

Employer Information Guide



ABOUT THIS GUIDE

This guide provides information about various forms you will need to complete, as well as checklists and other materials you can use to develop and implement health and safety and return-to-work programs in your workplace. It is intended to bring together some basic information and often-used contacts.

CONTACT US

- If you have questions about occupational health and safety, contact our Prevention Services Department:
Toll free: 1-800-870-3331
Halifax local: (902) 491-8950
Fax: (902) 491-8951
Email: prevention@wcb.gov.ns.ca
- If you have questions about injury reporting obligations, your workers' claims or return-to-work programs, contact your Case Worker, Regional Manager or our Client Services Department:

Client Services (Mainland)
Toll free: 1-800-870-3331
Halifax local: (902) 491-8999
Fax (injury reporting): (902) 491-8001
Fax (general information): (902) 491-8002
Email: info@wcb.gov.ns.ca

Client Services (Cape Breton)
Toll free in Cape Breton: 1-800-880-0003
Sydney local: (902) 563-2444
Fax: (902) 563-0512
Email: info@wcb.gov.ns.ca

- If you have questions about assessment-related issues or your account, contact your Field Representative or our Assessment Services Department:
5595 Fenwick Street, Suite 109, Halifax
Toll free: 1-877-211-9267
Halifax local: (902) 491-8324
Fax: (902) 491-8326
Email: assess@wcb.gov.ns.ca

- Our main address is:
Workers' Compensation Board
of Nova Scotia
PO Box 1150
5668 South Street
Halifax, NS B3J 2Y2
Toll free: 1-800-870-3331
Halifax local: (902) 491-8999
Fax: (902) 491-8002
Email: info@wcb.gov.ns.ca

Corporate and general information:
www.wcb.ns.ca

Injury prevention social marketing:
www.worksafeforlife.ca

Young worker safety:
silencedoesntworkhere.ca

EMPLOYER INFORMATION GUIDE

WHAT IS THE WCB?

The Workers' Compensation Board (WCB) of Nova Scotia has been there for Nova Scotians since 1917. We promote workplace injury prevention and provide injured workers with financial and healthcare benefits and services to help them safely return to work.

Nova Scotia has among the highest rates of workplace injuries in Canada. Every day too many workers are injured on the job. Once injured, workers stay off the job longer in Nova Scotia than almost anywhere else in the country. This is a big part of the reason employers in Nova Scotia pay among Canada's highest rates for workplace injury insurance.

Reducing the human and economic toll of workplace injuries and helping injured workers make an early and safe return to work is what drives the WCB.

WHAT DOES THE WCB DO?

The WCB provides workplace safety information to all employers and workers in the province as well as workplace injury insurance to 18,000 registered employers and their 300,000 workers. We focus on three key areas:

Injury Prevention and Education – The WCB envisions a Nova Scotia with a strong safety culture, where workplace injury is considered unacceptable. We will accomplish this goal through an annual integrated social marketing plan to raise awareness about workplace injury and by direct work with associations, employers and workers to help them reduce injury in their workplaces.

We offer rate incentives to reward employers who take positive steps to improve safety, while encouraging employers who don't to take immediate action.

Return to Work – The WCB assists injured workers and their employers with safe and timely return to work after a workplace injury. A safe and timely return to work helps reduce the overall human and financial costs of workplace injuries for both workers and employers.

Benefits – The WCB provides income replacement benefits to workers when a workplace injury causes the worker to lose time from work. We also provide a wide range of health care benefits and services to help workers return to work and recover from their workplace injury. For those workers whose injuries are so severe that they are left with a permanent impairment, and possibly an associated loss of earnings, we provide vocational rehabilitation services, health care and long-term benefits, as appropriate.

HOW DOES THE WCB WORK?

The WCB is funded entirely by employers' premiums. In return for providing insurance coverage, employers are protected against law suits resulting from workplace injuries. Workers do not pay for their workers' compensation insurance.

A Board of Directors made up of employer and worker members governs the Workers' Compensation Board. Members of the Board are appointed by the Nova Scotia Minister of Labour and Workforce Development.

TABLE OF CONTENTS

How do I prevent workplace injuries?	1
Costs of workplace injury	1
Change through information	2
Prevention services and programs	2
Priority Employer Program	2
Safety Incentive Program	2
My Account	2
Certificate of Recognition (COR) Program	2
Occupational Health and Safety Research Grant Program	3
Education and awareness	3
Occupational health and safety rights and responsibilities	4
How do I do business with the WCB?	8
Websites	8
My Account online access	8
Signing up	9
Logging in	10
Do I need workplace injury insurance and how do I register?	11
Obtaining coverage	11
Requirements to register	11
Employer - employee relationship	11
Employees working outside Nova Scotia	11
Out-of-province companies doing business in Nova Scotia	12
Special protection coverage	12
Voluntary coverage	12
Self-insured employers	12
Registration process	13
Business status change	13
Confidentiality and representation	13
Employer accounts and business numbers	13
Business numbers	13
Multiple industries, divisions and payrolls	14
Cancelling coverage	14
Permanent cancellation requirements	14
Closing operations	14
Less than three workers	15
Voluntary coverage	15
Temporary discontinuation of operations	15
Business Discontinuation Form	16

How is my company classified and my assessment rate set?	17
Controlling rates through safety	17
Classification and grouping	17
Industry rates (rate-setting model)	18
Costs affecting industry rates	19
Company rates (experience rating)	19
Costs affecting company rates	20
Advice Notice	21
Poor safety performance surcharge	21
Experience Rating Statement	22
Industry levy	23
How do I report my payroll and pay my premiums?	24
Assessment Payment Plan	24
Remittance frequencies, reporting periods and due dates	24
Due dates	26
Statement of Account	26
Account identification	26
Remittance calculation worksheet	26
Remittance voucher	26
Remittance instructions	27
Summary of financial transactions	27
Statement messages	27
Making your remittances	28
Your workers	28
Due date and end of period date	28
Total assessable payroll	28
Total gross payroll for the period	28
Prorated wages	29
Excess wages	30
Labour portion of subcontracts	30
Total assessable payroll	30
Calculating your premium	31
Calculating your payment	31
Counting your employees	31
Completing the Remittance Voucher	31
Submitting your payments	32
Reporting subcontractors	33
Calculating the labour portion of contracts	34
Annual Subcontractor Report	34
Clearance Letters	35

Penalties, interest and liability	36
Late reporting	36
Failure to report and provisional assessment	36
Under reporting	36
Interest	36
Director liability	36
Employer Year-end Update Form	37
Records audit	37
What do I do when an injury occurs and how do I manage return to work?	38
Provide health care	38
Report a workplace injury	41
Completing the WCB Accident Report	42
Manage return to work	46
Providing transitional duties	46
Supporting your worker	46
Developing a return-to-work program	47
Benefits of return-to-work programs	47
Employment Incentives Program	48
On-the-job Training Program	48
Re-employing your injured workers	48
Worker benefits	49
How do I appeal a WCB decision?	50
Where do I get more information?	51
Policy, regulation and legislation	51
Glossary	52
Meredith Principles (Workers' Compensation founding principles)	58

HOW DO I PREVENT WORKPLACE INJURIES?

Nova Scotia has an unacceptably high rate of workplace injury. On average, more than two dozen Nova Scotians are injured every day and someone dies on the job every two weeks.

As an employer, you have a key role to play in making Nova Scotia safer. Every workplace injury is avoidable. Employers have a legal responsibility to create a safe work environment and ensure their employees go home safe.

Senior management sets the tone and expectations of an organization. Without this commitment and support, safety and return-to-work programs will have a limited effect.

Three elements are key to achieving our vision of safe workplaces, and they apply to both workers and employers:

- programs to increase knowledge and awareness of risks, best practices, rights and responsibilities;
- initiatives that support attitude and behaviour change, such as incentives and leadership development; and
- targeted workplace support to increase adoption of best practices.

COSTS OF WORKPLACE INJURY

Nova Scotia employers pay among the highest rates in Canada for workplace injury insurance. This is a direct result of the frequency of workplace injuries and the length of time workers are off the job due to injury in our province. Premiums will not improve unless the number of injuries is reduced and injured workers return to work in a more timely manner.

In addition to the direct costs related to the number of injuries and the duration of claims in your workplace, the indirect costs also can be substantial. The indirect cost of replacing injured

THE TEST

Tangible Cost Analysis

As a direct result of workplace injuries last year, calculate the following amounts for your company:

Total WCB costs	\$ _____
Production delays and interruptions	\$ _____
Retraining	\$ _____
Replacement workers and overtime	\$ _____
Rehiring	\$ _____
Investigation time	\$ _____
Damage to equipment and tools	\$ _____
Cost of product and material damage	\$ _____
Clerical time	\$ _____
Supervisory and other staff time	\$ _____
Total	\$ _____

Intangible Cost Analysis

As a direct result of workplace injuries last year, consider your costs related to the following:

Decline in morale	\$ _____
Work quality	\$ _____
Labour relations	\$ _____
Productivity	\$ _____
Absenteeism	\$ _____
Total	\$ _____
Grand Total	\$ _____

Credit: Wayne Parry, Guide to Health and Safety Management: 20 Proven Programs, *OHS Canada Magazine*, (1991)

workers, modifying work areas, production slowdowns and decreased morale all impact your business. The cost analysis table may help you better understand both the direct (“tangible”) and indirect (“intangible”) costs of workplace injury. See page 1 for “The Test.”

CHANGE THROUGH INFORMATION

The WCB provides programs, resources and guidance to make you aware of the impact of injuries on your company, your workers and their families. We also have a progressive social marketing campaign for the general public and young workers featuring important messages about workplace safety. In addition, we work with external partners, such as industry safety associations, to ensure that we’re reaching all workers and employers with important safety messages.

PREVENTION SERVICES AND PROGRAMS

Successful health and safety systems and programs are those developed by workers and employers together. This ensures that both perspectives are considered and that the best possible solutions are developed. Successful solutions will help you and your workers meet minimum health and safety requirements and, ideally, adhere to best practices in your workplace.

Some of our programs are described below. More information is available at www.wcb.ns.ca (look under the Prevention tab) or by contacting us.

PRIORITY EMPLOYER PROGRAM

The Priority Employer Program provides workplace health and safety support to targeted employers with a history of high costs and high injury rates. It is a multi-level service offered to specific groups of Nova Scotia employers.

SAFETY INCENTIVE PROGRAM

The Safety Incentive Program makes WCB rates more responsive to employers’ safety performance. Companies that improve their safety records by reducing injuries will see their rates go down more quickly, and companies that do not improve face the possibility of a surcharge. Safety incentives give employers greater control over their rates.

MYACCOUNT

MyAccount is an online service that gives you immediate access to your WCB claims, assessment information and statistical trends. This tool will provide you with a better understanding of the costs of your workplace injuries and where to focus your prevention efforts. See page 8 for more details.

CERTIFICATE OF RECOGNITION (COR) PROGRAM

Employers who pass a COR standardized health and safety audit are awarded a Certificate of Recognition. The certificates are issued by an approved third party audit provider and co-signed by the WCB. The COR standards also outline what third party health and safety providers must do to have their workplace safety audit tool recognized by the WCB. Depending on the business you’re in, you may be required to have a Certificate of Recognition. Contact your industry association to find out.

OCCUPATIONAL HEALTH AND SAFETY (OHS) RESEARCH GRANT PROGRAM

The OHS Grant Program supports new and innovative research into, and best practice sharing of, workplace injury prevention strategies and research results. Proposals are evaluated against defined criteria, and applicants may receive up to \$25,000 for a one-year study.

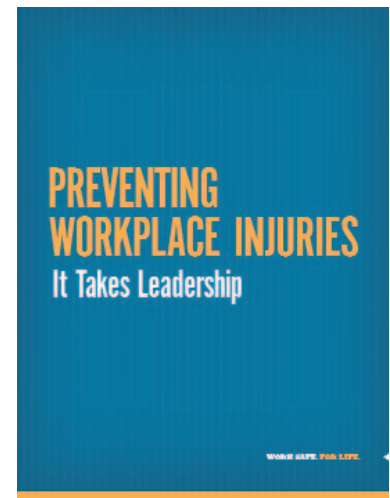
EDUCATION AND AWARENESS

Occupational health and safety resources and reference materials for your workplace are available at www.wcb.ns.ca at no cost.



The WCB's main family of prevention materials is called "Preventing Workplace Injuries." The "Preventing Workplace Injuries: Getting Started" brochure outlines important first steps for employers. It is available electronically and in print format.

Larger employers may also want to consider downloading or requesting the rest of the PWI package, which includes a comprehensive resource binder with a health and safety checklist, and a brochure specifically targeting leaders of larger public and private sector employers. The brochure entitled "Preventing Workplace Injuries: It Takes Leadership" includes high-level, leadership-focused information for managers, CEOs and owners about fostering a safety culture in their workplaces.



A variety of awareness sessions are available to industry and safety associations, employer groups, unions and employee associations, and employers identified through prevention programs.

The WCB also undertakes social marketing aimed at raising awareness of the importance of workplace safety. You may notice our television and radio advertising. There are two campaigns—a campaign aimed at the general working public and one aimed at young workers.

The general campaign is anchored by worksafeforlife.ca. It's an online resource providing high-level information about the importance of injury prevention and return to work, all prevention-related brochures and educational materials. It presents safety information in an engaging, interactive way.

Our young worker website, considersafety.ca, targets younger workers—a difficult-to-reach demographic—with a hard-hitting message about safety.

The Health and Safety 101—hs-101.ca—online learning program for youth is another engaging way to learn about workplace safety, and is considered a primer for the certificate available from passporttosafety.ca, a fee-for-service e-learning tool popular with many education institutions.

Workplace injury prevention posters are also available by request to all employers in Nova Scotia.

OCCUPATIONAL HEALTH AND SAFETY (OHS) RIGHTS AND RESPONSIBILITIES

The basis of Nova Scotia's *Occupational Health and Safety (OHS) Act* is the Internal Responsibility System (IRS). The IRS is founded on the principle that everyone at the workplace shares responsibility for creating and maintaining safe and healthy workplaces and that the greatest degree of responsibility goes to the party with the greatest control in the workplace. As the employer, you have the greatest control and, therefore, the greatest responsibility for maintaining health and safety in your workplace.

Rights

In all workplaces in Nova Scotia, employees have three basic rights. The:

- **right to know** about hazards that affect their health and safety;
- **right to participate** on health and safety committees or to be a health and safety representative; and
- **right to refuse** work that the employee believes will endanger him/herself or another person.

Responsibilities

Both you and your workers have legal responsibilities. Workers must co-operate with your health and safety rules, protect their own health and safety and that of others at the workplace, and cannot be discriminated against for following Nova Scotia's *OHS Act*. Employers—regardless of size and type of work—must obey the *OHS Act*. The *Act* and its Regulations are administered and enforced by Nova Scotia Labour and Workforce Development. If you have questions about your specific responsibilities under the *OHS Act*, take the link from our website (www.wcb.ns.ca, look under Policy & Legislation), or contact Nova Scotia Labour and Workforce Development toll free at 1-800-952-2687.

In general, your responsibilities include:

- **Report a workplace incident or injury.** Employers are obligated under the *Workers' Compensation Act* to report workplace injuries to the WCB. As well, you are obligated under the *Occupational Health and Safety Act* to report certain workplace incidents to Nova Scotia Labour and Workforce Development. To report an injury to the WCB, see "Completing the WCB Accident Report" on page 42. To report an incident to Nova Scotia Labour and Workforce Development, call the OHS Officer for your region, or 1-800-952-2687 toll free.
- **Provide first aid in the workplace.** You must have a qualified First Aid Attendant with valid and appropriate certification available in case of emergency. In addition, you are responsible for the provision of a first aid kit appropriate to the number of workers in your company and in accordance with the Occupational Health and Safety General Regulations.
- **Prevent workplace injury.** The "Preventing Workplace Injury: Getting Started" brochure, discussed briefly in "Education and Awareness," on page 3, outlines and explains employer and worker rights and responsibilities. See what your workplace may need to do to improve your safety culture. Take the online workshop at wcb.ns.ca/pwi.
- **Create a company safety policy.** If your business has five or more workers, a health and safety policy is required by law. A written policy shows your commitment to a safe workplace. It lets employees know that safety is a priority and unsafe acts are not acceptable.

- **Know your responsibilities.** Knowing and accepting your responsibilities for health and safety is key to preventing injury. Some employer/manager responsibilities include:
 - ensuring equipment, materials, and the worksite are safe
 - writing and ensuring safe work policies and procedures are followed
 - providing orientation and safety training
 - consulting with workers about health and safety issues
 - establishing a health and safety committee or representative
 - making everyone accountable for safety performance

Some worker responsibilities are to:

- follow workplace safety policies and procedures
- wear required personal protective equipment
- use machinery, equipment and tools properly and as authorized
- follow safe work procedures
- report all incidents, hazards and injuries before going home

Some industries also have codes of practice. Ask questions about your responsibilities. Call Prevention Services or the OHS Division of Nova Scotia Labour and Workforce Development—both agencies are committed to protecting Nova Scotia’s workers and employers from workplace injury.

- **Establish a health and safety program.** Your program shows how you put your workplace safety policy into action and that you:
 - understand what must be included in the program
 - assign and communicate health and safety responsibilities
 - set measurable standards
 - involve workers in program development
 - have tools for identifying, assessing and controlling hazards
 - establish a procedure for regular safety inspections and incident/injury investigation
 - show required orientation and safety training
 - set a way to measure program success and ongoing improvements.

If your business has 20 or more workers, a health and safety program is required by law.

- **Create a joint occupational health and safety committee or representative.** Committees are forums where workers and employers focus together on improving workplace safety. Committee activities commonly include:
 - helping to develop and implement health and safety programs
 - helping to promote safety awareness in the workplace
 - reviewing worker complaints or suggestions about workplace safety
 - participating in workplace inspections and investigations
 - monitoring effectiveness of safety programs
 - providing clear minutes of meetings, and highlighting and communicating action items.

An occupational health and safety committee is required by law at any workplace where you employ 20 or more workers. Smaller businesses do not require a committee, but must have a safety representative, if they employ five or more workers.

- **Control hazards.** Businesses committed to safety do everything possible to ensure the safety of workers and the jobsite by identifying, controlling and eliminating workplace hazards. It's important while identifying hazards that employers and workers consider actual hazards, near misses and possible hazards where the potential for injury lies. Hazard identification approaches are a required part of a health and safety program, and include:
 - workplace inspections
 - incident and injury investigations (see “Learn from experience” below)
 - job hazard analysis
 - process for hazard reporting
 - clear communication of workplace hazards
 - methods for monitoring and following up on controls.

- **Learn from experience.** Sometimes, even when employers and workers have done their best to put prevention measures in place, workplace injuries or hazardous events happen. Investigating and learning the true cause of an incident leads to prevention, not blame. In preparing a process for workplace investigations, it is important to understand:
 - effective interviewing skills and process; train managers and workers who will be involved in investigations
 - the importance of having an investigation tool kit
 - how to secure and preserve the scene of a serious incident or injury
 - your legal responsibilities for emergency response and reporting to the OHS Division of Nova Scotia Labour and Workforce Development and to the WCB
 - other investigative agencies that should be involved
 - particulars of the incident/injury, including what occurred before, during and after the incident; and to record the timing, sequence, location and direction of actions and events
 - resist making assumptions and entertain all possible causes
 - remember to separate fact from opinion
 - results will show the prevention measures needed
 - effective investigation means fact-finding, not fault-finding.

