



Data Now Program (DNP)  
**Indemnity Data Call Reporting Practices &  
Indemnity Incentive Program**

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## Key Topics

- Mapping the Data
- Subrogation Recoveries
- Indemnity Paid on Matching Claims
- New Data Elements
- ***Indemnity Incentive Program***

## Mapping the Data

### Mapping—Benefit Type Code

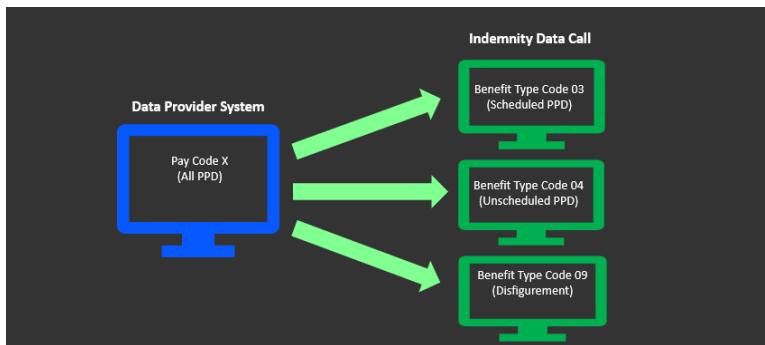


### Mapping—Benefit Type Code

- 03—Scheduled Permanent Partial Disability Benefits
  - The transactional amount of indemnity permanent partial disability benefits paid as established by a **statutory list (schedule) of weeks for specific parts of body**
- 04—Unscheduled Permanent Partial Disability Benefits
  - The transactional amount of indemnity permanent partial disability benefits paid for injuries to parts of the body **not specifically listed in a statutory schedule**
- 09—Disfigurement Benefits
  - The transactional amount of indemnity benefits paid for any **scarring or cosmetic defect** as defined by statute in the applicable jurisdiction

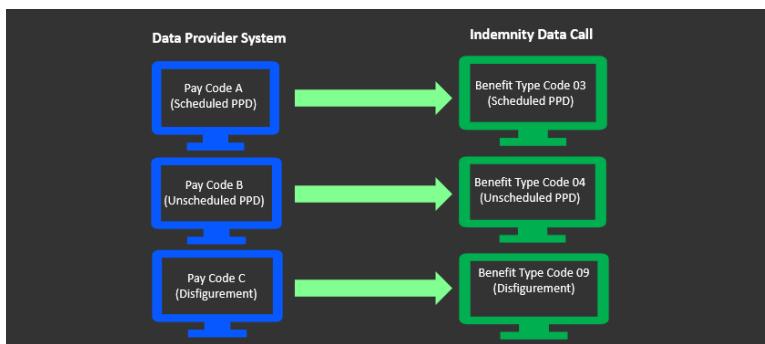
## Problematic Mapping—Permanent Partial Disability (PPD)

### PPD Example: 1 to Many



## Ideal Mapping—Permanent Partial Disability (PPD)

### PPD Example: 1 to 1



## Ideal Mapping—Permanent Partial Disability (PPD)

### PPD Example (FL)

Code	Description	Additional Rules and/or Exceptions (If Applicable)
01	<b>Death Benefits</b> —The transactional amount of indemnity benefits paid for the death of the claimant resulting from a work-related accident or occupational injury or disease.	Includes burial expenses. Benefits for multiple survivors may be reported as a single transaction for all the survivors or one transaction per survivor for each payment made.
02	<b>Permanent Total Disability Benefits</b> —The transactional amount of indemnity benefits paid for permanent total disability as defined by statute in the applicable jurisdiction.	GA—Defined as Catastrophic Injury Benefits TX—Defined as Lifetime Income Benefits AK, KY, MT, OR, and VT—Not applicable
03	<b>Scheduled Permanent Partial Disability Benefits</b> —The transactional amount of indemnity permanent partial disability benefits paid as established by a statutory list (schedule) of weeks for specific parts of body.	TN—Not applicable for accidents occurring on or after 07/01/2014 FL—Defined as Impairment Income Benefits NH—Defined as Permanent Impairment Awards TX—Defined as Supplemental Income Benefits
04	<b>Unscheduled Permanent Partial Disability Benefits</b> —The transactional amount of indemnity permanent partial disability benefits paid for injuries to parts of the body not specifically listed in a statutory schedule.	FL—Not applicable NH—Defined as Compensation for Permanent Partial Disability TX—Defined as Impairment Income Benefits

