



# NEW YORK COMPENSATION INSURANCE RATING BOARD

Dear Workers Compensation Policyholder:

RE: Compulsory Workplace Safety and Loss  
Prevention Program  
Combinable Group #: [REDACTED]

Legislative Bill 11331, which was signed into law by Governor Pataki on September 10, 1996, is a workers compensation reform bill that is intended to improve workplace safety and control the cost of workers compensation insurance in New York State.

Section 10 of this legislation requires that an employer, with more than \$800,000 in annual payroll and whose most recent New York experience modification is greater than 1.20, implement an approved safety and loss prevention program.

Although your experience modification is computed on an interstate basis for premium determination, the law recognizes only your New York operations for the purpose of this program. Consequently, an experience modification based on your New York operations only has been calculated in order to fulfill the intent of the law. Please note that the modification so calculated will be used solely for the purpose of determining eligibility for the safety program and has no bearing on your policy premium.

According to the Rating Board's records, your business has a 1.24 experience modification effective 28-FEB-15 and YOU ARE HEREBY NOTIFIED THAT YOU ARE REQUIRED TO UNDERGO A SAFETY AND LOSS PREVENTION CONSULTATION AND EVALUATION. You must arrange for this evaluation within 30 days following receipt of this letter and must then, within 10 days thereafter, notify your insurance carrier and the New York State Department of Labor, in writing, of the means by which this evaluation is to be accomplished. (Do not send this information to the Rating Board.) THE EVALUATION MUST BE COMPLETED, AND THE CONSULTANT'S WRITTEN REPORT RECEIVED BY YOU, WITHIN 75 DAYS FROM THE DATE OF THIS NOTIFICATION. Also note that any remedial action recommended in the evaluation must be implemented within six months following your receipt of the evaluation.

You should immediately contact your insurance carrier, agent or broker and inform them that you have received this notice. Your insurance carrier is responsible for verifying compliance with this regulation.

The New York State Department of Labor certifies consultants who can provide the required consultation. You can locate a consultant (ICR 59 -Certified Safety Consultant) using the Department's Search engine by accessing our webpage at:  
<https://applications.labor.ny.gov/WSLPISpecialistSearch/specialistSearch.faces>

You will be able to enter your search criteria using several options and geographic areas. You can then select and send a message to any consultant who has provided an e-mail address. Phone numbers are also provided.

Most private insurance carriers have consultants certified to provide the required service to their clients and many private sector self-employed consultants accept new clients on a fee basis.

There is also information and guidelines for compliance. Please see our webpage at:  
<http://www.labor.ny.gov/workerprotection/safetyhealth/DOSH%20Wrkplc%20Sfty%202.shtm>

Follow the link to "How to Comply with Code Rule 59." Employers should review our "Guidelines to Code Rule 59" and our "ICR 59 Report Checklist" before arranging for a consultation or sending a report to the Department.

After contacting your insurance carrier, you should schedule a consultation with one of the Certified Consultants and notify the Department of Labor of your intent to comply with this regulation.

All correspondence, including the notification to the Department of Labor that you intend to have a consultation and copy of consultation report should be mailed to the address below. The Department of Labor will accept e-mailed copies of the required correspondences to: [WSLPIP@labor.ny.gov](mailto:WSLPIP@labor.ny.gov). The Department of labor recommends the use of e-mail for all correspondence to avoid unnecessary delays in processing reports and determining compliance.

New York State Department of Labor  
Workplace Safety and Loss Prevention Programs  
Room 167, Building 12, Harriman State Campus  
Albany, NY 12240  
Attention: Program Manager

A copy of this letter has also been forwarded to the New York State Department of Labor who will monitor compliance with this Program. Sample compliance timeframes may also be found on-line at the above web address.

NOTE: FAILURE TO COMPLY WITH THIS PROGRAM WILL RESULT IN INCREASED CHARGES TO YOUR WORKERS COMPENSATION PREMIUM.

Very truly yours,

Safety Program Notification Unit

cc: N.Y. State Dept. of Labor

[REDACTED]

Policy [REDACTED]  
Policy Effective Date [REDACTED]

Please refer to the following when responding to NYCIRB: [REDACTED]