- **Leadership and training.** Leaders set vision and direction, work collaboratively, assign resources, provide motivation, and coach and train workers so they have the knowledge and tools needed to perform jobs safely. Safety champions can be found throughout an organization, but workplace commitment starts with the employer. Below is a list of ways you can show safety leadership:
 - partner with workers to set a shared safety vision and direction
 - commit resources that are sufficient and sustainable
 - talk about safety every day and tie it to every business function
 - write workplace safety rules and clearly communicate them
 - keep consistent and accurate records, including worker training and certificates; reports from inspections, investigations or audits; maintenance logs, first aid and incident reports; minutes from health and safety committee meetings and any other safety-related correspondence
 - hold everyone (including yourself!) accountable for safety responsibilities
 - find out what training is legally required and ensure workers and managers complete all general (ie. WHMIS, first aid) and specific (ie. fall protection, confined space) health and safety courses needed for the safe completion of duties; ensure that training is regularly reviewed with an appropriate instructor.

For safety requirements specific to your business, be sure to consult the Occupational Health and Safety General Regulations for a broad range of activities relating to workplace health and safety. Look under “Policy & Legislation” at www.wcb.ns.ca.

- **Establish a return-to-work program.** Workplace injuries are costly. And, while preventing injury is the goal, having an effective return-to-work program can reduce the human and financial toll when an injury occurs. The key to a successful return-to-work program is a strong partnership among workers, the employer, health care providers and us. As you move forward with your return-to-work program, keep in mind these key steps to success:
 - customize your return-to-work program to suit the needs of your workers and your organization;
 - involve your workers in the process;
 - organize a return-to-work committee and/or select someone to act as the return-to-work co-ordinator for your workplace;
 - write a return-to-work policy and program guide; and
 - create and distribute to your employees a return-to-work information package.

For more information, see “Manage Return to Work” on page 46.

HOW DO I DO BUSINESS WITH THE WCB?

In addition to conducting business with us in person, by telephone and by email—see contact information on the inside front cover—you also can do business with us online.

IMPORTANT WEBSITES

Our main website (www.wcb.ns.ca) is updated frequently and includes general information about safety, your workplace injury insurance and recent news and events. Our site also includes links to other excellent sources of information, such as:

- worksafeforlife.ca (Prevention tools such as customizable posters and general awareness information)
- silencedoesntworkhere.ca (designed specifically for young workers);
- www.gov.ns.ca/lwd/healthandsafety (OHS Division, Nova Scotia Labour and Workforce Development);
- www.canoshweb.org (Canada's National Occupational Health and Safety website);
- www.ccohs.ca (Canadian Centre for Occupational Health and Safety); and
- www.hrsdc.gc.ca/en/home.shtml (Human Resources and Skills Development Canada).

The Nova Scotia Business Registry (NSBR) website allows you to start the WCB registration process online and gives you access to Clearance Letters 24/7. WCB services accessed through the NSBR are free – all you need is your Business Number. Check out www.nsbr.ca.

MYACCOUNT

You can manage your workplace injury insurance online.

MyAccount is a valuable resource providing all the information you need to manage your WCB account and take a closer look at workplace health and safety. With more information at hand, you will be in a better position to put the right programs and services in place to reduce the human and financial cost of workplace injury.

Features include:

- **Clearance Letters for your own company or subcontractors** – View and/or print a Clearance Letter for your company or for a subcontractor. To use this option, you must have your subcontractor's Business Number at hand.
- **The ability to create and maintain subcontractor lists** – Create a list of subcontractors for which you have obtained Clearance Letters. The list makes it faster and easier to renew Clearance Letters and, for your convenience, we can review your list and send you a monthly electronic notification when the status of a company has changed.

- **Experience Rating Statements** – Display and/or print this statement. Currently, you receive this statement by mail early in the fall each year. Now you will have access to it on a moment's notice.
- **Review account information** – Display and/or print a copy of your Statement of Account. Again, quick access to view your payment details and injury cost information.
- **Up-to-the-minute transactions** – View transactions that have been processed since your last Statement of Account.

You can also access your experience rating history, calculate your rate and compare it to your industry rate, view your workers' claim information, and compare your overall claim statistics to that of your industry group. At a glance, MyAccount lets you see how injury prevention can impact your bottom line.

SIGNING UP

MyAccount is free, but you must sign up to access it. MyAccount works best with Windows XP, Internet Explorer 6.0 and requires Adobe Reader 6.

MyAccount was built to be user friendly and is designed to work like other online services, such as online banking. That said, no matter where you are in the process, if you encounter a problem or don't know where to find something, click HELP at the bottom of the page or contact us by telephone (1-877-211-9267) or email (assess@wcb.gov.ns.ca).

MyAccount:
Why call when
you can click?

When you sign up for MyAccount, four security levels allow you to designate who in your company can see particular types of information:

- **Employer Administrators** can access all functions and have the ability to create, modify and delete other users on your account.
- **Full Access Users** can use all functions of MyAccount but they don't have the ability to create, modify and delete other users.
- **Assessment Only Users** can access primarily assessment-related information, such as your company's rates, payroll and experience rating information.
- **Claims Only Users** can access information that assists with return-to-work and claims management.

Follow these steps to sign up for MyAccount:

1. Go to www.wcb.ns.ca and click on MYACCOUNT. This will take you to the MyAccount login page. On the right-hand side of the page, click on the link that says NOT YET REGISTERED FOR MYACCOUNT? The page that appears describes MyAccount and defines the role of an Employer Administrator. You will then be asked to left click on the NEXT button or the CANCEL button if you wish to end the sign-up session.
2. When you have clicked on the NEXT button, enter the Business Number of the account you wish to sign up and provide the information requested, which you will find on your Statement of Account. Remember to use the most recent statement; this is a security feature.

3. Left click on the **ADD ACCOUNT** button if you have additional accounts to sign up, and go through the same process. If you do not have or want additional accounts signed up, left click on **NEXT** to proceed.
4. Provide the information requested to obtain your **USERNAME** and **PASSWORD**. You must provide all the information identified with an asterisk (*), including a question and answer that will identify you and allow you to change your password at a later date. Keep this in a safe place. In this step, you will also be required to review and accept the legal and privacy policies. Review them by left clicking and accept them by clicking in the box at the bottom of the page. Click **NEXT**.
5. This page explains that you will receive a confirmation e-mail and follow-up letter to the employer (this may or may not be you). The letter confirms for the employer the name of the Employer Administrator for the accounts identified.
6. Click **YES** to continue or **NO** to cancel the sign-up process. If you click yes, sign up is completed and you are now looking at the confirmation page. You will receive a verification e-mail at the address provided, and you must click on the link contained in the e-mail to complete the registration verification. Then click on the **GO TO LOGIN PAGE** button and enter your user name and password.
7. If you are the Employer Administrator and you are the person signing up, be sure to respond to the verification e-mail (noted in step 6). You will not be successful at logging in if you have not responded to the verification e-mail. That done, you may use MyAccount and, if required, set up other users on any of your accounts.

LOGGING IN

After you've signed up and responded to the verification e-mail, you may log in and conduct business. Follow these easy steps to log in:

1. Go to www.wcb.ns.ca and click **MYACCOUNT**.
2. Enter your user name and password and click **LOGIN**.
3. Select the account you wish to access from the drop-down menu that appears if you are registered for more than one account. Otherwise, your single account information will automatically appear.
4. If you require other information, or want to do other business, pick an option and proceed as indicated.

DO I NEED WORKPLACE INJURY INSURANCE AND HOW DO I REGISTER?

OBTAINING COVERAGE

REQUIREMENTS TO REGISTER

Most businesses are required to have workers' compensation insurance. A business in a mandatory industry must register with us within 10 days of becoming an 'employer.' If the company does not have at least three workers when the business is started, coverage is required as soon as the third person is hired. See the definitions of 'employer' and 'worker' in the glossary.

Registration for some businesses is not required either because the industry in which the business is engaged is not mandatory or because the business has fewer than three workers. Voluntary coverage is available for these employers.

EMPLOYER — EMPLOYEE RELATIONSHIP

Employers must determine who are considered their employees and who are not. This is important because you are not permitted to reduce your employees' remuneration to pay for their workers' compensation coverage. Also, your employees cannot register for workers' compensation coverage for themselves.

If you are not sure who is an employee and who is self-employed, please contact us directly, or read the Canada Revenue Agency (CRA) publication called "RC4110 Employee or Self-employed?" We use CRA's guidelines to determine the nature of an employee's relationship with an employer.

EMPLOYEES WORKING OUTSIDE NOVA SCOTIA

Occasionally, an employee may be required to work outside Nova Scotia. In this case, the employer must confirm with the workers' compensation board equivalent in the area where the employee will be working whether coverage is required with that organization.

If you are not required to register with a workers' compensation board equivalent outside Nova Scotia, upon request, we may extend coverage to your workers doing business outside Nova Scotia. If you need more information about a particular situation, please contact Assessment Services at 1-877-211-9267 toll free.

OUT-OF-PROVINCE COMPANIES DOING BUSINESS IN NOVA SCOTIA

Employers from outside Nova Scotia are required to register with us, if they operate in a mandatory industry and have three or more workers doing business in Nova Scotia for more than five days (cumulative). If you are unsure whether coverage is required, please contact Assessment Services at 1-877-211-9267 toll free.

SPECIAL PROTECTION COVERAGE

Proprietors and partners are not required to have workplace injury insurance. Similarly, family members of an employer living in the employer's household are not required to have coverage. For these workers, special protection coverage is available.

If you would like to purchase special protection, you must select the desired amount of coverage from a minimum of \$10,200 per year up to the maximum assessable earnings figure confirmed by us at the beginning of each year. Choose an amount that closely reflects your actual gross earnings because, in the event of an injury, the benefits paid are based on the lesser of actual wages earned or the amount of special protection purchased.

Special protection coverage is renewable every year and effective when both the application and full payment are received by us. Payments for special protection accounts must be made payable to "The Workers' Compensation Board of Nova Scotia" and sent to us directly.

Special protection is prorated quarterly. Therefore, if you wish to cancel coverage prior to the end of the year, your coverage is in place to the end of the quarter in which we receive written notification. You will receive a refund for any remaining quarters.

If you choose to purchase special protection for yourself, you must also provide coverage for your workers.

VOLUNTARY COVERAGE

Voluntary coverage is available for most employers who are not required to register with us. Once registered, employers have the same rights and responsibilities as those for whom registration is mandatory. If you would like to purchase voluntary coverage, please complete the Employer Registration Form found at www.wcb.ns.ca (under Forms), or contact Assessment Services at 1-877-211-9267 toll free for a copy.

SELF-INSURED EMPLOYERS

Self-insured employers are federal and provincial governments that assume their own risk for workplace injuries. As with all claims, when government employees are injured on the job, we pay their injury costs. However, what sets governments apart from non-government employers is that government employers reimburse us for all their injury costs and also pay an administration fee. Because their costs are reimbursed, they do not affect the total cost for administration of the workers' compensation system.

REGISTRATION PROCESS

If you are required to register with us, or you would like to purchase special protection or voluntary coverage, you must complete an Employer Registration Form. If you choose to purchase special protection, you must submit full payment with the form.

- Download the Employer Registration Form from www.wcb.ns.ca (look under Forms); or
- Visit the Nova Scotia Business Registry (www.nsbr.ca) to begin the registration process online. This registration method is not available if you are purchasing special protection; or
- Contact our Assessment Services Department directly at 1-877-211-9267 toll free; or
- Visit our Assessment Services offices. Business hours are between 8:00am and 4:30pm, Monday to Friday.

BUSINESS STATUS CHANGE

If your company changes its business status (structure), you must notify us immediately. In certain circumstances, your company may be considered a new employer. The following are some examples of changes to business status:

- You are the sole proprietor of your business, and you decide to incorporate;
- You have a partnership and you purchase your partner's shares, making you a sole proprietor; or
- You and your partners own a business, and the group decides to incorporate.

If you are unsure whether or not your company's status has changed, contact Assessment Services at 1-877-211-9267 toll free.

CONFIDENTIALITY/REPRESENTATION

We will not disclose confidential information about your business to unauthorized persons. If you have a representative working on your behalf, you must authorize us to release your business information to them. In this case, you must provide us with written authorization confirming the name of the representative and the information to be released.

EMPLOYER ACCOUNTS AND BUSINESS NUMBERS

When you registered with us, we opened at least one account for your company; some employers will require more than one account. Each account is identified by a Business Number, which is unique to each employer.

BUSINESS NUMBERS

The Business Number (BN) is used to identify your business and make it possible for the Canada Revenue Agency (CRA) to process your WCB payroll information and payments. Please use your WCB BN on all correspondence with us and on all WCB remittances made to the CRA.

If your business was registered with the CRA before registering with us, you already have a BN. Your WCB BN includes the same first nine digits (business identifier) used by the CRA, but for WCB accounts, your WCB BN will include the two letters (NW) to identify a WCB of Nova Scotia account (program identifier), and an additional four-digit number to identify your specific WCB account (account identifier).

MULTIPLE INDUSTRIES, DIVISIONS AND PAYROLLS

Most employers will have only one 15-digit WCB BN because they have only one WCB account. However, some employers may require more than one account for payroll reporting efficiency. This may be the case when you have workers engaged in separate divisions within your company. Also, if you keep separate payrolls for your administrative and field staff, or if you hire (sub)contractors or have special protection, you may need more than one account.

Please contact us:

- if you would like to set up additional accounts; or
- if you now report more than one business under the same WCB BN and have not already notified us.

CANCELLING COVERAGE

PERMANENT CANCELLATION REQUIREMENTS

Most employers operate in mandatory industries and have more than two workers. For them, workers' compensation coverage is required and cannot be cancelled arbitrarily.

You may cancel your workers' compensation coverage **permanently** if:

- Your operations are closing permanently or your business has been sold;
- Your workforce drops below three; or
- You have voluntary coverage.

You may cancel your workers' compensation coverage **temporarily** if:

- Your business is of a seasonal nature or ceases to operate temporarily.

If you fall into one or more of these categories and you wish to cancel your coverage, you may use the Business Discontinuation Form, or notify us in writing with the details. You must ensure that all assessable payroll has been reported and that any assessment up to the date the account is closed is paid, including all penalties and interest owing. It is your responsibility to inform your workers that they are no longer covered.

CLOSING OPERATIONS

If your business is closing permanently, you will be required to either complete a Business Discontinuation Form or provide written notification to us with the details. In addition, you must report all assessable payroll and pay all premiums owed, including any penalties and interest, up to the date of closing. A copy of the Business Discontinuation Form is available at www.wcb.ns.ca (look under Forms), or by contacting Assessment Services at 1-877-211-9267 toll free.

If your business stops operating in the middle of a reporting period, you are still required to complete your Remittance Voucher for that period and forward it to the Canada Revenue Agency on or before your usual due date. You are responsible for any assessment up to the date your business closed, including any penalties and interest.

If you have sold your business, you must provide us with details about the sale (i.e., the purchaser's name, address, telephone and fax numbers).

LESS THAN THREE WORKERS

If you are operating in a mandatory industry but have reduced the number of your workers to less than three, you may cancel coverage if there is a clear expectation that future operations will involve fewer than three workers for at least 12 continuous months. You must provide us with written notification.

Accounts will not be opened and closed throughout the year simply because the number of workers fluctuates between two and three. If there is any uncertainty, your historical payroll information will be reviewed to determine coverage status and whether cancellation is appropriate. If it is apparent you will have less than three workers for at least 12 continuous months, coverage may be cancelled. In addition, you must report all assessable payroll up to the date you notified us that coverage was no longer required. You are responsible for any assessment up to this date, including any penalties and interest, and must provide notification to your workers that coverage is no longer in place.

VOLUNTARY COVERAGE

Voluntary coverage is coverage purchased by employers who are not required by law to have workers' compensation insurance. Voluntary coverage may be cancelled by notifying us in writing. Coverage is in effect until the date we receive your notification. If you wish to cancel your coverage, you are required to report all assessable payroll up to the date written cancellation notification is received by us. You are responsible for any assessment up to this date, including penalties and interest, and must provide notification to your workers that coverage is no longer in place.

TEMPORARY DISCONTINUATION OF OPERATIONS

There may be times when your business ceases operating temporarily, or because of its seasonal nature, it does not operate for certain periods during the year. You are still required to make your remittances by your scheduled due dates. Failure to report by the scheduled due date, even if there is no assessable payroll during a period, will result in penalties. Therefore, if you know you will have no assessable payroll to report for certain periods, you may find it convenient to complete a Business Discontinuation Form rather than continue to submit Remittance Vouchers for these periods. Alternatively, you may find it convenient to use TeleReply (1-800-959-2256) to notify us of the specific periods during which you will not be operating. This will remove the requirement for you to submit a Remittance Voucher for these periods.

The Business Discontinuation Form notifies us that you will not be operating for a specified time period. If your business stops operating in the middle of a reporting period, you are still required to complete a Remittance Voucher for that reporting period and forward it to the Canada Revenue Agency on or before your usual due date.

IMPORTANT:

- If you have not started operating by the date indicated on your Business Discontinuation Form, or through TeleReply (1-800-959-2256), you are still required to complete and return your Remittance Voucher for the period by the due date. However, you will indicate a zero payroll figure on the Remittance Voucher.
- If you know that you will not resume operations by the date expected, please contact us to extend your discontinuation period. Failure to notify us may result in penalties.
- If you start operating sooner than indicated, you are required to begin making remittances on your usual reporting cycle immediately after start up.
- If you do not notify us that you have ceased operating temporarily, and you have not filed a Remittance Voucher for the reporting period, or contacted TeleReply (1-800-959-2256), you will be charged a penalty for failure to report. You will also be charged a provisional assessment for the reporting period and interest.


You must ensure that the closing date and the date on which you expect to begin operating again are noted on the Business Discontinuation Form or entered during the TeleReply (1-800-959-2256) process. Both dates must be provided. If you are not sure of the specific date operations are expected to resume, we will be unable to process your temporary discontinuation request. In this case, you will continue to receive statements and be expected to continue making your remittances.

When the date you expect to resume operating arrives, you will be notified in writing and will receive remittance vouchers. You will then be expected to begin making your remittances on your usual reporting cycle.

During a temporary closure you will continue to receive Statements of Account if there is activity or an outstanding balance on your account. Any outstanding balances must be paid by the usual due date.

BUSINESS DISCONTINUATION FORM

The Business Discontinuation Form is used to notify us that your business is closing permanently, will not be operating for a specified period of time, or being sold. It may also be used to cancel coverage. A copy of the form can be found at www.wcb.ns.ca (under Forms), or by contacting Assessment Services directly at 1-877-211-9267 toll free.