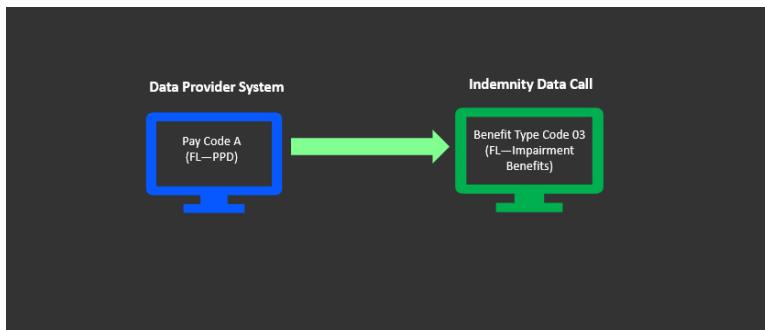
*Indemnity Data Call Reporting Guidebook, Part 6—Data Dictionary, Section A.8*



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## Ideal Mapping—Permanent Partial Disability (PPD)

### PPD Example (FL): 1 to 1



## Ideal Mapping—Permanent Partial Disability (PPD)

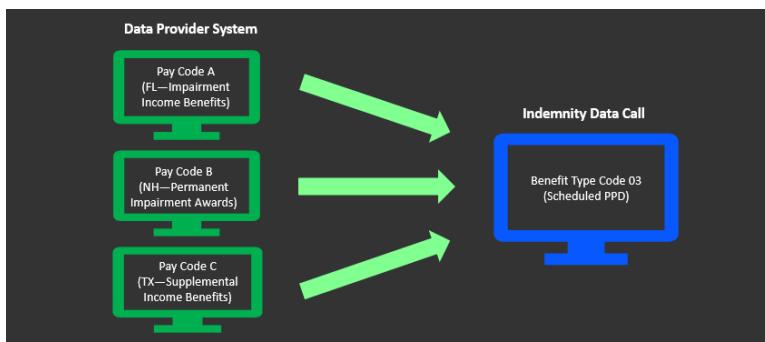
### PPD Example (state-specific)

Code	Description	Additional Rules and/or Exceptions (If Applicable)
01	<b>Death Benefits</b> —The transactional amount of indemnity benefits paid for the death of the claimant resulting from a work-related accident or occupational injury or disease.	Includes burial expenses. Benefits for multiple survivors may be reported as a single transaction for all the survivors or one transaction per survivor for each payment made.
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04	<b>Unscheduled Permanent Partial Disability Benefits</b> —The transactional amount of indemnity permanent partial disability benefits paid for injuries to parts of the body not specifically listed in a statutory schedule.	FL—Not applicable NH—Defined as Compensation for Permanent Partial Disability TX—Defined as Impairment Income Benefits

*Indemnity Data Call Reporting Guidebook*, Part 6—Data Dictionary, Section A.8

## Ideal Mapping—Permanent Partial Disability (PPD)

### PPD Example (state-specific): Many to 1





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### Mapping—Benefit Type Code

- 49—Indemnity and Medical Combined
  - The transactional amount of benefits paid for **indemnity and medical** on a **combined** basis which **cannot be separated out**
- 79—Lump Sum Including Multiple Indemnity
  - The transactional amount paid via **lump sum** for **multiple indemnity benefit types** that **cannot be reasonably separated out**
- 99—Other Indemnity Benefits Not Otherwise Specified
  - The transactional amount of indemnity benefits paid, **not otherwise classified** by NCCI

**Note: It is expected that Benefit Type Code 49, 79, and 99 will be used infrequently.**

### Mapping—Employment Status Code

- Employment Status Code
  - Indicates the employee's primary work status at the time of injury
- Report Based on Hierarchy
  - When multiple codes apply

