

Workers' Compensation Taxes and Assessments
American Insurance Association
September 2007

NOTES:

- As used herein, the term "Gross" means plus loss reimbursements or deductible credits under a large deductible (LD) workers' compensation (WC) policy, and the term "Net" means net with respect to these amounts.
- Included herein are all assessments on the WC line, but only WC-specific taxes (not general fund, multi-line premium taxes). In all states, the general premium tax base begins with direct written premium from page 14 of the Annual Statement, this base is net with respect to WC LD policies, and the tax is payable to the insurance or tax (or revenue) department (depending on the state).

Taxes and Assessments		Base	Treatment of Large Deductibles in Base
AL	WC Administration Trust Fund		
	Rate: Determined annually. \$250 plus proportionate amount. Total assessment among all insurers not to exceed \$5 million per year.	"Each insurance carrier, self-insured employer, and group fund shall be assessed \$250.00. The gross claims for compensation and medical payments paid by the carriers, self-insured employers, and group funds are the basis for computing the amount to be assessed. The amount of assessment shall be based upon the proportion that the total gross claims for compensation and medical payments paid by the carrier, self-insured employer, or group fund during the preceding calendar year bore to the total gross claims for compensation and medical payments paid by all carriers, self-insured employers, and group funds during that period. The total assessment shall not exceed \$5,000,000.00 per year. The director shall determine if the assessment shall be a specific amount or shall be a percentage of gross claims for compensation and medical payments paid by the insurance carriers, self-insured employers, and group funds. An assessment shall not exceed an amount reasonably necessary to defray the necessary administration expense." (Ala. Code § 25-5-316(d))	Gross (of loss reimbursements)
	Pay to: Department of Industrial Relations		
	Base: Total gross claims for compensation and medical payments paid		
	Prospective or Retrospective Base: Retrospective; Data is taken from the preceding calendar year		
Years of Data: The preceding one-year period ending on December 31 st (Ala. Code § 25-5-316(h))			
	Insurance Guaranty Association		
	Rate: Determined annually; not to exceed 1% of member's net direct written premiums for the calendar year preceding the assessment on the kinds of insurance in the account.	"The assessments of each member insurer shall be in the proportion that the net direct written premiums of the member insurer for the calendar year preceding the assessment on the kinds of insurance in the account bears to the net direct written premiums of all member insurers for the calendar year preceding the assessment on the kinds of insurance in the account. Each member insurer shall be notified of the assessment not later than 30 days before it is due. No member insurer may be assessed in any one year on any account an amount greater than one percent of that member insurer's net direct written premiums for the calendar year preceding the assessment on the kinds of insurance in the account." (Ala. Code § 27-42-8(3))	Net
	Pay to: Insurance Guaranty Association		
	Base: Net direct written premiums		
	Prospective or Retrospective Base: Retrospective; Data is taken from the preceding year		
Years of Data: The preceding one-year calendar period.			

