

CARDS (Claims & Regulatory Data System)

User Manual for Workers' Compensation Assessments

Nevada Division of Industrial Relations- June 2025

Claims Expenditure & Premium Data Reporting

Definition

The Insurer Claims Expenditures & Premium Data Webform provides a way for insurers and TPAs to submit bi-annual claims expenditure and premium data for the purpose of calculating assessments. Some things to note about the webform:

- Data call windows open twice a year to collect expenditure data over a six-month period
- Data collected for the July-December period is collected from January 31st – February 28th
- Data collected for the January-June period is collected from July 31st – August 31st
- Verification period opens at the end of the year, allowing users to validate the previous fiscal year's data prior to the assessment calculations. The verification window is open from October 31st – January 1st
- The webform collects claims expenditure and earned premium data, categorized between mining and non-mining data
- TPAs can only enter claims expenditure and premium data as a registered user of the insurer they are associated with

Communications

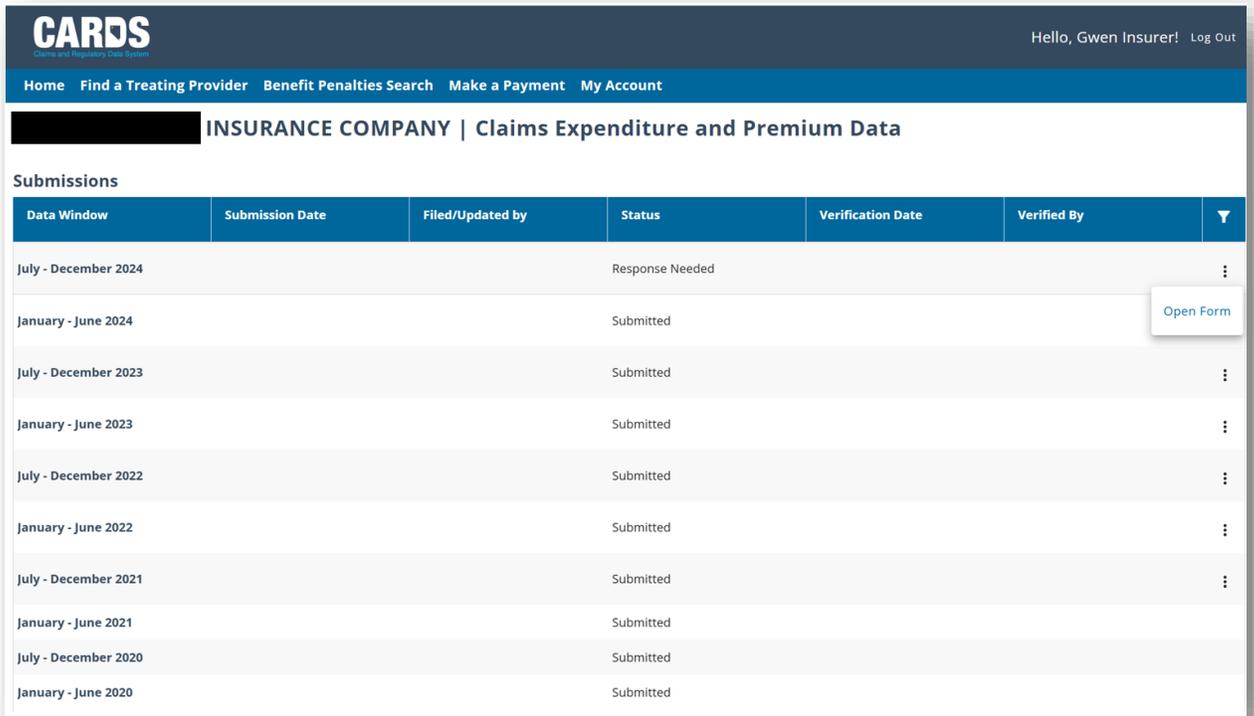
When the Claims Expenditure and Premium Data webforms become available, either on January 31st or July 31st, insurers will be notified via email to submit the claims expenditure and earned premium data. If an insurer has not submitted the webform when the data call window is active, a reminder will be sent to the insurer 30 days and 45 days after the initiation of the data call window.

Permissions

Insurer users with admin access can grant the Claims Expenditure and Premium Data permission to give access to the webform. Permissions can be set from the User Access Management page available from the Forms and Tools menu.