*Indemnity Data Call Reporting Guidebook, Part 6—Data Dictionary, Section A.18*

### Mapping—Employment Status Code

#### Example: Employment status at time of injury (part-time volunteer worker)

Code	Description	Hierarchy
9	Volunteer—Indicates that the injured worker is a volunteer for the covered employer and sustained a compensable injury, but the claim administrator will make no indemnity payments unless indemnity benefits are required based on concurrent employment.	1
8	Seasonal—Indicates that the claimant was employed in a position dependent on or controlled by the season of the year.	2
1	Regular Full-Time—Indicates that the injured worker was employed on a full-time basis. (Schedule is comparable to other employees of the company and/or other employees in the same business or vicinity that are considered full-time). This status is NOT used when reporting experience for full-time seasonal, volunteer, apprenticeship, or piece workers.	3
2	Part-Time—Indicates that the injured worker was employed on a part-time basis and their work history in the preceding months shows that the person worked on less than a full-time basis. This status is NOT used when reporting experience for part-time seasonal, volunteer, apprenticeship, or piece workers.	4
X	Other—Indicates that the claimant had an employment status other than those listed above.	5

In general, report the single applicable code. If multiple codes apply, select the one with the lowest hierarchy number.



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## Mapping—Temporary Disability Benefit Extinguishment Code

- Temporary Disability Benefit Extinguishment Code
  - Indicates the reason why temporary disability benefits were terminated
- Report Based on Hierarchy
  - When multiple codes apply

*Indemnity Data Call Reporting Guidebook*, Part 6—Data Dictionary, Section A.52

## Mapping—Temporary Disability Benefit Extinguishment Code

**Example: Temporary benefits extinguished (claimant returned to work and reached MMI)**

Code	Description	Hierarchy
0	Temporary Benefits not Extinguished or Not Applicable	N/A
1	Return to Work (RTW)	1
2	Release RTW	2
3	Maximum Medical Improvement (MMI)	3
4	Maximum Statutory Duration	4
5	Medical Noncompliance (e.g., missed medical appointments or refusal to be examined)	5
6	Other	6

## Subrogation Recoveries

- 30—Indemnity Recovery Reimbursement Amount—  
**Third-Party Actions**
  - The transactional amount of indemnity recovery reimbursed to the carrier from a **third-party** action less recovery expenses
- 31—Indemnity Recovery Reimbursement Amount—  
**State-Administered Funds**
  - The transactional amount of indemnity recovery reimbursed to the carrier from a **state-administered fund** (e.g., Second Injury Fund)

## Subrogation Recoveries

- Report as a **positive** value on the Transactional record
- Report the Indemnity and Medical Paid-To-Date and incurred amount **reduced by** the subrogation recovery amount on the Quarterly record
  - Same as Unit Statistical Reporting



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## Indemnity Paid on Matching Claims

Indemnity Paid on Matching Claims	
Transactional > Quarterly	
Total Indemnity Paid - Transactional	\$35,547
Total Indemnity Paid - Quarterly	\$27,053
Percentage Difference	31.4%

[View Matching Claims](#)

Quarterly > Transactional	
Total Indemnity Paid - Quarterly	\$341,755
Total Indemnity Paid - Transactional	\$278,872
Percentage Difference	18.4%

[View Matching Claims](#)

- Matching Claims based on unique key fields reported on both record types
- Displays the Total Indemnity Paid reported for the quarter
  - Transactional > Quarterly
  - Quarterly > Transactional

## Transactional > Quarterly

Transactional > Quarterly	
Total Indemnity Paid - Transactional	\$35,547
Total Indemnity Paid - Quarterly	\$27,053
Percentage Difference	31.4%

[View Matching Claims](#)

Claims with a difference in the Indemnity Paid-To-Date between the current and prior quarter Quarterly records is less than the sum of Transactional payments submitted for the current quarter

## Transactional > Quarterly

Possible reasons for occurrence:

- Indemnity Paid-To-Date
- Voids/Credits
- Claim Valuation Date
- Subrogation Recoveries

## Quarterly > Transactional

Quarterly > Transactional	
Total Indemnity Paid - Quarterly	\$341,755
Total Indemnity Paid - Transactional	\$278,872
Percentage Difference	18.4%

[View Matching Claims](#)

Claims where the difference in the Indemnity Paid-To-Date between the current and prior quarter Quarterly records is greater than the sum of Transactional payments submitted for the current quarter



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## Quarterly > Transactional

Possible reasons for occurrence:

- Indemnity Paid-To-Date
- Missing Transactional Records
- Claim Valuation Date
- Subrogation Recoveries

## New Data Elements

### Quarterly Record

Classification Code	Return to Work Date	Zip Code of Injury Site
Number of Dependents	Exposure State Code	Indemnity Claim Code

