Illinois Workers'
Compensation
Commission

Welcome to the IWCC Public Portal for Self-Insurance and Assessments

MEDICAL CENTER

HOTEL

Please register or sign in above

The Illinois Workers' Compensation Commission's
New Web Portal

Self-Insurance Plus (SIP)

External Training Manual

Revision date: 8/3/2022

Table of Contents

Portal User Pointers

SIP works best with a Chrome or Edge web browser.

For Company Admins, make sure when setting up company contacts that you add individuals from your company who will be using SIP regularly, as well as those who will serve as backups to the primary users. Note all company contacts will have access to all documents submitted in the system and correspondence from the IWCC. Contact the IWCC at wcc.selfinsurance@illinois.gov if a contact should only see assessment information.

Keywords may be used by utilizing the wildcard character (*) when the user is not sure about the spelling or format of the application or assessment needed (such as West* for anything beginning with the word West). If you want to find anything with the word *West* in it, format the search as follows: *West* and click search.

If you are a contact that will be working with multiple companies in the SIP portal (ABC Company as well as XYZ Company), contact the IWCC at wcc.selfinsurance@illinois.gov to properly set up your account. The message should state that you need to be a multi-company contact in SIP.

> Use of the registration link on the Portal page is only for initial online registration of a Company Contact representing either:
>
> A. A company not currently Self-Insured and initiating the process of applying for Private Self-Insured Employer certification for the Self-Insurance privilege, or
> B. A company not already registered with the IWCC as an Insurance Company, Local Public Entity, or Pools-Group WC/Intergovernmental/Not for Profit Company to comply with IWCC Assessment requirements to receive and pay IWCC assessments.
>
> The registration of ALL other Company Contacts is initiated by a registered SIP Company Administrator or IWCC staff. If you have any doubt about the advisability of using the Registration link, please contact the IWCC at wcc.selfinsurance@illinois.gov.

To register for SIP, click the *Register* button in the top right corner. If you try to register an email address and get an error message stating the email already exists in Okta, contact the IWCC at wcc.selfinsurance@illinois.gov for assistance or click the *Contact Us* link on the bottom of the SIP homepage.

Non-Self-Insured companies will not be able to add subsidiaries or affiliates from the portal. Contact the IWCC via email at wcc.selfinsurance@illinois.gov for assistance. Include the *Company Name, Street Address, City, State, Zip Code, FEIN, and the Company type (insurance Company, Local Public Entity, or Pools-Group WC/Intergovernmental/Not-For-Profit)*

so the IWCC can add the correct subsidiary/affiliate information into your profile. You may also click the *Contact Us* link on the bottom of the SIP homepage.

To stay up to date on self-insurance information from the IWCC, click the *Help* link on the bottom of the SIP homepage. This link takes you to the IWCC's Self-Insurance information page. To go to the IWCC homepage, click on ©IWCC. Clicking the *Terms & Conditions* link provides the terms upon which you agree to use the SIP portal.
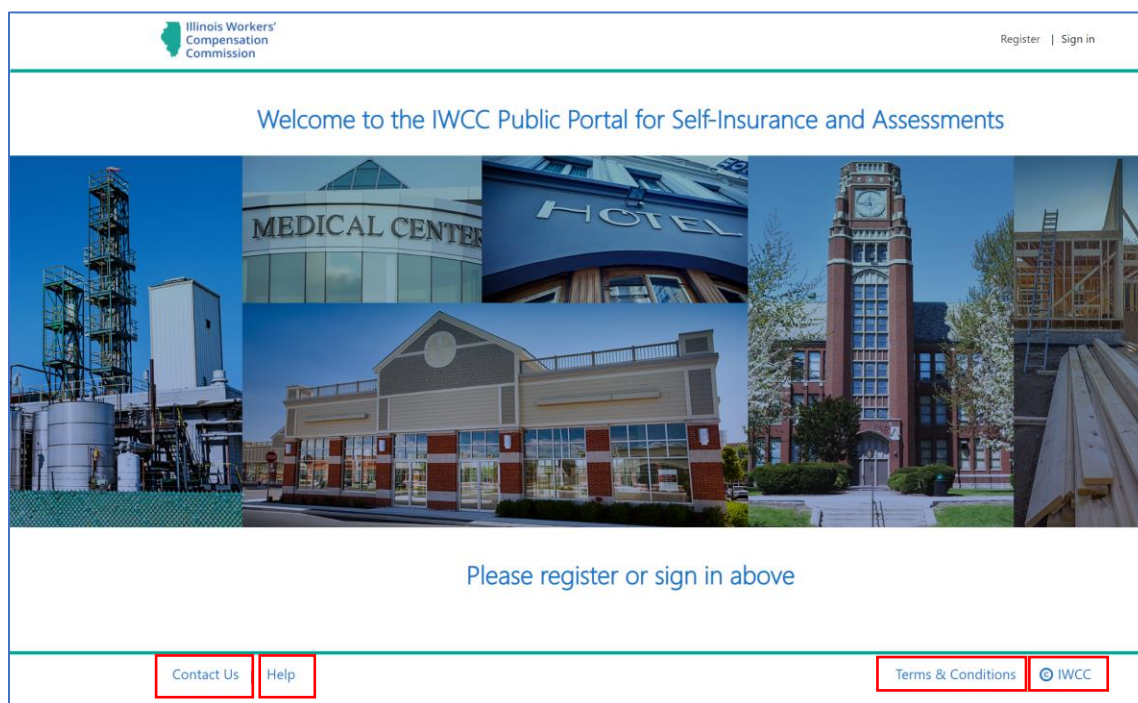

Figure 1.0

Introduction to Self-Insurance Plus (SIP)

SIP is the Illinois Workers' Compensation Commission's new electronic web portal for submitting initial applications, sub applications, and renewal applications, as well as assessments, and more! The portal requires you to register in the system, create an Okta account with multi-factor authentication, and create a password to keep your information secure.

The new portal is designed for a variety of functions. Companies requesting the self-insurance privilege can utilize the SIP portal for:
- Assessments: manage filing and processing of assessments.
- Initial Application: file a new application for self-insurance.
- Sub Application: add a subsidiary or affiliate to an existing approved application.
- Renewal Application: renew your application for self-insurance.
- Documents: provides the ability to upload documents to the IWCC electronically.
- Company Certificates: manage SIP certificates of coverage electronically.

Non-SI Companies can use SIP for managing their *Assessments*. Both SI and Non-SI Companies may access the SIP system by going to https://iwccsip.dynamics365portals.us/ . Figure 1.0 is the view of the SIP homepage before registration or logging into the system.

Types of Portal Users

Portal users can be one of two types: Non-SI Companies (insurance companies, municipalities, pools) and Self-Insurance Companies (SI Companies (private self-insurers)). The options available to each are different and described in detail below.

SIP Homepage for SI Company Admins

The SIP portal has different functions available depending on the account type registered within the system. If an account is registered as a private self-insurer, users can serve as a SI Company Admin or have a SI Company Staff role.

- SI Company Admin can access all portal features and manage company users. This permission allows assignment of security roles as well as sending invitations to other company portal users to join the company's account. The SI Company Admin can assign the Company Admin role to multiple people in the company. In other words, multiple company admins are permitted. The commission supports and recommends multiple company admins.
- SI Company Staff can access all portal features, but they will be unable to add new portal users, assign web roles, or send invitations.
- SI Company Staff will have access to all documents submitted in the system and correspondence from the IWCC. Contact the IWCC at wcc.selfinsurance@illinois.gov if a contact should only see assessment information.

SIP Home Page for Non-Self-Insurance Company Admins (Non-SI)

Non-SI Companies need access to the SIP Portal for assessment purposes only. Non-SI Companies have two roles in the portal: Non-SI-Company Admin or Non-SI-Company Staff.

- Non-SI Company Admin can access Assessments and manage company users. This permission allows assignment of security roles as well as sending invitations to other company portal users to join the company's account. The commission supports and recommends multiple company admins.
- Non-SI Company Staff can access Assessments, but they are unable to add new portal users, assign web roles, or send invitations.

Profile and Contact Management

Portal users with *Company Admin* permissions can manage their company profile. All users can manage their contact information in the portal. ***The only exception to this is a multi-company contact and that will be discussed later.*** There is a drop-down arrow to the right of the logged in user's name. Click this arrow to have the option to access the *Contact Profile, Company Contacts, Company Details,* and *Sign Out* to log out.
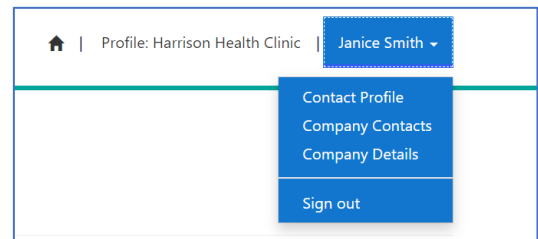
Figure 1.1

SIP for the Self-Insured Employer (SI Company)

When a Self-Insured Company Contact is logged in, the SIP homepage displays six (6) buttons, as shown in figure 1.2. A brief description of the buttons follows (from left to right, top to bottom order).
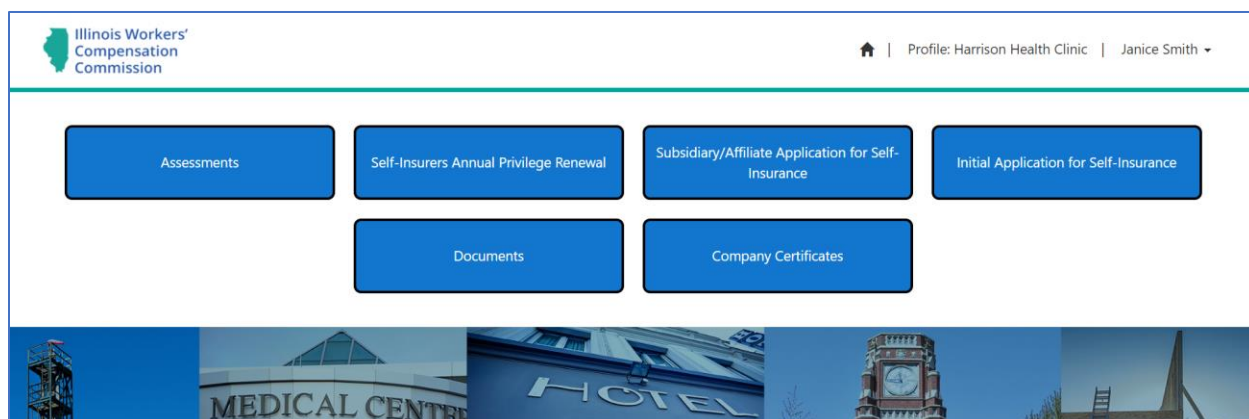
Figure 1.2

Assessments Button

Clicking the Assessments button takes the user to the *Assessments* summary page. This page includes summary details of the: Rate Adjustment Fund (RAF)/Second Injury Fund (SIF), Self-Insurers Security Fund (SISF), and Operations assessments. See figure 1.3. For each assessment, there is a *Current* and *History* option which is accessed by clicking the dropdown arrow. Note: when accessing the Assessments page, the default view is the Security Fund Assessments-Current.