How To: Submit Claims Expenditure and Premium Data Webform

1. Login to the External Portal.
2. Open the Forms and Tools menu.
3. Click on the Claims Expenditure and Premium Data link.
4. Use the action menu for a Data Window to select Open Form.



The screenshot shows the CARDS (Claims and Regulatory Data System) interface. At the top, there is a navigation bar with the CARDS logo and the text "Claims and Regulatory Data System". To the right, it says "Hello, Gwen Insurer! Log Out". Below the navigation bar, there are links for "Home", "Find a Treating Provider", "Benefit Penalties Search", "Make a Payment", and "My Account". The main heading is "INSURANCE COMPANY | Claims Expenditure and Premium Data". Underneath, there is a section titled "Submissions" with a table. The table has columns for "Data Window", "Submission Date", "Filed/Updated by", "Status", "Verification Date", and "Verified By". The first row shows a "Data Window" of "July - December 2024" with a status of "Response Needed". A dropdown menu is open for this row, showing an "Open Form" option. The other rows show "Submitted" status for various data windows from 2020 to 2024.

Data Window	Submission Date	Filed/Updated by	Status	Verification Date	Verified By	
July - December 2024			Response Needed			⋮
January - June 2024			Submitted			⋮
July - December 2023			Submitted			⋮
January - June 2023			Submitted			⋮
July - December 2022			Submitted			⋮
January - June 2022			Submitted			⋮
July - December 2021			Submitted			⋮
January - June 2021			Submitted			⋮
July - December 2020			Submitted			⋮
January - June 2020			Submitted			⋮

5. Enter required data for earned premiums and claims expenditure information.

INSURANCE COMPANY | Claims Expenditure and Premium Data Webform for 07/01/2024 - 12/31/2024

FEIN [REDACTED]	NV Cert of Authority Number [REDACTED]	NAIC Number [REDACTED]	Date Certified 09/03/2008
Workers Comp Status Active	Workers Comp Status Date 09/03/2008	NCCI Carrier Code [REDACTED]	NCCI Group Code [REDACTED]

Earned Premiums Information:
(Please round all amounts to the nearest dollar)

\$ Non-Mining *	10000	\$ Mining *	0	Total	\$10,000.00
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Claims Expenditure Information:
(Please round all dollar amounts to the nearest dollar) July 1, 2024 through December 31, 2024 (For injuries on or after 7/1/99)

Important: The insurer must submit claims information for each decertified self-insured employer or association of self-insured employers that this insurer has entered into or is a party to a loss portfolio transfer. Separate out the data below for claims expenditures under this insurer as a private carrier versus claims expenditures for each **decertified self-insured employer or association of self-insured employers that this insurer assumed through a loss portfolio transfer**. Place one decertified insurer on each line.

Private Carrier Name NGM INSURANCE COMPANY	\$ Non-Mining *	10000	\$ Mining *	0	Total	\$10,000.00
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Decertified Self-Insured Employer:
July 1, 2024 through December 31, 2024 **For claims for a decertified self-insured employer assumed through a loss portfolio transfer**

[+ Add](#)

Decertified Association of Self Insurer Employers:
July 1, 2024 through December 31, 2024 **For claims for a decertified association of self-insured employers assumed through a loss portfolio transfer**

6. Confirm information is correct and select a submission statement.

User Submission:

If executed in Nevada: Pursuant to Nevada Revised Statutes (NRS) 53.045, I declare under penalty of perjury that the foregoing is true and correct.

Except as otherwise provided in NRS 53.250 to 53.390, inclusive, if executed outside of Nevada: I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

Username
insurer@training.com

Date Submitted
5/8/2025

Enter your full name below to electronically sign *

[Cancel](#) [Submit](#)

7. Electronically sign.

8. Click the Submit button.

Invoicing and Payment Process

Definition

Using the data submitted on the Claims Expenditure and Premium Data webform, assessments will be calculated for the insurers and invoices issued to collect payments on each of the three assessments. Some important notes about the Assessment process:

- The three assessment types are: Estimated, Final, and COLA
- The Estimated Assessment is calculated based on an average of the previous 3 years' worth of claims expenditure data
- The estimated amount will be split into installment payments that will be paid over a four-month period (December – March)
- The Final Assessment will determine whether the estimated payments resulted in under or over payments, and either an additional amount will be invoiced, or a refund will be processed for the Insurer
- The COLA Assessment determines the Cost-of-Living Adjustment
- Invoices that are not paid in a timely manner may become eligible for a fine or penalty

Communications

Once the internal process of calculating the Estimated, Final, and COLA assessment occurs, invoices will be generated, and Insurers will be notified of the assessment payment via email. The invoice attached to the email will include the cover letter and invoice for the associated assessment.