**WORKERS'
COMPENSATION
BOARD OF NOVA SCOTIA**

Business Discontinuation Form

Assessment Services Department, 5595 Barrack Street, Suite 100, PO Box 1150, Halifax, NS B3J 2Y7
Tel: (902) 491-8324 Toll free in Canada: 1-877-211-9267 Fax: (902) 491-8326 E-mail: enquiry@wcb.ns.ca

Please use this form to notify us of any changes in your business status. If you have more than one WCB account, you must complete a separate form for each Business Number. Please return the fully completed form by fax or mail at the number and address noted above. If you have any questions, please contact us.

Business Name (Please print) _____ Business Number: (3 digit) _____ NW _____ (4 digit) _____

Please check the appropriate box below and provide all required information for that section. Do not use this form if you wish to cancel your Special Protection account. In this case, please contact us directly.

☐ **My business is closing temporarily.** To process this request, you must enter the exact close and start dates. If you are unsure of the exact date your business will start operating again, please enter the date that you expect operations to begin. If you realize later that your business will not start on this date, you must notify us immediately with a new expected start date.

The date operations will close is: Day _____ Month _____ Year _____

The date operations will start again is: Day _____ Month _____ Year _____

☐ **My business is closing permanently.**

The closing date is: Day _____ Month _____ Year _____

☐ **My business was sold, or is in the process of being sold.**

The date of sale occurs: Day _____ Month _____ Year _____

Purchaser's Name: _____

Address: _____

Telephone: _____ Fax: _____

☐ **I wish to cancel my coverage because the number of workers in my business will be less than 3 for at least 12 consecutive months.** I understand coverage is in effect up to the date the WCB receives this notification, and I must report all assessable payroll up to this date.

Current number of active officers: _____

Current number of employees: _____

☐ **I wish to cancel my voluntary coverage.** I understand coverage is in effect up to the date the WCB receives this notification, and I must report all assessable payroll up to the date.

Name (Please print) _____

Signature _____

Position _____

Telephone _____

Date _____

Rev. 12/2012

HOW IS MY COMPANY CLASSIFIED AND MY ASSESSMENT RATE SET?

The funds needed to cover the cost of WCB benefits and services are collected from registered employers in the form of premiums. Premiums are calculated by applying an assessment rate to a firm's assessable payroll.

Our rate-setting model focuses on how industries share the costs of the system based on the concept of collective liability. In theory, all assessed employers are liable for all injuries. Given that different industries experience different levels of injury costs, it is necessary to set assessment rates at the industry level.

Industries experiencing lower than average costs pay lower than average premiums (based on lower than average assessment rates) and industries experiencing higher than average costs pay higher than average premiums (based on higher than average assessment rates). In theory, if an industry is responsible for 3% of all injury costs, it will be responsible for paying 3% of total premiums.

When you registered with us, your company was classified according to industry and then assigned an industry assessment rate.

The industry rate is set annually using our rate-setting model. Your individual firm rate is then modified to reflect your individual injury experience through a process called Experience Rating.

For a complete list of industry types, Standard Industrial Classification codes and WCB assessment rates, see our Rate Book at www.wcb.ns.ca (under Brochures & Publications); or contact Assessment Services at 1-877-211-9267 toll free.

CONTROLLING RATES THROUGH SAFETY

Employers have the ability to impact their rates. We have incentives to reward employers who reduce costs, and we have services to assist employers with reducing high injury rates and costs. By embracing safety, Nova Scotia employers can reduce their rates more quickly. Those who do not, will see their rates increase and may receive a surcharge. See page 21 for more details.

CLASSIFICATION AND GROUPING

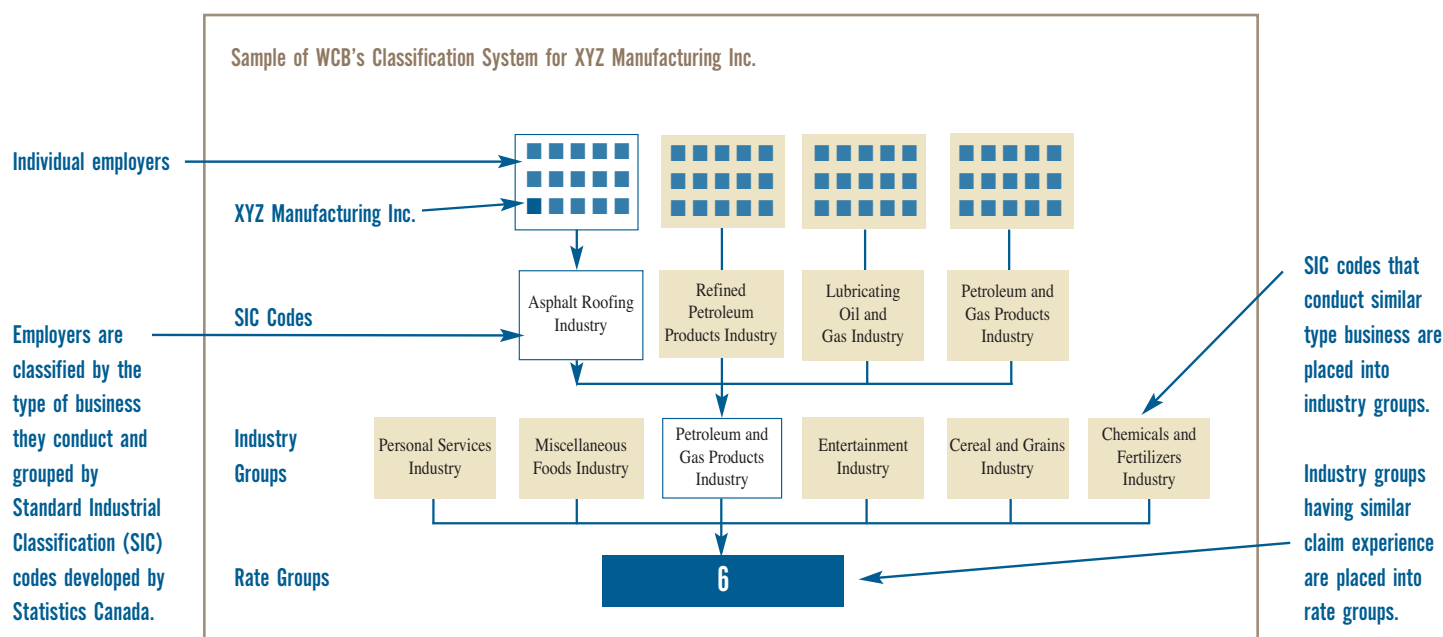
All registered employers are classified by the type of business they operate. The WCB uses Statistics Canada's Standard Industrial Classification (SIC) codes for this purpose. Using SIC codes as a standard ensures that businesses operating in similar industries pay similar assessment rates.

One of the goals of our rate-setting model is to set rates which are sufficiently stable. If rates are set for a group that is very small, the rates would be too volatile from one year to the next.

The number of employers who fall into most SIC codes/groups is too small to set a rate based on their experience alone. As a result, we create industry groups which contain SIC codes covering employers with similar types of activity and similar levels of risk.

Even at the industry group level, most groups remain too small. To create larger groups, the WCB takes two or more industry groups having similar claim-cost experience and places them together in a single rate group. Because they have similar cost experience, it makes sense that they would have the same industry rate.

Our industry and rate groups are monitored and adjusted, as necessary, on an annual basis. For example, if one of the industry groups within a rate group improves relative to the rest of the rate group, we would move it to a rate group with a lower cost experience.



INDUSTRY RATES (RATE-SETTING MODEL)

When all employers are classified appropriately, costs and payroll are analyzed to determine an appropriate industry assessment rate. Rates are set by first comparing the five-year ratio of costs to payroll for the industry to the ratio for all industries.

Each rate group is assigned a baseline rate based on the claim-cost experience for the entire rate group. For the purpose of setting baseline rates, claim-cost experience is measured as the ratio of the cost of new injuries over a five-year period to the payroll for the same period. The claim-cost experience ratio of the rate group, compared to the overall claim-cost experience ratio of all assessed industries, drives the baseline rate. For example, if a rate group had a claim-cost experience ratio four times greater than the overall claim-cost experience ratio for all assessed industries, the baseline rate is four times the average rate.

As stated earlier, in theory, if the rate group is responsible for 3% of all injury costs, it is responsible for paying 3% of total premiums. The rate is adjusted each year based on the group's new (running) five-year claim-cost experience.

You will receive confirmation of your assessment rate for the next year by September 1st of the current year. Assessment rates by SIC code are available in our assessment Rate Book, which is published annually. An electronic copy is available on our website at www.wcb.ns.ca (under Brochures & Publications) or contact Assessment Services at 1-877-211-9267 toll free.

COSTS AFFECTING INDUSTRY RATES

Not all injury costs are charged against an industry's claim-cost experience. Therefore, not all costs influence rate setting for that industry.

When calculating an industry rate, we look at payments for new injuries occurring during the most recent five full calendar years. For example, to determine an industry's rate for 2006, we considered only those costs paid on injuries that occurred during the period 2000 to the end of 2004. Injuries that occurred prior to 2000 do not influence rate setting for 2006.

As well, the costs of an injury included in an industry's experience is limited to an amount equal to two times the maximum assessable earnings in the year of the injury. This means any injury costs that are greater than double the maximum do not affect the industry's experience and rate.

Also, we have a standard amount that is charged for fatalities. The standard is set at two times the maximum assessable earnings in the year of the injury.

Costs for long-term industrial diseases are excluded from the rate-setting calculation as these are not true "new" claims. Rather, these are injuries that arose out of exposure to workplace conditions that may have occurred in the past.

New for 2006, we apply "weighting factors," which vary by year of injury, to the costs before calculating industry rates. The weights are higher for more recent injuries and lower for older injuries. By using these weights, we make industry rates more responsive. If an industry's recent experience is good, the rate will come down faster than without the weighting factors, and if the recent experience is poor, the rate will go up faster.

COMPANY RATES (EXPERIENCE RATING)

After rates are set at the industry level, your individual rate is modified to reflect your own injury experience relative to other employers in your rate group. This process is referred to as "Experience Rating."

Experience Rating shifts a relative amount of the financial responsibility to companies with worse-than-average experience and rewards companies with better-than-average experience. Your rate will decrease (merit) if your experience is lower than the average claim-cost experience, and will increase (demerit) if you have above average claim-cost experience. In this way, Experience Rating provides a more equitable system and an incentive for improved safety. In theory, Experience Rating is intended to be a revenue-neutral program.

The ratio of new injury costs to payroll over a three-year period is the measure of risk used to apply Experience Rating to individual employer rates. The size of the merit or demerit resulting from Experience Rating is determined by a comparison of your cost ratio with the average cost ratio in your rate group.

The maximum merit or demerit you are eligible to receive is based on size, as measured by assessment premiums. A large company participating fully in the Experience Rating process may receive up to a 30% merit or 60% demerit. Smaller employers may receive up to a 10% merit or 20% demerit.

New firms do not fully participate in Experience Rating until they have built up sufficient claim-cost experience. After one year's claim-cost experience, the firm participates in the program at 25%; after two years, at 50%; and after three years, the firm participates fully in the Experience Rating program.

COSTS AFFECTING COMPANY RATES

When setting a company's Experience Rating, we look at payments for new injuries that occurred during the most recent three full calendar years. Using only recent injury costs ensures that the system is dynamic and that your Experience Rating adjustment reflects your company's current injury experience. Costs from injuries long past do not continue to affect your current rate.

Not all costs are included in Experience Rating. For example, for 2006, a company's experience is affected by costs associated with new injuries that occurred between 2002 and the end of 2004. For Experience Rating, a standard amount is charged for fatalities, which is set at two times the injury year's assessable maximum. In addition, at the employer level, costs are capped at two times the maximum assessable earnings in the injury year. Also excluded from consideration are costs for long-term industrial disease claims.

New for 2006, as with industry rates, we apply "weighting factors," which vary by year of injury, to the costs. The weights are higher for more recent injuries and lower for older injuries, making the calculation more responsive to recent experience.

Experience Rating provides an incentive for you to create a safer working environment. Implementing return-to-work programs and safety committees is one way to do this. Involving your workers will improve buy in. Improved safety results in fewer lost work hours, which means happier and healthier workers and lower claim-cost experience. Working together, employers and workers who reduce injury costs can have a direct influence on assessment rates.

PREMIUM	MAXIMUM MERIT	MAXIMUM DEMERIT	PARTICIPATION LEVEL
\$5,000 or less	10.00%	20.00%	33.33%
\$5,200	10.30%	20.60%	34.33%
\$5,400	10.60%	21.20%	35.33%
\$5,600	10.90%	21.80%	36.33%
\$5,800	11.20%	22.40%	37.33%
\$6,000	11.50%	23.00%	38.33%
For each \$200 increase in premium, add 0.30% to determine the appropriate merit; add 0.60% to determine the demerit; and add 1% to the participation level for experience rating purposes.			
\$18,000	29.50%	59.00%	98.33%
\$18,200	29.80%	59.60%	99.33%
\$18,400	30.00%	60.00%	100.00%

If you would like details about the injury costs associated with your workers' claims, you may request an Advice Notice. This report is available monthly, quarterly or annually.

POOR SAFETY PERFORMANCE SURCHARGE

A few employers consistently receive the maximum possible demerit through experience rating, because they don't embrace safety sufficiently to bring injuries and costs under control. We encourage employers to embrace safety, including safe and timely return to work, by levying a "poor safety performance" surcharge on top of their maximum demerit.

We are targeting employers now who are consistent poor performers, and levying a surcharge. These employers receive warning notices prior to being surcharged, to encourage them to improve their safety performance and to bring down their costs.

The surcharge applies to employers whose cost ratio is consistently at least 200% worse than the cost ratio in their rate group over a consecutive number of Experience Rating Statements.

The number of years considered depends on the company size as measured by their Experience Rating participation level:

- four years for large employers (100% participation);
- five years for medium employers (50-99% participation); or
- 6 years for small employers (less than 50% participation).

In some cases, surcharges will be significant. The surcharge is cumulative in nature and will be applied up to a maximum of 20% of the industry rate each year. This means, it will increase up to 40% the second year, up to 60% the third year and so on, if the employer's safety record does not improve to levels comparable with their peers.

**WORKERS'
COMPENSATION
BOARD**

404 North Street
Post Office Box 1150
Halifax, Nova Scotia
B3V 2V2

Medical Arts Building
350 Kings Road, Suite 117
Sydney, Nova Scotia
B1P 1A9

REPORT NOTICER

BN 12345 6/85 NW0001

File Number: 123456 000123

Event Date: 1

Event Date: 5/22/2005

EAT SMART TAKE-OFF

EAT SMART TAKE OUT
173 THIRD STREET
HALIFAX, NS B3J 1H2

THIS STATEMENT SHOWS REPORTING ACCIDENT CASE DATA ON BEHALF OF YOUR CLIENT/0000 FOR THE PERIOD OF
DATE: 05/22/2005 TO DATE: 06/08/2005 ON DATE: 06/08/2005 AND SHOWS IN SUMMARY.
Consolidation Code for the period from 05/22/2005 to 06/08/2005

BN	Client Number	Ref Date	Client	Period Covered From	To	Type	Amount
		1/01/05		1/01/05	1/01/05	BNL NWU	.00
123456/NW0001	25 26/0045	20/02/05	DOE, JOHN	17/11/04	17/11/04	WRT/ATH	37.40
	26/0046	28/01/05	DOE, JOHN	1/06/05	1/06/05	WRT/ATH	18.84
	8/0042	22/11/05	FAWN, JANE	15/10/05	15/10/05	WRT/ATH	36.07
	8705137	22/11/05	FAWN, JANE	15/10/05	15/10/05	WRT/ATH	34.88
	8/0042	22/11/05	FAWN, JANE	15/10/05	15/10/05	WRT/ATH	36.73
01st JANUARY 2005	CU	04th DECEMBER 2005					167.77
01st JANUARY 2005	CU	01st JANUARY 2005					.00
01st JANUARY 2005	CU	04th DECEMBER 2005					167.77
S U M M A R Y O F C L A I M							
From: 1/01/2005 To: 4/12/2005							
ANALYSIS	Client #	Employee	CURR	RES/ALD	PERIOD	DBB PTP/DBB	TOTAL
16/11/2004	26/0045	DOE, JOHN	.00	85.24	.00	.00	85.24
15/10/2005	8/0042	FAWN, JANE	.00	81.53	.00	.00	81.53
			.00	167.77	.00	.00	167.77

TOWARDS A HEALTHY, WORKING NOVA SCOTIA

EXAMPLE - SURCHARGE

An employer pays an industry rate of \$5.00 per \$100 of assessable payroll, plus \$3.00 for its own experience rating demerit. In 2008, the employer is 275% worse than the average in their rate group and has been at least 200% worse for a number of years.

- The maximum allowable demerit is $275\% - 200\% = 75\%$ of the industry rate, which is \$3.75.
- The employer's initial demerit is 20% of the industry rate, which is \$1.00.

Assuming that the industry rate remains at \$5.00 and the employer remains at 275% worse than average, their rate would change as follows:

2008	\$5.00 industry + \$3.00 experience rating + \$1.00 surcharge = \$9.00 rate
2009	\$5.00 industry + \$3.00 experience rating + \$2.00 surcharge = \$10.00
2010	\$5.00 industry + \$3.00 experience rating + \$3.00 surcharge = \$11.00
2011	\$5.00 industry + \$3.00 experience rating + \$3.75 surcharge = \$11.75

EXPERIENCE RATING STATEMENT

The Experience Rating Statement has changed for 2006. An illustration and explanation of the form is provided here. The Statement includes valuable information about your company and your rate group. It is sent to employers whose workers had claims that impacted their rate. Review the illustration for clarification. More details about how your rate is set can be obtained by contacting Assessment Services at 1-877-211-9267 toll free to request an Experience Rating Detail Report.


1 The top of the statement shows your company name and address, Business Number (BN) and firm number. Below this, you will find your new rate, including your industry levy, if applicable.

2 Section A shows how your rate was calculated beginning with your basic industry rate and adjusting up or down for your company's own experience rating and poor safety performance surcharge, if applicable. If you work in an industry that collects a levy for safety programming, your levy is also given. Finally, you can see a range of rates, the lowest of which you can reach with improved safety performance.

3 Section B gives your Standard Industrial Classification (SIC) code and industry group.

4 Section C shows your assessable payroll over a three-year period and your injury costs for the same period. These amounts are used to determine your experience rating which is indicated in Section A.

5 Section D gives your cost ratio, resulting merit or demerit, and adjustment. These figures are calculated from the information in Section C.

