

**State:** Missouri **Filing Company:** NCCI  
**TOI/Sub-TOI:** 16.0 Workers Compensation/16.0004 Standard WC  
**Product Name:** P-1409 Withdrawal of Ex-Medical Coverage Endorsements WC 00 03 06 & WC 00 03 07  
**Project Name/Number:** /

## Filing at a Glance

Company: NCCI  
Product Name: P-1409 Withdrawal of Ex-Medical Coverage Endorsements WC 00 03 06 & WC 00 03 07  
State: Missouri  
TOI: 16.0 Workers Compensation  
Sub-TOI: 16.0004 Standard WC  
Filing Type: Form  
Date Submitted: 05/24/2011  
SERFF Tr Num: NCCI-127180335  
SERFF Status: Closed-APPROVED  
State Tr Num:  
State Status: APPROVED  
Co Tr Num: P-1409 (MJ)  
Effective Date: 01/01/2012  
Requested (New):  
Effective Date: 01/01/2012  
Requested (Renewal):  
Author(s): Lesley O'Brien, Alison Herwig, Frank Gnolfo, Roy Wood, Robert Dalton  
Reviewer(s): Karen Rimel (primary)  
Disposition Date: 06/08/2011  
Disposition Status: APPROVED  
Effective Date (New): 01/01/2012  
Effective Date (Renewal): 01/01/2012

State Filing Description:

**State:** Missouri **Filing Company:** NCCI  
**TOI/Sub-TOI:** 16.0 Workers Compensation/16.0004 Standard WC  
**Product Name:** P-1409 Withdrawal of Ex-Medical Coverage Endorsements WC 00 03 06 & WC 00 03 07  
**Project Name/Number:** /

## General Information

Project Name: Status of Filing in Domicile:  
 Project Number: Domicile Status Comments:  
 Reference Organization: Reference Number:  
 Reference Title: Advisory Org. Circular:  
 Filing Status Changed: 06/08/2011  
 State Status Changed: 06/08/2011 Deemer Date:  
 Created By: Frank Gnolfo Submitted By: Frank Gnolfo  
 Corresponding Filing Tracking Number: NCCI-127176855  
 State TOI: 16.0 Workers Compensation State Sub-TOI: 16.0004 Standard WC

### Filing Description:

This item withdraws from use WC 00 03 06 - Medical Benefits Exclusion Endorsment and WC 00 03 07 - Medical Benefits Reimbursement Endorsement from NCCI's Forms Manual of Workers Compensation and Employers Liability Insurance.

Additionally, the item is being filed in conjunction with B-1423 - Elimination of Ex-Medical Coverage which proposes to eliminate all ex-medical coverage rules from the Basic Manual, Experience Rating Plan Manual for Workers Compensation and Employers Liability Insurance and Statistical Plan for Workers Compensation and Employers Liability Insurance. Items B-1423 and P-1409 should be adopted concurrently.

## Company and Contact

### Filing Contact Information

Roy Wood, State Relations Executive roy\_wood@ncci.com  
 11430 Gravois Road 314-843-4001 [Phone]  
 Suite 310 314-842-3188 [FAX]  
 St. Louis, MO 63126

### Filing Company Information

NCCI	CoCode:	State of Domicile: Florida
901 Peninsula Corporate Circle	Group Code:	Company Type:
Boca Raton, FL 33487	Group Name:	State ID Number:
(561) 893-3186 ext. [Phone]	FEIN Number: 65-0439698	

## Filing Fees

Fee Required? No  
 Retaliatory? No  
 Fee Explanation:

## State Specific

NAIC Number: RO99985  
 Have you reviewed the General Instructions document? (yes/no)(General Instructions updated 9/14/07): Yes  
 If this is a rate filing, was rate data added on the rate/rule schedule? (yes/no): No

SERFF Tracking #:

NCCI-127180335

State Tracking #:

Company Tracking #:

P-1409 (MJ)

**State:** Missouri **Filing Company:** NCCI  
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	Karen Rimel	06/08/2011	06/08/2011

SERFF Tracking #:

NCCI-127180335

State Tracking #:

Company Tracking #:

P-1409 (MJ)

