

INFORMATIONAL BULLETIN DWC-01-2018 ISSUED June 4, 2018 Florida Department of Financial Services Jimmy Patronis Chief Financial Officer

- Attn: All Insurance Companies, Commercial Self-Insurers Under Sections 624.462 and 624.4621, Florida Statutes, Assessable Mutual Insurers as Defined in Section 628.6011, Florida Statutes, Electric Cooperative Self-Insurance Funds Under Section 624.4626, Florida Statutes, and Individual Self-Insurers Under Chapter 440, Florida Statutes
- Re: Order Setting Assessment Rate for the Special Disability Trust Fund for Calendar Year 2019

Attached is a copy of the Order setting the assessment rate for the Special Disability Trust Fund for calendar year 2019.

Pursuant to section 440.49(8)(b)(1), Florida Statutes, the Department shall estimate annually in advance the amount necessary for the administration of section 440.49(8), Florida Statutes, and the maintenance of the Special Disability Trust Fund.

The Department estimates the amount necessary for the administration of section 440.49(8), Florida Statutes, and the maintenance of the Special Disability Trust Fund for the calendar year 2019 is 0.42%. Beginning January 1, 2019, the assessment rate for the Special Disability Trust Fund is reduced from the 2018 calendar year rate of 0.91% to the 2019 calendar year rate of 0.42%.

If you have questions or need additional information about these assessments, please call Gene Smith, Assessments Coordinator for the Division of Workers' Compensation, at (850) 413-1644.

Attachment



CHIEF FINANCIAL OFFICER JIMMY PATRONIS STATE OF FLORIDA

IN THE MATTER OF:

ASSESSMENT RATE FOR SPECIAL DISABILITY TRUST FUND FOR CALENDAR YEAR 2019

Case No. 226970-WC

ORDER

THIS CAUSE came on for consideration pursuant to section 440.49(8), Florida Statutes (2018), which requires the Department of Financial Services ("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 calendar year beginning January 1, 2019, and being otherwise fully apprised in all material premises, hereby finds and orders as follows:

1. Pursuant to section 440.49(8)(b), 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 mutual insurers as defined in section 628.6011, Florida Statutes, and the self-insurers under chapter 440, Florida Statutes. An electric cooperative self-insurance fund that meets the requirements of section 624.4626, Florida Statutes, is also subject to assessments set forth in section 440.49(8), Florida Statutes. 2. Section 440.49(8)(b), Florida Statutes, requires the Department to estimate annually in advance the amount necessary for the administration of section 440.49(8), Florida Statutes, and the maintenance of the Special Disability Trust Fund, and to make such assessment in the manner provided therein.

3. With respect to the calendar year beginning January 1, 2019, the Department estimates the assessment rate necessary for the administration of subsection 440.49(8), Florida Statutes, and the maintenance of the Special Disability Trust Fund is 0.42%.

IT IS THEREFORE ORDERED:

Beginning January 1, 2019, each insurance company writing compensation insurance in the State of Florida, each commercial self-insurer under section 624.462 or section 624.4621, Florida Statutes, each electric cooperative self-insurance fund under section 624.4626, Florida Statutes, and each assessable mutual insurer as defined in section 628.6011, Florida Statutes, shall pay a Special Disability Trust Fund assessment equal to forty-two one-hundredths of a percent (0.42%) of the net workers' compensation premiums written in the State of Florida.

Beginning on the self-insurer's anniversary date falling within calendar year 2019, each selfinsurer under chapter 440, Florida Statutes, shall pay a Special Disability Trust Fund assessment equal to forty-two one-hundredths of a percent (0.42%) of the net premiums computed by the Division of Workers' Compensation, as if the self-insurer had purchased workers' compensation insurance in the State of Florida.

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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 by section 440.51, Florida Statutes.

DONE and ORDERED this ______ day of June, 2018.

MANX Ya

CHIEF FINANCIAL OFFICER

NOTICE OF RIGHTS

You have the right to request a proceeding to contest this action by the Department of Financial Services ("Department") pursuant to sections 120.569 and 120.57, Florida Statutes, and chapter 28-106, *Florida Administrative Code*. The proceeding request must be in writing, signed by you, and must be filed with the Department within 21 calendar days of your receipt of this notice. The request must be filed with Julie Jones, DFS Agency Clerk, Florida Department of Financial Services, 612 Larson Building, 200 East Gaines Street, Tallahassee, Florida 32399-0333. Your written response must be received by the Department no later than 5:00 p.m. on the twenty-first day after your receipt of this notice. Mailing the response on the twenty-first day will not preserve your right to a hearing. You may file your request by email to julie.jones@myfloridacfo.com.

FAILURE TO ENSURE YOUR WRITTEN RESPONSE IS RECEIVED BY THE DEPARTMENT WITHIN 21 CALENDAR DAYS OF YOUR RECEIPT OF THIS NOTICE WILL CONSTITUTE A WAIVER OF YOUR RIGHT TO A PROCEEDING ON THE MATTERS ALLEGED.

Your request for hearing must comply with Rule 28-106.201, *Florida Administrative Code*. Specifically, your response must 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 (For the purpose of requesting hearing in this matter, you are the "petitioner".); the name, address, and telephone number of the petitioner's representative, if any, which shall be the address for service purposes during the course of the proceeding; 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. A statement of all disputed issues of material fact. If there are none, the petition must so indicate;
- 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 reversal or modification of the agency's proposed action; and
- g. A statement of the relief sought by the petitioner, stating precisely the action petitioner wishes the agency to take with respect to the agency's proposed action.

You have the right to be represented by counsel or other qualified representative at your expense, to present evidence and argument, to call and cross-examine witnesses, and to compel the attendance of witnesses and the production of documents by subpoena.

Failure to follow the procedure outlined with regard to your response to this notice may result in the request being denied. All prior oral communication or correspondence in this matter shall be considered freeform agency action, and no such oral communication or correspondence shall operate as a valid request for an administrative proceeding. Any request for an administrative proceeding received prior to the date of this notice shall be deemed abandoned unless timely renewed in compliance with the guidelines as set out above. Mediation of this matter pursuant to section 120.573, Florida Statutes, is not available.