Workers' Compensation Board of Nova Scotia		Experience Rating Statement for 2006	
		P.O. Box 1100 Halifax, Nova Scotia B3J 2T2 Assessment Services Department: Telephone: 902 491-8304 Toll Free: 877 211-9267 Fax: 902 491-8326 Website: www.wcb.ns.ca	
ABC CONTRACTING LTD. 836 HORSEFEATHER LANE SUNNYVALE NS B3W 1A7		Business No: 99999 9999 NW0001 Firm Number: 999999 99 Date: 31/08/2005	Page 01 of 02
Your 2006 assessment rate: \$3.71 per \$100 assessable payroll			
SECTION A: Your Rate Components			
Basic Industry Rate:	\$1.02		
Experience Rating Merit/Demerit:	-\$0.40	see details in Section D below	
Poor Safety Performance Surcharge:	pending	see attached warning notice	
Levy - NS Construction Safety Association:	+\$0.09		
TOTAL RATE for 2006:	\$3.71	per \$100 assessable payroll	
Note: Your company's workplace injuries and the associated costs determine your Experience Rating adjustment. You can control your rate by eliminating workplace injuries and helping injured workers return to work in a safe and timely manner. Your 2006 rate could have been as low as: \$2.89 or as high as: \$6.60.			
SECTION B: SIC and Industry Group		SECTION C: Cost and Payroll	
To set rates, the WCB classifies employers by the industry in which they operate, and groups industries with similar activities and risk into industry groups. Your Standard Industrial Classification (SIC) Code: 4299 OTHER TRADE WORK N.E.C.		Assessable Payroll 2004 \$940,520 2003 \$510,907 2002 \$680,862 TOTAL \$2,141,298 Cost of New Injuries from 2002 to 2004: \$2,715.45 Please review the detailed list of claims on page 2.	
Your Industry Group for 2006: 4290 MISC. MAINTENANCE AND REPAIRS			
SECTION D: Your Experience Rating Details			
Experience Rating for 2006 is calculated using injury and payroll data from the years 2002 to 2004. The 3 year costs and payroll are determined, and costs are weighted so that more recent experience has more impact on rates. The key measure in determining your Experience Rating adjustment is the "cost ratio", which is your weighted cost divided by your payroll. The lower your cost ratio relative to your rate group, the lower your rate will be.			
Your Cost Ratio is:		33.61% LOWER Than Your Rate Group's Cost Ratio	
Resulting Merit/Demerit:		10.09% MERIT Produces an Experience Rating adjustment of \$0.40	

INDUSTRY LEVY

Each year we collect a levy on behalf of the forestry, trucking, construction and retail gasoline industries in Nova Scotia. The levy monies are used to fund industry-specific safety associations. The levy is calculated as a set percentage of premiums for all employers in the industry. It must be added to your assessment rate and used to determine the amount of your premium.

If you do not operate in one of these industries, you do not pay a levy. If you operate in an industry for which a levy is collected, you cannot opt out of paying the levy. If you would like more information about how the levy is used, please contact your industry safety association.

The levy rate, if payable, is noted in Section A of your Experience Rating Statement. Below is a list of industries for which we collect levies. Contact them for more information about safety programming.

- | | | |
|---|----------------|--|
| • Nova Scotia Construction Safety Association | 1-800-971-3888 | www.nscsa.org |
| • Forestry Safety Society of Nova Scotia | 902-895-1107 | www.fss.ns.ca |
| • Nova Scotia Trucking Safety Association | 1-888-329-9660 | www.nstsa.ca |
| • Retail Gasoline Dealers' Association of Nova Scotia | 902-466-7516 | www.ataatlantic.ca/rgda |

HOW DO I REPORT MY PAYROLL AND PAY MY PREMIUMS?

ASSESSMENT PAYMENT PLAN

The Assessment Payment Plan outlines the process you use to make your remittances (i.e., report your payroll and pay your WCB premiums). It is made possible through a partnership we have with the Canada Revenue Agency (CRA). The Assessment Payment Plan is based on the payroll deductions program of the CRA, and uses many of the rules and processes used in CRA programs. Although we maintain ownership of the Assessment Payment Plan, the involvement of the CRA is significant and vital. The role of the CRA is to accept remittances from employers on our behalf.

REMITTANCE FREQUENCIES, REPORTING PERIODS AND DUE DATES

Making your remittances is a periodic process occurring throughout the year, and in most cases, on the same schedule you would use to report to the CRA. If you do not currently report to the CRA, you are still required to report your WCB remittances through the CRA. In this case, we will provide you with a Business Number.

Currently, there are six remitting frequencies:

- monthly;
- quarterly;
- twice a month (Threshold 1);
- four times a month (Threshold 2);
- bi-weekly payroll (Threshold T2B); and
- semi-monthly payroll (Threshold T2S).

If you have more than one account, each account may require a different reporting frequency. For example, you may have a separate account for (sub)contractors, if you use them. Generally, all (sub)contractor remittances are made quarterly, regardless how often remittances are made for your other accounts. However, you may contact Assessment Services at 1-877-211-9267 toll free to arrange to make (sub)contractor remittances more often, if you prefer. Use the same number to contact us if you would like to set up a new account to align with your CRA reporting.

If you have special protection coverage, you do not participate in the Assessment Payment Plan. However, you are still required to have a Business Number and pay a premium for your coverage. In this case, the premium is paid at the time your application is submitted, and it is paid directly to us (not to the CRA).

Upon registration, we confirm your payment frequency and provide details about important dates in the remitting process. They are highlighted again here for your convenience. For more clarification, review the examples.

Important Dates in Your Remitting Process

■ Reporting Period ■ End of Period ■ Due Date

- If you are a **MONTHLY** remitter, your:
 - *Reporting period* is always the 1st day of the month to the last day of the month
 - *End of period* date is always the last day of the month
 - *Due date* is always the 15th day of the next month*
- If you are a **QUARTERLY** remitter, your:
 - *Reporting period* is always the 1st day of the quarter to the last day of the quarter
 - *End of period* date is always the last day of the quarter
 - *Due date* is always the 15th day of the month after the end of the quarter*
- If you are a **THRESHOLD 1 (T1)** remitter, your:
 - First *reporting period* is always the 1st day of the month to the 15th day of the month
 - *End of period* date is always the 15th day of the month
 - *Due date* is always the 25th day of the same month*
 - Second *reporting period* is always the 16th day of the month to the last day of the month
 - *End of period* date is always the last day of the month
 - *Due date* is always the 10th day of the next month*
- If you are a **THRESHOLD 2 (T2)** remitter, your:
 - First *reporting period* is always the 1st day of the month to the 7th day of the month
 - *End of period* date is always the 7th day of the month
 - *Due date* is always three business days after the 7th*
 - Second *reporting period* is always the 8th day of the month to the 14th day of the month
 - *End of period* date is always the 14th day of the month
 - *Due date* is always three business days after the 14th*
 - Third *reporting period* is always the 15th day of the month to the 21st day of the month
 - *End of period* date is always the 21st day of the month
 - *Due date* is always three business days after the 21st*
 - Fourth *reporting period* is always the 22nd day of the month to the last day of the month
 - *End of period* date is always the last day of the month
 - *Due date* is always three business days after the end of the month*

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Notes for T2 remitters:

- Threshold 2 remitters make your remittances as noted above.
- Threshold 2B remitters make at least one remittance for either of the first two periods of each month and at least one for either of the last two periods. Your end of period dates are the same as for a T2 remitter. Your remittances are due on or before the third business day after the end of each reporting period in which you have a pay day.
- Threshold 2S remitters make at least two remittances each month. Your end of period dates are the same as for a T2 remitter. Your remittances are due on or before the third business day after the end of each reporting period in which you have a pay day.

- * For all types of remitters, if your due date falls on a Saturday, Sunday, national or Nova Scotia holiday, you must make your remittances by the next business day following your due date.

DUE DATES

Where possible, your remittance due dates have been harmonized with those used by the CRA. Most employers use the same schedule they use to report payroll deductions to the CRA. See above for due dates relevant to your reporting frequency.

Penalties and interest may be charged for late reporting or non-reporting.

STATEMENT OF ACCOUNT

We issue a Statement of Account on the 25th day of each month to all employers with activity on their accounts or having outstanding balances. Please take the time each month to review your statement to ensure that all transactions are accounted for and accurate. Contact Assessment Services at 1-877-211-9267 toll free, immediately, if any of the information is incorrect. Beginning early in 2006, you will be able to view your Statement of Account online via our new tool, MyAccount. See more about MyAccount on page 8. Your statement has six sections providing important information.

1 Account Identification

The information preprinted in this section is used to properly identify your account. If you have more than one account, you will receive a statement for each account on which there is activity.

2 Remittance Calculation Worksheet

The Remittance Calculation Worksheet is provided to assist you in calculating your assessable payroll, premium and payment. You should keep the worksheet for future reference. If you are an accelerated remitter, your Worksheet is located above the Remittance Voucher in your booklet. How to complete the Remittance Calculation Worksheet is explained on page 28 under “Making Your Remittances.”

3 Remittance Voucher

The Remittance Voucher must be completed and sent with your payment to the

WORKERS' COMPENSATION BOARD OF NOVA SCOTIA

STATEMENT OF ACCOUNT

For WCB inquiries:
Telephone: 1-877-211-9267 (Toll Free)
1-902-191-8324 (In Nova Scotia)
Email: assess@wcb.ns.ca
Internet: www.wcb.ns.ca

Business Number: _____ Employer Name: _____
SIC: _____ Account Description: _____

Remittance Calculation Worksheet

This worksheet has been provided to assist you when completing the Remittance Voucher. You should refer to the Employer's Guide for complete details. Round payroll figures to the nearest dollar.

A. Total gross payroll for period	0.0
B. Excess wages (amount above assessable maximum of \$45,100 per person)	0.0
C. Labour portion of subcontractors	0.0
D. Total assessable payroll (A + B + C) (Include on Remittance Voucher)	0.0
E. Assessment rate per \$100.00	X
F. Premium payable for period (D x E / 100)	=
G. Statement of Account balance due	+
H. Total amount payable (F + G) (Include on Remittance Voucher)	=
I. Number of employees (Include on Remittance Voucher)	

Please complete all the boxes on the Remittance Voucher below, and round your total assessable payroll figure to the nearest dollar. Detach here, return Remittance Voucher with your payment and retain Statement of Account for your files.

REMITTANCE VOUCHER

Amount paid: _____

Total assessable payroll (in dollars only): **0.0**

Number of employees in last pay period: _____

End of period: Year: _____ Month: _____ Day: _____

Business number: **50**

Do not use this area

CRA by your due date for each reporting period. It is filled out after you complete the Remittance Calculation Worksheet. Some of the information is preprinted by us.

It is your responsibility to ensure the amount of your payment, your total assessable payroll, the number of employees during the period and the end date for the reporting period have been inserted onto the voucher. How to complete the Remittance Voucher is explained on page 28 under “Making Your Remittances.”

4 Remittance Instructions (not shown)

Brief instructions about how to make your remittances are noted on the back of the Remittance Calculation Worksheet. If you remit more often than monthly, you will receive a booklet containing a year's supply of vouchers before the start of each year. This booklet contains your remittance instructions.


5 Summary of Financial Transactions

Financial transactions for the past month are noted in this section. Details for each transaction are provided. If either the payroll reported or payment amount do not appear on your statement, please contact Assessment Services at 1-877-211-9267 toll free immediately. Use the same number to contact us if the payroll information is incorrect. The transaction amounts are totaled to provide the balance due or credit amount. Overdue balances are also listed and, if a balance has been placed in the judgment process pending a legal proceeding, this amount is also listed.

Remittances made just prior to the date your Statement of Account is issued may not be noted because they are still being processed. They will be reflected on your next statement and, once processed, will be viewable through MyAccount. See page 8 for details.

6 Statement Messages

We use this section to notify you about any issues respecting your account, changes to your insurance coverage and important messages about safety. Please read it carefully.



WORKERS' COMPENSATION BOARD OF NOVA SCOTIA

STATEMENT OF ACCOUNT

For WCB Inquiries:
 Telephone: 1-877-211-9267 (Toll Free)
 1-902-491-8384 (Halifax)
 Email: assess@wcb.gov.ns.ca
 Internet: www.wcb.ns.ca

Statement as of
December 15, 2005

Due Date
January 15, 2006

Business Number
98765 4321 NW0001

SIC
61110

Employer Name
EZ Sales

Account Description
Sales

Summary of Financial Transactions

Date	Description	Payroll	Rate	Amount
NOV 25, 2005	BALANCE FORWARD			17.90
DEC 07, 2005	ACTUAL OCT 01-DEC 31, 2005	6,808-	1.62	110.29-
DEC 07, 2005	ACTUAL OCT 01-DEC 31, 2005	10,212	1.62	165.43
DEC 07, 2005	PAYMENT RECEIVED DEC 05, 2005			.55-
DEC 20, 2005	ACTUAL OCT 01-DEC 31, 2005	10,212-	1.62	165.43-
DEC 20, 2005	ACTUAL OCT 01-DEC 31, 2005	13,616	1.62	220.58
DEC 20, 2005	PAYMENT RECEIVED DEC 19, 2005			.55-
DEC 21, 2005	ACTUAL OCT 01-DEC 31, 2005	13,616-	1.62	220.58-
DEC 21, 2005	ACTUAL OCT 01-DEC 31, 2005	20,192	1.62	327.11
DEC 21, 2005	PAYMENT RECEIVED DEC 19, 2005			179.02-
Statement of Account balance due				54.60

Breakdown of Balance:

Current:	.00
Past Due:	54.60

One or more remittances were not received at the time this statement was printed. If your remittance including payment has been sent please accept our thanks. If not, please give this matter your immediate attention to avoid further interest or penalties.

MAKING YOUR REMITTANCES

Remittances are based on actual payroll and made periodically during the year. There are eight steps involved in making your remittances and each is described below. Please refer to the illustration below and, if you are an accelerated remitter, to the illustration on page 29.

- 1 **Your workers** – A ‘worker’ is any full-time, part-time, or casual worker, including those hired through a Human Resources and Skills Development Canada grant; all owners, officers and directors of an incorporated company, whether active or not, who are carried on the payroll; and all (sub)contractors who work in mandatory industries and who do not have their own coverage in place (as evidenced by a WCB Clearance Letter). When in doubt about who you must provide coverage for, please contact Assessment Services at 1-877-211-9267 toll free.
- 2 **Due date and End of Period date** – If you do not submit your remittances by your due date, you may receive a penalty and be charged interest. **Please ensure that you put the correct end of period date on the Remittance Voucher.** Your due date and end of period date will be different depending on the type of remitter you are. See page 25 for details.
- 3 **Total assessable payroll** – You can use your Remittance Calculation Worksheet (found on your Statement of Account) to calculate your total assessable payroll. If you are an accelerated remitter, your Worksheet is located on the top portion of each Remittance Voucher in your booklet. Follow the steps below to calculate your assessable payroll.

Total Gross Payroll for the Period (Line A)

Begin with your total gross payroll figure for the period. Your total gross payroll must include wages **paid** during the reporting period, rather than wages **earned**. Enter your total gross payroll for the period at Line A on your Remittance Calculation Worksheet. The gross payroll figure is not shown on the Accelerated Remittance Calculation Worksheet, but it must be used to determine your total assessable payroll. If the division in question has been set up for reporting (sub)contractors only, enter zero on Line A.

Remittance Calculation Worksheet	
This worksheet has been provided to assist you when completing the Remittance Voucher. You should refer to the Employer's Guide for complete details. Round payroll figures to the nearest dollar.	
A. Total gross payroll for period	0.0
B. Excess wages (amount above assessable maximum of \$45,100 per person)	.00
C. Labour portion of subcontractors	.00
D. Total assessable payroll (A + B + C) (Include on Remittance Voucher)	.00
E. Assessment rate per \$100.00	X
F. Premium payable for period (D x E / 100)	=
G. Statement of Account balance due	+
H. Total amount payable (F + G) (Include on Remittance Voucher)	=
I. Number of employees (Include on Remittance Voucher)	

Please complete all the boxes on the Remittance Voucher below, and round your total assessable payroll figure to the nearest dollar. Detach here, return Remittance Voucher with your payment and retain Statement of Account for your file.

REMITTANCE VOUCHER	
Amount paid	5
Total assessable payroll (in dollars only)	3 00 6
Number of employees in last pay period	
End of period	2
Business number	50

“Assessable payroll” is defined as all employment earnings that are reported to the Canada Revenue Agency in Box 14 of the T4, less:

- Employer-funded short- and long-term disability benefits;
- Top-up of workers’ compensation benefits;
- Top-up of earnings-loss benefits;
- Top-up of maternity and parental benefits; and
- Equipment allowance of 25% of employment earnings for workers in the logging industry who supply their own chain saws.

The image shows a form titled "Accelerated Remittance Calculation Worksheet" and "REMITTANCE VOUCHER". It includes fields for Business number, Assessable payroll, Assessment rate, Period premium, Start of account balance, and Payment amount. It also has sections for "Amount paid", "Total assessable payroll", "End of period", and "Business Number". Numbered callouts 1 through 6 point to specific fields: 1 points to Business number, 2 points to End of period, 3 points to Assessable payroll, 4 points to Period premium, 5 points to Amount paid, and 6 points to Total assessable payroll.

When calculating your total gross payroll, **include** the wages of the following workers:

- All full-time, part-time and casual workers, including those hired through a Human Resources and Skills Development Canada grant;
- All active officers and directors who are carried on the payroll of a limited company; and
- All workers doing business outside the province, who are not covered by the workers’ compensation board equivalent in that province, and who have received confirmation that they are covered by us.

Do not include the wages of the following workers:

- Proprietors and any family members living in their household;
- Partners and any family members living in their household;
- Family members of officers and directors who, themselves, are not an officer or director (active or not) of an incorporated company, who are living in their household;
- Classes of workers identified in Sections 9-14 of the Workers’ Compensation General Regulations; and
- Workers doing business outside Nova Scotia who are covered by the workers’ compensation board equivalent in that area.

Prorated Wages

The wages of any officers (if the firm is a limited company) and the wages of any workers who provide support to the separate divisions or accounts must be prorated based on the total gross payroll for the previous year. The prorated amount is included in the total gross payroll for the applicable divisions/accounts. Wages to be prorated should not exceed the maximum assessable earnings per person for the given year. If wages cannot be prorated, then the wages must be applied to the division/account with the highest assessment rate. See “Example - Prorating” on page 30.

Excess Wages (Line B)

Excess wages are earnings in excess of the maximum assessable earnings per worker per year. The maximum assessable earnings figure is confirmed by us each year. Find this figure at www.wcb.ns.ca (look under Employers, Insurance Coverage, Maximum Earnings), or contact Assessment Services at 1-877-211-9267 toll free.

You are required to count earnings for each worker until their earnings reach the assessable maximum. Once this amount has been paid in a year, all further wages for this worker are considered excess wages, and are not included in your total assessable payroll calculation.

When the maximum assessable earnings are reached for all your workers and you have zero payroll to report, you are still required to submit a Remittance Voucher showing the zero payroll. Alternatively, you may use TeleReply (1-800-959-2256) to report your zero payroll.

Enter the excess wages at Line B on your Worksheet. This figure is not shown on the Accelerated Remittance Calculation Worksheet, although it is still necessary for accelerated remitters to use this figure to determine their total assessable payroll.

Labour Portion of Subcontracts (Line C)

If your business hires (sub)contractors, you must include the labour portion of each contract in your total assessable payroll calculation if:

- the (sub)contractor is not assessed and in good standing with us as demonstrated by a Clearance Letter, and
- the work performed under the contract is conducted in a mandatory industry.

Wages or labour for (sub)contractors must be included with the last remittance of each calendar quarter. You may choose to remit more frequently for your (sub)contractors on request to Assessment Services at 1-877-211-9267 toll free.

