



L&I Home

[Workers' Compensation](#) > [FAQs](#) > General WC FAQs

Workers' Compensation

Workers' Compensation FAQs

Health & Safety Division

Health & Safety Information

Workers' Compensation Insurance

Q. If I have multiple locations, how many safety committees are required and can they have a centralized committee; or is each location required to have its own committee?

A. An employer may have either a centralized committee or single committees. Ideally for a centralized committee, a representative from each location should be a committee member, but it is not necessary as long as there are measures in place to communicate safety concerns between all locations and safety committee members. If a single committee for each location is elected, then each committee must be approved and must meet all basic minimum requirements.

Compliance

Uninsured Employers Guaranty Fund

Q. What must I do to become certified?

A. An employer must meet the basic requirements and complete and submit an application for approval. Requirement information is available on our website at www.dli.state.pa.us.

Medical Treatment Information

Q. Are safety committees required to meet every month after they are certified?

A. Yes. Safety committees must meet at least monthly, documenting a quorum of committee members present for a minimum of six months prior to signing, dating, and submitting their Initial Application for Certification. Upon certification, safety committees must document monthly meetings thereafter.

Claims Information

Publications

Conferences, Seminars, Training

Q. My company has been bought by another person or company. Does the certification remain in effect? What name would I list on the Renewal Application?

A. Yes, you are still certified as long as the basic minimum requirements are being met. You would change the name of the company on the Renewal Affidavit and change workplace names as necessary. If you retain the same Federal Employer Identification Number (FEIN), that is all that is required. If you change the FEIN number as well as the company name, you must provide a detailed explanation as to why the FEIN was changed on the Renewal Affidavit.

FAQs

General WC FAQs

Health Care Services Review FAQs

Workplace Safety Committee Certification Program FAQs

Q. How is an organization selected for an on-site audit?

A. Each organization of the regulated community (insurers, self-insured employers, group funds and certified workplace safety committees) is assigned a record number. Record numbers are selected by the computer application. The record number is then matched with the "Master List," which identifies the organization to be audited.

Q. How frequently should an organization expect to be audited?

A. On-site audits began in 1997, and currently less than 12 organizations have had a second on-site audit. The Health and Safety regulations allow for an organization to be audited at least once every two years.

Log In

Compliance with the Workers' Compensation Act

Q. Is a subcontractor required to carry workers' compensation insurance if he/she is a sole proprietor?

A. Sole proprietors with no employees are not required to carry workers' compensation insurance. However, detailed information must be provided to your insurer to prove that the individual is a true independent contractor. If your insurer determines that the sole proprietor is your employee, you will be charged for his/her payroll as per the appropriate classes on your policy. It is your responsibility to provide your insurer with all appropriate documentation to resolve their employment status.

Q. As owner of a trucking operation, must I show proof of workers' compensation insurance if I use owner/operator drivers?

A. If an insured utilizes owner/operators and is part of a trucking operation, proof of workers' compensation insurance coverage may be required. For those drivers deemed to be employees, your insurer will need proof of workers' compensation insurance coverage. Otherwise, that part of the total remuneration that is wages will be included in the premium calculation. If payroll cannot be obtained, then 1/3 of the contract price will be considered payroll for premium calculation purposes.

Q. Do members of limited liability companies (LLC) have an obligation to ensure workers' compensation liability on their members?

A. Section 301(a) of the Workers' Compensation Act (Act), 77 P.S. Section 431, only requires employers to maintain workers' compensation coverage of their employees. Section 104 of the Act, 77 P.S. Section 22, states that the "employee" as used in the Act is synonymous with servant and includes "[a]ll natural persons who perform services for another for a valuable consideration, exclusive of persons whose employment is casual in character and not in the regular course of the business of the employer..." To the

extent that LLCs have no employees, i.e., its only workers are partners, it has no employees and, thus, no workers' compensation liability. However, should a partner withdraw from the partnership and become an employee or the business adds a part-time or a full-time employee, it would then be required to insure its workers' compensation liability.

Q. Do family members and minors have to be covered by workers' compensation insurance?

A. Pennsylvania state law does require you to cover any employee, regardless of the number of hours worked per week or whether the person is your spouse or child. The Pennsylvania Workers' Compensation Act can be viewed in its entirety on our website at www.dli.state.pa.us or can be obtained in hard copy from the State Bookstore of Pennsylvania, Commonwealth Keystone Building, Plaza Level, 400 North Street, Harrisburg, PA 17120, telephone number (717) 787-5109. You may want to look specifically at Sections 103, 104, 301 and 305(a).