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**Project Name/Number:** /

## Disposition

Disposition Date: 06/08/2011

Effective Date (New): 01/01/2012

Effective Date (Renewal): 01/01/2012

Status: APPROVED

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Filing Memorandum	REVIEWED	Yes
Form	Medical Benefits Exclusion Endorsement	APPROVED	Yes
Form	Medical Benefits Reimbursement Endorsment	APPROVED	Yes

**State:** Missouri  
**TOI/Sub-TOI:** 16.0 Workers Compensation/16.0004 Standard WC  
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**Project Name/Number:** /

**Filing Company:** NCCI

## Form Schedule

Item No.	Schedule Item Status	Form Name	Form Number	Edition Date	Form Type	Form Action	Action Specific Data		Readability Score	Attachments
							Previous Filing Number:	Replaced Form Number:		
1	APPROVED 06/08/2011	Medical Benefits Exclusion Endorsement	WC 00 03 06	04/01/1984	END	Withdrawn	Previous Filing Number: NCCI-85-84	Replaced Form Number: NA	0.000	Exhibit 1 P-1409.pdf
2	APPROVED 06/08/2011	Medical Benefits Reimbursement Endorsment	WC 00 03 07	04/01/1984	END	Withdrawn	Previous Filing Number: NCCI-85-84	Replaced Form Number: NA	0.000	Exhibit 2 P-1409.pdf

### Form Type Legend:

<b>ABE</b>	Application/Binder/Enrollment	<b>ADV</b>	Advertising
<b>BND</b>	Bond	<b>CER</b>	Certificate
<b>CNR</b>	Canc/NonRen Notice	<b>DEC</b>	Declarations/Schedule
<b>DSC</b>	Disclosure/Notice	<b>END</b>	Endorsement/Amendment/Conditions
<b>ERS</b>	Election/Rejection/Supplemental Applications	<b>OTH</b>	Other

EXHIBIT 1

FORMS MANUAL OF WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE  
MEDICAL BENEFITS EXCLUSION ENDORSEMENT

(WC 00 03 06)

(Applies in: AL, AR, CO, CT, DC, FL, HI, IA, ID, IL, IN, KY, LA, MD, ME, MO, MS, MT, NV, NC,  
NH, NM, OK, RI, SC, SD, TN, VT, VA)

~~MEDICAL BENEFITS EXCLUSION ENDORSEMENT (WC 00 03 06)~~

~~Part One (Workers Compensation Insurance) does not cover any medical benefits required by the workers  
compensation law of a state named in the Schedule. You will provide medical benefits to the full extent  
required by that workers compensation law and to our satisfaction.~~

~~Schedule~~

~~State~~

EXHIBIT 2  
FORMS MANUAL OF WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE  
MEDICAL BENEFITS REIMBURSEMENT ENDORSEMENT

(WC 00 03 07)

(Applies in: AL, AR, CO, CT, DC, FL, HI, IA, ID, IL, IN, KY, LA, MD, ME, MO, MS, MT, NV, NH,  
NM, OK, RI, SC, SD, TN, VT, VA)

~~MEDICAL BENEFITS REIMBURSEMENT ENDORSEMENT (WC 00 03 07)~~

~~You will provide all medical benefits to the full extent required by the workers compensation law of each state named in the Schedule and to our satisfaction.~~

~~This agreement is between you and us. It does not change the rights of others under the policy. You will reimburse us for any of those medical benefits that we may be legally required to pay.~~

~~Schedule~~

~~State~~

SERFF Tracking #:

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## Supporting Document Schedules

<b>Satisfied - Item:</b>	Filing Memorandum
<b>Comments:</b>	
<b>Attachment(s):</b>	Filing Memorandum - P-1409.pdf
<b>Item Status:</b>	REVIEWED
<b>Status Date:</b>	06/08/2011



## FILING MEMORANDUM

### ITEM P-1409—WITHDRAWAL OF EX-MEDICAL COVERAGE ENDORSEMENTS WC 00 03 06 & WC 00 03 07

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#### PURPOSE

This item withdraws from use WC 00 03 06—Medical Benefits Exclusion Endorsement and WC 00 03 07—Medical Benefits Reimbursement Endorsement from NCCI's *Forms Manual of Workers Compensation and Employers Liability Insurance*.