### Implementation History

- Circular IND-2024-01 published 10/10/2024
- 4Q 2025 data due to NCCI by 3/31/2026
- 2024 update to the **Indemnity Data Call Reporting Guidebook**
  - Record Layout
  - Data Dictionary
  - Indemnity Data Call Production Edit Matrix

### Quarterly Record Layout

New Quarterly Indemnity Claim Data Elements (Field 38-43)				
Field No.	Field Title	Class	Position	Bytes
38	Classification Code	N	195-198	4
39	Return to Work Date	N	199-206	8
40	Zip Code of Injury Site	AN	207-215	9
41	Number of Dependents	N	216-217	2
42	Exposure State Code	N	218-219	2
43	Indemnity Claim Code	N	220	1
44	RESERVED FOR FUTURE USE		221-300	80



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### Quarterly Record

- Classification Code
  - The code under which the injured employee's payroll and premium is assigned in accordance with the rules of NCCI's **Basic Manual**
  - Reported the same as Unit Statistical Data
- Return to Work Date
  - The date of the claimant's most recent return to work
  - Reported the same as Detailed Claim Information (DCI) data
- ZIP Code of Injury Site
  - The postal or United States Postal Service ZIP+4 Code of the location where the injury occurred
  - Reported in Detailed Claim Information (DCI) data
- Number of Dependents
  - The number of dependents the injured worker has at the time of injury
  - New element reported only in Indemnity data
- Exposure State Code
  - The code used to identify the state in which coverage has been provided and to which the claimant's payroll has been assigned
  - Reported the same as Unit Statistical Data

### Exposure State—Examples

Exposure State Is ...	Accident Occurs in ...	Benefits Paid Under the WC Act in ...	Jurisdiction State Is ...
FL	FL	FL	FL
TX	NM	TX	TX
GA	SC	SC	SC

### Quarterly Record

- Indemnity Claim Code
  - A code that can aid in identifying and deleting claims
  - New element reported only in Indemnity data

Code	Description
1	Compensable indemnity claim
2	Noncompensable indemnity claim
3	Medical-only claim
4	Jurisdiction state no longer applicable



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### Quarterly Record

Classification Code	Return to Work Date	Zip Code of Injury Site
Number of Dependents	Exposure State Code	Indemnity Claim Code

Changes to any of these elements (after the claim has been reported to NCCI) would require that an updated Quarterly record is reported for a particular claim as part of the Quarterly record reporting triggers outlined in the *Indemnity Data Call Reporting Guidebook*.

These six new Indemnity data elements will support NCCI's legislative analysis, pricing, and research.

### Indemnity Incentive Program

#### Overview

#### Compliance Programs



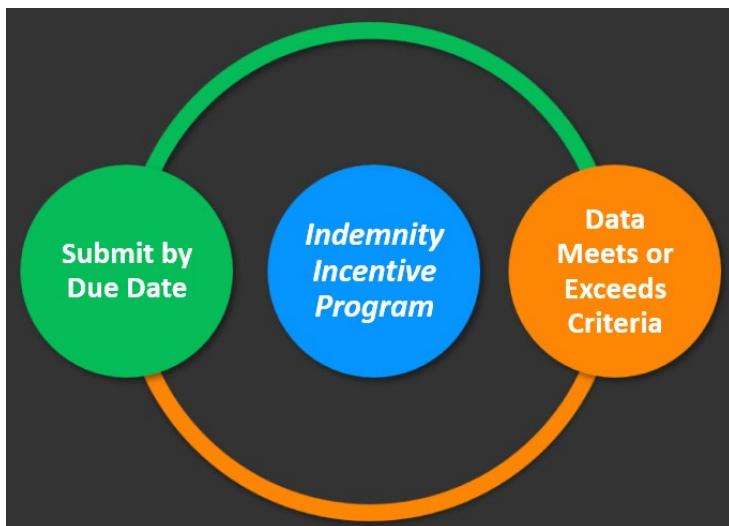
## Applicability

**Indemnity Incentive Program** applicable jurisdiction states:

Alabama	Hawaii	Maryland	North Carolina <sup>(*)</sup>	Vermont
Alaska	Idaho	Minnesota <sup>(*)</sup>	Oklahoma	Virginia
Arizona	Illinois	Mississippi	Oregon	West Virginia
Arkansas	Indiana <sup>(*)</sup>	Missouri	Rhode Island	Wisconsin <sup>(*)</sup>
Colorado	Iowa	Montana	South Carolina	
Connecticut	Kansas	Nebraska	South Dakota	
District of Columbia	Kentucky	Nevada	Tennessee	
Florida	Louisiana	New Hampshire	Texas	
Georgia	Maine	New Mexico	Utah	

<sup>(\*)</sup> At the discretion of the independent bureau, this is an applicable Indemnity Data Call state. Report the Indemnity Data Call in conjunction with the designated statistical plan.