A separate account may be set up for (sub)contractor reporting for your convenience. If you have a separate account for (sub)contractors, you will enter zero for gross payroll and excess wages on your Remittance Calculation Worksheet.

EXAMPLE – PRORATING

A firm, operating in two distinct industries, has two divisions/accounts with administrative staff that support both accounts and a sole officer who draws a wage from the operation.

The total assessable payroll for both accounts was \$1,000,000 for last year. If we divide the payroll for each account by the total of the two payrolls, then we can determine the percent of the total assessable payroll that each account represents.

In this example, assessable payroll for last year for the first account was \$600,000 ($60\% \times \$1,000,000$) and for the second account, \$400,000 ($40\% \times \$1,000,000$).

Next, we apply the percentage found in the assessable payroll calculation to the current payroll for shared administrative staff and officers. The total wages for the two accounts for the current year is \$130,000 broken down into \$90,000 for common support staff and \$40,000 for the officer.

Therefore, \$78,000 is included in the total assessable payroll for the first account, calculated as follows:

Support staff:	$\$90,000 \times 60\% = \$54,000$
Officer:	$\$40,000 \times 60\% = \underline{\$24,000}$
	\$78,000

For the second account, the total assessable payroll is \$52,000, calculated as follows:

Support staff:	$\$90,000 \times 40\% = \$36,000$
Officer:	$\$40,000 \times 40\% = \underline{\$16,000}$
	\$52,000

If the labour portion of the contract is not specifically noted in the contract, you must use the percentages indicated in the table on page 35 to determine your assessable labour. This table is also found on the back of your Annual Subcontractor Report.

Enter the labour portion of your contracts at Line C on your Worksheet. This figure is not shown on the Accelerated Remittance Calculation Worksheet, although it is still necessary for accelerated remitters to use this figure to determine their assessable payroll.

See more about reporting (sub)contractors on page 33.

Total Assessable Payroll (Line D)

Determine your total assessable payroll by using the following formula:

Total Assessable Payroll = Gross Payroll - Excess Wages + Labour Portion of Subcontracts

Enter this figure at Line D on your Remittance Calculation Worksheet. Accelerated remitters enter this figure at the top of the second column of your Worksheet. **This figure must also be noted on your Remittance Voucher.**

- 4 **Calculating Your Premium** – When you know your total assessable payroll, and you’ve entered it on Line D on your Worksheet, multiply this amount by your assessment rate. The assessment rate, preprinted on Line E of your Remittance Calculation Worksheet, comes from your Experience Rating Statement. Your total assessment rate is listed in the “Summary of Financial Transactions” section on your Statement of Account. This rate includes your individual assessment rate, plus your industry levy, if applicable. The WCB collects a levy from employers in certain industries. The levy is noted in Section A of your Experience Rating Statement. If you are an accelerated remitter, enter your total rate (individual rate plus levy) on your Worksheet in the second box in the right-hand column.

Multiply your total assessable payroll for the period by your assessment rate and divide by 100 to determine your premium. Enter your premium payable at Line F. If you are an accelerated remitter, enter this amount in the third box in the right-hand column of your Worksheet.

- 5 **Calculating Your Payment** – If you have an outstanding balance or credit on your account, it will be noted on your statement in the top section and at Line G on your Worksheet. If you are an accelerated remitter, enter this amount on your Worksheet in the second last box in the column on the right.

The payment amount is the premium (Line F) plus the balance due on your Statement of Account (Line G). If you have a credit balance, this amount is subtracted from your premium. Enter the amount payable at Line H on your Worksheet, or in the box at the bottom of the right-hand column, if you are an accelerated remitter. **The payment amount must be noted on the Remittance Voucher.**

- 6 **Counting Your Employees** – The number of employees includes those people paid during the reporting period. Count anyone for whom you will complete a T4, including part-time and temporary employees, employees absent with pay, etc. Do not count persons for whom you will not complete a T4, such as occasional employees not part of your payroll and persons who did not draw pay in the reporting period, such as those on unpaid leave. **Note this number at Line I on your Remittance Calculation Worksheet, and also on your Remittance Voucher.** Accelerated remitters enter this number in the fourth box down the left-hand side of your Worksheet and on the Voucher. Although not all of your workers may be counted for purposes of reporting the number of employees, the amount you pay all your workers must be included in your total assessable payroll.

- 7 Completing the Remittance Voucher** – When you have completed the Remittance Calculation Worksheet, review the information that is preprinted on your Remittance Voucher to ensure it is correct. Enter your payment amount (from Line H) in the first box, and your total assessable payroll (from Line D) in the box below it. Both of these figures must be provided to avoid receiving a penalty. If either of these figures is zero, write a “0” in the box. You must make a remittance even if your payment amount or payroll is zero and, as usual, it must be received by your due date. For your convenience, you may use TeleReply (1-800-959-2256) to report a zero payroll.

The number of employees is entered in the box beside your payroll. Enter your end of period date on the Voucher. The BN will be preprinted.

8 Submitting Your Payments

When you have completed all the spaces on your Remittance Voucher, you may make your remittances through any payment channel currently used to make payments to the Canada Revenue Agency.

These include:

- in person at your bank;
- electronically (online) by computer banking or telephone banking;
- automatically through your payroll service provider; or
- by mail using the self-addressed envelope to the Canada Revenue Agency, 875 Heron Road, Ottawa, ON, K1A 1B1.

When making your remittances, please keep the following points in mind:

- Make your cheques payable to the Receiver General for Canada.
- Pay your Canada Revenue Agency payroll deductions and WCB payment with a single cheque or separately. If you decide to pay together, you must complete a Remittance Voucher for both organizations and submit both vouchers with your cheque. Your cheque must be for the total amount owed for each program.
- If you are not making a payment, you cannot make your remittance at a financial institution. In this case, please mail your Voucher to the Canada Revenue Agency by your due date, or use TeleReply (1-800-959-2256).
- No matter which method you choose to make your remittances, they must reach the Receiver General by your due date. Please ensure that remittances made through banks and bank machines are processed by your due date.
- Your remittances must include a payroll figure and payment (including premium and any outstanding balance on account). If the payroll figure is missing, a penalty will be applied to your account. If your payment is late, interest will be applied. Daily interest is calculated and accrued on all unpaid balances and applied monthly to your account.

TELEREPLY (1-800-959-2256)

TeleReply is an automated telephone reporting system. It is available to our clients through an existing business partnership with the Canada Revenue Agency (CRA).

Each agency has its own set of reporting requirements. Please ensure that you provide the appropriate information for each agency separately.

You can use TeleReply to report:

- A zero payroll; or
- Payroll when you are not making a payment; or
- When your business is closing temporarily.

When using TeleReply, your usual due dates apply.

When you call TeleReply, the system will guide you through each step of the process. However, for your convenience:

- Complete your Remittance Voucher before you call. This serves two purposes: first, you will have a paper copy of the information for your files in the event you are audited at a later date. Second, you will have the appropriate information ready when prompted to enter it by the automated system.
- Do not use a cellular or cordless telephone, or a telephone with the keypad in the handset. This will prevent you from hitting the wrong keys and increase your privacy.
- Please ensure that you choose the “WCB” option when prompted, so that you avoid entering WCB information for CRA questions.
- Enter all the required information before you hang up, otherwise your information will not be saved. When you have entered all the required information, confirmed that it is correct, and the process is completed, you will receive a confirmation number. If you do not receive a confirmation number from the TeleReply system, then your information has not been saved. In this case, you will have to try again, or send your Remittance Voucher to the CRA using another method.

REPORTING SUBCONTRACTORS

If you do not hire (sub)contractors, this section is not relevant to you. However, if you hire (sub)contractors, they are considered your workers and you may have to include the labour portion of your contracts with your total assessable payroll. Please read below to determine if you must include (sub)contractors in your payroll calculation.

- If you hire a (sub)contractor who works in a mandatory industry but who is not required to be registered with us, the assessable wages associated with the (sub)contractor’s work must be included in the calculation of your total assessable payroll and reported at least quarterly on your Remittance Voucher. In this case, the (sub)contractor is considered your worker, and you cannot hold back premiums. If you determine at a later date that the (sub)contractor does have workers’ compensation coverage, an adjustment will be made.

- If you hire a (sub)contractor who is not working in a mandatory industry, then no premiums are payable on behalf of the (sub)contractor. The (sub)contractor is not covered by workers' compensation insurance in the event of an injury. You are still required to report the contract on your Annual Subcontractor Report. Examples of typical contracts in non-mandatory industries are for accounting, drafting, surveying, consulting engineering, legal and project management.
- If the (sub)contractor is registered with us but is not "in good standing" (meaning that he/she has coverage, has met all payroll reporting requirements, has paid all premiums to date and has no outstanding balance on account), then you and the (sub)contractor are jointly responsible for premiums associated with the (sub)contractor's work. In this case, you may withhold the amount of the (sub)contractor's premium from the contract. This is the only situation in which you can hold back a portion of the (sub)contractor's wages.

If you hire (sub)contractors, you must complete an Annual Subcontractor Report (see "Calculating the Labour Portion of Contracts" below).

CALCULATING THE LABOUR PORTION OF CONTRACTS

When you have determined which (sub)contractors must be included in your payroll, you must now determine the amount of their wages to be included. The amount you calculate must be included in your total assessable payroll calculation at least quarterly.

To calculate the labour portion of contracts, you can use your Annual Subcontractor Report. The Annual Subcontractor Report is a list of all (sub)contractors hired during the calendar year and recorded quarterly. It includes information about the job, wages and proof of coverage (i.e., Clearance Letter). All (sub)contractors hired must be reported, including those who are not mandatory.

To complete the Annual Subcontractor Report:

- Provide the information for columns 1-6. These are self explanatory. At this point, for those (sub)contractors who provided a Clearance Letter or who are not working in a mandatory industry, no further information or calculation is required. For all (sub)contractors hired without a Clearance Letter, you must complete Column 7 and/or 8 to calculate the total actual assessable labour for (sub)contractors paid during the quarter.
- In Column 7, please indicate whether the amount noted in Column 6 is for labour only. If you know the labour portion of the contract, enter this amount in Column 9. If you do not know the labour portion of the contract, use the table on page 35 (also found on the back of the Annual Subcontractor Report) to determine the appropriate percentage to note in Column 8. In this case, multiply Column 6 by Column 8, and enter this amount in Column 9. If you answered NO in Column 4, please enter the 'end of period' date in which you included the labour portion of the contract in your payroll and paid the associated premium in Column 10.

Workers' Compensation Board of New South Wales
Annual Subcontractor Report

Accredited form for employers, 1995, 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 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3816, 3817, 3818, 3819, 3820, 3821, 3822, 3823, 3824, 3825, 3826, 3827, 3828, 3829, 3830, 3831, 3832, 3833, 3834, 3835, 3836, 3837, 3838, 3839, 3840, 3841, 3842, 3843, 3844, 3845, 3846, 3847, 3848, 3849, 3850, 3851, 3852, 3853, 3854, 3855, 3856, 3857, 3858, 3859, 3860, 3861, 3862, 3863, 3864, 3865, 3866, 3867, 3868, 3869, 3870, 3871, 3872, 3873, 3874, 3875, 3876, 3877, 3878, 3879, 3880, 3881, 3882, 3883, 3884, 3885, 3886, 3887, 388

- At least quarterly, total the actual assessable labour amounts (Column 9) and enter this figure in the row designated for the quarterly total. If you are a monthly or quarterly remitter, transfer the total assessable amount for each quarter to Line C on your Remittance Calculation Worksheet. If you are an accelerated remitter, your Worksheet does not include a space for this figure, but you must be sure to include this amount in your total assessable payroll calculation.
- At the end of the fourth quarter remittance period, the back page of the Annual Subcontractor Report must be completed in full. Also, please ensure that the business name, address and BN are correctly entered on the front of the report, and that the reporting year is noted clearly.

Submit the Annual Subcontractor Report to us by the last day of March in the year after the reporting year. Additional copies of this report are available electronically on our website (look under Forms), or by calling us directly. If you need additional space, you may create your own form as a spreadsheet and ensure that it includes all the information required on this report.

A \$50 penalty is charged for late submission of the Annual Subcontractor Report.

TYPE OF CONTRACT	PORTION FOR LABOUR
Labour only	100%
Labour and materials	50%
Courier service	50%
Trucking and leased equipment	25%
Logging (chain saw)	75%

CLEARANCE LETTERS

The Clearance Letter confirms that a company is in good standing, which means that the company has workers' compensation coverage, has met all payroll reporting requirements, has paid all premiums to date and has no outstanding balance on account.

If you require a Clearance Letter, it can be obtained in several ways:

For your own company:*

- Visit MyAccount at www.wcb.ns.ca early in 2006. You must be signed up to access MyAccount and have your Business Number at hand. See instructions on page 8.
- By visiting the Nova Scotia Business Registry at www.nsbr.ca. You must have your Business Number at hand;
- By sending an e-mail to clearance@wcb.gov.ns.ca; or
- By faxing a request to 902-491-8326.

For your (sub)contractors:*

- Visit MyAccount at www.wcb.ns.ca early in 2006. You must be signed up to access MyAccount and have your subcontractor's Business Number at hand. See instructions on page 8.
- By visiting the Nova Scotia Business Registry at www.nsbr.ca. You must have the Business Number of your (sub)contractor at hand; or
- By requesting one directly from your (sub)contractor.

* Clearance Letters are available through the NSBR and MyAccount for incorporated companies only. You cannot obtain a Clearance Letter online for special protection, sole proprietorships or partnership accounts. These must be obtained from the (sub)contractor directly.

If you are in good standing, you may request that we provide you with a Clearance Letter that covers you quarterly or annually.

Before you hire (sub)contractors registered with us, or release funds to them, you should request that they provide you with a Clearance Letter. If the Clearance Letter expires before the end of the contract work period, obtain an up-to-date letter. **If a work-related injury occurs and the (sub)contractor does not have coverage (or is not in good standing), you may be liable.** Keep Clearance Letters on file in the event we conduct an audit of your company.

PENALTIES, INTEREST AND LIABILITY

Late Reporting

If your total assessable payroll is not reported by the due date for each reporting period for your remittance frequency, we charge a penalty based on 10% of the premium owing for the reporting period. If you are late repeatedly, you may be charged a 20% penalty.

Failure to Report and Provisional Assessment

If you do not report your total assessable payroll, including a zero payroll, by the due date for each reporting period, we will set a provisional assessment for the missed reporting period. The provisional assessment is an estimate of your payroll based on the average assessable payroll reported during the previous year. In addition, we will charge a penalty based on 10% of the premium owing on the provisional assessment. When we receive your actual payroll figure for the missed reporting period, your account will be adjusted and the provisional assessment reversed. Penalties and interest charged against the provisional assessment remain.

Under Reporting

If the payroll amount for a reporting period is increased after the due date for the reporting period, a 10% penalty will be applied on the difference in premium owing, and retroactive interest will be applied.

Interest

Interest is charged on outstanding amounts. We use the same interest rates used by the CRA for unpaid balances. Daily interest is calculated and accrued on all unpaid balances and applied monthly to your account.

Director Liability

If your company is incorporated and you fail to make WCB remittances (for premiums, outstanding balances, or other payments), the directors of your company may be held personally liable, along with the company, to pay the amount due. This amount includes penalties and interest.

EMPLOYER YEAR-END UPDATE FORM


The Employer Year-end Update form is used to update contact information, names of officers and directors, and the list of assets used in the operation of your company. This form may also be used to revise payroll figures from the past reporting year, if necessary. However, **we recommend that you notify us immediately throughout the year of any changes in payroll so you can avoid being charged penalties and minimize interest charges.**

If there are changes to any of the information requested on the Employer Year-end Update, please submit the form after the end of each year. A copy of the Employer Year-end Update is distributed each year. Alternatively, a copy is available at www.wcb.ns.ca (look under Forms).

If there are no changes, please do not submit the form.

RECORDS AUDIT

We have the right to conduct an audit of the records of any company at our discretion. The audit includes examination and photocopying of any record that may be required for assessment purposes. You are required to keep accurate and up-to-date records and copies of your Remittance Calculation Worksheets for this purpose.



Employer Year-end Update 2005
Assessment Services Department, 5035 Renwick Street, Suite 100, PO Box 1150, Halifax, NS B3J 2Y2
Tel: (902) 491-8324 Toll free in Canada: 1 877 211 9267 Fax: (902) 491-8426 E-mail: assess@wcb.gov.ns.ca

Section 1 — General Information

1 Some employers conduct business out of more than one office. Please review the addresses below and, if necessary, provide updated information on the right.

☐ **New information**
Contact Name: _____
Street: _____
City: _____
Province: _____ Postal code: _____
Phone Number: _____
Facsimile Number: _____

☐ This address is correct for delivery of **financial information** (e.g., Statement of Account). If this address is an "RR #," or "PO Box #," please give the physical location in Question 5.

☐ **New information**
Contact Name: _____
Street: _____
City: _____
Province: _____ Postal code: _____
Phone Number: _____
Facsimile Number: _____

☐ This address is correct for delivery of **claim-related information** (e.g., Advice Notice).

2 The WCB collects general information about each employer. If the information is incorrect, print the up to date information in the space provided.

Employer name: _____
☐ New information

Trade name: _____
☐ New information

Business number: _____
☐ New information

Main business activity: _____
☐ New information

Standard Industrial Classification (SIC) Code: _____
☐ New information

WCB Employer Year-end Update 2005 1

WHAT DO I DO WHEN AN INJURY OCCURS AND HOW DO I MANAGE RETURN TO WORK?

While preventing workplace injuries is our goal, when an injury does occur, our goal shifts to assisting workers to achieve safe and timely return to work.

In most cases, having an injury does not mean a worker cannot work. In fact, in many cases, with minor and temporary job modifications, the worker can return to work the same day. To assure a safe return to work, the worker's assigned job duties must match the worker's functional abilities and are measured by a physiotherapist or physician. For the health and well being of the worker, you should make every effort to provide transitional duties during the injury recovery period.

Continuing to work is a critical component of injury recovery and prevention of disability. Work reduces the physical, social, psychological and financial impacts of the injury on the worker and reduces the overall impact on the company. Maintaining connection with the workplace and providing timely health care and transitional work is the recipe for a successful safe and timely return to work.

Require your workers to report all workplace injuries when they occur and before they leave the work site that day. Timely reporting of injuries allows you to effectively investigate the work site where the injury occurred, interview witnesses and collect the information required to understand the cause.

When you become aware that an injury has occurred:

- Contact the worker right away to let them know you are concerned for their health and wellness. Provide or seek immediate health care for your worker. See below for details.
- Reassure them that you will do what you can to help them back to work as soon as possible.
- If the worker will lose some time from work, report the injury to the WCB (and Occupational Health and Safety Division at Nova Scotia Labour and Workforce Development, if necessary) within 5 business days of the injury. See page 41 for details.
- Assist the worker to achieve safe and timely return to work. See page 46 for details.

PROVIDE HEALTH CARE

The type of health care required depends on the severity of the injury. When in doubt, send the worker to the hospital or to a physician. However, in most cases, the following apply:

Minor Injuries:

For minor injuries, basic health care or on-site first aid treatment may be required.