For more detailed information, please see the section on Assessments.
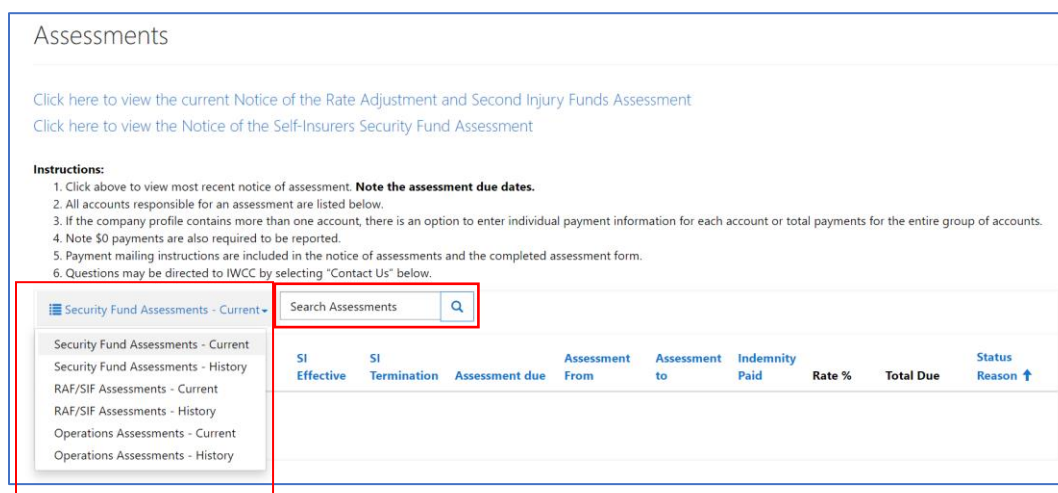
Figure 1.3

Initial Application for Self-Insurance Button

Clicking this button takes the user to the Initial Application for Self-Insurance summary page, allowing an employer to apply for self-insurance. Click *Create Application.* See figure 1.4. Prior

to final submission of the application, the user can work on the application and save it as a draft. The draft application will be listed in the summary. When the user is ready to continue the application process, click the down arrow on the far right to open/edit/finalize the application. *Once an application has been submitted to the IWCC, it cannot be edited*, only viewed (figure 1.5). Note: prior to completing an application, view the Required Information and Documents instructions on page 59 or on the IWCC homepage. Click the *Help* link on the bottom of the SIP portal page to go to the IWCC's Self-Insurance information page. For instructions on entering an application, see section *Filing an Application for Self-Insurance in SIP.*
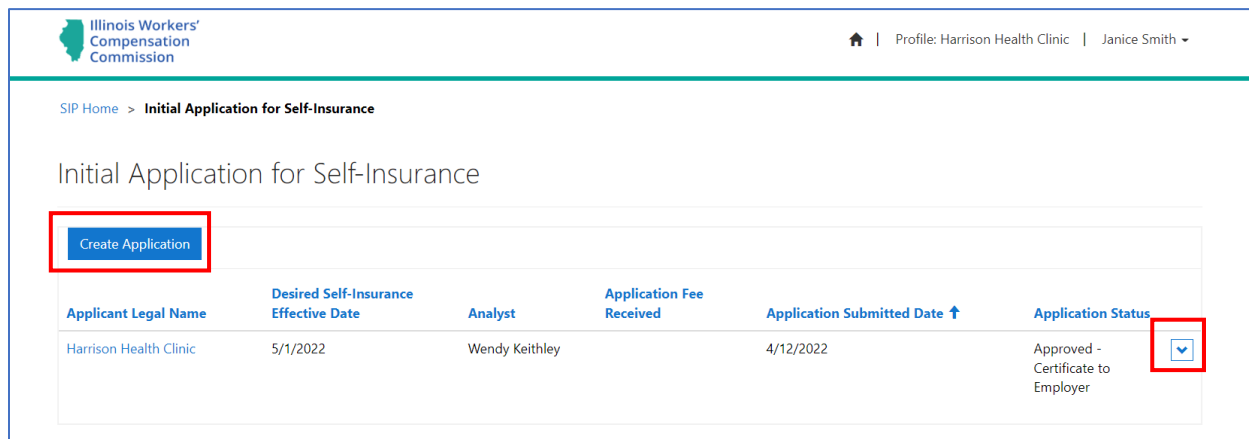
Figure 1.4
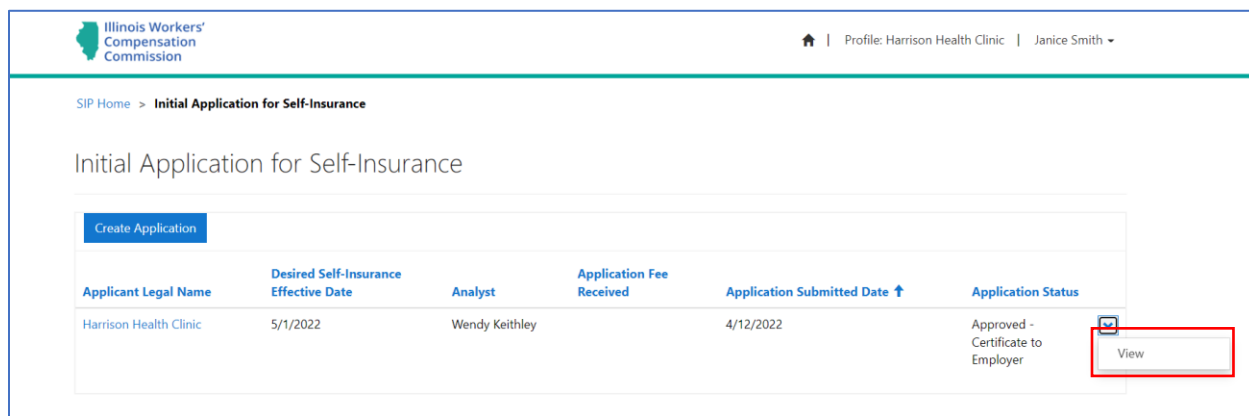
Figure 1.5

Subsidiary/Affiliate Application for Self-Insurance Button

Clicking this button takes the user to the Subsidiary/Affiliate Application for Self-Insurance summary page allowing a current self-insured employer to complete a self-insurance application for a subsidiary/affiliate. Click *Create New* (figure 1.6). The summary page also displays existing subsidiary electronic applications. Note: a subsidiary/affiliate application cannot be submitted if the parent's initial application or current renewal application is pending.

Figure 1.6

Prior to completing an application, view the *Required Information* and *Documents* instructions on page 60 or on the IWCC homepage. Click the *Help* link on the bottom of the SIP portal page to go to the IWCC Self-Insurance information page. For instructions on entering an application, see section *Filing a Subsidiary Application for Self-Insurance in SIP.*

Self-Insurers Annual Privilege Renewal Button

Every primary self-insured employer must file a yearly renewal to maintain its self-insurance privilege. Clicking this button takes the user with SI permissions to the Renewal Application summary page which displays a view of the user's current and prior electronic renewal applications. The system will notify the primary and secondary company contacts when the renewal application process is available for completion. Click the dropdown arrow next to the new renewal application to start the application or click on a prior renewal to view (figure 1.7).

Note: prior to completing a renewal application, view the *Required Information and Documents* instructions on page 61 or on the IWCC homepage. Click the *Help* link on the bottom of the SIP portal page to go to the IWCC's Self-Insurance information page. For instructions on entering a renewal, see section *Filing a Renewal Application for Self-Insurance in SIP.*

Figure 1.7

Documents Button

Clicking this button takes the user to summary page listing existing security instruments, excess coverage certifications, and additional documents submitted to the IWCC (figure 1.8). Portal users can upload new documents to existing records or add a new document as requested by the IWCC. If information for a specific document is displayed incorrectly, contact the IWCC.

Figure 1.8

Company Certificates Button

Clicking this button takes the user to a summary page listing certificates issued, and termination requests made in the electronic system (figure 1.8). The user may download and print a certificate, if the certificate in not in a pending status, by clicking on the down arrow next to the activate certificate. Also, to request a self-insurer be terminated from the self-insurance program, click the down arrow next to the self-insurer's certificate record and select *Create Termination Request.*

Figure 1.9

Submitting Assessments

Registered users (SI and Non-SI portal users) can see details of their assessments within SIP. SI employers can view the following assessments: Rate Adjustment Fund (RAF) and Second Injury Fund (SIF); Self-Insurers Security Fund (SISF); and Operations fee. Non-SI employers can view the following assessments: Rate Adjustment Fund (RAF) and Second Injury Fund (SIF); and Security Fund (SISF) assessments.

The assessment notices and due dates are available in the portal. The Assessment page has two links (circled below): one for the Notice of the Rate Adjustment and Second Injury Fund Assessment and another for the Notice of the Self-Insurers Security Fund Assessment. Clicking either of these links takes the portal user to the fund specific Notice of Assessment, allowing the user to download or print the document(s) (figure 2.0).

Figure 2.0

As shown in Figure 2.1, clicking the down arrow (outlined for reference) allows the portal user to select the assessment type as well as choose current or historical data, depending on the need.

Figure 2.1

Figure 2.2

Notice the view on the screenshot above (figure 2.2) is of RAF/SIF Assessments – Current. There are two assessments listed, one with a *Submitted* assessment and the other with an *Active* status. Portal users can complete an assessment if the assessment is in *active* status. By clicking the assessment record under the year column or by selecting the down arrow on the right, the portal user can enter the assessment fields to complete the assessment, print, upload, and submit it to the IWCC. *Once an assessment has been submitted to the IWCC, it cannot be edited.* See figure 2.3 and note that *view* is the only option for the assessment.

Year	Account	Assessment From	Assessment to	Assessment due	Indemnity Paid 6 Months	RAF Rate %	RAF Amount Due	SIF Rate %	SIF Amount Due	Total Due	Amount Received (RAF/SIF)	Status Reason ↑	
2022-5	Harrison Health Clinic	1/1/2022	6/30/2022	8/17/2022	$6,700,000.00	0.6250	$41,875.00	0.0625	$4,187.50	$46,062.50		Active	⌄
2022-3	Harrison Health Clinic	1/1/2022	6/30/2022	4/19/2022	$5,000,000.00	0.6250	$31,250.00	0.0625	$3,125.00	$34,375.00		Submitted	⌄ View

Figure 2.3

Submitting Rate Adjustment/Second Injury Fund and Self-Insurers Security Fund Assessments

The portal user will receive an email from SIP (wcc.SIPNoReply@illinois.gov) when an assessment has been issued and ready for completion. Example emails are shown in figure 2.4 and 2.5.
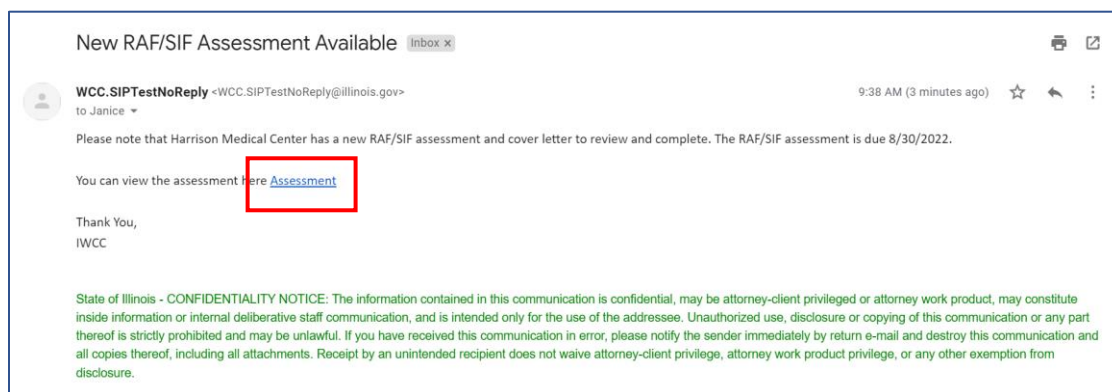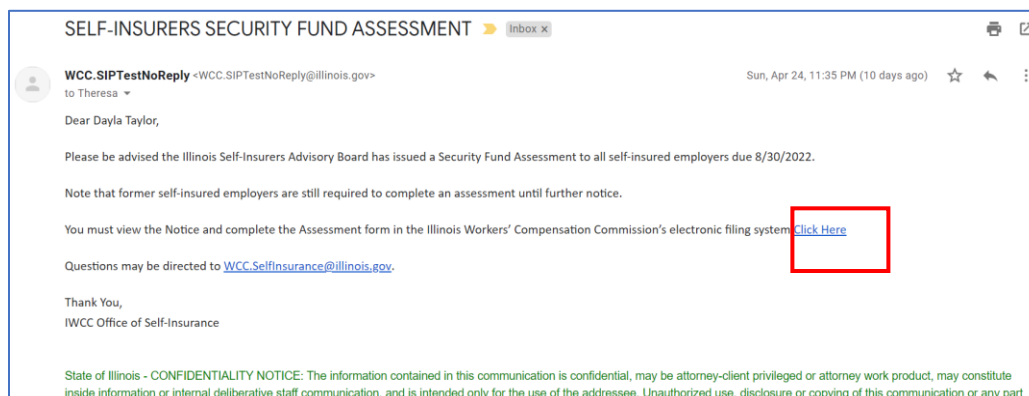

Figure 2.4

Figure 2.5

The portal user can click the *Assessment* link in the email or go to Assessments on the SIP homepage (https://iwccsip.dynamics365portals.us/). By clicking the down arrow next to the *active* assessment, a menu appears with an *Edit* option (figure 2.6).