AK	Second Injury Fund			Net																																																							
	Rate: In disability cases, compensation multiplied by applicable contribution rate (up to 6%) as determined annually by the Commissioner, and \$10,000 in no-dependency death cases.	"The amount of the contribution is the product of the compensation to which the employee is entitled for temporary total disability, temporary partial disability, permanent partial disability, or permanent total disability and the applicable contribution rate set out in column A of this subsection. Payment need not be made to the second injury fund if the total contribution under this subsection is less than \$20. By December 15 of each year the commissioner shall determine and make available to the public the applicable contribution rate for the following calendar year according to the reserve rate of the second injury fund in column B of this subsection:																																																									
	Pay to: Commissioner of Labor	<table border="1"> <thead> <tr> <th colspan="2">SIF</th> <th colspan="3">Reserve Rate</th> <th colspan="2">SIF</th> <th colspan="3">Reserve Rate</th> </tr> <tr> <th>Contribution</th> <th>At Least</th> <th>Less Than</th> <th>Contribution</th> <th>At Least</th> <th>Less Than</th> <th>Contribution</th> <th>At Least</th> <th>Less Than</th> </tr> <tr> <th>(Percent)</th> <th>(Percent)</th> <th>(Percent)</th> <th>(Percent)</th> <th>(Percent)</th> <th>(Percent)</th> <th>(Percent)</th> <th>(Percent)</th> <th>(Percent)</th> </tr> </thead> <tbody> <tr> <td>6</td> <td>0</td> <td>50</td> <td>3</td> <td>100</td> <td>125</td> <td>0</td> <td>175</td> <td></td> </tr> <tr> <td>5</td> <td>50</td> <td>75</td> <td>2</td> <td>125</td> <td>150</td> <td></td> <td></td> <td></td> </tr> <tr> <td>4</td> <td>75</td> <td>100</td> <td>1</td> <td>150</td> <td>175</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			SIF		Reserve Rate			SIF		Reserve Rate			Contribution	At Least	Less Than	Contribution	At Least	Less Than	Contribution	At Least	Less Than	(Percent)	(Percent)	(Percent)	(Percent)	(Percent)	(Percent)	(Percent)	(Percent)	(Percent)	6	0	50	3	100	125	0	175		5	50	75	2	125	150				4	75	100	1	150	175			
	SIF		Reserve Rate			SIF		Reserve Rate																																																			
	Contribution	At Least	Less Than		Contribution	At Least	Less Than	Contribution	At Least	Less Than																																																	
(Percent)	(Percent)	(Percent)	(Percent)	(Percent)	(Percent)	(Percent)	(Percent)	(Percent)																																																			
6	0	50	3	100	125	0	175																																																				
5	50	75	2	125	150																																																						
4	75	100	1	150	175																																																						
Base: Compensation																																																											
Prospective/Retrospective Base: Prospective; The contribution rate is determined each December 15 th for the following calendar year.																																																											
Years of Data: One preceding year (Alaska Stat. § 23.30.155)	If an employee suffers a compensable injury that results in death and the employee is not survived by a widow, widower, child, or dependent relative eligible to receive death benefits under AS 23.30.215, the employer or insurance carrier shall pay \$ 10,000 to the second injury fund." (Alaska Stat. § 23.30.040)																																																										