- Small job modifications may be required for a short period, usually with no time lost from work.

Sprains and Strains:

A sprain or strain is a pulled muscle, usually in the back, shoulder, neck, arm or leg. It often is caused by improper lifting, pushing, pulling or twisting. If your worker is expected to lose time from work as a result of a sprain or strain, refer the worker for an immediate assessment by a physiotherapist.


You may refer the worker for an assessment by completing the **PT Intake Report – Form A** as outlined below. A list of all clinics approved by us is available by calling 1-800-870-3331.

Complete the first two sections of the PT Intake Report – Form A and send it to your local WCB-approved physiotherapist. A copy of the form may be downloaded from www.wcb.ns.ca (look under Forms). You may give the completed form to your worker to take to the physiotherapist, or fax it directly to the physiotherapy clinic where the worker will be assessed. The physiotherapist will finish completing the form after conducting the assessment of your worker. Copies will be sent to you and us within a few days of the assessment.

- 1 Complete the Worker Information section. Worker contact information is required to properly identify the worker. Indicating if the worker is working following the injury, or has stopped work due to the injury, is important so that we can plan return-to-work initiatives appropriate to the worker's abilities and job requirements.
 - If you are unable to complete this section before sending the worker for an assessment, the worker and physiotherapist can complete it during the initial visit.

- 2 Complete the Employer Information section prior to referring your worker to a physiotherapist for an assessment. Knowing who to contact in your organization will help us speed the process along and ensure that we're sending information to the appropriate person. This section also helps us collect information about the worker's functional job demands for both the pre-injury job and transitional duties.

- Include the name of the person most suited to answer questions related to return-to-work issues.
- Find your firm and division numbers on your Statement of Account.
- Attach a list of the current functional job demands or, if this is not available, a job description. This will help in the development of an appropriate return-

 WORKERS' COMPENSATION BOARD OF NOVA SCOTIA		Halifax Office 1-800-870-3331 toll free 902-491-8905 local 902-491-8001 fax	Sydney Office 1-800-889-0903 toll free 902-563-2444 local 902-563-0512 fax	PT Intake Report Form A
Date of Initial Visit: _____		WCB Claim Number: _____ Health Card Number: _____		
Worker Information				
Worker's Last Name	First Name	Initial	Date of Birth (dd/mm/yyyy)	
Address - Street		City/Town	Province	Postal Code
Home/Cell Phone	Work Phone	Date of Injury (dd/mm/yyyy)	Is the worker working? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Employer Information (if possible, to be completed by employer prior to referral; if not, to be completed by health care provider)				
Employer Name		Employer Contact Name		Employer Contact Phone
I have WCB Accident Report been filed? Yes <input type="checkbox"/> No <input type="checkbox"/>		Firm #	Div #	
Worker's Job Title/Occupation	Job task information available? (attach if available)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Transitional duties available? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Employer's Address		Employer's Signature: _____		
Injury Information (to be completed by health care provider)				
Mechanism of Injury: _____				
Physiotherapy Diagnosis (specify body part): _____				
Is injury preventing worker from performing pre-injury work?		Yes <input type="checkbox"/> No <input type="checkbox"/>	Estimated date of return to pre-injury work (dd/mm/yyyy)	
Is injury preventing worker from performing transitional duties?		Yes <input type="checkbox"/> No <input type="checkbox"/>		
Has the worker had a similar problem previously? Yes <input type="checkbox"/> No <input type="checkbox"/> If so, specify: _____				
Initial Job Match Summary (to be completed by health care provider; see over for definitions – attach additional page if necessary)				
Describe pre-injury job requirements: Sedentary <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Heavy <input type="checkbox"/> Very Heavy <input type="checkbox"/>				
Describe present work capability: Sedentary <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Heavy <input type="checkbox"/> Very Heavy <input type="checkbox"/> No <input type="checkbox"/>				
Describe transitional duties: Sedentary <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Heavy <input type="checkbox"/> Very Heavy <input type="checkbox"/>				
Functional Abilities: _____				Employer contacted? Yes <input type="checkbox"/> No <input type="checkbox"/> Response: _____
Health Care Provider Information (to be completed by health care provider, please print)				
Name of Clinic:		ID#:		
Name of Practitioner:		Phone:	Fax:	
WCB Response (to be completed by WCB Case Worker)				
WCB Case Worker (print): _____		Phone: _____	Date (dd/mm/yyyy): _____	
Employer Covered: Yes <input type="checkbox"/> No <input type="checkbox"/>		Claim Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>	TRD <input type="checkbox"/>	
Copy for Employer, Copy for Worker				

to-work plan. See a list of physical/functional demands and work classifications on the back of this form.

- Attach a list of transitional duties. Offering transitional duties that the worker can safely perform during recovery will speed recovery along and assist the worker in returning to full pre-injury duties. See examples of how to implement transitional duties on page 46.

3 This section is completed by the physiotherapist. Information about the worker's injury will help us develop an appropriate return-to-work plan.

4 This section is completed by the physiotherapist. The information in this section describes the worker's abilities and helps us match the worker to an appropriate job or transitional duties until return to pre-injury duties is possible.

5 This section is completed by the physiotherapist. It is important for you and us to know the name of the worker's physiotherapist so that the physiotherapist can be involved in the development of the return-to-work plan. We also need this information for billing purposes.

- When all but the last section of the Form A are completed, the physiotherapist will send both you and us a copy within a few days of the assessment.

6 The final section is completed by us and a copy returned to the physiotherapist.

7 The back page of the PT Intake Report – Form A describes transitional duties and suitable work, and the various work classifications and ability levels. It is used as a guide in recommending appropriate transitional duties for the worker. The same information can be found on the back side of most WCB physiotherapy forms.

Following the initial assessment, the physiotherapist will send you and us a report called the **PT Initial Assessment – Form B**. This form contains some of the same information as found on Form A (noted above), but with more details regarding the worker's injury, including the physiotherapist's diagnosis. If physiotherapy treatment is appropriate, the physiotherapist will provide the treatment plan. Progress reports will be provided to you and us by the physiotherapist. If the physiotherapist

7

Work Capabilities—Definitions*

Transitional Duties • A temporary change in or adaptation of the pre-injury work is achievable, based on the worker's capabilities.	Suitable Work • A different job with duties within the worker's capabilities.
---	---

Work Classifications
 The following are five work classifications used to describe the amount of physical effort required to perform a task or job. These classifications are referred to as various WCB forms, and are used by health care providers and the WCB to assist with planning treatment and return-to-work initiatives.

SEDENTARY Work
 • Lifting up to 4.4 kg (10 lbs) of force occasionally and/or a negligible amount of force frequently. Example: An occupation where the worker sits most of the time, and only walks or stands for brief periods.

LIGHT Work
 • Lifting up to 8.9 kg (20 lbs) of force occasionally and/or up to 4.4 kg (10 lbs) frequently and/or negligible force constantly. Example: Walking or standing to a significant degree, or lifting constantly but with arm and/or leg controls with exertion of force greater than sedentary.

MEDIUM Work
 • Lifting up to 22.2 kg (50 lbs) of force occasionally and/or up to 8.9 kg (20 lbs) of force frequently and/or up to 4.4 kg (10 lbs) constantly.

HEAVY Work
 • Lifting up to 44.4 kg (100 lbs) of force occasionally and/or up to 22.2 kg (50 lbs) of force frequently and/or up to 8.9 kg (20 lbs) of force constantly.

VERY HEAVY Work
 • Lifting in excess of 44.4 kg (100 lbs) of force occasionally and/or in excess of 22.2 kg (50 lbs) of force frequently and/or up to 8.9 kg (20 lbs) of force constantly.

Comparison of Ability Levels
 The National Institute of Occupational Safety and Health (NIOSH) set standards for evaluation of Physical Demand Capacity. These are used in both the Canadian National Occupational Classification system (NOC) and the American Dictionary of Occupational Titles (DOT).

Frequent Weight
 A worker's demonstrated tolerance for frequent weight (F) is recognized as the weight at which they first report a change or increase in symptoms or the first pain behavior. It is estimated that the worker can safely handle the weight for up to 66% of their workday tolerance.

Occasional Weight
 A worker's demonstrated tolerance for occasional weight (O) is recognized as the maximum weight they are able to lift, carry, or push/pull. It is estimated that the worker can safely handle this weight for up to 33% of their workday tolerance.

(*Adapted from The Medical Disability Advisor, Working World, M.D., 1997 Publications, and from The National Occupational Classification)

PT Initial Assessment Form B

Workers' Compensation Board of Nova Scotia

Halifax Office: 1-800-670-3331 toll free, 902-491-8000 local, 902-491-8001 fax
 Sydney Office: 1-800-680-0008 toll free, 902-560-2444 local, 902-562-0512 fax

Date of Assessment: _____

Worker's Last Name: _____ First Name: _____ Initial: _____ Date of Birth (dd/mm/yyyy): _____

Date of Injury (dd/mm/yyyy): _____ Is the worker working? Yes ☐ No ☐ If yes, describe: transitional duties ☐ pre-injury work ☐

Employer Information (to be completed by health care provider)

Employer Name: _____ Employer Contact Name: _____ Employer contacted? Yes ☐ No Response ☐

Worker's Job Title/Occupation: _____ Job task information available? Yes ☐ No ☐ Transitional duties available? Yes ☐ No ☐

Injury Assessment Information (to be completed by health care provider; attach additional page if necessary)

Diagnosis (specify body part): _____ Date of Referral (dd/mm/yyyy): _____

Significant Objective: _____ Significant Subjective: _____

Physical Abilities Report? Yes ☐ No ☐ If no, why? _____

Functional Abilities: _____

Are there flags that influence duration? Yes ☐ No ☐ Linton questionnaire score: _____ Expected RTW Date (dd/mm/yyyy): _____

Job Match Summary
 (to be completed by health care provider; see over for definitions; complete if Physical Abilities Report not attached)

Describe pre-injury job requirements: Sedentary ☐ Light ☐ Medium ☐ Heavy ☐ Very Heavy ☐

Describe present work capability: Sedentary ☐ Light ☐ Medium ☐ Heavy ☐ Very Heavy ☐ Nil ☐

Describe transitional duties: Sedentary ☐ Light ☐ Medium ☐ Heavy ☐ Very Heavy ☐

Recommended Treatment Plan (to be completed by health care provider)

Goals	Methodology	Recommended Time Frame (specify dates)
		From: _____ To: _____
		From: _____ To: _____
		From: _____ To: _____

Health Care Provider Information (to be completed by health care provider; please print)

Name of Clinic: _____ ID#: _____

Name of Practitioner: _____ Phone: _____ Fax: _____

WCB Response (to be completed by WCB Case Worker)

Yes – Treatment from _____ to _____ Screen 119 updated: Yes ☐ Initials: _____

No – Reason: _____

WCB Case Worker (print): _____ Phone: _____ Date (dd/mm/yyyy): _____

10/10/09

determines the injury is more serious than a sprain or strain, the worker will immediately be referred to the hospital or to a physician.

Also during the initial assessment, the physiotherapist will determine the worker's current functional abilities and capacity for return to work. If the worker is unable to return to full pre-injury duties, the physiotherapist will complete a **Physical Abilities Report – Form E**. When completed, a copy of this report is sent to you and us by the physiotherapist. When received, you, your worker and your WCB case worker will use the information to develop an appropriate return-to-work plan for the worker. The information on this report compares the worker's functional ability to the job demands, so that an appropriate and safe match can be made. The Form E is updated every two weeks to show the worker's functional progress. This ensures that the return-to-work plan continues to include appropriate transitional duties based on the worker's improving abilities.

Workers' Compensation Board of Nova Scotia

Halifax Office
5988 South Street
PO Box 1170
Halifax, NS B3J 2Y9
1-800-870-3331 toll free
902-491-0001 fax

Sydney Office
209 King's Road, Suite 117
Medical Arts Building
Sydney, NS B1A 1A9
1-800-980-0009 toll free
902-552-2444 local
902-552-0519 fax

Physical Abilities Report Form E

Worker's Name: _____ Area of Injury: _____

Employer's Name: _____ Phone: _____

Employer Contact Name: _____

This report gives employers and injured workers the health care provider's opinion as to the type and degree of job activity the worker is safely able to perform after an injury has occurred. This form will assist the employer in placing the worker in transitional job tasks suited to their physical capabilities until they are able to return to their regular duties. **Medical research indicates that an early and safe return to work speeds recovery.**

Physical Abilities Assessment To be completed by the health care provider

The worker is capable of returning to: ☐ Regular Duties or ☐ Transitional Duties
OR ☐ The worker is not capable of returning to work

Comparison of Ability Levels
F – Frequent O – Occasional (see reverse side of form for details)

Ability	Weights: <input type="checkbox"/> pounds <input type="checkbox"/> kilograms				Job Demands			
	(all/m/y)	(all/m/y)	(all/m/y)	(all/m/y)	As reported by:			
	F	O	F	O	Worker	Employer	Other (e.g. NUC)	
Lifting								
Above Shoulder								
Horizontal								
Floor/Waist								
Carrying								
Right Hand								
Left Hand								
Both Hands								
Pushing								
Pulling								
Grip Strength								
Tolerance (length of time based on client report during the assessment)								
Standing								
Sitting								
Walking								
Other Job Task:								

Health Care Provider's Signature: _____ Phone: _____

Health Care Provider's Name (please print): _____ ID #: _____

Name of Clinic: _____

Initial Assessment Date: (date/m/y) _____ Updated Assessment Date(s): (date/m/y) _____

19926

Other Injuries:

For all other injuries, the worker should immediately go to the hospital or see a physician.

- These include serious cuts (not treatable by basic first aid at the work site), crush injuries, falls, eye injuries, exposures (e.g., chemicals), broken bones, head injuries, or any other injury that appears more serious than a sprain or strain.

Immediately complete and send the WCB Accident Report to us. Timely receipt of this report ensures no delays in approving and providing services and benefits to your workers. See below for details.

REPORT A WORKPLACE INJURY

You are required by law to complete a WCB Accident Report and send it to the WCB within 5 business days of when you are notified that a workplace injury has occurred. If we do not receive your report within 8 days, you may be subject to a penalty.

Injuries are reported using the WCB Accident Report Form. Look for this form at www.wcb.ns.ca (under Forms) or call us at 1-800-870-3331. Once completed, please fax the report to our office at 491-8001. If you do not have access to a fax machine, please mail or deliver to our Halifax or Sydney offices. See the inside front cover for our contact information.

COMPLETING THE WCB ACCIDENT REPORT

Page 1 – WCB Accident Report

The information on Page 1 is needed to easily identify you and your worker; acknowledge that you both have seen the information; and provide the appropriate declaration and consent needed to process the claim. Do not delay submitting the Accident Report because your worker's signature is missing. We can get this later.

- *Employer Information section.* The company name is the legal name of the business. The trade name is the name of your company known by your clients and the general public, or the name under which most daily operations are conducted. Include your Business Number, or firm and division numbers, to ensure fast and accurate registration of your workers' claims.
- *Worker Information section.* The worker's Social Insurance Number must be noted on the **upper right-hand corner of each page** to ensure that we match all the relevant pages for one worker together. The worker's date of birth and date of injury are also required.
- *Declaration and Consent section.* This section has four purposes: to show joint completion by the worker and employer; to provide an opportunity for the parties to disagree; to provide consent of the worker; and to inform the parties of our rights to obtain from and share information with relevant parties.

Page 2 – WCB Accident Report

Page 2 helps us gather important information about the injury, such as the type, and when and how it happened. This page also includes questions about time lost from work, employment type and job tasks.

- You must complete questions 1 to 7, if the injury resulted from a single incident. For example, a fall.
- If the injury resulted over a period of time, such as an injury from using a jackhammer for an extended period of time, you must complete questions 1 AND 8 to 12.
- Complete questions 13 to 21 for all types of injuries resulting in an earnings loss. If there is no earnings loss, do not complete this page.
- Do not complete this form if you are reporting an occupational disease or occupational hearing loss. There are special forms for these illnesses which can be found at www.wcb.ns.ca (look under Forms), or contact us for a copy.

Below is an explanation for each question on page 2 of the WCB Accident Report. Please refer to the illustration, if necessary.

- 1 This information helps us determine if the worker's injury resulted from a single event (e.g., fall) or over a period of time (e.g., an injury resulting from continuous use of a vibrating tool during the course of performing regular duties).
- 2 This information helps us confirm the location of the injury.
- 3 This information helps us gather details about the injury and how it happened. With this information, we can ensure the injury is work-related, determine the severity of the injury and assist in future prevention efforts. Please identify the underlying causes for the injury, which can then be

addressed to prevent a recurrence of this type of incident in the future. If you do not think the injury occurred at the workplace, it is important that you attach details explaining why and what you believe may have caused the injury.

We require all medical reports to process a claim. It is the worker's responsibility to ensure that all medical reports are sent to us. We may also request medical reports directly from appropriate sources.

This information is used to determine who and when to pay. If the worker loses time from work and earnings, we pay benefits to the worker. If the worker loses only time from work because you pay sick benefits, then we pay you. In either case, we pay for all approved health care.

We must determine the worker's status on the job because not all workers are covered. See the definition of 'worker' in the glossary.


We use the date provided to determine whether your report is received on time. Speedy reporting reduces delays in benefits and services to workers and expedites return-to-work efforts.

Knowing the worker's main responsibilities is important to determine how the job tasks may have contributed to the injury, what treatment might be appropriate and to assess whether the worker can return to those duties. For example, it may be necessary to change a worker's job responsibilities to facilitate early and safe return to work or to reduce the likelihood of re-injury.

While an injury to a hand is important, an injury to the worker's dominant hand has significant effects on the worker's day-to-day life and performing even the simplest activities. The response to this question helps us measure the impact of the injury and the type and timing of treatment required.

The answer to this question helps us determine whether the injury was caused by the activities the worker was performing at the time of the injury, or whether these activities aggravated a pre-existing injury.

Knowing the amount of overtime worked just before the injury occurred, or when the symptoms were first noticed, is important to determine the cause of the injury (e.g., the activity itself, or the frequency of performing the activity) and the appropriate treatment or job changes to be made.



HALIFAX:
5668 South Street, PO Box 1150
Halifax, Nova Scotia B3J 2Y2
Tel: (902) 491-8999 Fax: (902) 491-8001
Toll Free: 1-800-870-3331

SYDNEY:
Medical Arts Building, 326 Kings Road, Suite 117
Sydney, Nova Scotia B1S 1A9
Tel: (902) 563-2444 Fax: (902) 563-0512
Toll Free: 1-800-880-0003

MUST BE COMPLETED ON EACH PAGE

SOCIAL INSURANCE NUMBER

WCB Claim No. _____

WCB ACCIDENT REPORT

ACCIDENT INFORMATION

To be completed by both the employer and the worker. If more space is needed, please attach additional pages, or use the space provided on page 3.

1. Please **check one**. The injury or illness occurred:

☐ From a specific accident
 DATE (D/M/Y) _____ TIME _____ ☐ AM ☐ PM
 Please complete questions 2-7.