Figure 2.6

A new window displays (figure 2.7) to complete the assessment. As shown, indemnity payments of $3,500,000 were reported by clicking in the payment box and typing the amount. There is also the option to link the subsidiaries into one assessment or leave them separate: select yes or no depending on your preference. There are instructions on the webpage to guide you through the process. Click *Save & Next.*

Figure 2.7

Clicking *Save & Next* calculates the amount due and presents the totals on the next screen (figure 2.8). It also provides a summary of the assessment fields and has options on the bottom right to go to the Previous page. If an error has been made, Exit the page (*Exit does not save your changes to the current page),* or Apply Signature & Next. By clicking the *Apply Signature & Next* button, a pop-up appears asking you to confirm you want to sign the assessment; Click yes to move to the next step.

Figure 2.8

The final step is the option to attach any supporting documents. This is not required. Simply click the *Attach Documents* button, select the document type: options are RAF/SIF Signed Assessment Form, Self-Insurer Security Fund Assessment Form, Operations Assessment Letter, and Check Copy, (see figure 2.9), click *Save & Next.* Then, click the *Add files* button, select the pertinent file from your computer, click the *Add files* button, and then click the *Upload* button. The document shows up on the screen with the document type listed, the name of the person who submitted it as well as the C*reated On* date. If you have inadvertently added the wrong document for upload, you may click the down arrow next to the incorrect document and delete it. Repeat the steps to add the correct document. Please note: to print the assessment for your records, click the *Print* button located on the bottom right of the screen. Clicking the print button begins the download of the assessment. Once the assessment is downloaded, you can print it. Once everything is complete and any documents are uploaded into SIP, click *Submit to IWCC.* Payment instructions are included in the notice.
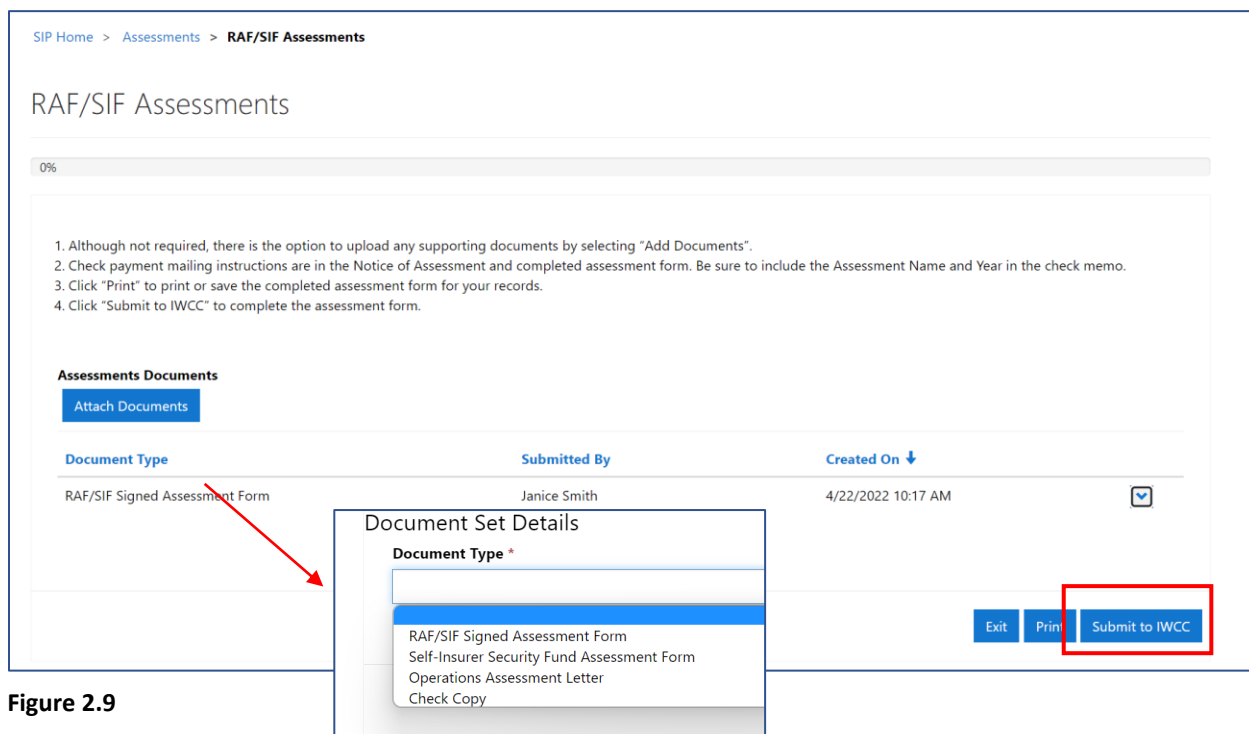
Figure 2.9

Operations Fund (ICOP) Assessments

The portal user receives an email from SIP (wcc.sipnoreply@illinois.gov) when an assessment has been issued and is ready for review. An example ICOP email is shown in figure 3.0. Within it is a link to the assessment in SIP.
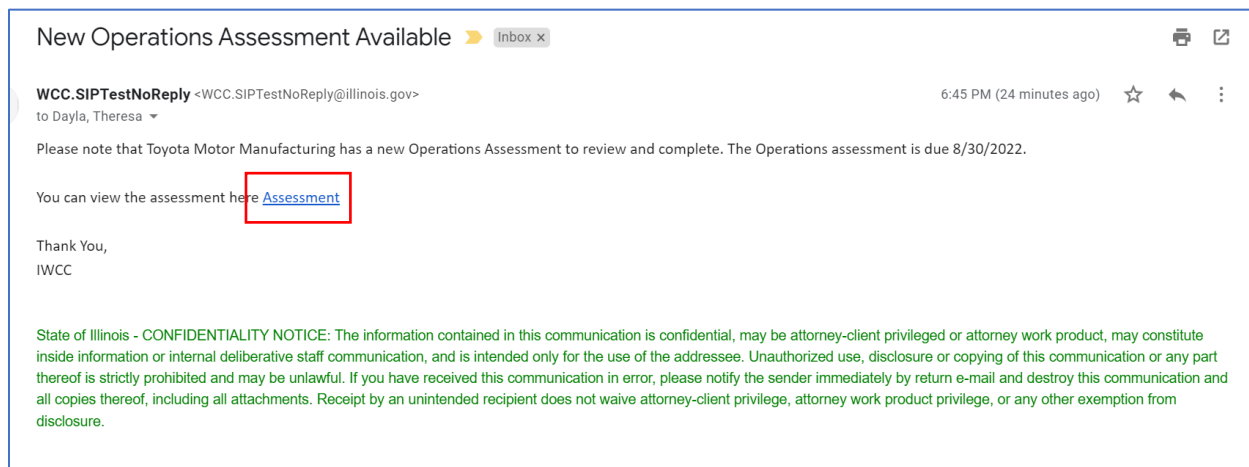
Figure 3.0

The portal user can click the Assessment link (marked in figure 3.0) in the email or go directly to the Assessments on the SIP homepage (https://iwccsip.dynamics365portals.ux/). The ICOP assessment can be downloaded/printed by clicking the *Print* button (see Figure 3.1 below). Payment instructions are included in the notice.

Figure 3.1

Filing an Initial Application for Self-Insurance in SIP

An initial application is filed when a private employer seeks approval for the self-insured privilege. Note: prior to entering an application, view the *Required Information and Documents* instructions on page 59 or on the IWCC homepage. Click the *Help* link on the bottom of the SIP portal page to go to the IWCC's Self-Insurance information page.

User navigates to the SIP portal and logs into their Self-Insurance account by clicking *Sign In.* Click *Initial Application for Self-Insurance* button, as shown in figure 3.2.

Figure 3.2

Figure 3.3

On the next screen, the user clicks the *Create Application* button, which generates an initial application for Self-Insurance to submit to the IWCC for approval. Once the information has been saved in the application, the status of the application can be viewed (see figure 3.3). All fields with a * must be filled out before moving to the next screen/page. The percent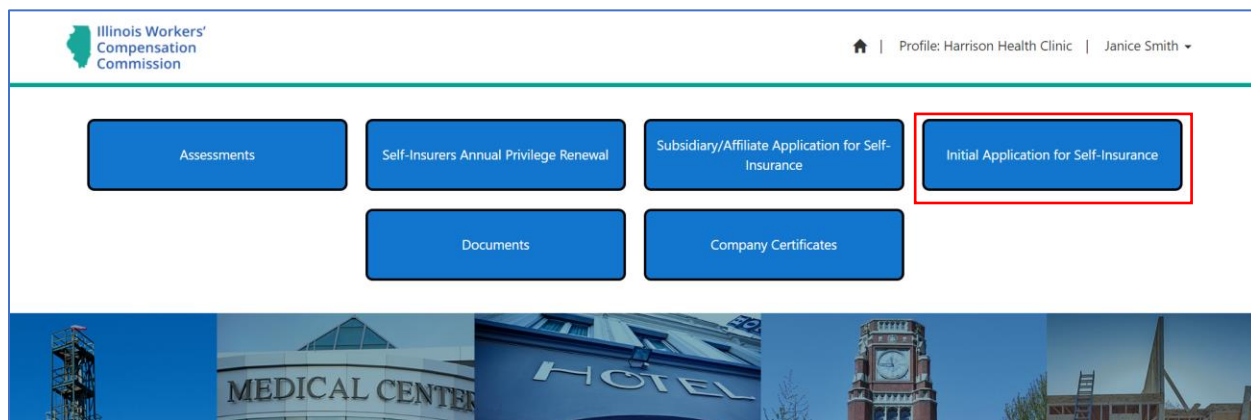age bar lets the user know the completion level as the screens/pages progress. The first field is *Applicant Legal Name**. The *Applicant Legal Name* is the full legal name of the employer applying to be self-insured within the state of Illinois. The user enters address information and the date requesting self-insurance and clicks *Save & Next* (figure 3.4)*. C*licking *Save & Next* saves your progress up to that point if you need to stop entering information. ***Exit does not save the work completed on your application.***

If at any time during this process, you need to step away from your machine and would like to come back later, press *Save & Next* at the bottom right of a screen. This will ensure all your work up to that point is saved, and you can come back later to complete the process. Pressing *Exit* from the following screen will take you out of the process.

Figure 3.4

The following page asks the user to provide primary, secondary, and assessment contact information. All three are mandatory fields and must be filled out to move to the next page of the application.

Figure 3.5

If the Company Admin has added one or more company contacts to the profile, the user is able to click the magnifying glass as shown in figure 3.5 and select a contact from the list for the three representative roles. The user can also type in the name or put a check mark next to the name and click the *Select* button (figure 3.6). The contact information for the selected user auto-populates the name, address, and phone into that section of the application. If a person is

chosen for a specific contact type by accident, put a check mark next to their name and click the *Remove Value* button. Repeat the above steps to add in the correct contact.

 Figure 3.6

When the selected contact is chosen through the search function, the information about the contact auto-fills and you do not have to fill out the information for each contact a second time (figure 3.7). If the company contacts contain all the information about your company and those who are working within the portal, it makes this page easy to fill out.

 Figure 3.7

The next page continues with questions regarding the applicant's Federal Employer ID Number (FEIN) and Company Type. As shown in figure 3.8, *Company Type* is a drop-down list: Select *Partnership, Limited Liability Company (LLC), Limited Liability Partnership (LLP), Corporation, S Corporation, or Nonprofit Corporation*. Only one may be selected.

Figure 3.8

Fill in the field for the *Nature of Business* and click the *Add NAICS Code* to open a new window (figure 3.9).

Figure 3.9

Clicking the magnifying glass opens a search window (figure 4.0).