## Objectives of the Indemnity Incentive Program

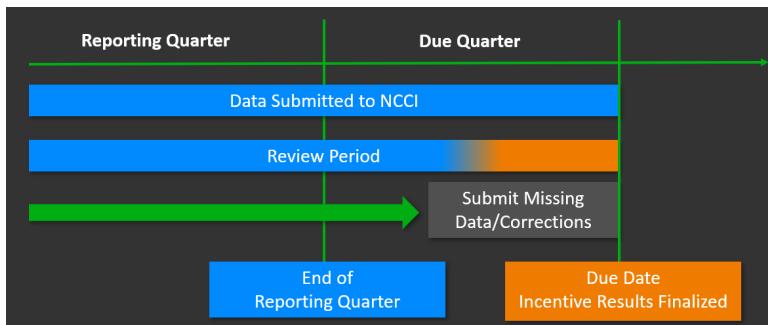


## Evaluation Timeframe

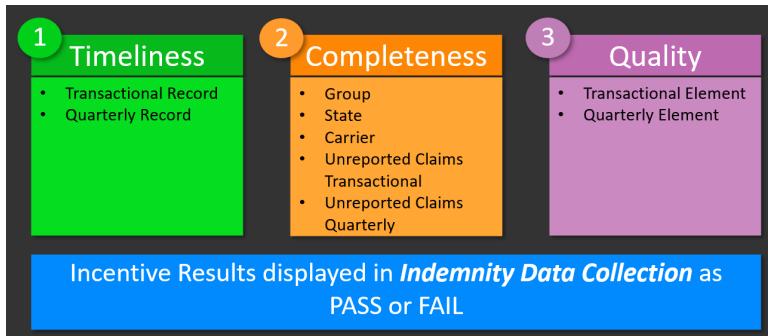
- Quarterly Evaluation
- Data Received by the Due By Date

Reporting Quarter	Due By Date
Q1	June 30
Q2	September 30
Q3	December 31
Q4	March 31 (following year)

## Review Period



## Indemnity Incentive Program Components





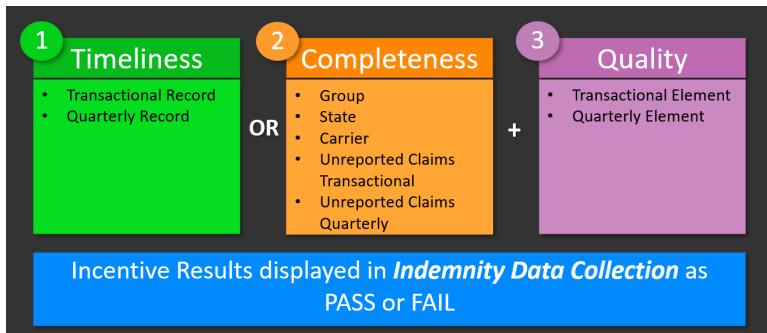
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## Indemnity Incentive Program Assessment Calculation

