

NCCI WCIP STATE INSTRUCTIONS

Use the state chart below along with the ACORD® Forms Instruction Guide for completing the ACORD® 133 Workers Compensation Insurance Plan Assigned Risk section and ACORD® 130 Workers Compensation Application. For questions relating to the Plan, please refer to Rule 4 of NCCI's **Basic Manual for Workers Compensation and Employers Liability Insurance**, NCCI's **Basic Manual User's Guide** (National pages), and NCCI's **Assigned Risk Supplement**, or contact NCCI's Customer Service Center at 800-NCCI-123 (800-622-4123).

ARKANSAS				
Estimated Annual Premium	Premium Installment Basis	Minimum Deposit %	Additional Payments During Year	Number of Refusers: Two—one must be the current carrier, if applicable.
Less than \$2,500	Annual	100%	None	Effective Date: The later of the following options: <ul style="list-style-type: none"> 12:01 a.m. on the date following receipt by Plan Administrator of a complete and eligible application The date of expiration of existing coverage A date the applicant requests If an eligible application and check are sent via US mail, coverage will be bound at 12:01 a.m. on the day following the postmark on the envelope or the expiration of existing coverage. For effective date determination, a private postage meter mark will not be accepted, and only a US Postal Service postmark affixed to the envelope will be accepted by the Plan Administrator as a valid postmark.
At least \$2,500	Semiannual	50%	One	
At least \$10,000	Quarterly	50%	Three	
\$50,000 or more	Monthly	25%	Eight	
Additional premium installments must be made in equal amounts, the sum of which, when added to the deposit premium, must equal 100% of the estimated annual premium. Estimated annual premium and the premium installment schedule are subject to adjustment at preliminary, interim, and/or final audit(s) or when an endorsement is issued. At policy inception, the employer may request a higher minimum deposit percentage, but may not select a deposit percentage lower than the otherwise applicable minimum stated in the deposit and premium installment table.				
The deposit and premium installment table is followed by all assigned carriers. However, the assigned carrier, based upon sound underwriting practices, may make appropriate changes to the governing state's premium installment basis that the employer has selected. The assigned carrier must provide the reason(s) for such change(s) to the employer and will appropriately document the file.				
Minimum Premium Policies The deposit premium for a minimum premium policy is 100% of the estimated annual premium. Minimum premium policies must be paid in full and are not eligible for premium installments.				
Short-Term Policies The deposit premium for short-term policies with a duration of six months or less is 100% of the estimated premium. The estimated premium is based on the estimated payroll for the policy period, unless otherwise approved by the Plan Administrator.				
For any dispute concerning the change of an employer's payment basis, refer to Basic Manual Rule 4-A-10.				
Application Submission Options: <ul style="list-style-type: none"> Online—Applications may be submitted via NCCI's website at ncci.com. To enroll for access to this free service, contact NCCI's Customer Service Center at 800-NCCI-123 or at customer_service@ncci.com. Telephone—Applications may be submitted by contacting NCCI's Customer Service Center at 800-NCCI-123. Mail—Applications may be submitted via the US Postal Service or private overnight delivery service to the address provided below. Note: Under Arkansas law, an out-of-state agent/producer is required to have an Arkansas resident or nonresident license to submit an application to NCCI for primary coverage.				
Voluntary Coverage Assistance Program (VCAP® Service): NCCI's VCAP® Service applies to all employers seeking coverage through the residual market in which NCCI is the Plan Administrator, and is offered through NCCI's Residual Market Application Processing System (RMAPS® Online Application Service). Through this free, Internet-based application, voluntary coverage providers have the opportunity to evaluate potential employers that submit applications through the residual market. All assigned risk applications (electronic, phone-in, or mail-in) submitted to NCCI as Plan Administrator are processed through VCAP® Service to determine if they match the preselected criteria specified by a participating voluntary coverage provider.				
Refer to NCCI's Basic Manual Rule 4-D-Voluntary Coverage Assistance Program (VCAP® Service) for the applicable rules.				
Guide to Premium Calculation (for detailed information, refer to Arkansas State Special Rules in NCCI's Basic Manual): <ul style="list-style-type: none"> <li style="width: 50%;">Deductible insurance, if applicable <li style="width: 50%;">Tabular Adjustment Program, if applicable <li style="width: 50%;">Assigned Risk Alternate Preferred Plan, if applicable <li style="width: 50%;">Merit rating, if applicable <li style="width: 50%;">Experience modification, if applicable <li style="width: 50%;">Alcohol- and Drug-Free Workplace Premium Credit, if applicable 				
Election/Rejection Under State Law: Corporate officers, sole proprietors, partners, members of limited liability companies, members of professional associations, and a self-employed employer who is not a subcontractor and who owns and operates his or her own business are automatically covered under the Act, but may by agreement or contract elect to be excluded from coverage. In accordance with Ark. Code § 11-9-108, a current, signed and dated exclusion of coverage letter from any individuals who are listed as excluded on the application and who are to be excluded from workers compensation and employer's liability coverage under the policy must be submitted to the carrier or attached to the application at time of submission.				
Payroll must be excluded for any corporate officers, sole proprietors, partners, and members of limited liability companies rejecting coverage.				
Note: Members of limited liability companies are treated as sole proprietors/partners for premium determination purposes in Arkansas.				

Failure to file any applicable forms/notices for election or rejection of coverage in accordance with state laws may result in additional premium being charged and collected by the Plan Administrator or the assigned carrier.

Volunteers

Volunteer firefighters of municipalities are automatically covered under the Act.

“Volunteer public safety organizations” are not automatically covered under the Act, but the quorum court of the county served by the organization may elect to cover the “volunteer public safety organizations,” which include:

- County organization for emergency services
- Sheriff’s auxiliary
- Ambulance service or rescue squad
- Rural volunteer fire department or a subscription fire service department formed as a nonprofit organization

In order to obtain coverage for volunteers under Arkansas law, the employer and/or its representative must include payroll for those workers in the premium calculation.

Refer to the Arkansas Workers’ Compensation Commission at www.awcc.state.ar.us for the most current rules, regulations, and forms.

Note: This information applies only to Arkansas. If additional states are to be covered, additional action may be necessary under the applicable state law.

Employee Leasing:

IMPORTANT: Before completing Professional Employer Organization (PEO) Arrangement applications, refer to NCCI’s *Basic Manual Rule 4-B—Professional Employer Organization (PEO) Arrangements for the applicable rules. Obtain forms from NCCI.*

- All of the PEO’s leased workers to clients under the state’s WCIP must be secured under an MCP basis
- The client’s policy covering its leased workers will be issued in the name and FEIN of the client in accordance with this rule and all other rules governing the issuance of a standard policy for assigned risk business
 - Direct workers of a client will not be included on the client’s policy for its leased workers
- The PEO’s policy covering its direct workers will be issued in the name and FEIN of the PEO in accordance with this rule and all other rules governing the issuance of a standard policy for assigned risk business under the WCIP
 - If the PEO has no direct workers in the state where its clients’ coverage is being obtained, the PEO’s policy will be issued with premium based on the use of Code 8810—Clerical Office Employees NOC on an “if any” basis

Submit Application via Regular Mail to:

NCCI
Attn: Treasury Department
PO Box 3045
Boca Raton, FL 33431

Send Correspondence to:

NCCI Customer Service Center
901 Peninsula Corporate Circle
Boca Raton, FL 33487-1362
Phone: 800-622-4123
Fax: 561-893-1191

Submit Application via Overnight Delivery to:

NCCI
Attn: Treasury Department
901 Peninsula Corporate Circle
Boca Raton, FL 33487-1362