Figure 4.0

Type the code or a business description into the search bar and click the magnifying glass. Choose the correct NAICS Code/Description from the list and click *Select*. Click *Save & Close.* Repeat for each NAICS code.

The use of a wildcard character is allowed/recommended in this search. You can type pharmacy* in the search bar to return all NAICS codes/descriptions that begin with the word *pharmacy* (figure 4.1). If there are multiple results, choose the most appropriate NAICS Code description and click the *Select* button.

 Figure 4.1

Note: If an incorrect code/description was saved, it can be updated or removed by using the down arrow next to the code/description (figure 4.2). Go through the steps to *Add* NAICS *Code* to add the correct NAICS code.

Figure 4.2

The remainder of this page asks the user questions relating to state of incorporation, incorporation date, and when the employer began doing business in Illinois. For the date fields, you can use the calendar function that allows you to have a calendar view and select the appropriate date or type the date into the box (MM/DD/YYYY – see figure 4.3). If the employer is a subsidiary, be prepared to also provide the ultimate parent's legal name, FEIN, and incorporation information. Click *Save & Next*.

Figure 4.3

For the next section, the applicant provides the corporate principal details by clicking the *Add Corporate Principal* button. A new window opens, and details of the corporate principal are entered. Click *Save & Close* to save the information. As shown in the screenshot (figure 4.4) the corporate principal information has been added to the screen. At least one corporate principal must be added. Click *Save & Next* to continue.

Figure 4.4

Next you will list any Subsidiaries or Affiliates seeking approval for self-insurance. Click *Add Subsidiaries/Affiliates* and you will see a new window to add in requested information. When complete, click *Save & Close* (figure 4.5).

Figure 4.5

If you have added a subsidiary or affiliate incorrectly, you can update it with the correct information or remove it altogether by clicking the down arrow next to the company and making the correct selection (see figure 4.6). Click *Save & Next* when ready to continue.

Figure 4.6

On the next page of the application, add the physical locations of each associated self-insured company. Click the *Add Physical Location* button (figure 4.7), which opens up a new window for entering location information.

Figure 4.7

Enter information for each Illinois physical location to be included in the self-insurance program (figure 4.8). Click *Save & Close. Perform this process for each location. At least one location is required.* After all locations have been enetered, click *Save & Next.*

Figure 4.8

NOTE: If there are more than 15 locations, create a worksheet with all of the information contained on the *Add Pysical Location* screen. This worksheet will be uploaded in a later step, prior to submission of the application (Name, Street Address, City, State, Zip, FEIN, Nature of Business and Avg. # Employees). If the button to add a location is clicked in error, click the x in the top right corner to close the pop up window.

Clicking *Save & Close* will not allow you to move forward as the system expects data to be added to the fields before continuing.

Once you have added the location(s), the details display on the page as shown in figure 4.9. If an error has been made when entering the location(s), click the down arrow to update or remove the record. Click *Save & Next* to proceed.

Figure 4.9

The next screen requires workers' compensation policy information. Be prepared to provide the current policy number and effective date, as well as specific premium information and class codes (see figure 5.0 that follows).

Note: Mandatory fields must be entered or an error message displays. The application process cannot continue until all required information has been provided.

Figure 5.0

To add compensation premium, click the *Add Compensation Premium* button and a new window appears (figure 5.1). All fields are required before clicking *Save & Close.*

Figure 5.1

The next section on the screen involves claim history and requires the year end dates for the most recent three (3) completed policy years. Use the calendar function or manually enter the dates (MM/DD/YYYY) (figure 5.2). When fields are completed, click *Save & Next.* If you need to go back to the previous page, click *Previous.* Note: your progress on the current page will be lost if you go back to the previous page.

Figure 5.2

The next page of the application is related to *Claims Information.* All questions must be answered in order to proceed. Click the down arrow to the right of each question to *Add* responses (circled below in figure 5.3).

Figure 5.3

After the down arrow is clicked and *Add* is selected, a new window opens to enter claim information for each *Policy Year Ended*. For example, the *Number of accidents requiring only medical attention* question has fields available for all three policy years (figure 5.4). These are manual data entry fields, so simply click in the box and respond to each line item. A value of 0 is a valid answer. When finished, click *Save & Close*.

Figure 5.4

After each question is answered, the user must indicate if the reserves in question D vary by more than 20% from one year to the next. If Yes, a box will appear to provide an explanation for the variance. Click *Save & Next* to proceed*.*

The *Service Agency or Company Claim Administrator* screen requires the user to provide information regarding the responsible party for the administration of claims for the proposed self-insured company. Click the *Add Claims Administration Contact* button and provide the required information (figure 5.5). Click *Save & Close*.

 Figure 5.5

Once the information has been added to the screen, verify its accuracy. If something has been incorrectly added, click on the down arrow on the right side of the screen. There is an option to either *Update* or *Remove* the line item (figure 5.6). If remove is selected, a message appears

asking you to confirm removal of the information. If confirmed, click the *Delete* button and the information is removed from the system. If the information is correct, click *Save & Next.*

Figure 5.6

Safety representative information is required on the next SIP screen (figure 5.7). The user will enter the name and contact information for the safety representative, identify all medical facilities that are available, and add any employee occupational disease exposures if applicable. *Add exposure to Substance* works like the other *Add* features in the portal: Click the button, a new window appears, enter the mandatory fields, and click *Save & Close*. If no exposures have occurred, click *Save & Next* and proceed to the next page.

Figure 5.7

The next screen contains three questions, with simple Yes/No answers (figure 5.8). Make the appropriate selection. Each of the questions have answers defaulted to "No". If any of the questions are *Yes*, an explanation will be required in a box that appears directly below the question. Click *Save & Next* when complete.

Figure 5.8

On the last page of the application, the user will attach and upload the required documents into the portal prior to submitting the application to the IWCC.

Prior to final submission of the application, the user must download and print the application affidavit for the officer signatures and notarization. Click *Download to Print Affidavit and Application* button (figure 5.9). Once signed/notarized, upload along with other required documents. Click the *Attach Documents* button.

Figure 5.9

Once clicked, a new window appears (figure 6.0). Click the down arrow to bring up a list of document types. Note: do this for every required document type: Select the appropriate document types. Click *Save & Next.*

Figure 6.0

A second window opens for uploading the selected document. Click *Add files* then *Choose Files.* Locate the file(s) on your local machine, click *Add files,* and then click *Upload* (figure 6.1)*.*

For uploading more than file per document type, see section *Uploading Multiple Files within a Document Type* on page 62.

Figure 6.1

If the user fails to upload all the required documents before clicking 'Submit to IWCC,' an error message is returned (figure 6.2). Only when all document types have been uploaded to the application is the user able to submit the self-insurance application.

Figure 6.2

The required documents for an initial application for self-insurance include: *Signed & Notarized Affidavit, Evidence of Current Coverage, Experience Modification Factor – NCCI Worksheet, Financial Statements (3 years),* and *Detailed Loss Runs (3 years).* If more than 15 locations need to be added to the application, upload the additional locations during this step. Descriptions of all fatalities must be included, if applicable.

When all documents have been attached and downloaded, select *Submit to IWCC.* Once submitted, a success message displays (see figure 6.3).

Figure 6.3

After submitting the initial application to the IWCC, an acknowledgment email is sent to the primary and secondary contact (figure 6.4).
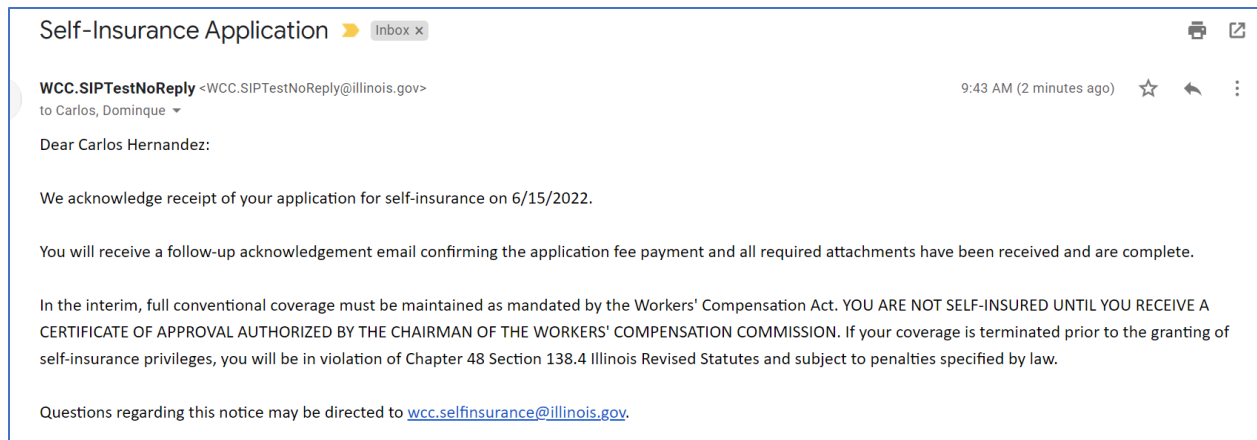
Figure 6.4

IMPORTANT: The renewal will not be processed until the renewal fee has been paid.
It currently cannot be paid through the Self-Insurance Plus Portal.
Please remit fee to:
Illinois Workers' Compensation Commission
Office of Self-Insurance
Springfield Regional Office Building
4500 South 6th St. Frontage Road
Springfield, IL 62703

Filing a Subsidiary Application for Self-Insurance in SIP

A subsidiary application is filed when an approved self-insurance employer seeks to add subsidiaries or affiliates to its self-insurance program. Note: prior to entering an application, view the *Required Information and Documents* instructions on page 60 or on the IWCC homepage. Click the *Help* link on the bottom of the SIP portal page to go to the IWCC's Self-Insurance information page.

User navigates to the SIP portal and logs into their Self-Insurance account by clicking *Sign In.* Click *Subsidiary/Affiliate Application for Self-Insurance* button, as shown in figure 6.5.
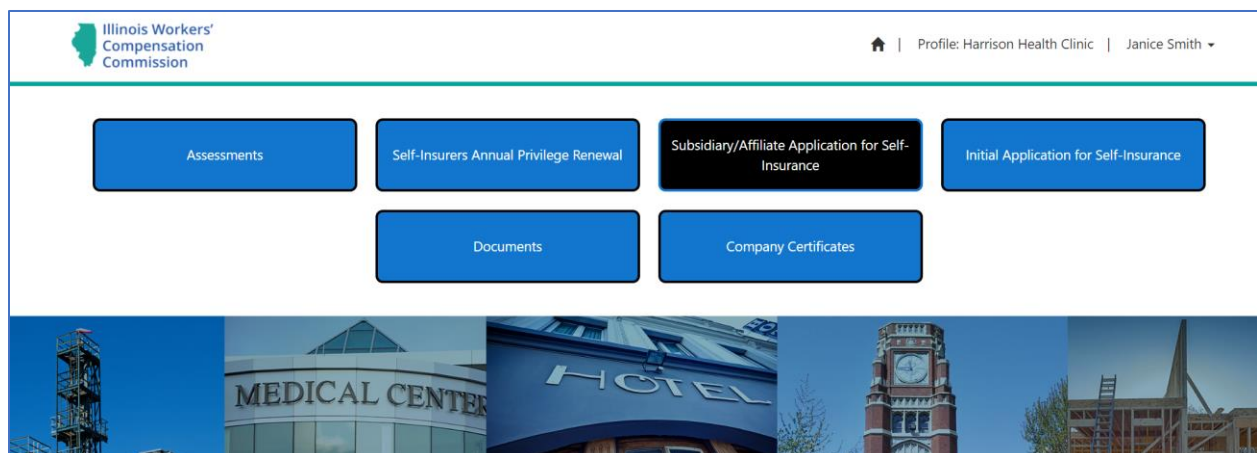
Figure 6.5

On the next screen, the user clicks the *Create New* button (figure 6.6) which generates a subsidiary/affiliate application to submit to the IWCC for approval. Once the information has been saved in the application, the status of the application can be viewed in the portal.

