U.S. Department of Labor

Office of Workers' Compensation Programs Division of Longshore and Harbor Workers' Compensation Washington, D.C. 20210



July 21, 2014

INDUSTRY NOTICE No. 145

TO: INSURANCE CARRIERS AND SELF-INSURED EMPLOYERS, LONGSHORE AND HARBOR WORKERS' COMPENSATION ACT AND EXTENSIONS

SUBJECT: CY 2014 ASSESSMENT FOR THE SPECIAL FUND, SECTION 44
OF THE LONGSHORE AND HARBOR WORKERS' COMPENSATION ACT

On January 31, 2014, pursuant to Section 44 of the Longshore and Harbor Workers' Compensation Act, a Notice was sent to all insurance carriers and self-insured employers authorized under the Act and its extensions (including the District of Columbia Compensation Act), requesting a report of the amount of all compensation and medical payments made during calendar year 2013. Form LS-513, Report of Payments, was attached to the Notice.

All payments made during calendar year 2013 by insurance carriers and self-insured employers have now been reported. A total of \$956,178,453 in compensation payments has been reported under the Longshore Act and three extensions, the Defense Base Act, the Outer Continental Shelf Lands Act, and the Nonappropriated Fund Instrumentalities Act. A total of \$4,149,632 has been reported under the District of Columbia Compensation Act for compensation and medical payments in cases where the date of injury arose prior to July 26, 1982.

This Office has determined that for calendar year 2014, a total of \$118,000,000 is needed for the Special Fund under the Longshore Act and extensions (excluding the D.C. Act) and a total of \$5,000,000 is needed for the Special Fund under the District of Columbia Act. Proceeds from the Special Fund assessment are used for payments under Sections 8(f), 10(h), and 18(b) plus other payments provided for under Section 44 of the Act.

This notice accompanies the bill for final amounts owed on your CY 2014 assessment. The attached billing form shows the calculation on which your assessment is based. Under the Longshore Act and extensions (except the D.C. Act) the assessment is based on (1) the ratio of the amount each carrier or self-insurer paid during the prior calendar year for compensation benefits in relation to the amount all such carriers and self-insurers paid during that period, and (2), the ratio of the amount of payments made by the Special Fund attributable to each carrier or self-insurer for cases being paid under Section 8(f) of the Act during the preceding calendar year in relation to the total of such payments. The resulting sum is divided by two and multiplied by the estimated expenses of the Fund. The amount paid for the advance assessment is credited against the total assessment and the amount now due is shown as the last figure.

Under the District of Columbia Compensation Act the ratio of the amount each carrier or self-insurer paid during the prior calendar year for compensation and medical benefits in

relation to the amount all such carriers and self-insurers paid during that period is multiplied by the estimated expenses of the Fund.

PLEASE MAKE YOUR CHECK PAYABLE TO THE U.S. DEPARTMENT OF LABOR, OFFICE OF WORKERS' COMPENSATION PROGRAMS, AND MAIL IT TO:

U.S. DEPARTMENT OF LABOR
Division of Longshore and Harbor Workers' Compensation
200 CONSTITUTION AVE. N.W. – Room C-4319
Washington D.C. 20210
TAX ID# 61-1609381

You may also process a Fed Wire with TREASURY New York.

Bank:

Federal Reserve Bank of New York

Routing number:

021030004

Account number: 16150003

You must FAX a copy of the bill and your wire instructions with the sequence number and bill number to (202) 693-1380 prior to the transaction.

Payment must be received no later than **August 29, 2014**. **Please provide the Sequence No. and bill No. with any payments and include a copy of the bill with all checks.** Please direct any inquiries concerning your assessment to Mr. Richard Stanton of this office at (202) 354-9631, email at stanton.richard@dol.gov, or FAX (202) 693-1380.

Antonio A. Rios

Director

Division of Longshore and Harbor Workers' Compensation