☐ Over a period of time. Date symptoms first noticed: _____ DATE (D/M/Y) _____
 Please complete questions 2-12.
2. What body part was injured? _____
☐ Left side ☐ Right side ☐ Upper body ☐ Lower body
3. How did the injury(ies) / illness(es) happen? List any and all weights, distances, movements and equipment involved and the conditions or activity occurring at the time of the incident. If relevant, list exposures to noise or chemical agents, and the duration of the exposure.

 CITY/TOWN/PROVINCE WHERE INCIDENT OCCURRED _____
 Did any person or factor other than the employer or coworkers contribute to the cause of the injury or illness? ☐ YES ☐ NO
 If person, please provide name: _____
 If factor, please explain: _____
4. If medical attention was sought, please provide the name of the doctor **OR** medical facility where the worker was first seen. Also provide the date, phone number and location of the doctor **OR** medical facility.
 NAME OF DOCTOR OR MEDICAL FACILITY _____
 DATE (D/M/Y) _____ PHONE _____ LOCATION _____
5. Did the worker lose time because of this injury or illness? ☐ YES ☐ NO
 If yes, give the date and time when time-loss started:
 DATE (D/M/Y) _____ TIME _____ ☐ AM ☐ PM
 Did the worker lose earnings because of this injury or illness? ☐ YES ☐ NO
 If yes, give the date and time when earnings-loss started:
 DATE (D/M/Y) _____ TIME _____ ☐ AM ☐ PM
 Please complete page 3 if you answered yes to either of these questions.
6. Indicate if the worker is:
☐ a proprietor ☐ a partner ☐ an active officer or director of the company
 Indicate if the worker is a family member living in the household of any proprietor / partner / active officer or director of the company.
☐ YES ☐ NO
7. To whom at your place of employment was the injury or illness reported?
 NAME _____
 TITLE _____ PHONE _____
 Date reported: _____ Please explain any delay in reporting: _____

IF THE INJURY OR ILLNESS OCCURRED OVER A PERIOD OF TIME, PLEASE COMPLETE QUESTIONS 8-12. USE EXTRA PAGES IF NECESSARY.

8. What are the worker's main job tasks?

9. Is the worker left or right hand dominant? ☐ Left ☐ Right
10. How long has the worker been employed in this specific job / position?
 If less than 90 days, in what job / position were they previously employed?

11. How much overtime did the worker perform in the 90-180 days before this injury or illness occurred?

12. Have there been any changes in the worker's responsibilities in the past 90-180 days? (e.g. changes in duties, changes in workload, a leave of absence). Please explain.

YOU MAY FAX/SUBMIT A JOB DESCRIPTION WITH THIS REPORT.

PAGE 2 - 100M 09/01

- 12 helps to determine whether it was the normal work routine that caused the injury, or whether it resulted from the worker doing something unusual or new. This information also assists us and the worker to plan an appropriate return-to-work and treatment plan.

Page 3 – WCB Accident Report


The last page should be completed only if the worker has a time loss or earnings loss. Page 3 helps us gather earnings and employment information.

Below is an explanation for each question on page 3 of the WCB Accident Report. Please refer to the illustration, if necessary.

- 13 We use this information to help us determine whether a worker is eligible for re-employment.
- 14 Confirming the worker's type of employment assists us to determine the worker's earnings-replacement benefit and if you are obligated to re-employ the worker.
- 15 This information is also used for re-employment decisions. A worker may be eligible for re-employment, if the worker has an employment pattern with your company. See the example for clarification.
- 16 The information provided in this question is used to calculate the worker's benefit amount. You must complete part A or B.

Part A should be completed for workers with regular earnings or a consistent work schedule.

Part B should be completed for workers who work irregular hours, such as seasonal or casual workers. Fishermen are a good example. They may work a few weeks on and off during the fishing season. In this case, you would indicate the worker's earnings and start date for this particular fishing season; the earnings information should be for the most recent employment period before the injury occurred. The "to" date would be the day before the injury occurred. If necessary, provide a reasonable estimate of the worker's normal gross earnings. See the definition of 'normal gross earnings' in the glossary.

 HALIFAX: 5888 South Street, PO Box 1150 Halifax, Nova Scotia B3J 2Y2 Tel: (902) 491-8999 Fax: (902) 491-8001 Toll Free: 1-800-870-3331		SYDNEY: Medical Arts Building, 236 Kings Road, Suite 117 Sydney, Nova Scotia B1S 1A9 Tel: (902) 563-2444 Fax: (902) 563-0512 Toll Free: 1-800-880-0003	MUST BE COMPLETED ON EACH PAGE SOCIAL INSURANCE NUMBER WCB Claim No.
WCB ACCIDENT REPORT EARNINGS / EMPLOYMENT INFORMATION If you answered YES to either time loss or earnings loss in question 5, please complete this section.			
The earnings information provided will normally be used to establish the benefit amount. We may request additional earnings information from both the employer and the worker to determine a more accurate benefit amount. Benefits provided by the Canada Pension Plan may affect the amount WCB pays.			
13. Has the worker been employed with this company for the 12 months preceding the earnings loss? <input type="checkbox"/> YES <input type="checkbox"/> NO	17. Usual number of hours/days worked: Hours per day _____ Days per week _____ Other _____ Show usual days of work: S __ M __ T __ W __ T __ F __ S __ If shift or casual worker, please attach the first three weeks of schedule after the earnings loss began. If the worker works on a fixed rotation schedule, please attach a sample of the rotation schedule.		
14. Indicate the worker's employment type: A. <input type="checkbox"/> Permanent <input type="checkbox"/> Casual / Temporary <input type="checkbox"/> Seasonal / Irregular B. <input type="checkbox"/> Sub-contractor <input type="checkbox"/> Vehicle Owner / Operator <input type="checkbox"/> Courier Service <input type="checkbox"/> Logging / Chain Saw Operator <input type="checkbox"/> Self-Employed <input type="checkbox"/> Other: _____ Note: If you check any box in B above, the worker must submit a detailed income and expense statement. If this information is not readily available, the WCB will estimate the worker's employment expenses.	18. Indicate the worker's tax deduction (TD) code: _____ 19. Number of hours scheduled on day time/earnings loss began: _____ Number of hours worked on day time/earnings loss began: _____ Number of hours paid on day time/earnings loss began: _____		
15. If the worker is part-time, seasonal or casual, please indicate the date the original employment began: _____ DATE (D/M/Y)	20. Did the worker return to work after the injury or onset of symptoms? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give the date and time: _____ DATE (D/M/Y) _____ TIME _____ Did the worker return to regular duties? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give the date and time: _____ DATE (D/M/Y) _____ TIME _____		
16. A. Worker's normal gross earnings at the time of the injury: \$ _____ <input type="checkbox"/> per hour <input type="checkbox"/> per day <input type="checkbox"/> per week <input type="checkbox"/> bi-weekly <input type="checkbox"/> per month <input type="checkbox"/> other (please specify) _____ Note: complete B only if you are unable to complete A, above. (Usually applies to seasonal, irregular or casual workers). B. Gross earnings for the period of one year or less: \$ _____ From: _____ 12 MONTHS OR LESS PRIOR (D/M/Y) to: _____ DATE BEFORE INJURY (D/M/Y)	21. Will you be making any payments to the worker while the worker is off work due to the injury or illness? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, type of benefit paid: _____ How long will payments continue: _____		
Use this space if necessary to explain any answers.			

EXAMPLE — EMPLOYMENT PATTERN

Mary works with you every summer from May 1st to September 30th. She originally started with you in May 1997. This year, as usual, Mary began in May. In August, she injured herself. Therefore, the date required for Question 15 is May 1997—the date of her first employment with you.

- 17 We use this information to determine the amount of the worker's benefit and the worker's 2/5ths waiting period. Prior to receiving earnings-replacement benefits, each worker must undergo a waiting period immediately after the injury. The waiting period is 2/5ths of the worker's usual work week. For this reason, we must know the worker's usual hours and days worked. See the example for clarification.

Some workers have irregular hours because of the nature of their employment. Nurses, for example, perform shift work, and may have more hours in one week than the next. Carpenters are another example. They may work many hours during some weeks, and only a few hours during other weeks, depending on their contracts.

Please provide the worker's usual work hours or work days. Indicate the days of the week the worker usually works. For workers with unusual work schedules, please give an estimate of the worker's average hours worked each week, and include, where possible, a schedule for the three weeks immediately following the day earnings loss began.

EXAMPLE – WAITING PERIOD

If a worker usually works five days a week, then the waiting period is two days ($2/5 \times 5$). The WCB does not pay benefits for these two days.

If a worker usually works three 12-hour shifts a week (36 hours per week), then the waiting period is 14.4 hours ($2/5 \times 36$). The WCB does not pay benefits for these two days.

- 18 This information is used to calculate the worker's net earnings. The tax codes (both federal and provincial must be noted) tell us how much income tax should be taken off the gross earnings. The worker's benefit amount is based on 75% of net earnings for the first 26 weeks, and 85% of net earnings thereafter.

- 19 This information helps us determine from what point benefits should be payable. From this, we can calculate the benefit amount and the amount of the 2/5ths deductible (waiting period). This amount is reimbursed if the worker's earnings loss continues beyond five weeks. See the example for clarification.

- 20 We must determine if the worker has returned to work, and whether the worker is receiving earnings. It is illegal for a worker to collect full benefits when they have returned to work, regardless whether they have returned to full-time or part-time employment. If the worker has returned to transitional duties with a change in pay, benefits must be adjusted by the amount of the worker's modified earnings. The worker must advise us of any change in employment status.

EXAMPLE – BENEFITS PAYABLE

A worker is injured at 12 noon and goes to the hospital for treatment. The worker usually works seven hours during the day. Noon is the middle of the worker's day, and he/she is not paid for their one-hour lunch period. Therefore, we would be responsible to calculate benefits for that day based on four hours (from 1pm to 5pm), and then for seven hours a day thereafter, until the worker returns to work or benefits are discontinued.

- 21 This information helps determine if you are paying the worker during the worker's time away from work. It is used to determine to whom we should make the payment. If you pay your workers during their time away from work, we reimburse you rather than the worker. When your payments stop, we begin forwarding the benefit directly to the worker, if the worker is still entitled.

MANAGE RETURN TO WORK

Return to work simply means helping an injured worker get back to the workplace as soon as possible after a work-related injury by adjusting their assigned duties to match their functional ability.

When we receive the WCB Accident Report, a case worker is assigned to the claim. If the worker requires medical aid only and/or suffers only a short loss of time from work, the case worker will contact you only if additional information is required.

In the event time loss continues, the case worker will contact you, the worker and the health care providers to collaborate on a return-to-work plan. The plan is based on the worker's functional abilities (what they CAN do) and any other related issues needing to be addressed. Your case worker ensures an appropriate plan and return-to-work date is established as quickly as possible.

If the expected return-to-work date is not achieved, the case worker will schedule a conference with the worker, you and the necessary health care providers to discuss the situation and revise the return-to-work plan. If the worker's injury is complicated by other health-related factors preventing return to work, the case worker may recommend additional health care services.

If, at any time, you have questions or concerns, contact your case worker. It is important you work together to assist the injured worker.

PROVIDING TRANSITIONAL DUTIES

If the worker returns to transitional duties, we will continue to work together to progressively increase the duties as the worker's function improves. The objective here is to return the worker to full, pre-injury job duties. Transitional duties should be as close to the pre-injury job as possible.

Consider the following return-to-work transitional options:

- Pre-injury job with modifications of some duties (most effective);
- Pre-injury job with elimination of some duties;
- Some pre-injury duties with some new duties; or
- Some combination of the above.

SUPPORTING YOUR WORKER

Support your worker during the rehabilitation process by:

- Maintaining communication with your worker;
- Providing meaningful work for your worker;
- Monitoring the work to ensure your worker is not placed at further risk. Do not allow the worker to do more than his/her physical abilities allow, otherwise the risk of worsening the injury or re-injury exists;
- Accommodating your worker's scheduled health care appointments;
- Maintaining communication with the WCB case worker and health care providers; and
- Ensuring the job duties are increased as your worker's abilities improve, with the objective of returning to full, pre-injury duties.

In the unlikely event the worker doesn't return to their pre-injury condition, you will need to find an alternate but suitable job for the worker. Our case managers and vocational rehabilitation counsellors will assist with permanent job changes.

If, at any time, issues or concerns arise, contact your case worker.

DEVELOPING A RETURN-TO-WORK PROGRAM

A well defined and understood return-to-work program is a valuable tool to facilitate safe and timely return to work. In the absence of a program, you are required to figure it out as we go. This results in unnecessary delays, increased costs and return-to-work failures. Your return-to-work program will be a success if you:

- Understand your responsibilities and rights as the employer, and ensure all of your workers understand their obligations and responsibilities.
- Define your return-to-work program and ensure everyone understands what happens if an injury occurs. Your program can be easily scaled to the size and complexity of your organization.
- Assign a return-to-work co-ordinator to be responsible for helping to assure a successful return to work through collaboration with everyone involved.
- Implement internal company policies that require workers to report injuries when they occur and before leaving the worksite. Time is of the essence when managing injury recovery.
- Develop functional job demands for each position. This will ensure functional assessments can occur quickly and save valuable time. Your local physiotherapist can assist you with this.
- Develop relationships with local health care providers and your case management team so they understand the type of work performed in your organization and how you can work together to achieve safe and timely return to work—every time.
- Obtain the union's buy in and support, if you operate in a unionized environment.
- Stay involved in your workers' claims. Participate in regular discussions with your case worker.

BENEFITS OF RETURN-TO-WORK PROGRAMS

Providing return-to-work options benefits both the injured worker and the employer in many ways—both financial and non-financial. This is one program you can't afford to miss.

Benefits to you:

- Encourages communication between you and your injured worker, which is a key factor in recovery;
- Allows a skilled and experienced worker to continue to work with you;
- Keeps loss of productivity to a minimum;
- Reduces the costs of retraining new workers;
- May reduce the risk of re-injury;
- Maintains the morale of your workforce; and
- Reduces your workers' compensation premiums.

Benefits to your workers:

- Minimizes the impact and disruption on the injured worker's life because being back to work is closer to having things back to "normal";
- Reduces or eliminates lost earnings;
- Helps the worker stay active, which speeds up recovery;
- Shifts the focus from what a worker 'can't do' to what they 'can do';
- Allows the worker to remain in contact with co-workers and keep important social networks;
- Reduces the risk of re-injury and provides a sense of job security; and
- Maintains the worker's sense of belonging, purpose and confidence.

If you would like to develop a return-to-work program in your workplace, contact us. We can help.

EMPLOYMENT INCENTIVES PROGRAM

Some workers, because of the nature of their injury, cannot return to their pre-injury employment. If you hire an injured worker through our Employment Incentives Program, you benefit by hiring a skilled worker, receiving a wage subsidy, injury-cost protection and, where appropriate, worksite modifications or technological enhancements.

The wage assistance we provide comes in the form of a forgivable loan. This means, if you hire the worker into a permanent, full-time job at the end of the work term, the loan doesn't have to be repaid. Also, because of the nature of an injury, a worksite may need to be modified to allow the worker to be most productive. Modifications may include installing a wheelchair ramp or providing an ergonomic chair; technological enhancements may include computer hardware or a large-screen monitor.

One of the more significant benefits of participating in the Employment Incentive Program is the injury-cost protection we provide. The costs of the worker's injury are not charged to your account. Therefore, rates and premiums are not affected by your new employee's current costs—or new costs occurring during the Employment Incentives Program work term.

ON-THE-JOB TRAINING PROGRAM

If providing permanent, full-time employment for an injured worker is not practical for you, participation in another program may be an option. The On-the-Job Training Program works the same way as the Employment Incentives Program, except it doesn't include the commitment to hire the worker at the end of the work term. It does include a 100% wage subsidy during the work term.

The purposes of the On-the-job Training Program are to provide much-needed training and experience to the injured worker. Because some workers are not able to return to their pre-injury employment, they must find a new career—perhaps even in a new field. On-the-job training provides the worker with the experience needed to find a new job, and you get a risk-free, qualified employee for a specified period of time only.

RE-EMPLOYING YOUR INJURED WORKERS

Most employers are required to re-employ their injured workers as soon as the worker is safely able to return to work. This requirement does not apply to employers with fewer than 20 workers and employers in the construction industry or other specifically excluded industries. Although re-employment may not be a legislated requirement for your organization, it is highly recommended to help you manage the risks associated with workplace injury.

If your worker is able to return to work and do the essential duties of their job, you must re-employ them at their pre-injury job. If their job is no longer available, you must find a comparable job for the worker. If no comparable job is available, suitable work must be found. As positions that are more like the worker's pre-injury job open up, they must be offered to the worker.

If adjustments or modifications to the worksite are needed to accommodate the worker, we may be able to provide equipment and wage replacement incentives as noted above.

Your obligation to re-employ lasts up to two years after the injury and ends if the worker refuses an acceptable offer of re-employment. We can assist you and the worker with re-employment decisions. Contact your case worker, or call us at 1-800-870-3331.

WORKER BENEFITS

The package of benefits provided to an injured worker depends on the severity of their injury and the barriers they must overcome to return to work.

- **Temporary Earnings-Replacement Benefits (TERB)** – We pay TERB for time lost from work. Injured workers must undergo an unpaid waiting period equal to 2/5ths of their usual work week before they are entitled to receive benefits. Benefits are not paid during the waiting period. After the worker's waiting period ends, they are eligible to receive TERB based on 75% of their "net" or "after-tax" earnings. If the worker's time loss exceeds 26 weeks, the benefit increases to 85% of net. See more about the waiting period on page 45.
- **Health Care** – We pay for all health care and other appropriate medical aid to achieve safe and timely return to work.
- **Travel** – We pay travel expenses incurred by the worker to attend health care appointments, if the travel results in an expense the worker would not have otherwise incurred.
- **Vocational Rehabilitation** – In the event the worker sustains a permanent impairment preventing the worker from returning to the pre-injury job, we pay for the services required to help the worker secure an alternate job. Ideally, this would be with the pre-injury employer. Services may include retraining costs, work site adjustments, equipment modifications, etc.
- **Permanent Impairment Benefits (PIB)** – If the worker sustains a permanent impairment, he/she receives a Permanent Impairment Benefit, which is based on the worker's pre-injury earnings and the percentage of permanent medical impairment. This benefit may be commuted and paid as a one-time lump sum or paid monthly for life.
- **Extended Earnings-Replacement Benefits (EERB)** – If the worker has a permanent impairment and is able to return to work in a job that pays less than the pre-injury job, we pay the worker the difference in the earnings (85% of net pre-injury earnings less the earnings from the new job). If the worker has a permanent impairment and we are unsuccessful in helping the worker return to gainful employment of any type due to the injury, we pay full EERB at 85% of net pre-injury earnings. In some instances, we may estimate earnings.
- **Annuity** – The earnings on which benefits are based are capped at the maximum assessable/insurable earnings for the year of the injury. The maximum is adjusted annually according to the Nova Scotia Average Industrial Wage. At age 65, the worker's EERB is replaced by an annuity. The annuity is calculated by setting aside an additional 5% of the worker's PIB and EERB benefits each year until age 65. This amount is used to purchase an annuity, which is intended to replace lost retirement income.
- **Death Benefits** – If a worker should die due to a workplace injury, financial benefits are available for dependants. For example, spousal benefits, dependant child benefits, education benefits and funeral expenses are available.