You will receive a confirmation email with a receipt when your payment is complete.

Permissions

Insurer users with admin access can update user permissions to view invoices by selecting the Monetary Assessment Review permission on the User Access Management page.

How To: Make a Payment in CARDS

1. Login to the External Portal.
2. Open the Forms and Tools menu.
3. Click on the Invoices link.
4. Expand an individual invoice record and select Pay Now or click Select All to pay all invoices.

CARDS
Hello, Insurer Account! Log Out

Home Find a Treating Provider Benefit Penalties Search Make a Payment My Account

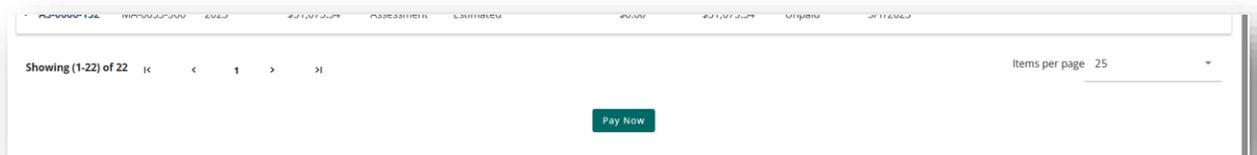
Invoices are currently due. Please select the check box for the invoice(s) that you want to pay and select Pay Now. Failure to pay by the deadline can result in fines or penalties and referral to collections.

Invoicing Details

Select All

Invoice	Invoice Number	Assesse... Year	Total Amount Due	Category	Type	Installme...	Amount Paid	Balance Due	Payment Status	Due Date	Payment Date	Online Receipt	Pay
		2024	\$1,521.93	Assessment	Cola		\$0.00	\$1,521.93	Unpaid	6/30/2025			
		1	\$1,521.93	Assessment	Cola	1	\$0.00	\$1,521.93	Unpaid	6/30/2025			<input checked="" type="checkbox"/> Pay Now
		1	\$1,521.93	Assessment	Cola	1	\$0.00	\$1,521.93	Unpaid	6/30/2025			<input type="checkbox"/> Pay Now
>		2024	\$1,521.93	Assessment	Cola		\$0.00	\$1,521.93	Unpaid	6/30/2025			
>		2024	\$1,521.93	Assessment	Cola		\$0.00	\$1,521.93	Unpaid	6/30/2025			
>		2024	\$1,521.93	Assessment	Cola		\$0.00	\$1,521.93	Unpaid	6/30/2025			
>		2025	\$30,656.65	Assessment	Estimated		\$7,664.17	\$22,992.48	Unpaid	3/1/2025			
>		2025	\$30,656.65	Assessment	Estimated		\$7,664.17	\$22,992.48	Unpaid	3/1/2025			

5. Click the Pay Now button at the bottom of the Invoicing Details page.



6. Click the Pay Now button in the Secure Acceptance pop up modal.



7. Enter Billing Information and Payment Details.

CARDS
Claims and Regulatory Data System

Billing Information * Required field

First Name *

Last Name *

Address Line 1 *

Address Line 2

City *

Country/Region *

Zip/Postal Code *

Phone Number *

Email *

Payment Details

Routing Number *

Account Number *

Account Type *

By clicking Pay, I agree to the [Electronic Check Terms & Conditions](#)

Your Order

Total amount **\$271.65**

eCheck selected. [Change payment method](#)

8. Select the Pay button.

9. Confirm payment details.

CARDS Hello, Insurer Account! [Log Out](#)

[Home](#) [Find a Treating Provider](#) [Benefit Penalties Search](#) [Make a Payment](#) [My Account](#)

Payment Confirmation

Your payment was successful.

Payment Date 05/08/2025	Order Number 20250508IOx0TA
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Billing Information

Name Insurer Account	Address 123 Main St	City Henderson
State NV	Country US	Postal Code 89011
Email test@test.com	Phone (555) 555-5555	

Payment Details

Payment Method card	Order Total \$1,521.93
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