**Workers' Compensation Taxes and Assessments
September 2007**

	<p>Service fee</p> <p>Rate: Insurers: 1.82% of direct premium income. Employers: 2.9% of reported payments.</p> <p>Pay to: Department of Labor and Workforce Development</p> <p>Base: Insurers: Direct premium income. Employers: reported payments.</p> <p>Prospective/Retrospective Base: Retrospective; Data is taken from the preceding year. (<i>Alaska Stat. § 23.30.155</i>)</p> <p>Years of Data: One preceding calendar year.</p>	<p>“Each insurer providing workers' compensation insurance and each employer who is self-insured or uninsured for purposes of AS 23.30 in this state shall pay an annual service fee to the department for the administrative expenses of the state for workers' safety programs under AS 18.60 and the workers' compensation program under AS 23.30 as follows:(1) for each employer, (A) except as provided in (b) of this section, the service fee shall be paid each year to the department at the time that the annual report is required to be filed under AS 23.30.155(m) or (n); and (B) the service fee is 2.9 percent of all payments reported to the Alaska Workers' Compensation Board under AS 23.30.155(m) or (n), except second injury fund payments; and (2) for each insurer, the director of the division of insurance shall, under (e) of this section, deposit from funds received from the insurer under AS 21.09.210 a service fee of 1.82 percent of the direct premium income for workers' compensation insurance received by the insurer during the year ending on the preceding December 31, subject to all the deductions specified in AS 21.09.210(b).” (<i>Alaska Stat. § 23.05.067</i>)</p>	<p>Net</p>
	<p>Insurance Guaranty Association Surcharge</p> <p>Rate: Determined annually; Limited to 4% of prior year premium for account assessed. If an account is insufficient to pay claims, the association shall assess an insurer subject to assessment in the other two accounts, up to 2% of premium for the applicable calendar year.</p> <p>Pay to: Alaska Insurance Guaranty Association</p> <p>Base: Net direct written premiums</p> <p>Prospective/Retrospective Base: Retrospective; Data is taken from the preceding year.</p> <p>Years of Data: One preceding year</p>	<p>“...the assessments of each member insurer must initially be based on a uniform percentage, as determined by the association, of the net direct written premiums of each member insurer for the last year for which annual statements have been filed on the kinds of insurance in the account; this initial assessment shall be adjusted by applying the same uniform percentage as initially used to each member insurer's net direct written premiums for the calendar year following the year in which the initial assessment was issued.....an initial assessment may be made at any other time if the association determines funding is necessary, except that a member insurer may not be assessed initial assessments on any account in an amount greater than four percent of the member insurer's net direct written premiums for the applicable calendar year; and if an account has insufficient funds to pay covered claims under this section, the association shall assess each member insurer subject to assessment in the other two accounts an additional amount not to exceed two percent of the member insurer's net direct written premiums for the applicable calendar year...” (<i>Alaska Stat. § 21.80.060(a)(3)</i>)</p>	<p>Net</p>
<p>AR</p>	<p>WC Fund, Second Injury Trust Fund, Death and Permanent Total Disability Trust Fund</p> <p>Rate: Determined annually; total rate for all three funds not to exceed 3 percent</p> <p>Pay to: Workers' Compensation Commission</p> <p>Base: Amounts computed to be necessary to properly administer the funds for the ensuing year</p> <p>Prospective/Retrospective Base: Prospective; The applicable assessments are to be determined based on amounts deemed necessary to administer the funds in the ensuing year.</p> <p>Years of Data: N/A</p> <p>Antifraud Assessment</p> <p>Rate: Determined annually, not to exceed \$1,000</p> <p>Pay to: State insurance department criminal investigation division</p> <p>Base: Unknown</p> <p>Prospective/Retrospective Base: Unknown</p> <p>Years of Data: Unknown</p>	<p>“The Workers' Compensation Commission, on or before December 31 of each year, shall determine the surplus, if any, in the Workers' Compensation Fund, together with the additional amounts necessary to properly administer this chapter for the ensuing year. The commission shall determine the rate of taxation for collections for that year on or before March 1 of the following year. The commission, on or before December 31 of each year, shall determine the surplus, if any, in the Second Injury Trust Fund, together with the additional amounts necessary to properly administer this chapter for the ensuing year. The commission shall determine the rate of taxation for collections for that year on or before March 1 of the following year. The commission, on or before December 31 of each year, shall determine the surplus, if any, in the Death and Permanent Total Disability Trust Fund, together with the additional amounts necessary to properly administer this chapter for the ensuing year. The commission shall determine the rate of taxation for collections for that year on or before March 1 of the following year. The total rate of taxation for all three (3) funds when added together shall not exceed three percent (3%). The commission shall notify each insurance carrier of the rate of taxation applicable to each fund for the preceding year, and taxes shall be computed and paid pursuant to the provisions of § 11-9-303(c) on or before April 1 of the following year. The commission shall notify each self-insured employer subject to the tax of the rate of taxation applicable to each fund for the preceding year, and taxes shall be computed by the commission and paid to each fund by the self-insurer through payments made directly to the commission on or before April 1 of the following year. The commission shall notify each public employer subject to this tax of the rate of taxation applicable to each fund for the preceding year, and taxes shall be computed by the commission and paid to each respective fund through payments made directly to the commission by the public employer on or before April 1 of the following year.” (<i>Ark. Stat. Ann. § 11-9-306</i>)</p> <p>“Each licensed insurer shall pay into the state insurance department criminal investigation division trust fund a nonrefundable antifraud assessment as directed by the insurance commissioner for the reasonable and necessary expenses and operation of the criminal investigation division of the state insurance department. By rule the commissioner may set the amount of the antifraud assessment. The antifraud assessment shall not exceed one thousand dollars (\$1,000) per fiscal year. The antifraud assessment shall be in addition to the premium taxes and fees now required under existing law.” (<i>Ark. Code Ann. § 23-100-104</i>)</p>	<p>“Manual Premium”</p>