Figure 6.6

All fields with a red * must be filled out before moving to the next screen/page. The percentage bar lets the user know the completion level as the screens/pages progress. The first field is *Applicant Legal Name**. The *Applicant Legal Name* is the full legal name of the employer applying to be self-insured within the state of Illinois. The user enters address information and the date requesting self-insurance, and specifies if it is a subsidiary or affiliate, and clicks *Save & Next* (figure 6.7)*.*

If at any time during this process, you need to step away from your machine and would like to come back later, press *Save & Next* at the bottom right of the screen. This will ensure all of your work up to that point is saved, and you can come back at a later time to complete the process. Pressing *Exit* from the following screen will take you out of the process.

Figure 6.7

The following page (figure 6.8) presents the primary contact information. These fields auto-populate from the Parent Company profile. Click *Save & Next*.

Figure 6.8

The next page continues with questions regarding the applicant's Federal Employer ID Number (FEIN) and Company Type. As shown in figure 6.9, *Company Type* is a drop-down list: Select *Individual, Partnership, Limited Liability Company (LLC), Limited Liability Partnership (LLP), Corporation, S Corporation, or Nonprofit Corporation*. Only one may be selected.

Figure 6.9

Fill in the field for the *Nature of Business* and click the *Add NAICS Code* to open a new window (figure 7.0).

Figure 7.0

Clicking the magnifying glass opens a search window (figure 7.1).

Figure 7.1

Type the code or business description into the search bar and click the magnifying glass. Choose the correct NAICS Code/Description from the list and click *Select*. Click *Save & Close.* Repeat for each NAICS code.

The use of a wildcard character is allowed/recommended in this search. You can type *physician* in the search bar to return all NAICS codes/descriptions that contain the word *physician*. See results in figure 7.2. If there are multiple results, choose the most appropriate NAICS Code description and click the Select button.

Figure 7.2

Note: If an incorrect code/description was saved, it can be updated or removed by using the down arrow next to the code/description (figure 7.3). Go through the steps to *Add NAICS Code* to add the correct NAICS code.

Figure 7.3

The remainder of this page asks user questions relating to state of incorporation, incorporation date, and when the employer began doing business in Illinois. For the date fields, you can use the calendar function that allows you to have a calendar view and select the appropriate date or type the date into the box (MM/DD/YYYY). Click *Save & Next*.

On the next page of the subsidiary application, add the physical locations of each applicant. Click the *Add Physical Location* button (figure 7.4) which opens up a new window for entering location information.

Figure 7.4

Enter information for each Illinois physical location to be included in the self-insurance program. Click *Save & Close*. Perform this process for each location. At least one location is required. After all locations have been entered, click Save & Next.

NOTE: If there are more than 15 locations, create a worksheet with all of the information contained on the *Add Physical Location* screen (Name, Street Address, City, State, Zip, FEIN, Nature of Business and Avg. # Employees). This worksheet will be uploaded in a later step, prior to

Figure 7.5

submission of the subsidiary application. If the button to add a location is clicked in error, click the x in the top right corner to close the pop up window. The next screen is about the current workers' compensation policy for the applying subsidiary. If there is a current policy in place, be prepared to provide the current policy number and effective dates, as well as specific premium information and class codes (see figure 7.7).

Figure 7.6

To add compensation premium, click the *Add Compensation Premium* button and a new window appears. All fields are required before clicking *Save & Close (see figure 7.6, 7.7).*

Figure 7.7

The next section on the screen involves claims history and requires the year end dates for the most recent three (3) completed policy years. Use the calendar function or manually enter in the dates (M/D/YYYY) (figure 7.8). When fields are completed, click *Save & Next.* If you need to go back to the previous page, click *Previous.* Note: your progress on the current page will be lost if you go back to the previous page.

Figure 7.8

The next section of the subsidiary application is related to *Claims Information.* All questions must be answered in order to proceed. Click the down arrow to the right of each question to *Add* responses (marked below in figure 7.9).

Figure 7.9

After the down arrow is clicked and *Add* is selected, a new window opens to enter claim information for each *Policy Year Ended.* For example, the *Total dollars paid for claims* question has fields available for all three policy years (figure 8.0). These are manual data entry fields, so simply click in the box and respond to each line item. A value of 0 is a valid answer. When finished, click *Save & Close*.

Figure 8.0

After each question is answered, the user must indicate if the reserves in question D vary by more than 20% from one year to the next. If *Yes,* a box will appear to provide an explanation for the variance. Click *Save & Next* to proceed.

Safety representative information is required on the next SIP screen (see figure 8.1). The user will complete the name and contact information for the safety representative, identify all medical facilities that are available, and add any employee occupational disease exposures, if applicable. *Add exposure to Substance* works like the other *Add* features in the portal: Click the button, a new window appears,enter the mandatory fields, and click *Save & Close*. If no exposures have occurred, click *Save & Next* and proceed to the next page.

Figure 8.1

On the last page of the subsidiary application (figure 8.2), the user will attach and upload the required documents into the portal prior to submitting the application to the IWCC. Prior to final submission of the application, the user must download and print the application affidavit for the officer signatures and notarization. Click *Download to Print Affidavit and Application* button. Once signed/notarized, upload along with the other required documents. Click the *Attach Documents* button.

Figure 8.2

Once clicked, a new window appears. Click the down arrow to bring up a list of document types (figure 8.3). Note: do this for every required document type: Select the appropriate document types one by one. Click *Save & Next.*

Figure 8.3

A secondary window opens for uploading the selected document, click *Add files,* then *Choose Files.* Locate the file(s) on your local machine and click *Add files,* then Upload (figure 8.4).
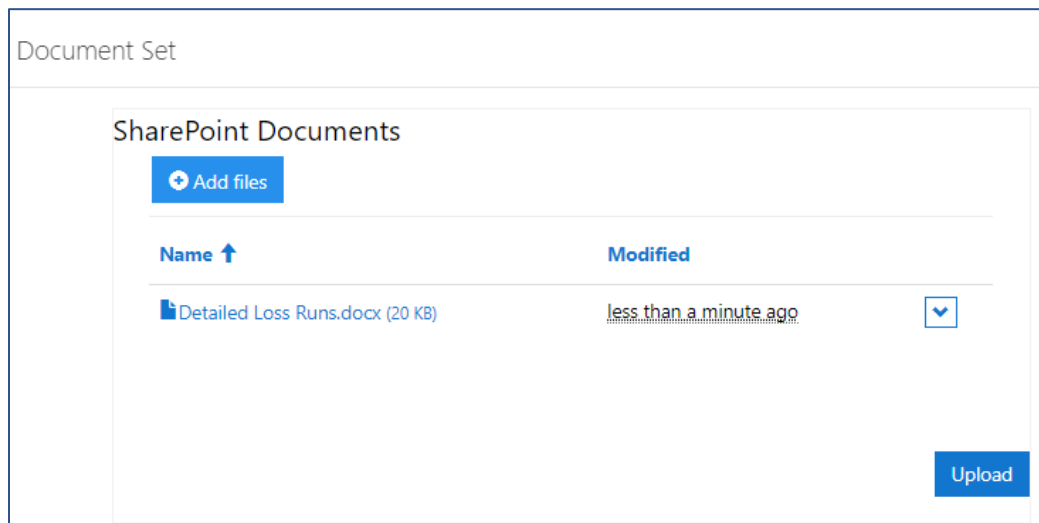
Figure 8.4

If the user fails to upload all the required documents before clicking *Submit to IWCC,* an error message is returned. (see figure 8.5).

For uploading more than one file per document type, see section *Uploading Multiple Files within a Document Type* on page 62.
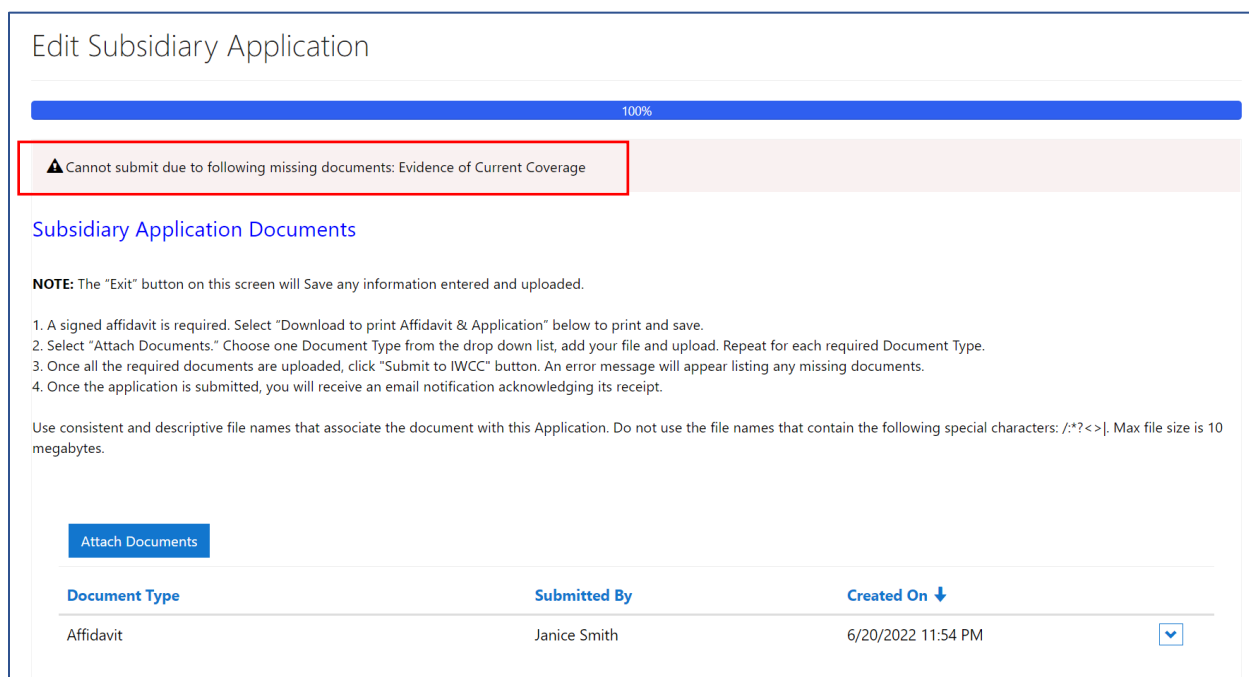
Figure 8.5

The required documents include: *Signed Affidavit, Evidence of Current Coverage, and Description of all Fatalities (if applicable).*

Figure 8.6

When all documents have been attached and downloaded, select Submit to IWCC (figure 8.6). Once submitted a success message displays.

After submitting the subsidiary application to the IWCC, an email is sent to the primary and secondary contact acknowledging receipt (figure 8.7).
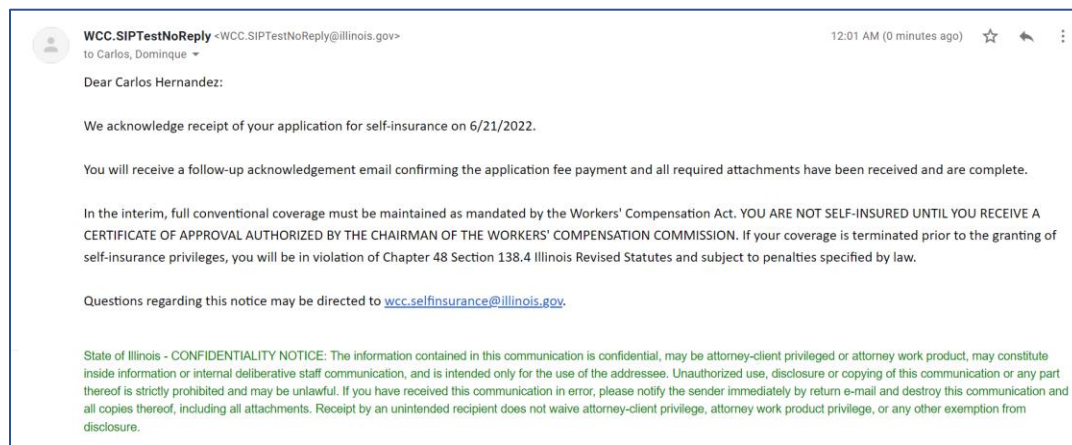
Figure 8.7

IMPORTANT: The application will not be processed until the application fee has been paid. It currently cannot be paid through the Self-Insurance Plus portal. Please remit fee to: Illinois Workers' Compensation Commission
Office of Self-Insurance
Springfield Regional Office Building
4500 South 6th Street, Frontage Road
Springfield, IL 62703

Filing a Renewal Application for Self-Insurance in SIP

Each private self-insurer must file an annual renewal application for its self-insurance privilege with the IWCC. The Self-Insurance Office will notify the companies when it is time to renew via an email to the primary contact and a copy to the secondary contact (figure 8.8).

