

**FISCAL YEAR (FY) WCS WORKERS' COMPENSATION CLAIMS ACTIVITY REPORT/STATEMENT OF INACTIVITY
DUE SEPTEMBER 1**

***THIS REPORT IS TO REFLECT WORKERS' COMPENSATION CLAIMS ACTIVITY
OCCURRING DURING THE FISCAL YEAR ONLY.***

INSTRUCTIONS FOR FILING VIA WEBFORM IN THE CARDS PORTAL

The WCS requires the filing of the ***FY WCS Workers' Compensation Claims Activity Report (Activity Report)*** or the ***Statement of Inactivity*** via webform by insurers in the CARDS portal. Third-Party Administrators (TPAs) may not submit reports on behalf of insurers; however, they may utilize the Excel format worksheet of the ***Activity Report*** on the WCS website for compiling and providing the required data to their insurer clients. **Reports submitted on the Excel form via email will not be processed.**

Follow the steps below for submitting the report via webform:

1) Access the webform in CARDS.

- a. The ***Activity Report*** webform is accessible by insurer users who have the "Claims Activity Report Submission" access. This permission must be granted by a CARDS Account Administrator.
- b. Login to CARDS.
- c. On your dashboard, select the insurer for which you are reporting from the Entity Selection drop down.
- d. Access the webform from the Forms and Tools drop down menu for the specific insurer by selecting "Claims Activity Annual Submission." Note: The webform is only accessible between July 15th and December 31st each year and is considered late if submitted after the September 1st due date. Insurers failing to report by the due date may be subject to administrative fines.

2) Complete the webform.

- a. The insurer identification information will appear at the top of the form. Ensure you have selected the correct insurer from the Entity Selection drop down on your dashboard.
- b. You will be asked to select the appropriate Attestation. You may only check one:
 - i. Select ***Statement of Inactivity*** if the insurer had no claims activity during the fiscal year. Continue by clicking Submit.
 - ii. Select ***Claims Activity*** if the insurer had claims activity during the fiscal year.
- c. Enter the required information into the webform. Each insurer report should include and combine activity for all claims administrators. A zero (0) should only be entered for line items where there has been no activity. If an amount is unknown or not captured for a line item, mark the check box for that field. The webform will not allow fields to be left blank.

State of Nevada
Department of Business and Industry
Division of Industrial Relations - Workers' Compensation Section

3) Submit the completed webform.

- a. You may save a draft of the report by Clicking on "Save" at the bottom of the form. You may return to the draft by going to the "Filing History" tab and clicking on the draft form.
- b. When you are ready to submit the form, click on "Submit" at the bottom of the form. You will receive a message if the report was successfully submitted. If required field are not completed, you will not be allowed to submit the form.
- c. Once the form is submitted, it cannot be updated. If you need to file a corrected report, you will need to submit a new report in its entirety. Subsequent reports will overwrite the previous report.

NEVADA INSURERS WHO MUST REPORT:

A. Insurers with ACTIVE Certificates of Authority for workers' compensation in Nevada:

The **Activity Report** must include all activity occurring during the fiscal year that was covered by the active certificate of authority and should include payments made by excess (for self-insured employers and associations of self-insured employers) and reinsurance (for private carriers). Private carriers who are licensed to write workers' compensation in Nevada but have not done so are considered to have an active certificate and are required to report.

B. Insurers with INACTIVE Certificates of Authority for workers' compensation in Nevada:

Any self-insured employer who formerly held an active certificate of authority is now considered inactive if the certificate was voluntarily surrendered or if withdrawn by the Division of Insurance. Private carriers are considered inactive insurers for purposes of the **Activity Report** if their Certificate of Authority is inactive or if the workers' compensation line is no longer an active line on their Nevada Certificate of Authority. Insurers that retain the liability for **claims incurred while the certificate was active** must report claims activity that occurred during the fiscal year **for those claims**. If there was no claims activity during the fiscal year, the **Statement of Inactivity** should be submitted.

DEFINITIONS:

Insurer:

- **Self-Insured Employer (SIE):** Any employer who meets the requirements set forth by Nevada Revised Statutes and is certified and issued a Certificate of Authority by the Nevada Commissioner of Insurance.
- **Association of private or public self-insured employers (ASSN):** A nonprofit, unincorporated association composed of five or more private or public employers that have been certified by and issued a Certificate of Authority by the Nevada Commissioner of Insurance.
- **Private Carrier (PC):** Any individual insurer (not an SIE or ASSN) authorized to provide industrial insurance pursuant to chapters 616A to 617, inclusive, of NRS, who has been issued a Certificate of Authority by the Nevada Commissioner of Insurance. A Carrier Group is NOT a Private Carrier.

State of Nevada
Department of Business and Industry
Division of Industrial Relations - Workers' Compensation Section

Active Insurer: An insurer who holds an active Certificate of Authority for workers' compensation in Nevada at any time during the fiscal year. An "Active Insurer" may or may not have claims activity to report during the fiscal year.

Inactive Insurer: Any insurer who held a Certificate of Authority for workers' compensation in Nevada which was active prior to the fiscal year, however, was not active at any time during the fiscal year. The reporting by inactive insurers is particularly important for entities that retain the responsibility for claims (open or closed), ***which were incurred while the certificate was active***. An "Inactive Insurer" may or may not have claims activity to report during the fiscal year. An inactive insurer that has transferred its liabilities to another insurer via a transfer agreement is not required to report.

Fiscal Year (FY): The period July 1 through June 30.

I.E.: Injured Employee.

Medical Only Claim (Activity Rpt., Part 1, Lines C & H): A claim in which the benefits received by the injured employee or his dependents for the duration of the claim do **NOT** include benefits for a temporary total disability (TTD), temporary partial disability (TPD), or permanent total disability (PTD). "Medical Only" claims, however, could have included a Permanent Partial Disability Award.

Lost Time Claim (Activity Rpt., Part 1, lines D & I): A claim in which the benefits received by the injured employee or his dependents for the duration of the claim included benefits for a temporary total disability (TTD), temporary partial disability (TPD), or permanent total disability (PTD). (The injured employee was incapacitated from earning full wages for five or more days in a 20-day period as a result of the on-the-job injury/disease.)