**Workers' Compensation Taxes and Assessments
September 2007**

	Property and Casualty Insurance Guaranty Assessment		
	Rate: Not to exceed 2% of net direct premiums	<p>“...Thereafter, the Insurance Commissioner shall be empowered to make such assessments as may be necessary to produce the additional funds needed to make payment of all covered claims. The commissioner may make partial assessments as the actual need for additional funds arises for each insolvent insurer. The commissioner shall assess individual insurers in proportion to the ratio that the total net direct written premium collected in the State of Arkansas by the insurer during the preceding calendar year bears to the total net direct written premium collected by all insurers, except insolvent insurers, in the State of Arkansas for the preceding calendar year. Assessments during a calendar year may be made up to, but not in excess of, two percent (2%) of each insurer's net direct written premium for the preceding calendar year. If the maximum assessment in any calendar year does not provide an amount sufficient for payment of covered claims of insolvent insurers, assessments may be made in the next and successive calendar years.” (Ark. Stat. Ann. § 23-90-112)</p>	
	Pay to: State Treasurer		
	Base: Total net direct written premium		
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year.		
	Years of Data: One calendar year		
DE	WC Premium Tax		
	Rate: 2%	<p>“For the privilege of carrying on the business of workers' compensation insurance in this State, every insurance carrier shall pay the taxes imposed under the Insurance Code, and every employer carrying the employer's own risk and thereby insuring the employer's own self....shall pay the taxes imposed....Every employer carrying the employer's own risk, and thereby insuring the employer's self....shall annually on or before the 30th day of January report under oath to the Department the total amount of the employer's payroll for the preceding calendar year, classified in accordance with classifications approved by the Department for the purpose of fixing compensation rates.....The charges to self-insurers shall be the same charges which other insurance carriers are required to pay...The Department shall assess against such payroll a tax computed by taking 4% of the amount of premium payable upon the payroll so ascertained in accordance with the classifications and premium rates approved by the Department for insurance against liability....No employer shall become or continue a self-insurer under this chapter, except upon the payment of the tax for the previous calendar year. The moneys so assessed against and paid by insurers who carry their own risks shall be paid to the Secretary of Finance.” (19 Del. C. § 2391)</p>	Net
	Pay to: Secretary of Finance		
	Base: Premium		
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year		
	Years of Data: One calendar year		
	WC Fund		
	Rate: Not to exceed 1% at each due date	<p>“Every insurance carrier insuring employers who are or may be liable....to pay for compensation for personal injuries to or death of their employees...shall pay to the Department annually, on or before March 1 and October 1 of each year, a sum not to exceed 1 percent at each date on all workers' compensation or employer liability premiums received by the carrier during the calendar year next preceding the due date of such payment. Such sums shall be paid by the Department to the State Treasurer, to be deposited in a special account known as 'Workers' Compensation Fund.’ “(19 Del. C. § 2395)</p>	Net
	Pay to: Labor Department		
	Base: Premiums received		
	Prospective/Retrospective Base: Retrospective; Data is taken from the next preceding calendar year		
	Years of Data: One calendar year		
	WC Administrative Costs Assessment		
	Rate: Determined semi-annually	<p>“For the purpose of securing to the State the moneys necessary for paying the salaries and necessary expenses of the State in administering and carrying out Part II of this title relating to worker's compensation, insurance carriers shall pay the assessments imposed by this section. Semi-annually, on or before September 30 and March 31, every insurance carrier, insuring employees who are or may be liable under this chapter to pay for compensation for personal injuries to or death of their employees, shall report, under oath, or, in the case of a corporation, verified by the affidavit of its president and secretary or other chief officers or agents, to the Secretary of Finance, the amount of all compensation payments and awards actually paid by said carrier during the preceding calendar year, excluding payments made under § 2395 of this title and reimbursements received under § 2396 of this title....The Department shall then determine for each insurer the proportion/percentage of the expense...that the total compensation or payments made by each insurer bore to the total of such expenses. Using these proportions/percentages, the Department shall then assess each insurer its proportion/percentage of such expenses. The amounts so secured shall be paid to the Department of Labor, Division of Industrial Affairs for the expenses of administering this chapter.” (19 Del. C. § 2392)</p>	Net
	Pay to: Labor Department, Division of Industrial Affairs		
	Base: all compensation payments and awards actually paid		
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year.		
	Years of Data: One calendar year		
	Insurance Fraud Protection Bureau Assessment		
	Rate: \$550	<p>“The costs of administration and operation of the Delaware Insurance Fraud Prevention Bureau shall be borne by all of the insurance companies admitted or authorized to transact the business of insurance in this State. The Commissioner shall assess \$ 550 annually against each insurance company to provide the funds necessary for the operation of the Bureau.” (18 Del. C. § 2415)</p>	
	Pay to: Insurance Fraud Protection Bureau		
	Base: Lump sum assessed to all insurers		
	Prospective/Retrospective Base: N/A		
	Years of Data: N/A		