Full details about the benefits and services provided to workers and their families are available in the "Worker's Handbook" at www.wcb.ns.ca (look under Brochures & Publications) or contact us at 1-800-870-3331 for a paper copy.

HOW DO I APPEAL A WCB DECISION?

Employers can appeal WCB decisions regarding claims or matters related to company classification and assessment rates.

The form is titled "Notice of Appeal to Hearing Officer" and is from the Workers' Compensation Board of Nova Scotia. It includes contact information for the Internal Appeals Department and the Forensic Medical Centre. The form is divided into two main sections: A. INFORMATION REQUIRED and B. DECISION TO BE APPEALED. Section A has two parts: 1. Worker's Appeal and 2. Employer's Appeal, each with fields for name, address, city, province, postal code, telephone, fax, and email. Section B has fields for the decision maker, the error, and the benefits/remedy sought. The form is dated 04/02/2003 and has a footer that says "Form continues on reverse".

Workers' Compensation Board of Nova Scotia

Notice of Appeal to Hearing Officer 04/02/2003

Mailing Address: Internal Appeals Department, PO Box 1150, Halifax NS, B3J 2Y2

Street Address: Forensic Medical Centre, 2285 Forewick Street, Suite 305, Halifax NS

Contact Numbers: Local: (902) 491-8800, Toll Free: 1-800-870-3331, Fax: (902) 491-8801

This Notice of Appeal form must be completed in full and submitted with all relevant supporting information attached. It must be received by the Workers' Compensation Board within 30 days of being notified of the WCB decision.

A. INFORMATION REQUIRED

If you are a **WORKER**, complete Section 1. If you are an **EMPLOYER**, complete Section 2.

1. Worker's Appeal

Worker's Name _____ Claim No. _____

Street Address / R/R _____

City / Town _____ Province _____ Postal Code _____

Telephone _____ Fax _____ Email _____

Name of Employer When Injury Occurred _____

2. Employer's Appeal

Employer's Name _____ Firm No. _____

Street Address / R/R _____

City / Town _____ Province _____ Postal Code _____

Telephone _____ Fax _____ Email _____

Name of Worker and Claim # for Decision on Appeal _____

B. DECISION TO BE APPEALED

I wish to appeal the WCB decision made by _____ (Typed)

I believe the decision maker made the following error: (Please be specific. Use extra paper if necessary.)

The benefits / remedy I am seeking include: (Please be specific. Use extra paper if necessary.)

Form continues on reverse

Generally, if you do not agree with a decision, you may contact us with new information that we will consider to determine whether the current decision stands, or whether a change in the decision is required.

If you still do not agree with the decision, you may file a Notice of Appeal to Hearing Officer Form within 30 days of the date of the original decision. A Hearing Officer will review the information and make our final decision.

To avoid a delay in processing your appeal, please ensure that you have completed all sections of the form and that it is signed and dated.

Find a copy of the "Appealing a WCB Decision" brochure at www.wcb.ns.ca (under Brochures & Publications) and download a copy of the "Notice of Appeal to Hearing Officer" form at www.wcb.ns.ca (under Forms), or contact us for a paper copy at:

- (902) 491-8999 in Halifax;
- 1-800-870-3331 toll free in mainland Nova Scotia;
- (902) 563-2444 in Sydney; or
- 1-800-880-0003 toll free in Cape Breton.

The next level of appeal is to the external Workers' Compensation Appeals Tribunal, which is part of the Nova Scotia Department of Justice. They can be reached by:

- calling (902) 424-2250 locally or 1-800-274-8281 toll free; or
- visiting www.wsis.ns.ca.

WHERE DO I GET MORE INFORMATION?

Copies of the *Occupational Health and Safety Act* and *Workers' Compensation Act* are available from Service Nova Scotia and Municipal Relations by:

- calling (902) 424-7580 in Halifax, or 1-800-526-6575 toll free in Nova Scotia;
- sending a fax to (902) 424-5599;
- visiting www.gov.ns.ca/snsmr/consumer/publications/; or
- sending an email to publications@gov.ns.ca.

Copies of the *Occupational Health and Safety Act*, *Workers' Compensation Act* and the Workers' Compensation Board Policy Manual are available by:

- taking a link from www.wcb.ns.ca (look under Policy & Legislation); or
- visiting certain libraries across the province.

Copies of the WCB Policy Manual are available:

- online at www.wcb.ns.ca (look under Policy & Legislation) – FREE; or
- by calling (902) 491-8380 in Halifax or 1-800-870-3331 toll free in Nova Scotia – \$75 charge (one time only).

GLOSSARY

Accelerated Remitter – An employer that reports its payroll and pays its premium twice or four times a month.

Accident Date – In general, the date a work-related injury occurred. Same as “injury date”.

Accident Report – Form used to report an injury occurring in the workplace to the WCB. It is completed by the injured worker and employer, and must be received by the WCB within eight business days to avoid the employer receiving a penalty. See page 42.

Advice Notice – A statement containing a list of an employer’s injured workers and the costs paid by the WCB on their claims. See page 21.

Annual Subcontractor Report – Form used by employers that hire subcontractors. It provides the WCB with a record of the subcontractors hired and paid by the employer during each quarter. The form must be submitted to the WCB by the last day of March in the year following the reporting year. See page 34.

Assessable Payroll – The amount used to determine an employer’s premium. Specifically, assessable payroll is gross payroll, minus excess wages, plus the labour portion of contracts.

Business Number (BN) – A number used by the Canada Revenue Agency, various government departments and the WCB to identify employers. It is unique to each employer.

Baseline Rate – The target rate for a rate group as determined by the group’s claim-cost experience. To lessen the impact of potentially significant changes in rates, the group’s baseline rate increases in increments until it matches the targeted rate.

Basic Rate – The individual employer’s assessment rate before Experience Rating is applied.

Business Discontinuation Form – Form to be completed when an employer expects to discontinue operations on a temporary or permanent basis. By completing this form, the employer is telling the WCB that it will not be remitting reports or premiums for a specified period of time, or permanently. For temporary closing, the form clearly identifies for the WCB the date on which the employer’s remittances will begin again. See page 16.

Chronic Pain – Pain continuing beyond the normal recovery time for the type of personal injury that precipitated, triggered or otherwise predated the pain; or disproportionate to the type of personal injury that precipitated, triggered or otherwise predated the pain, and includes Chronic Pain Syndrome, Fibromyalgia, Myofascial Pain Syndrome and all other like or related conditions. It does not include pain supported by significant, objective, physical findings at the site of the injury, which indicate that the injury has not healed.

Claim Costs – The present value of all payments made in the year of the injury and expected to be made in subsequent years as a result of the injuries that occurred in the reporting year.

Clearance Letter – A letter issued by the WCB confirming whether an employer is in good standing with the WCB. This means that the employer is registered with the WCB, is current with its payroll reporting, and does not have an outstanding balance on their account. It can be obtained online or by request to the employer. See page 35.

Contractor – A person or company hired by an employer to do a specific job for a specific price. The WCB uses “contractor” and “subcontractor” interchangeably.

Cost-Experience Ratio – The ratio of new injury costs to assessable payroll. It is used to set baseline rates and calculate experience rating merits and demerits.

Due Date – The last day on which an employer’s WCB remittance must be received by the Canada Revenue Agency. Remittances received after this date will be charged interest.

Employer – A company becomes an employer for WCB purposes when it is engaged in an industry for which workers’ compensation coverage is required and it has three or more workers. Companies with voluntary coverage are also considered an employer. The Canada Revenue Agency may use a different definition for employer in its programs.

Employer Year-End Update – A form used by employers to report changes in contact information; the owners, officers and directors of the company; and payroll. It is completed and submitted to the WCB annually, early in the year, and does not need to be completed if there are no changes. See page 37.

End of Period Date – The last day of your reporting period. This date must be included on your Remittance Voucher.

Experience-Rated Costs – The benefits paid by the WCB for a period of three full calendar years, which are considered for experience rating purposes. Some costs are excluded. For example, the WCB only considers costs associated with new injuries.

Experience Rating – A process where an individual employer’s assessment rate is adjusted up or down based on a comparison of their cost experience with the average cost experience for their rate group.

Extended Earnings-Replacement Benefits (EERB) – A long-term benefit from the WCB designed to compensate an injured worker for economic loss due to a workplace injury.

Firm Number – Number assigned by the WCB and used to identify registered employers and accounts. Although the firm number is still in use, it is more common for the WCB to use the 15-digit Business Number for identification purposes.

Good Standing – An employer who is in good standing has coverage, has met all payroll reporting requirements, has paid all premiums to date and has no outstanding balance on account. Good standing is evidenced by a Clearance Letter.

Gross Payroll – The earnings figure found in Box 14 of the Canada Revenue Agency T4 for certain workers. Beginning with this figure, employers will determine their total assessable payroll for reporting purposes.

Health-Care Benefits – Health care services provided to injured workers, including, but not limited to, hospital care, physician and specialist fees, physiotherapy fees, prescriptions, dental expenses, braces or crutches. The WCB uses “medical aid,” “health care benefits” and “health care services” interchangeably.

Industry Group – A group created for assessment purposes. It consists of employers who conduct similar activities.

Injury – An injury, for WCB purposes, includes a physical injury as well as illnesses or diseases caused as a result of workplace incidents or working conditions.

Injury Date – In general, the date a work-related injury occurred. Same as “accident date”.

Internal Responsibility System (IRS) – The basis of the *Occupational Health and Safety (OHS) Act*. It is founded on the principle that everyone at the workplace shares responsibility for creating and maintaining safe and healthy workplaces and that the greatest degree of responsibility falls on the party with the greatest control in the workplace—in most cases, the employer.

Long-Term Disability Benefits – All financial benefits paid after the short-term disability benefits have ceased and after the injury is considered by the WCB to be sufficiently stabilized, plateaued or consolidated. Long-term disability benefits include Permanent Impairment Benefits (PIB) and Extended Earnings-Replacement Benefits (EERB).

Mandatory Employer – An employer conducting business in a mandatory industry and which has three or more workers.

Mandatory Industry – An industry listed in the *Workers' Compensation Act* as requiring workers' compensation coverage.

Maximum Assessable Earnings – The maximum earnings on which assessment premiums are based. This figure is set by the WCB annually at 140.2% of the Average Industrial Wage in Nova Scotia.

Maximum Insurable Earnings – The maximum earnings on which the amount of an injured worker's benefit is calculated. This is the same figure used for maximum assessable earnings, and is set by the WCB at 140.2% of the Average Industrial Wage in Nova Scotia.

Medical Aid – Health care services provided to injured workers, including, but not limited to, hospital care, physician and specialist fees, physiotherapy, prescriptions, dental expenses, braces or crutches. The WCB uses “medical aid,” “health care benefits” and “health care services” interchangeably.

Monthly Remitter – An employer that reports its payroll and pays its WCB premiums to the Canada Revenue Agency on a monthly basis. The WCB uses ‘monthly remitter’ and ‘regular remitter’ interchangeably.

Normal gross earnings – Any earnings paid to workers on a regular basis. Earnings normally paid to the worker. ‘Normal earnings’ includes, but is not limited to, regular salary or wages, regular overtime, commission, bonuses, vacation pay, profit sharing, tips and gratuities, taxable benefits, and other income included in ‘Employment Income’ and ‘Other Employment Income’ on the worker’s individual tax return.

Participation Level – The level at which an employer participates in the experience rating process. It is determined by the number of years that the employer has been registered with the WCB and the employer’s average annual assessment premium. The higher the level of participation, the greater the amount by which Experience Rating can adjust an employer’s rate. To fully participate, an employer must have at least three years’ experience.

Payment – The payment is the amount submitted by employers for workers’ compensation coverage. It should include both the premium and any outstanding balance indicated on the Statement of Account. It is included as part of the remittance.

Premium – The purchase price for workers’ compensation insurance coverage. The premiums collected from all registered employers are used to cover the costs to administer the workers’ compensation system. Individually, this amount is determined by multiplying the employer’s total assessable payroll by their assessment rate per \$100 of assessable payroll (plus industry levy, if applicable).

Prorated Wages – The apportioned wages of workers who provide support to several divisions of an employer. Prorated wages must be included in the total gross payroll for the applicable divisions and used to determine an employer’s total assessable payroll, premium and payment. See the example in the section entitled, “Making Your Remittances” on page 29.

Provisional Assessment – A payroll figure estimated and used by the WCB when employers do not provide the actual figure, as required.

Quarterly Remitter – An employer that reports its payroll and pays its WCB premium to the Canada Revenue Agency on a quarterly basis.

Rate Group – A group created for WCB assessment purposes. It consists of various industry groups that have similar claim-cost experience. Baseline rates are set at the rate group level.

Rate-Setting Cost – The benefits paid by the WCB for a period of five full calendar years, which are used for Experience Rating purposes. Some costs are excluded. For example, the WCB only considers costs associated with new injuries.

Regular Remitter – An employer that reports its payroll and pays its WCB premium to the Canada Revenue Agency on a monthly basis. The WCB uses ‘regular remitter’ and ‘monthly remitter’ interchangeably.

Remittance – The remittance is the payroll report (Remittance Voucher) and payment (premium plus outstanding balance).

Remittance Period – The period for which actual total assessable payroll is determined and for which a premium based on the actual payroll is calculated. Remittance periods are based on those used by the Canada Revenue Agency, or determined by the WCB. They vary from four times a month to quarterly. The WCB uses ‘remittance period,’ ‘reporting period’ and ‘remitting period’ interchangeably.

Remittance Voucher – Form to be completed and sent along with the WCB payment to the Canada Revenue Agency. The information to be included on the form is the amount of the payment, number of employees in last pay period, end of period date, and total assessable payroll.

Reporting Period – The period for which actual total assessable payroll is determined and for which a premium based on the actual payroll is calculated. Reporting periods are based on those used by the Canada Revenue Agency, or determined by the WCB. They vary from four times a month to quarterly. The WCB uses ‘reporting period,’ ‘remittance period’ and ‘remitting period’ interchangeably.

Self-Insured Employer – Provincial and federal government departments that are individually liable for their own workers’ compensation costs. This means they pay the costs of their own claims, as well as an administration fee to the WCB. Because their injury costs do not impact the workers’ compensation system, self-insurers are not assessed with other registered employers of the WCB.

Short-Term Disability Benefits – All income benefits paid during the initial period after the injury, before the injury has stabilized, plateaued or consolidated. Short-term disability benefits include benefits paid during a rehabilitation period and Temporary Earnings-Replacement Benefits (TERB).

Special Protection – Special protection coverage is an optional insurance plan for self-employed proprietors, partners and family members of an employer living in the employer’s household. The amount of coverage may range from a minimum of \$10,200 per worker to the maximum insurable earnings per worker for the year.

Standard Industrial Classification Code (SIC) – A system developed by Statistics Canada to classify employers by the nature of their business. This system is used by the WCB to classify employers for rate-setting purposes.

Subcontractor – A person or company hired by an employer to do a specific job for a specific price. The WCB uses ‘subcontractor’ and ‘contractor’ interchangeably.

Survivor Benefits – All benefits provided to the surviving spouse, children or other dependants after the death of a worker. Survivor benefits may include financial benefits, education benefits and funeral costs.

Temporary Earnings-Replacement Benefits (TERB) – A short-term benefit from the WCB designed to compensate an injured worker for economic loss due to a workplace injury.

Three-Worker Rule – The three-worker rule is used to determine whether an employer must register with the WCB. The three-worker rule only applies to employers operating in mandatory industries as outlined in the *Workers' Compensation Act*. If the employer works in a mandatory industry, as soon as the employer hires the third worker, workers' compensation coverage is required. The definition of worker is noted below. Not all workers under the three-worker rule are covered under the WCB's regular insurance policy; some workers require special protection.

Threshold 1 Remitter – An employer that reports its payroll and pays its premium twice a month. The WCB uses 'Threshold 1,' 'T1' and 'accelerated remitter' interchangeably.

Threshold 2 Remitter – An employer that reports its payroll and pays its premium four times a month. There are also T2 Biweekly and T2 Semimonthly remitters in this category. They are differentiated from T2 by the frequency at which they have pay days. The WCB uses 'Threshold 2,' 'T2' and 'accelerated remitter' interchangeably.

Total Assessable Payroll – The amount of payroll that is used to determine your premium. It is multiplied by your assessment rate. See page 28.

Transitional Duties – When a worker cannot return to his/her pre-injury duties as a result of a workplace injury, other duties may be assigned. Transitional duties, as they are called, may include the elimination of some duties, a combination of pre-injury and new duties, perhaps reduced work hours with ease back to full hours, or any combination of these "transitional" duties. See page 46 for details.

Vocational Rehabilitation – Vocational rehabilitation services are only available to workers who have a permanent impairment and who are unlikely to return to their pre-injury job. Services provided assist the injured worker to overcome difficulties that may affect their return to work. Services may include, but are not limited to, skills or educational upgrading, job search preparation and on-the-job training.

WCB – Short form used to identify the Workers' Compensation Board of Nova Scotia.

Worker (for purposes of determining who must have coverage) – A 'worker' is any full-time, part-time, or casual worker, including those hired through a Human Resources and Skills Development Canada grant; all owners, officers and directors of an incorporated company who are actively engaged in the business but not carried on the payroll OR who are not actively engaged in the business but carried on the payroll; and all subcontractors who work in mandatory industries.

Worker (for purposes of calculating payroll and premiums) – A 'worker' is any full-time, part-time, or casual worker, including those hired through a Human Resources and Skills Development Canada grant; all owners, officers and directors of an incorporated company, whether active or not, who are carried on the payroll; and all subcontractors who work in mandatory industries and do not have their own coverage in place, as evidenced by a WCB Clearance Letter.

MEREDITH PRINCIPLES

In 1910, in response to concerns about a lack of adequate funding for injured workers and a slow, inequitable court system, the Ontario government commissioned Sir William Meredith to produce a report about workers' compensation. Meredith reviewed systems in the United States, France, England, Belgium and Germany, and recommended a system based on collective liability and a wage-loss approach to calculating benefits.

The workers' compensation system in Nova Scotia is based on a foundation of standardized principles — the Meredith Principles. They are:

- Collective liability – all employers share responsibility for benefits to injured workers;
- No fault – the worker gains the right to benefits, regardless of fault, in return for giving up the right to sue their employer;
- Universal coverage – all workers are eligible to receive benefits;
- Industry funding – the entire costs of benefits are covered through levies (premiums) on employers;
- State administration – the state (province) assumes responsibility for the collection of employer contributions and the awarding and distribution of benefits to injured workers;
- Exclusive jurisdiction – the administrative Board (the WCB) has the power to inquire into, re-hear and re-adjust all issues as necessary;
- Security of payment – the worker's claim is separated from the employer's ability to pay and guaranteed by an accident fund under the WCB's administration; and
- Benefits based on wage loss – an injured worker receives benefits based on a calculation of wages lost as a result of the injury.

WCB of Nova Scotia

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