Note: prior to completing a renewal application, view the *Required Information and Documents* instructions on page 61 or on the IWCC homepage. Click the *Help* link on the bottom of the SIP portal page to go to the IWCC's Self-Insurance information page.
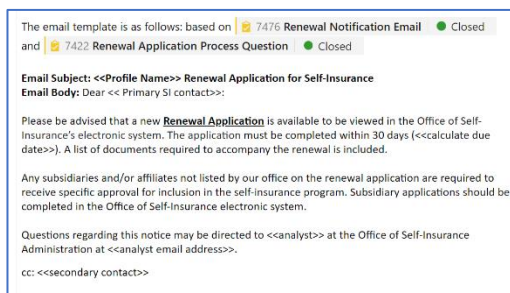
Figure 8.8

After logging into SIP with their username and password, the user clicks the Self-Insurers Annual Privilege Renewal button and is presented with the renewal application. The status of the renewal is *Renewal Sent.* Click the dropdown arrow next to the new renewal application and select *Edit* to start the application (figure 8.9).

If at any time during this process, you need to step away from your machine and would like to come back later, press *Save & Next* at the bottom right of the screen. This will ensure all your work up to that point is saved, and you can come back later to complete the process. *Exit* from the following screen will take you out of the process.
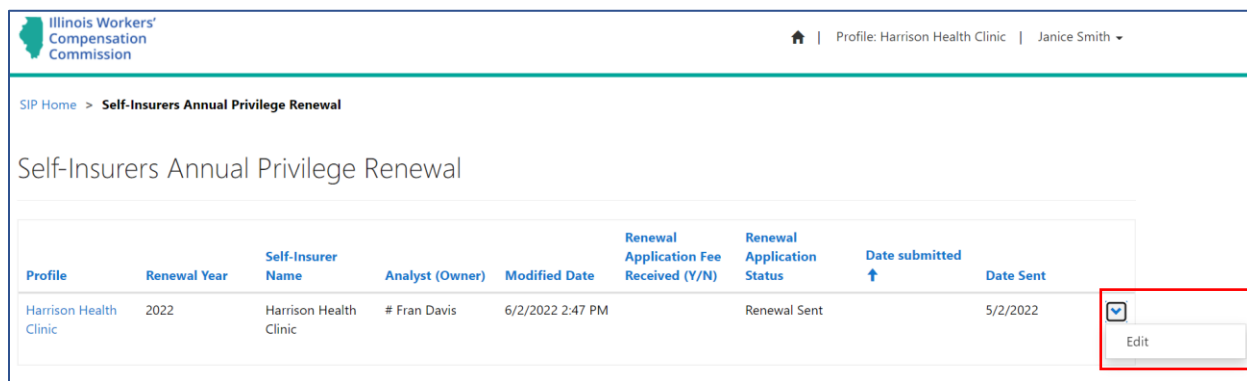
 Figure 8.9

Some of the fields within the renewal application will be pre-populated based on previous data provided to the Self-Insurance office. The user should answer all the renewal questions and validate the information that is presented on the screen for accuracy. If any information presented on the screen cannot be edited and saved, contact the analyst.

All fields on the renewal application marked with a red * are required fields and must be filled out to submit the renewal application to the IWCC

The first screen of the renewal will be pre-populated (figure 9.0).

Figure 9.0

The next section requires the nature of business and the NAICS code(s) for the primary self-insurer and approved subsidiaries.

Fill in the field for *Nature of Business* if blank. Also, if you need to add new NAICS codes, click the *Add NAICS Code* button to bring up a new window (figure 9.1). Type the code or business description into the search bar and click the magnifying glass. Choose the correct NAICS Code/Description from the list and click *Select.* The use of a wildcard character is allowed/recommended in this search. You can type *physician* in the search bar to return all NAICS codes/descriptions that contain the word physician. If there are multiple results, click the box for the appropriate NAICS description and click the *Select* button. Click *Save & Close on the NAICS Code window.*

Notice that the NAICS Code selection you made now appears in the sub grid below the code and description. If there is a wrong code/description listed, click the down arrow at the end of the NAICS Code sub grid and click update or mark for removal.

If there is an ultimate parent company, it would be present on this screen. If there are corrections that need to be made, click in the *Corrections* text box, and enter those corrections. Once complete, Click *Save* and next.

Figure 9.1

The next section lists the approved subsidiaries/affiliates (figure 9.2). The user should verify the information for accuracy. If any of the information is incorrect, or if the employer has a subsidiary/affiliate to be removed from the self-insurance program, select the dropdown arrow to the right of the company to update. In the new window, show changes in the *Corrections* text box and select *Yes* if the subsidiary is *Marked for Termination.*

The following text boxes will not be pre-populated:

- The *Other Subsidiaries or Affiliates* text box should reflect the subsidiaries that are not approved self-insurers.
- The *Other States* text box should list all the states where the employer is currently self-insured for workers' compensation.

Once information is provided, click *Save & Next* to move forward. If you need to go back to the prior page, click *Previous* and you will be taken back one page.

Figure 9.2

The next screen lists the existing self-insured locations reported by the employer (figure 9.3). The user can update or remove any locations from the list by selecting the dropdown arrow next to the operation name and select *Update.* Click *Save & Close* when done updating. The user can also add new self-insured locations using the *Add Physical Location* button (figure 9.3). Once the locations information is correct, click *Save & Next.* Note: If there are more than 15 locations, create a worksheet with all of the information contained on the *Add Physical Location* pop-up screen (Operation Name, Street Address 1, Street Address 2 if applicable, City, State, Zip, FEIN, Nature of Business and Avg. # Employees). This worksheet will be uploaded in a later step, prior to submission of the application to the IWCC. If the button to add a location is selected in error, click the x in the top right corner to close the pop up window. Clicking *Save & Close* will not allow you to move forward as the system expects data to be added to the fields before continuing.

Figure 9.3

The next page of the renewal application provides previously reported information about primary, secondary, and assessment contacts. The user should verify the contact information for accuracy. If a contact change is necessary, click the magnifying glass next to the current contact to select and replace with another registered contact (as shown in figure 9.4). To delete the current contact, click the X.

Figure 9.4

If the Company Admin has added one or more company contacts to the profile, the user is able to click the magnifying glass and type in the name of the contact to be added for the three representative roles. Once you have found the contact's name, click to put a check mark next to

the name and click the *Select* button. The contact information for the selected user auto-populates the name, address, and phone. Do this for each contact type. If a person is chosen for a specific contact type by accident, put a check mark next to their name and click the *Remove Value* button. Repeat the above steps to add in the correct contact. You are ready to move to the next screen by clicking *Save & Next.*

Information regarding the claims service agency/claims self-administrator appears on the next page. If everything is correct, click *Save & Next.* If the information is not correct, you may update or remove the listed administrator by clicking the dropdown arrow to the right of the company. To add a new claims administrator, click the *Add Claims Administrator* button as shown in figure 9.5. After entering all required fields, *click Save & Next.* Note: a copy of new claims service agency contract or amendment must be uploaded in a later step.

Figure 9.5

Information regarding the Security instruments maintained by the IWCC are listed on the next screen in detail. If there are corrections, they may be added to the *Security Instruments Correction* box as show in the following screenshot (figure 9.6).

Figure 9.6

Information regarding the current Excess insurance reported to the IWCC is also listed on this page (figure 9.7). New policy information should be added here by clicking *Add Excess Policy Information.* After entering the required data, click *Save & Close.* Note: a copy of the new excess certificate must be uploaded in a later step. Once finished, click *Save & Next.*

Figure 9.7

Portal user should provide information about *Employees & Wages* on the next page (figure 9.8); simply click and type within the text boxes provided. Click *Save & Next.* Note: a copy of the wage reports must be uploaded in a later step.

Figure 9.8

The next page contains information about Illinois claims Loss History. As shown in figure 9.9, data for previous years will be pre-populated based on previous reports provided to the Self-Insurance office. Claims information from the previous calendar year must be added by clicking the down arrow for each line item.

Figure 9.9

The pre-populated information contained within the previous years' fields cannot be updated here (figure 10.0). Corrections must be indicated within the *Comments* field. The Self-Insurance office will review the corrections and contact the company if necessary. When all answers have been provided, click *Save & Next* to move to the next page of the renewal application. Note: a copy of the paid loss reports must be uploaded in a later step.

Figure 10.0

Providing Outstanding Loss Reserves detail is next (figure 10.1). The requested validation date for the reserves is indicated. Click within the text box and enter the appropriate information for each question listed. Click *Save & Next.* Note: a copy of the outstanding loss reserves must be uploaded in a later step.

Figure 10.1

Two questions are presented on the next page (figure 10.2). Simple No/Yes responses are required; Notice if you select Yes on the second question, a reason for change in financial condition is required. Provide the reason and click Save *& Next*.

Figure 10.2

The last page (noted with 100% complete in the blue bar across the top) instructs the user to attach the required documents for the renewal (figure 10.3). This is a mandatory step, and the renewal application cannot be submitted until the appropriate documents are attached.

Figure 10.3

Figure 10.4

Per the instructions on the page, the first step is to select the *Download to print Affidavit & Application* button to print and save the renewal application (figure 10.4). A download appears in the lower left corner of the screen as a Microsoft Word document: Click on it to open. A *draft* of the application is presented to you for printing/reviewing/saving. The affidavit must be signed and notarized. Please note this is not the submitted renewal application.

Next, click the *Attach Documents* button and the Document Type drop down displays the various documents available for upload for the renewal application (figure 10.4). Select the document type, then click the *Add Files* button from the pop-up window. Navigate to the file you are uploading, click *Add Files,* and click the *Upload* button. Please note only one document type may be uploaded at a time. You must complete these steps for every document you upload into the SIP system. For uploading more than one file per document type, see section: *Uploading Multiple Files within a Document Type* on page 62.