**Workers' Compensation Taxes and Assessments
September 2007**

	<p>Property and Casualty Insurance Guaranty Association</p> <p>Rate: Determined according to class. Class A: equal amount for each insurer, not to exceed \$150. Class B: equal amount for all insurers, to be determined annually, not to exceed 0.1% of premiums. Class C: determined annually. Rates for Classes B and C together must not exceed 2% of written premiums.</p> <p>Pay to: Delaware Insurance Guaranty Association; Class B assessments to the Insurance Commissioner's Regulatory Revolving Fund</p> <p>Base: Class A: equal amount to each insurer; Class B: determined by Commissioner; Class C: net direct written premiums</p> <p>Prospective/Retrospective Base: Class C: Retrospective; Data taken from the preceding calendar year</p> <p>Years of Data: One calendar year</p>	<p>"For the purpose of providing the funds necessary to carry out the powers and duties of the Association, the Board of Directors shall assess the member insurers, separately for each class, at such times and in such amounts as the Board finds necessary.....There shall be 3 classes of assessments as follows: Class A assessments shall be made for the purpose of meeting administrative costs and other expenses and examinations conducted....Class B assessments shall be made annually to partially subsidize the oversight activities of the Commissioner, thereby minimizing the need for class C assessments. Class C assessments shall be made to the extent necessary to carry out the powers and duties of the Association...with regard to an insolvent member insurer. The assessments shall be determined as follows: The class A assessments will be equal in amount as to each member and may be assessed not more often than once each year. Such assessment shall not exceed \$ 150 annually. The class B assessments shall be made annually. The Commissioner shall determine the amount and shall so notify the Association on or before July 31 of each calendar year in which the assessment is to be made. Class B assessments will also be equal in amount as to each member. The said assessments shall be paid to the Insurance Commissioner's regulatory revolving fund....Class C assessments of each member insurer shall be in the proportion that the net direct written premiums of the member insurer for the preceding calendar year bears to the net direct written premiums of all member insurers for the preceding calendar year....The amounts assessed for class B assessments shall in no event exceed one tenth of one percent of the members' premiums for the year on which the assessment is based. The amounts assessed for class B and class C assessments combined shall not result in members being assessed a total B and C assessment amount which exceeds 2 percent of the members' premiums written in the applicable year." (18 Del. C. § 4208)</p>	<p>Net</p>
<p>GA</p>	<p>State WC Board Assessment</p> <p>Rate: Determined annually</p> <p>Pay to: Board of WC</p> <p>Base: Insurers: gross earned premiums; self-insurers: amount of premiums which they would have had to pay in the event they had insured their liability with an insurer</p> <p>Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year</p> <p>Years of Data: One calendar year</p>	<p>"The total expenses of the board shall be prorated among the qualified insurance companies writing compensation insurance....and...self-insurers, including, but not limited to, the state, counties, municipalities, and any political subdivisions or authorities thereof. Such proration shall be on the basis, in the case of the insurers, of the gross earned premium and, in the case of self-insurers, on the basis of the amount of premium which they would have had to pay in the event they had insured their liability with an insurer; provided, however, the board may establish by rule a minimum assessment, based upon the administrative cost necessary to provide licensure support and basic computer management reports for each insurer or self-insurer, to be paid by insurers and self-insurers whose actual prorated assessment otherwise would be less than the minimum assessment." (O.C.G.A. § 34-9-63)</p>	<p>Net</p>
	<p>Subsequent Injury Trust Fund Assessment</p> <p>Rate: Proportion of 175% of the total disbursement from the preceding calendar year less the amount of the net assets in the fund as of December 31 of the preceding calendar year. Initial assessment: 1%.</p> <p>Pay to: Georgia Subsequent Injury Trust Fund</p> <p>Base: Losses</p> <p>Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year</p> <p>Years of Data: One calendar year</p>	<p>"Each insurer and self-insurer....shall...make payments to the fund in an amount equal to that proportion of 175 percent of the total disbursement made from the fund during the preceding calendar year less the amount of the net assets in the fund as of December 31 of the preceding calendar year which the total workers' compensation claims paid by the insurer or self-insurer bears to the total workers' compensation claims paid by all insurers and self-insurers during the preceding calendar year....The initial assessment of each insurer or self-insurer for the purpose of generating revenue to begin operation of the fund shall be in the amount of one-half of 1 percent of the workers' compensation premiums collected by the insurer for the preceding calendar years from an employer....or the equivalent of such in the case of a self-insurer." (O.C.G.A. § 34-9-358)</p>	<p>Gross (of loss reimbursements)</p>
	<p>Special Insurance Fraud Fund Assessment</p> <p>Rate: Varies according to premiums written; see Ga. Comp. R. & Regs. R. 120-2-72-.05</p> <p>Pay to: Insurance Department</p> <p>Base: Written premiums</p>	<p>"On or before July 1 of the year of the approval of the appropriation specified in O.C.G.A. § 33-1-17 the Commissioner shall assess each foreign, alien and domestic insurance company doing business in Georgia on the following basis: Each insurer whose Georgia written premium is less than \$1,000,000.00, including those insurers whose Georgia written premium is zero or less than zero, will each be assessed a fixed amount not more than the minimum amount assessed an insurer with Georgia written premium of \$1,000,000.00 or more. Each insurer whose Georgia written premium is greater than \$40,000,000.00, but less than \$100,000,000.00, an assessment equal to .0045 times the appropriated amount. Each insurer whose Georgia written premium is \$100,000,000.00 or more, an</p>	