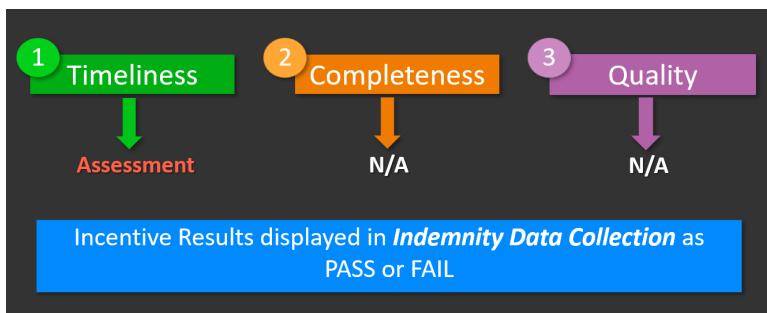
### Assessment Calculation Factors



### Assessment by Component



### Assessment by Component





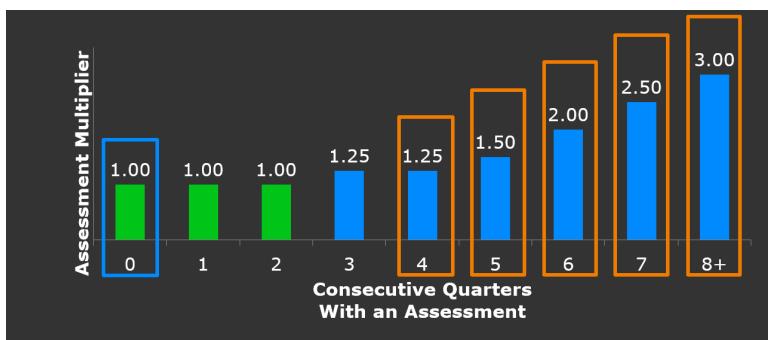
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### Assessment Multiplier

<b>Total Assessment</b>	<b>\$1,500</b>
Assessment	\$1,500
Assessment Multiplier	1.00
Assessment Level	2

An Assessment Multiplier greater than one is used if a carrier group has received assessments for three or more consecutive quarters. The multiplier will be applied to the Assessment amount and included in the calculation of the Total Assessment amount.

### Assessment Multiplier



### Assessment Levels

Assessment Level	Market Share Ranges
1	< = 0.25%
2	> 0.25% – 1.50%
3	>1.50%



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### Timeliness Assessment

Assessment Level	Market Share Ranges	Timeliness Assessment
1	< = 0.25%	\$3,750
2	> 0.25% – 1.50%	\$7,500
3	>1.50%	\$15,000

### Completeness Assessment

Assessment Level	Market Share Ranges	Total Completeness Assessment Based on Categories Not Complete on Time		
		1	2	3, 4, or 5
1	< = 0.25%	\$625	\$1,250	\$2,500
2	> 0.25% – 1.50%	\$1,250	\$2,500	\$5,000
3	>1.50%	\$2,500	\$5,000	\$10,000

Market share is based on the Direct Written Premium reported on the most recent NAIC Annual Statement.

### Quality Assessment

Assessment Level	Market Share Ranges	Quality Assessment per Data Element Based on Element Category			
		Supplemental	Priority	Critical	Required
1	< = 0.25%	\$25	\$125	\$250	\$500
2	> 0.25% – 1.50%	\$50	\$250	\$500	\$1,000
3	>1.50%	\$100	\$500	\$1,000	\$2,000

Market share is based on the Direct Written Premium reported on the most recent NAIC Annual Statement.

### Total Assessment Calculation

**Assessment x Assessment Multiplier = Total Assessment**

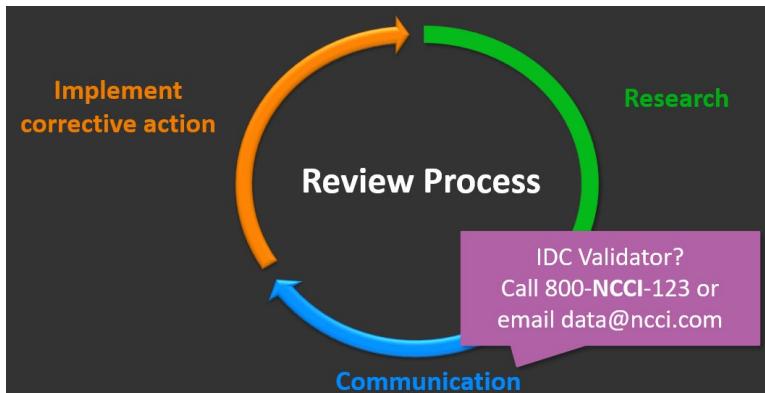
<b>Total Assessment</b>	<b>\$1,500</b>
Assessment	\$1,500
Assessment Multiplier	1.00
Assessment Level	2

**EARLY review allows time to respond to issues.**

## Assessment Evaluation and Billing

Reporting Quarter	Due Date	Invoice Month
Q1	June 30	August
Q2	September 30	November
Q3	December 31	February
Q4	March 31	May

Invoices are billed 2 months after the due date.



## Indemnity Incentive Program Resources

- **Indemnity Data Call Reporting Guidebook**
  - Edit Matrix
- **Indemnity Data Collection**
  - Tool User's Guide
- **Data Quality Guidebook**
- **Data Manager Dashboard**
- Indemnity Data Call Section on [ncci.com](http://ncci.com)

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