Required documents for the renewal application include:

Signed Affidavit
Financial Statements-Parent
Outstanding Claim Reserve Report
Detailed Loss Reports
Wage Reports

These documents are required (if applicable, based on responses within the renewal):

Collectible Excess Insurance Report
Service Agency Agreement
Certificate of Excess Insurance
Evidence of conventional insurance coverage for Terminated subsidiary/affiliates (select other)
Financial Condition Change Explanation

Additional Support Documents:

Physical Locations List
    Spreadsheet with columns in the following order: Name, Street Address, City,
    State, Zip, FEIN, Nature of Business and Avg. # Employees
Quarterly Financial Statement
Staffing Company Additional Document
Other
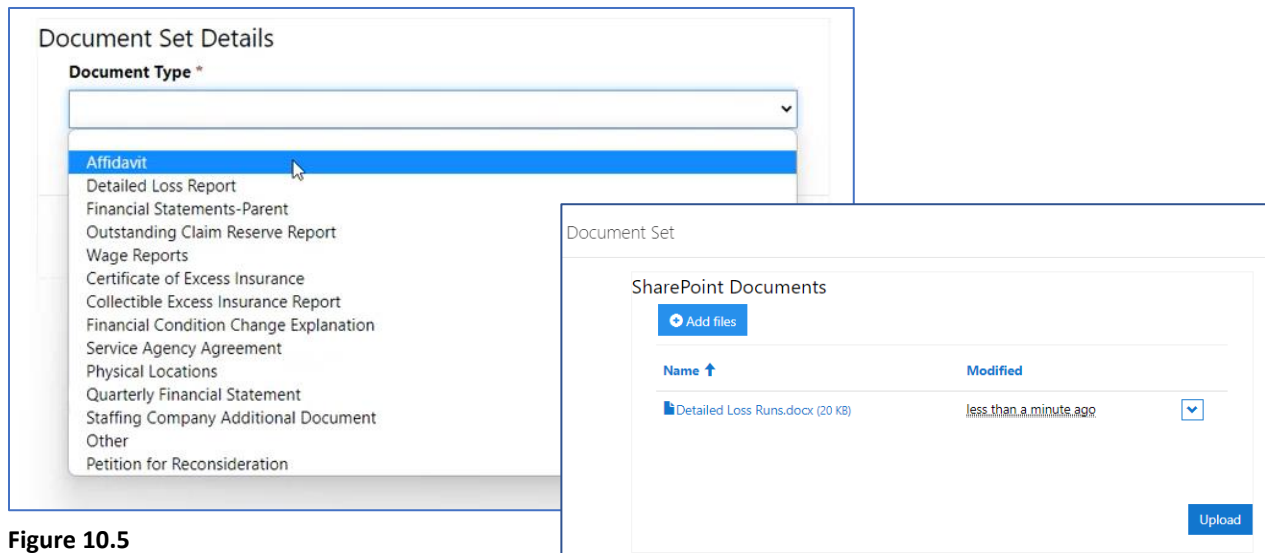
Figure 10.5

Note: all required documents must be uploaded prior to submitting the renewal application to the IWCC. When all documents have been attached and you have uploaded the signed affidavit to the portal, click the *Submit to IWCC* button. The system will give you an error message and list any missing required documents. Once all required documents have been submitted, a success message displays (figure 10.6).
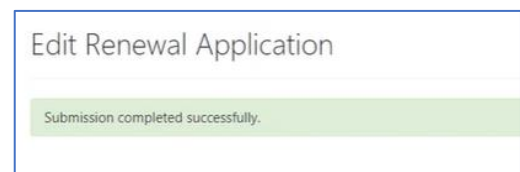
Figure 10.6

POST SUBMISSION OF THE RENEWAL APPLICATION

IMPORTANT: The renewal application will not be processed until the renewal fee has been paid. It currently cannot be paid through the self-insurance Plus Portal. Please remit fee to:

Illinois Workers' Compensation Commission
Office of Self-Insurance
Springfield Regional Office Building
4500 South 6th St. Frontage Road
Springfield, IL 62703

No changes may be made to the renewal application after it is submitted. It can be viewed, but not altered. If you make a mistake on the renewal application, you may contact the IWCC by clicking the *Contact Us* at the bottom left of the screen, allowing you to email the self-insurance team for assistance (wcc.selfinsurance@illinois.gov).

If the user failed to attach a document, they can go back to the *Upload Document* screen and attach it. Click on the *Self-Insurers Annual Privilege Renewal* from the SIP homepage screen to return to the renewal screen. Select the renewal to attach additional documents. The system will take you to the last page with the *Attach Documents* button.

To follow the status of the renewal, click on the *Self-Insurers Annual Privilege Renewal* button from the SIP homepage and select the renewal (figures 10.7 & 10.8).

Figure 10.7

Note: Please note the status of items you submit to the IWCC. Certain status descriptions allow you to make updates or edits, while some do not.

Once IWCC reviews the application and the Notice is signed by the Chairman, the primary and secondary contacts will receive an email that a Notice is available to be viewed. Click on the *Self-Insurers Annual Privilege Renewal* button from the SIP homepage to return to the renewal application screen. Select the dropdown arrow to the right of the *Renewal Year*, select *View* (f*igure 10.8).* Click *Next.* The Notice letter will be listed with all the documents the user previously uploaded. The Notice letter can be viewed/downloaded by clicking the down arrow (figure 10.9). IMPORTANT: There may be deadline requirements in the Notice.

Figure 10.8

Figure 10.9

After reviewing the *notice*, any required documents can be uploaded by clicking the *Documents* button from the SIP homepage (refer to *Documents* button description for additional information.

Figure 11.0

Self-Insurance Termination Request

If an approved self-insurer is terminating its self-insurance privilege, a user may begin the termination process by clicking the *Company Certificates* button from the SIP homepage. The certificates page shows all the company's self-insurance certificates (figure 11.1).

Figure 11.1

Click the down arrow next to the company being terminated from the self-insurance program and select *Create Termination Request* (shown in figure 11.2). There are required fields for the termination request, one of which is a *Reason* for the termination. Please provide the detail as to why you wish to terminate self-insurance; click *Save & Next.* The next page allows documents to be attached. Click *Attach Documents* and select the appropriate document type to upload. Choose *Add Files* and navigate to the document you are uploading. Once selected, click *Add files* and click *Upload.* Note: At least one of the document types listed below in the screenshot must be attached for the termination request. Once attachment(s) is complete, click *Submit to IWCC.*
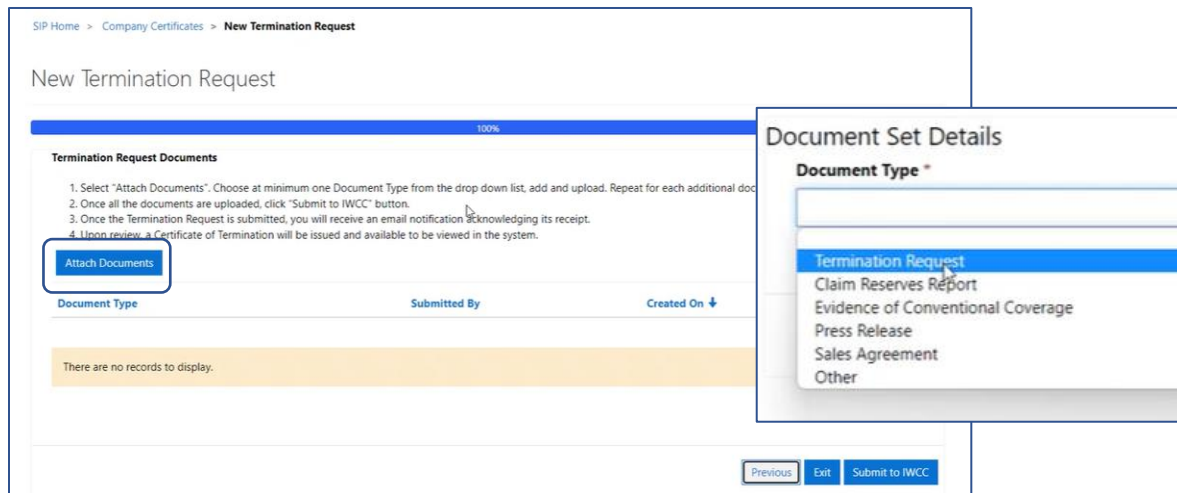
Figure 11.2

As per the instructions on the page detail, you will receive an email notification of receipt of the request and the *Company Certificates* page will reflect the submission (figure 11.3). Once IWCC reviews and approves the request, a Certificate of Termination will be issued, and available via the SIP home screen.
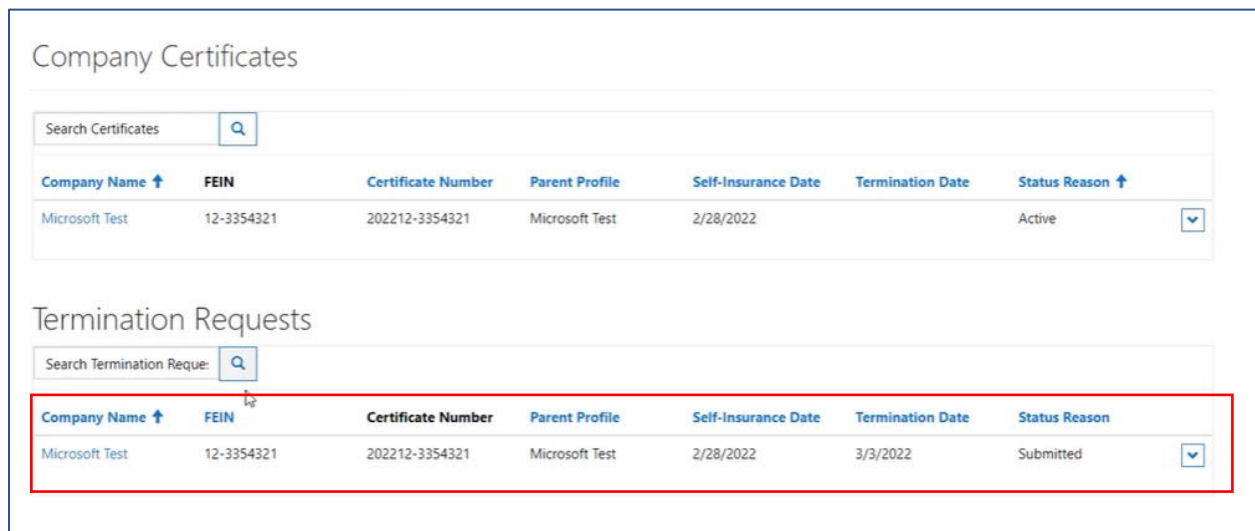
Figure 11.3

If you submit a termination request by mistake, or realize after the fact, that you need to withdraw the termination request, please contact the IWCC for assistance. *You cannot withdraw the termination request in the portal.*

When IWCC has processed the termination certificate, the status reason for the request will be *Completed,* as shown below.

Figure 11.4

As shown above, you may download a copy of the termination certificate by clicking the down arrow on the certificate line item and selecting *download* (see figure 11.4)*. A new window appears; click the blue link to view/download the termination certificate.

Filing an Initial Application for Self-Insurance
Required Information and Documents for the Self-Insurance Plus System

Private employers: After answering the application questions in the online system, you must download an affidavit page for the signatures of the appropriate company officers and notary. Then you will be required to upload the signed affidavit before final submission of the application. The information and documents required to complete the application are listed below.

In addition, the online application will not be processed until receipt of the nonrefundable application fee of $500 for each separate legal entity applying. You will receive an email confirmation upon our receipt of the application payment and all required documents.

Make the check payable to the "Illinois Workers' Compensation Commission" and mail to:
Illinois Worker's Compensation Commission
Office of Self-Insurance
4500 S. Sixth St., Frontage Road
Springfield, IL 62703-5118

Gather the following information and documents before starting the online application. Note if the application information is not entered in one session, you will be able to save and resume the process until final submission.

1) Representative information for primary, secondary, and assessment contacts.
2) Federal Employer Identification Number (FEIN) for applicant, any applying subsidiaries, and ultimate parent, if applicable.
3) North American Industry Classification System (NAICS) code(s) describing nature of business.
4) Corporate principals' contact information.
5) Physical locations. If more than 15, a list can be uploaded following the online format.
6) Evidence of current coverage.
7) Estimated annual workers' compensation premium for the last completed calendar year detailing the insurance class codes, estimated payroll, and current manual rate.
8) Detailed loss runs for the last 3 completed years.
9) Description of fatalities, if any.
10) Proposed claims administrator information.
11) Safety Representative information and a description of the safety program for the Illinois operations.
12) Information regarding any potential exposure to substances that may cause occupational disease.
13) Explanation if workers' compensation insurance has been refused or canceled.
14) Explanation if an application for self-insurance has been denied or a certification revoked.
15) List of other self-insured jurisdictions.
16) Financial Statements
    (a) If the applicant has an ultimate parent, provide the ultimate parent company's audited financial statements for the most recent three years.
    (b) If the applicant has no ultimate parent, provide the applicant's audited financial statements for the most recent three years.
    (c) If certified audited financial statements are not prepared, provide the financial statements prepared by an outside accountant for the most recent three years.
17) Current 10Q or internal quarterly balance sheet and income statement.
18) Experience Modification Factor report. Provide an explanation if the factor is greater than one.
19) Organizational Chart indicating which entities with operations in Illinois are seeking self-insurance.
20) Excess insurance quotes if applicant chooses to purchase excess coverage.

Direct questions to: wcc.selfinsurance@llinois.gov

Filing a Subsidiary Application for Self-Insurance
Required Information and Documents for the Self-Insurance Plus System

Private employers: **After answering the application questions in the online system, you must download an affidavit page for the signatures of the appropriate company officers and notary. Then you will be required to upload the signed affidavit before final submission of the application. The information and documents required to complete the application are listed below.**

In addition, the online application will not be processed until receipt of the nonrefundable application fee of $500 for each separate legal entity applying. You will receive an email confirmation upon our receipt of the application payment and all required documents.