**Workers' Compensation Taxes and Assessments
September 2007**

	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year	assessment equal to .0075 times the appropriated amount. Each insurer not included...above, an assessment shall be computed on a pro-rata basis of the remainder of the appropriation for each insurer whose Georgia written premium is greater than \$1,000,000.00 but less than \$40,000,000.00.....Written premium is determined from the most recent annual statement on file with the Commissioner at the time the assessment calculations are made....In the event of a supplemental appropriation, the assessment will be made as soon as practicable after approval of the appropriation, and will be due on May 15 of the year of the assessment..." (Ga. Comp. R. & Regs. R. 120-2-72-.05)		
	Years of Data: One calendar year			
	Insurers Insolvency Pool Assessment			
	Rate: Determined annually; not to exceed 2%		" To the extent necessary to secure the funds for the respective accounts of the pool for the payment of covered claims and also to pay the reasonable costs to administer the pool, the Commissioner, upon certification of the pool, shall levy assessments in the proportion that each insurer's net direct written premiums in this state in the classes protected by the account bear to the total of the net direct written premiums received in this state by all such insurers for the preceding calendar year for the kinds of insurance included within such account...Every assessment shall be made as a uniform percentage applicable to the net direct written premiums of each insurer in the kinds of insurance included within the account in which the assessment is made. The assessments levied against any insurer shall not exceed in any one year more than 2 percent of that insurer's net direct written premiums in this state for the kinds of insurance included within such account during the calendar year next preceding the date of such assessments." (O.C.G.A. § 33-36-7)	
	Pay to: Georgia Insurers Insolvency Pool			
	Base: Net direct written premiums			
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year			
	Years of Data: One calendar year			
HI	WC Special Compensation Fund			
	Rate: Determined annually. No-dependency deaths: 25% of 312 times the effective maximum weekly benefit rate.	"If there be no dependents who are entitled to benefits...the employer shall pay an amount equal to twenty-five per cent of three hundred and twelve times the effective maximum weekly benefit rate provided in section 386-31, to the nondependent parent or parents. If there be no such parent or parents, the employer shall pay the sum into the special compensation fund, pursuant to an order made by the director..." (HRS § 386-41(d)) "For the calendar year 1974 and for each calendar year thereafter, insurers of employers, as defined in section 386-1, shall pay a levy determined by the director which shall be based on a percentage on gross premiums, as defined in section 431:7-202(a), derived from workers' compensation insurance issued during the prior year in accordance with chapter 386 and chapter 431, if the levying and collecting of such a levy is required pursuant to section 386-152, which levy shall be collected in the same manner as the tax provided for in section 431:7-202 is collected and shall be deposited in the special compensation fund established in section 386-151. This levy shall be in addition to any tax imposed in chapter 431 on gross premiums derived from workers' compensation insurance." (HRS § 386-153)	Net	
	Pay to: No-dependency deaths: Director of Finance. Percentage levy - Department of Commerce and Consumer Affairs.			
	Base: Gross premiums			
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year			
	Years of Data: One calendar year			
	Compliance Resolution Fund Assessment			
	Rate: Proportional share of costs associated with regulating individual lines of business. Total assessments for all lines not to exceed \$5,000,000.	"The total amount or amounts to be assessed of insurers or entities regulated under title 24 in all lines or types of insurance shall be calculated based on the commissioner's proposed fiscal year budget, less funds in the insurance regulation sub-account of the compliance resolution fund on June 30 of the fiscal year immediately preceding the fiscal year of the proposed budget and less the commissioner's anticipated revenues; the assessments by line or type shall bear a reasonable relationship to the costs of regulating the line or type of insurance, including any administrative costs of the division; and the sum total of all assessments made and collected shall not exceed the special fund ceiling or ceilings related to the fund that are established by the legislature; provided that the total assessments for all lines or types of insurance in any one fiscal year shall not exceed \$5,000,000." (HRS § 431:2-215(d))		
