WORKERS' COMPENSATION AND INJURY MANAGEMENT ACT 1981
EMPLOYERS' INDEMNITY POLICIES (PREMIUM RATES) ACT 1990

Guidelines for completing Form WC20 – Annual Summary of Cost of Claims

Date Issued: 30 June 2022

Penalties

For late or non-submission

Section 103A of the *Workers' Compensation and Injury Management Act 1981* (the Act) stipulates a **$2,000** fine for refusing or failing to furnish to WorkCover WA information or returns requested in writing by WorkCover WA to enable it to compile and record statistics, records, and reports for the better administration of the Act.

A suspension and/or revocation of approval may also be invoked under section 161 of the Act.

For actuarial time after the first revision

Insurers requiring more than one revision of returns, conducted by the Actuary of WorkCover WA, may be billed directly by WorkCover WA for the additional processing time for subsequent revisions.

Information that is collected on the Form WC20 Annual

WC20-Annual consists of following information by the Fiscal Year of the accident date.
   a. Number of claims lodged in the current Fiscal Year.
   b. Total amount of claim payments in the current Fiscal Year.
   c. Number of claims outstanding as at the end of current Fiscal Year.
   d. Provision for claim outstanding estimates as at the end of current Fiscal Year dividend into:
      i. Case Estimates
      ii. Development and IBNR Estimates.

The WC20-Annual should contain data reported for the Fiscal Year,1st July to 30th June.

There are two requirements for WC20 Annual Data:

   1. All data including null values must be provided for the last ten Fiscal Years, including the current Fiscal Year
   2. Data for accident years older than ten years must be provided if one or more values is greater than zero (do not combine into "All earlier years")

Important notes before completing the Form WC20

   1. Claim Payments should be reported as the real net cost to the Insurer. That is, claim payments should be exclusive of any GST payable. For example, if a payment is made of $1100 (inclusive of GST) and the Insurer was entitled to an ITC of $100 (the GST component) then the Insurer would report $1000 (the net cost, exclusive of GST).

   2. Payments include all legal, assessor, witness, and surveillance fees directly attributable to workers' compensation cases.

   3. Exclude office or administration expenses.

   4. Claim payments are to be classified by Accident Year, regardless of when the claims were reported.

   5. Include any recoveries received (for example, compulsory motor vehicle third party recoveries, recoups against payments, stopped payments, cancelled cheques, et cetera).

   6. Exclude any reinsurance recoveries.

   7. Claim payments are to be reported according to Transaction Date, regardless of when the payments were reported to WorkCover WA via monthly returns (NIDS).

How to complete and submit this Form

The data supplied must conform to the Data requirements and specifications listed below:

The file name must adhere to WorkCover WA file naming convention, Insurer *Id-Insurer or Company Name (e.g., 999-WorkCover WA Insurance*)

Data for WC20-Annual Returns must be submitted on the WC20-Annual-File form template (available on the WorkCover WA website) via the WorkCover WA online portal. A sample pre-filled WC20-Annual file is provided on the WorkCover WA website showing how to complete the Form.

The WC20-Annual Returns must be lodged with WorkCover WA by the due date.

The scheduled due dates for all Premium Rate Forms are available on the WorkCover WA website.

Data requirements and specifications

Data Item	Name	Data Format	Notes
1	Accident Year	Text	CCYY/YY (Fiscal Year)
2	Number of Claims Lodged	Integer	Decimal Places = 0
3	Total Sum of Claims Payments	Currency	Decimal Places = 2
4	Number of Reported Claims Outstanding	Number	Decimal Places = 0
5	Provision for Claims Outstanding Case Estimates.	Currency	Decimal Places = 2
6	Development and IBNR Estimates	Currency	Decimal Places = 2

Item 1: Accident Year

Is the Fiscal Year (**1 July in a year to 30 June the following year**) in which the accident event occurred, irrespective of when the claim is reported, paid, or finalised

Item 2: Number of Claims

The number of claims lodged in the current period, apportioned by Accident Year. Include all reported claims, even those where no payments have been made or estimates provided.

Item 3: Total Sum of Claim Payments

The amount paid for claims in the current period, apportioned by Accident Year. This refers to the amounts actually paid in respect of claims gross of reinsurance recoveries but net of other recoveries.

Item 4: Number of Reported Claims Outstanding

The number of reported claims that remain outstanding at the end of the current period, apportioned by Accident Year.

That is, claims that have not yet been finalised. This includes those on which no payments have been made.

Item 5: Case estimates

The total amount estimated to be owing for claims that are outstanding at the end of the current period, apportioned by Accident Year.

Case estimate is defined as the estimate straight from the claim file, less any amounts that have already been paid, without adjustment for any reinsurance.

Case estimates are not to be reduced for any reinsurance recoveries.

Item 6: Development and IBNR Estimates

This includes provisions for incurred but not reported claims and any future claim development assessed using actuarial techniques where applicable.

The sum of *Item 5: Case estimates* and *Item 6: Development and IBNR Estimates* should be the total provision held by the company in respect of Workers' Compensation business in Western Australia on an inflated but undiscounted basis. That is **excluding** allowance for:

1. claim management expenses
2. prudential margin
3. reinsurance recoveries.

Other information

Fiscal Year

Fiscal Year is from **1 July in a year to 30 June of the following year**.

Returns to Insurance Commissioner

The information required on Form WC20 is similar to that required by the Australian Prudential Regulatory Authority (APRA) under the *Insurance Act 1973*, with the relevant Forms being 105 and 106. Where provisions are included in the Form 106, over and above those made as a result of local case estimates, similar provisions should be included in the Form WC20.

Reporting the cost of claims by Insurers involved in mergers/takeovers

Insurers are to include all relevant claims data where one Insurer takes over another and manages the claims on behalf of the merged Insurer.

Claim data, including number of claims (both reported and active), claim payments and case estimates outstanding is required to ensure that:

- all claims experience is reported

- claims experience for a group of policies/portfolio is not excluded

- claims experience for a group of policies/portfolio is not double counted (that is, included in the merged Insurer's returns).

Reinsurance

Do not allow for claims estimated, paid or recovered in respect of any reinsurance contract. Enter the information as though **no** reinsurance in any Form had been affected.

Recoveries

Include compulsory motor vehicle third party recoveries, recoups against payments, stopped payments and cancelled cheques, etcetera but **exclude** reinsurance recoveries.

Nil return

If you have a nil return, an electronic version with null values is still required to be submitted until all claims are finalised and approval in writing has been provided by WorkCover WA exempting the Insurer from having to complete this Form.