#### BACKGROUND

In states where a policy is permitted to be written on an ex-medical coverage basis, the carrier does not provide medical payment coverage, and a reduced manual rate applies to the policy. An employer written on an ex-medical coverage basis assumes the liability for medical payments for its injured employees and holds the carrier harmless via an endorsement to the policy. Ex-medical coverage policies are usually written for hospitals or other medical facilities equipped to treat employees in case of disease or injury.

Currently, ex-medical loss costs and rates for hospital classifications are provided on the footnotes page of the loss costs and rates pages of the *Basic Manual for Workers Compensation and Employers Liability Insurance*.

A review of NCCI's data identified only one current Indiana policy with the applicable ex-medical coverage code. No other policies have been reported to NCCI with that code for the current and past four years. Based on this research, NCCI is proposing to eliminate all ex-medical coverage rules from our manuals and discontinue ex-medical rating value calculations.

#### PROPOSAL

This item proposes to withdraw the following endorsements due to the elimination of ex-medical coverage rules:

- WC 00 03 06—Medical Benefits Exclusion Endorsement
- WC 00 03 07—Medical Benefits Reimbursement Endorsement

This item is being filed in conjunction with Item B-1423—Elimination of Ex-Medical Coverage. Item B-1423 proposes to eliminate all ex-medical coverage rules from the *Basic Manual, Experience Rating Plan Manual for Workers Compensation and Employers Liability Insurance* and *Statistical Plan for Workers Compensation and Employers Liability Insurance*. Items B-1423 and P-1409 should be adopted concurrently.

#### IMPACT

There will be no statewide premium impact as a result of the elimination of ex-medical coverage endorsements.

#### IMPLEMENTATION

The attached exhibits illustrate the endorsements proposed to be withdrawn from NCCI's *Forms Manual*:

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FILING MEMORANDUM

**ITEM P-1409—WITHDRAWAL OF EX-MEDICAL COVERAGE ENDORSEMENTS WC 00 03 06  
 & WC 00 03 07**

- **Exhibit 1** withdraws form WC 00 03 06
- **Exhibit 2** withdraws form WC 00 03 07

This item is applicable to new and renewal, voluntary and assigned risk, policies. It will become effective concurrently with each state's approved rate/loss cost filing for the 2012<sup>1</sup> filing cycle. For example, this item will be effective January 1, 2012 for approved rate/loss cost filings that have a January 1, 2012 effective date. Similarly, this item will be effective July 1, 2012 for approved rate/loss cost filings that have a July 1, 2012 effective date. If there is no rate/loss cost filing for a state in a given year, this item will take effect on that state's "normal" rate effective date. (The "normal" rate effective date is the anniversary date of the state's previous years rate effective date.)

The following chart shows the proposed effective dates for each state:

State	Proposed* Effective Date
Alabama	March 1, 2012
Arkansas	July 1, 2012
Colorado	January 1, 2012
Connecticut	January 1, 2012
District of Columbia	November 1, 2012
Florida	January 1, 2012
Hawaii	This item will be implemented in Hawaii's loss cost filing proposed to be effective January 1, 2012. The effective date will be determined upon regulatory approval of the individual carrier's election to adopt this change.
Idaho	January 1, 2012
Illinois	January 1, 2012
Indiana	January 1, 2012
Iowa	January 1, 2012
Kentucky	October 1, 2012
Louisiana	May 1, 2012
Maine	January 1, 2012
Maryland	January 1, 2012

<sup>1</sup> Unless otherwise noted.

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FILING MEMORANDUM

ITEM P-1409—WITHDRAWAL OF EX-MEDICAL COVERAGE ENDORSEMENTS WC 00 03 06  
 & WC 00 03 07

State	Proposed* Effective Date
Mississippi	March 1, 2012
Missouri	All rate changes related to this filing are proposed to be effective January 1, 2012 for the voluntary and assigned risk market.
Montana	July 1, 2012
Nevada	March 1, 2012
New Hampshire	January 1, 2012
New Mexico	January 1, 2012
North Carolina	April 1, 2012
Oklahoma	January 1, 2012
Rhode Island	June 1, 2012
South Carolina	July 1, 2012
South Dakota	July 1, 2012
Tennessee	March 1, 2012
Vermont	April 1, 2012
Virginia	April 1, 2012

\* Subject to change

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