	Pay to: Department of Insurance			
	Base: Appears to be premium			
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding fiscal year			
	Years of Data: One fiscal year			
	Insurance Guaranty Fund Assessment			
	Rate: Determined annually; not to exceed 2%.	"The assessments of each member insurer shall be in the proportion that the net direct written premiums of the member insurer for the preceding calendar year bears to the net direct written premiums of all member insurers for the preceding calendar year....No member insurer may be assessed in any year an amount greater than two per cent of that member insurer's net direct written premiums for the preceding calendar year." (HRS § 431:16-108(a)(3))	Net	
	Pay to: Insurance Guaranty Fund			
	Base: Net direct written premiums			
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year			
	Years of Data: One calendar year			

**Workers' Compensation Taxes and Assessments
September 2007**

IN	Safety Education and Training Bureau Fund Assessment		
	Rate: 0.75%	<p>“If the balance in the special fund for safety and health consultation service on April 1 of each year is less than six hundred thousand dollars (\$600,000) an annual tax is imposed to finance the safety and health consultation service for employers under section 41 [IC 22-8-1.1-41].” <i>(Ind. Code Ann. § 22-8-1.1-45)</i></p> <p>“The annual tax shall be an amount equal to three-fourths of one percent (0.75%) of the total worker's compensation benefits paid in this state by the insurance carrier and self-insured employers as provided in section 46 [IC 22-8-1.1-46] of this chapter during the preceding calendar year, excluding medical payments.” <i>(Ind. Code Ann. § 22-8-1.1-47)</i></p>	Net
	Pay to: Director of Safety Education and Training Bureau		
	Base: Total paid WC benefits		
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year		
	Years of Data: One calendar year		
	Second Injury Fund Surcharge		
	Rate: 2.5%	<p>“The total amount of the assessment may not exceed two and one-half percent (2.5%) of the total amount of all worker's compensation paid to injured employees or their beneficiaries under IC 22-3-2 through IC 22-3-6 for the calendar year next preceding the due date of such payment...” <i>(Ind. Code Ann. § 22-3-3-13)</i></p>	Net (under 2007 Statute)
	Pay to: WC Board		
	Base: Total paid WC benefits		
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year		
	Years of Data: One calendar year		
Residual Asbestos Injury Fund Assessment			
Rate: 0.5%	<p>“Before August 1, 1985, and April 10 in all subsequent years, each insurance carrier....and each employer....shall pay to the board for deposit in the fund the assessment specified...until the initial balance in the fund is equal to or greater than two hundred thousand dollars (\$200,000); and...only if the balance in the fund on April 1 of the year of the assessment is less than fifty thousand dollars (\$50,000). An assessment...equals one-half of one percent (0.5%) of the total amount of worker's compensation and occupational diseases benefits paid to injured employees or their beneficiaries during the calendar year immediately preceding the due date of the assessment.” <i>(Ind. Code Ann. § 22-3-11-2)</i></p>	Net	
Pay to: State Treasurer			
Base: Total paid benefits			
Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year			
Years of Data: One calendar year			
Insurance Guaranty Association Assessment			
Rate: Determined annually; not to exceed 1%. An additional \$50 may be assessed for administrative expenses.	<p>“The assessments of each member insurer shall be on a uniform percentage basis in the proportion that the net direct written premiums in this state of the member insurer for the preceding calendar year on the kinds of insurance in the account bears to the net direct written premiums of all member insurers for the preceding calendar year on the kinds of insurance in the account. However, in addition to the pro rata assessments already described, an assessment may be made against each member insurer in a stated amount up to fifty dollars (\$50) per year for the purpose of paying the administrative expenses of the association. There shall be no assessment for any account so long as assets held in such account are sufficient to cover all estimated payments for liquidation in process under such account...No member insurer may be assessed in any year on any account an amount greater than one percent (1%) of that member insurer's net direct written premiums in this state for the preceding calendar year on the kinds of insurance in the account.” <i>(Ind. Code Ann. § 27-6-8-7(a)(iii))</i></p>	Net	
Pay to: Indiana Insurance Guaranty Association			
Base: Net direct written premiums			
Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year			
Years of Data: One calendar year			