Self-Insuring for Workers' Compensation

Q. What are the requirements to be self-insured?

A. To be authorized by the Department of Labor and Industry's Bureau of Workers' Compensation to self-insure under the Workers' Compensation Act (Act), an employer must first demonstrate that it has the financial ability to guaranty the payment of all benefits it may incur under the Act while it is approved as a self-insurer and that it has an adequate accident and illness prevention program. See question below for further explanation on financial ability. Additionally, an approved self-insurer must post security, such as a bond or letter of credit, covering its liability; must purchase excess insurance to protect it and its workers from losses resulting from a large claim or a catastrophic situation; and, must arrange for the proper adjusting and administration of its potential claims, either through in-house resources or the retention of an authorized claims services company.

Q. What factors does the Bureau of Workers' Compensation consider in determining whether an applicant has the financial ability to self-insure?

A. In determining whether an applicant has the financial ability to self-insure, the Bureau first considers whether an applicant has the financial resources and capacity to liquidate easily the liability it could incur as a self-insurer, including the liability resulting from a catastrophe. The Bureau analyzes the applicant's liquid assets, exposure to large losses, and excess insurance protection in making this determination. A successful applicant for self-insurance must also show that its current long-term financial condition and solvency indicates that it will be available and able to liquidate in the future the liability incurred as a self-insurer. The Bureau performs an analysis of an applicant's audited financial statements and reviews other financial information in its consideration of an applicant's financial health.

Q. How much security must a self-insured post with the Bureau of Workers' Compensation?

A. The Bureau's regulations require a private sector self-insurer to post security in the amount equal to or greater than the self-insurer's outstanding liability for workers' compensation plus a standard additive calculated by formula. The self-insurer's amount of outstanding liability is calculated by the Bureau, generally using actuarial loss development techniques, or the outstanding liability is calculated by an independent actuary retained by the self-insurer.

Q. What annual special fund assessments do self-insurers pay and how much are they?

A. Self-insured employers must pay annual assessments for the maintenance of the Workmen's Compensation Administration Fund, the Workmen's Compensation Supersedeas Fund, the Subsequent Injury Fund, and the Self-Insurance Guaranty Fund. Assessments against a self-insurer are based on its pro rata share of all compensation paid by all self-insurers and insurers in the calendar year prior to a particular assessment multiplied against the amount needed to finance the operation of the special fund. While assessment rates vary each year depending on the amount needed to maintain the special funds and the amount of compensation paid, generally, total assessments against a self-insurer for all special funds have been averaging between 4 percent to 5 percent of the amount of compensation it paid in the prior year.

Claims Information

Q. How do I request my claims records?

A. Your request must be made in writing and either mailed or faxed to the Bureau of Workers' Compensation. If you are representing the injured worker or are a party to the claim, you must specify your relationship in the request. Requests should be sent to:

Physical Records Section
Bureau of Workers' Compensation
1171 S. Cameron St., Room 103
Harrisburg, PA 17104-2501
Fax: (717) 705-0940 or (717) 705-1629

Q. How long does it take to get results to a request for records?

A. Processing usually takes about 7 to 10 days – depending upon the availability of records.

Q. I received a letter about a missing FEIN number. Can I give you the information over the telephone?

A. Yes, you can give this information by calling (717) 787-3361.

Q. Why can't I print a copy of the form I submitted over the Internet?

A. The form may be printed after it has been submitted using the print button provided on the screen. If you would like to print the form from the summary screen prior to submission, do a right click on your mouse to show the print command and left click on the print command to print. Note: The summary screen should only be used to review your data as you have filed your form at this point.

Q. How do you measure compliance with the 21-day filing requirements of the Workers' Compensation Act?

A. The disability date or employer-notified date, whichever is later, is deducted from the file date to determine whether a particular filing is timely. The file date is the date the Bureau of Workers' Compensation receives the form unless there is a legible, United States postal mark present on the envelope. In the case of a United States postal mark, the file date is the date of the postal mark.

[Contact Us](#) | [Commonwealth Portal](#) | [Contact the Web Team](#) | [Privacy Policy](#) | [Disclaimer](#)

Copyright © 2011 Commonwealth of Pennsylvania