Make the check payable to the "Illinois Workers' Compensation Commission" and mail to:

Illinois Worker's Compensation Commission
Office of Self-Insurance
4500 S. Sixth St., Frontage Road
Springfield, IL 62703-5118

Gather the following information and documents before starting the online application. Note if the application information is not entered in one session, you will be able to save and resume the process until final submission.

1) Federal Employer Identification Number (FEIN) for applying subsidiaries.
2) North American Industry Classification System (NAICS) code(s) describing nature of business.
3) Physical locations. If more than 15, a list can be uploaded following the online format.
4) Evidence of current coverage, if applicable.
5) Estimated annual workers' compensation premium for the last completed calendar year detailing the insurance class codes, estimated payroll, and current manual rate, if applicable.
6) Detailed loss runs for the last 3 completed years, if applicable.
7) Description of fatalities, if any.
8) Safety Representative information and a description of the safety program for the Illinois operations.
9) Information regarding any potential exposure to substances that may cause occupational disease.
10) Financial Statements
    (a)   If the applicant has an ultimate parent, provide the ultimate parent company's audited financial statements for the most recent three years.
    (b)   If the applicant has no ultimate parent, provide the applicant's audited financial statements for the most recent three years.
    (c)   If certified audited financial statements are not prepared, provide the financial statements prepared by an outside accountant for the most recent three years.
11) Current 10Q or internal quarterly balance sheet and income statement.
12) Experience Modification Factor report, if applicable. Provide an explanation if the factor is greater than one.
13) Organizational Chart indicating which entities with operations in Illinois are seeking self-insurance.

Direct questions to: wcc.selfinsurance@llinois.gov

Revised 7/25/2022

Filing a Renewal Application for Self-Insurance
Required Information and Documents for the Self-Insurance Plus System

Private employers: **After answering the renewal application questions in the online system, you must download an affidavit page for the signatures of the appropriate company officers and notary. Then you will be required to upload the signed affidavit before final submission of the renewal application. The information and documents required to complete the renewal application are listed below.**

In addition, the online application will not be processed until receipt of the nonrefundable application fee of $500 for each separate legal entity applying. You will receive an email confirmation upon our receipt of the application payment and all required documents.

Make the check payable to the "Illinois Workers' Compensation Commission" and mail to:

Illinois Worker's Compensation Commission Office of Self-Insurance
4500 S. Sixth St., Frontage Road Springfield, IL 62703-5118

Gather the following information and documents before starting the online application. Note if the application information is not entered in one session, you will be able to save and resume the process until final submission.

1) Claims administrator information, including the Service Agency agreement, if applicable.
2) Certificate of Excess Insurance.
3) Wage report for prior calendar year.
4) Claim Payment report for prior calendar year.
5) Claim Reserve report for the most recent quarter ended.
6) Collectible excess insurance report, if applicable.
7) Financial Statements
   (a) If the applicant has an ultimate parent, provide the ultimate parent company's audited financial statements for the most recent three years.
   (b) If the applicant has no ultimate parent, provide the applicant's audited financial statements for the most recent three years.
   (c) If certified audited financial statements are not prepared, provide the financial statements prepared by an outside accountant for the most recent three years.

Direct questions to: wcc.selfinsurance@llinois.gov

Uploading Multiple Files within a Document Type

i. Click any of the *Attach Documents* buttons. The Document Type box appears.

ii. Select the document type appropriate for the document and in the Add files modal, select the files pertinent to the document type.

  a. You can click *Ctrl* and select the files one at a time.

  b. You may also click the Shift button and click the first and last files to select all files in between.

iii. Click Open. Notice in the Add files modal, the number of files is displayed.
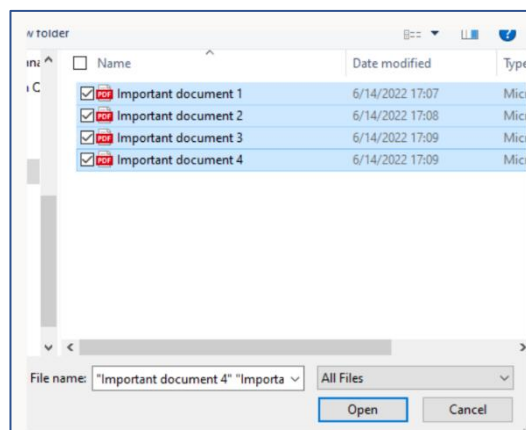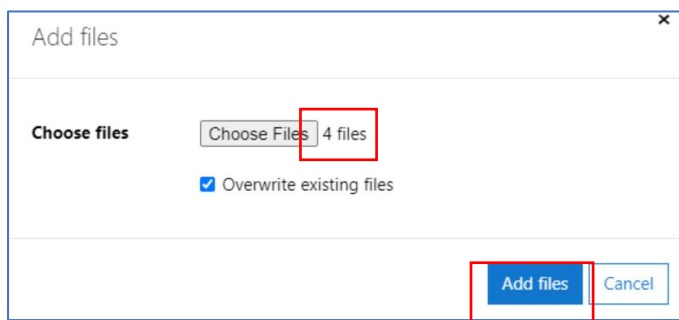

Figure 11.5

Figure 11.6

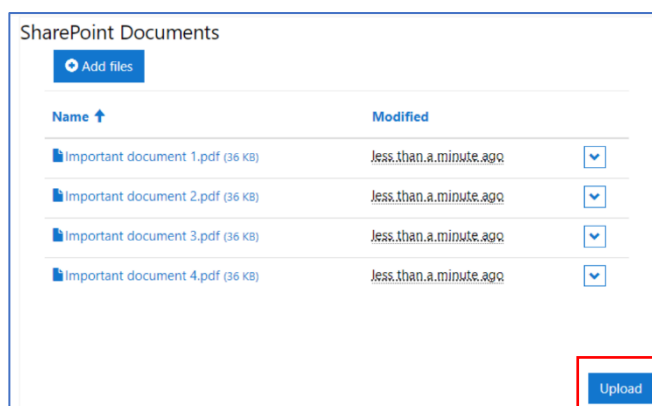iv. Click *Add files.* The list of files to upload is displayed.

Figure 11.7

v. Click *Upload* and the documents are uploaded into the portal. Click here to go back to uploading single files to SIP.

Glossary of Terms

Affiliate: A company associated with another company under common ownership.

Assessment: Illinois Workers' Compensation Commission's statutory requirement to fulfill self-funding obligations.

Corporate Principal(s): Also known as a Corporate Officer, a high-level management executive such as CEO, CFO, treasurer, president, vice-president, or secretary.

Estimated Annual Payroll: The projected annual payroll for any individual workers' compensation insurance classification code.

Excess Insurance: An insurance policy that indemnifies the self-insured employer for workers' compensation claims exceeding a designated dollar amount.

Experience Modification Factor: A numerical score of a company's workers' compensation claims history. It is the ratio of a company's actual claim costs compared to the expected costs for companies of similar size in the same industry.

Insurance Classification Codes: Three- or four-digit numerical code assigned by the National Council on Compensation Insurance (NCCI). These codes are assigned to differentiate between various job duties or work performed by employees.

Insurance Company: a company that sells a policy promising to pay for certain losses. Insurance companies that do *not* write workers' compensation insurance policies in Illinois, but are licensed to do so, are *still* required to complete Rate Adjustment/Second Injury Funds assessments.

Local Public Entity: any city, county, village, township, school district, or any other political subdivision organized under the laws of this state. An Illinois public entity may insure itself under the IWCC Acts and shall file annually with the IWCC its election to self-insure.

Loss Runs: A report showing a company's claim activity. A loss run includes claimant name, policy number, date of injury, type of injury, claim status, amounts paid and reserved.

Manual Rate: A unit of cost that is multiplied by an exposure base to determine an insurance premium.

Non-SI Company: Refers to portal users that are not private employers certified for the self-insurance privilege. These include insurance companies, local public entities, and pools. Non-SI Companies can only access *Assessments* in the SIP portal. (If you are an insurance company and you do *not* write workers' compensation insurance policies in Illinois, but are licensed to do so, you are *still* required to complete the assessment form).

Operations Fund: Created to pay the administrative costs of the Illinois Workers' Compensation Commission. More information regarding this fund can be found on the Assessments page of the Commission's website.

Pools-Group Workers' Compensation /Intergovernmental /Not-For-Profit Trust: Two or more employers or members of an association with homogenous risk characteristics that have combined their workers' compensation liability exposure collectively.

Private Self-Insured Employer: An employer granted permission to assume the financial responsibility for providing workers' compensation benefits for its employees.

Rate Adjustment Fund (RAF): Created to pay cost-of-living increases to individuals who are either permanently or totally disabled or the survivors of fatally injured workers. Individuals who receive permanent and total disability or death benefits are eligible. More information regarding this fund can be found on the Commission's website https://www2.illinois.gov/sites/iwcc/resources/Pages/funds.aspx .

Second Injury Fund (SIF): Created to provide an incentive to employers to hire disabled workers. If a worker previously incurred the complete loss of a member (one hand, arm, foot, leg, or eye) is injured on the job and suffers the complete loss of another member, so that he/she is permanently and totally disabled (PTD), the employer is liable only for the injury due to the second accident. More information on this fund can be found on the Commission's website https://www2.illinois.gov/sites/iwcc/resources/Pages/funds.aspx .

Security Instruments: Documents required by the IWCC to ensure the applicant satisfies the IWCC requirements to be self-insured. Applicants are required to furnish security in the form of a letter of credit, surety bond or escrow account to the Commission to guarantee payment of its workers' compensation obligation. This is to be precedent to approval of initial or renewal applications for self-insurance.

Self-Insurance Plus (SIP): The IWCC system enabling electronic submission of self-insurance initial applications, sub applications, and renewal applications, as well as assessments, and more.

Self-Insured Company: An employer that has obtained certification to self-insure its workers' compensation liabilities from the Illinois Workers' Compensation Commission; or an employer that is part of a Pool regulated by the Illinois Department of Insurance or a local public entity that may self-insure without obtaining certification.

Self-Insurers Security Fund (SISF): Created to pay benefits to employees of insolvent private self-insurers. More information regarding this fund can be found on the Commission's website https://www2.illinois.gov/sites/iwcc/resources/Pages/funds.aspx

Subsidiary: A company owned or controlled, directly or indirectly, by a company owning more than 50%.

Ultimate Parent: The topmost responsible entity of a corporate organizational structure.

10-K: A comprehensive report filed *annually* by a publicly traded company about its financial performance and is required by the U.S. Securities and Exchange Commission. The report contains much more detail than a company's annual report and is provided to its shareholders before an annual meeting to elect company directors.

10-Q: A quarterly report of financial performance required of all public companies to the Securities and Exchange Commission. This report contains financial statements, management discussion, and is usually unaudited.

Freedom of Information Act (FOIA)

User will click the FOIA request link to access the FOIA form.

Figure 11.8

The form contains basic information that allows the IWCC FOIA staff to accurately capture the details of the request. Notice there is only one required field in figure 11.8: the *Requestor Email Address.* This allows IWCC to contact the requestor when necessary. Once the form is filled out, the user clicks *Save & Next.*

The next screen is where the details of the request will be put into the form. Click the *Add FOIA request details* button.

Figure 11.9

A new window opens for adding *Case Number, Requested Document* type (see dropdown in screenshot), and a free form text box to allow for any details needed for successful fulfillment of the request. Notice case number is only needed if applicable to a case. It is a mandatory field, but N/A is an acceptable entry. Click *Save* when this page is completed.

Let the IWCC know if your request is for a commercial or non-commercial purpose by selecting the radio button that is applicable.

Figure 12.0

Figure 12.1

Attach documents, if necessary, by clicking the *Attach Documents* button. A code displays at the bottom left of the request form. Enter the letters/numbers into the box and click *Submit to IWCC* when finished.

An email confirmation is sent to the requestor letting them know the request has been received by the IWCC and will be responded to according to the Freedom of Information Act.

Figure 12.2