**Workers' Compensation Taxes and Assessments
September 2007**

IA	Second Injury Compensation Assessment		Net
	Rate: Dependency deaths: \$12,000 No-dependency deaths: \$45,000.	"The employer, or, if insured, the insurance carrier in each case of compensable injury causing death, shall pay to the treasurer of state for the second injury fund the sum of twelve thousand dollars in a case where there are dependents and forty-five thousand dollars in a case where there are no dependents." (Iowa Code § 85.65)	
	Pay to: State Treasurer		
	Base: Statutory sum		
	Prospective/Retrospective Base: N/A		
Years of Data: N/A			
	Second Injury Fund Surcharge		Net
	Rate: Determined annually	"If the commissioner determines sufficient funds will not be available, the commissioner shall impose by rule, pursuant to chapter 17A, a surcharge on employers during the next succeeding fiscal year for payment to the treasurer of state for the second injury fund...The total assessment amount used in calculating the surcharge shall be allocated between self-insured employers and insured employers based on paid losses for the preceding calendar year. The portion of the total aggregate assessment that shall be collected from self-insured employers shall be equal to that proportion of total paid losses during the preceding calendar year, which the total compensation payments of all self-insured employers bore to the total compensation payments made by all self-insured employers and insurers on behalf of all insured employers during the preceding calendar year. The portion of the total aggregate assessment that is not to be collected from self-insured employers shall be collected from insured employers....The method of assessing insured employers a surcharge shall be by insurers collecting assessments from insured employers through a surcharge based on premium." (Iowa Code § 85.65A)	
	Pay to: State Treasurer		
	Base: Paid losses		
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year		
Years of Data: One calendar year			
	Insurance Guaranty Association Assessment		Net
	Rate: Determined annually; not to exceed 2%; administrative assessment not to exceed \$50 may also be levied.	"The assessment of each member insurer shall be in the proportion that the net direct written premiums of the member insurer for the preceding calendar year bear to the net direct written premiums of all member insurers for the preceding calendar year...No member insurer may be assessed in any year an amount greater than two percent of that member insurer's net direct written premiums for the preceding calendar year....In addition, the association shall have the authority to levy an administrative assessment of not more than fifty dollars per year per member insurer on a non pro rata basis, which assessment shall be credited against any future insolvency assessment." (Iowa Code § 515B.5(1)(c))	
	Pay to: Iowa Insurance Guaranty Association		
	Base: Net direct written premiums		
	Prospective/Retrospective Base: Retrospective; Data is taken from the preceding calendar year		
Years of Data: One calendar year			