

amount necessary for the administration of Section 440.49(9), Florida Statutes, and the maintenance of the Special Disability Trust Fund, and to make such assessment in the manner provided for therein.

2. Pursuant to Section 440.49(9)(c), Florida Statutes, the assessment rate for the Special Disability Trust Fund shall not exceed 4.52 percent.

3. With respect to the fiscal year beginning July 1, 2004, the Department has calculated the assessment rate for the administration of Section 440.49(9), Florida Statutes, and the maintenance of the Special Disability Trust Fund.

IT IS THEREFORE ORDERED:

Each insurance company writing compensation insurance in the State of Florida, each commercial self-insurer under Section 624.462 or Section 624.4621, and each assessable mutual under Section 628.6011, Florida Statutes, shall pay a Special Disability Trust Fund assessment equal to four and fifty-two hundredths percent (4.52%) of the net workers' compensation premiums written in the State of Florida. Each self-insurer under Section 440.38, Florida Statutes, shall pay a Special Disability Trust Fund assessment equal to four and fifty-two hundredths percent (4.52%) of the net premiums computed by the Division of Workers' Compensation, as if the company had purchased workers' compensation insurance in the State of Florida.

The Special Disability Trust Fund assessment shall become due and be paid to the

Division of Workers' Compensation quarterly at the same time and in addition to assessments for the Workers' Compensation Administration Trust Fund, as provided for in Section 440.51, Florida Statutes.

DONE and ORDERED this _____ day of June 2004.

TOM GALLAGHER

NOTICE OF RIGHTS

You have a right to administrative review of this action under sections 120.569 and 120.57, Florida Statutes.

To obtain review, you must file a written petition requesting review. If you dispute a material fact contained in this action, you are entitled to a hearing under sections 120.569 and 120.57(1), Florida Statutes, at which you may be represented by counsel, present evidence and argument on the issue(s), examine witnesses, submit a proposed recommended order, and file exceptions to the recommended order of the administrative law judge. If you do not dispute a material fact contained in this action, you are entitled to a hearing under sections 120.569 and 120.57(2), Florida Statutes, at which you may be represented by counsel, present documentary evidence, and present a written statement in opposition to this action.

A petition for a hearing under section 120.57, Florida Statutes, must conform to rules 28-106.201(2) and 28-106.301(2), Florida Administrative Code. The petition shall contain a) the name and address of each agency affected and each agency's file or identification number, if known; b) the name, address, and telephone number of the petitioner; the name, address, and telephone number of the petitioner's representative, if any, and an explanation of how the petitioner's substantial interests will be affected by the agency determination; c) a statement of when and how the petitioner received notice of the agency decision; d) if you dispute a material fact, a statement of all disputed issues of material fact (if there are none, then the petition must so indicate), and if you do not dispute a material fact, a concise statement of ultimate facts alleged, including the specific facts the petitioner contends warrant reversal or modification of the agency's proposed action; e) a concise statement of the ultimate facts alleged, including the specific facts the petitioner contends warrant reversal or modification of the agency's proposed action; f) a statement of the specific rules or statutes the petitioner contends require a reversal or modification of the agency's proposed action; and g) a statement of the relief sought by the petition with respect to the agency's proposed action.

You must file the petition for hearing so that it is received by the Department within twenty-one (21) days of your receipt of this action. Any hearing request must be forwarded to the General Counsel, acting as the Agency Clerk, Florida Department of Financial Services, 200 East Gaines Street, Tallahassee, Florida 32399-0300. **FAILURE TO FILE A PETITION WITHIN THE TWENTY-ONE (21) DAYS CONSTITUTES A WAIVER OF YOUR RIGHT TO ADMINISTRATIVE REVIEW OF THIS ACTION.**

Mediation under section 120.569, Florida Statutes, is not available.