

**U.S. Department of Labor**

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



November 24, 1981

No. 52

**NOTICE TO SELF-INSURED EMPLOYERS UNDER THE LONGSHOREMEN'S  
AND HARBOR WORKERS' COMPENSATION ACT, AS AMENDED**

**Subject: Annual Report of Outstanding Liabilities**

In connection with the privilege of self-insuring workers' compensation liabilities under the Longshoremen's and Harbor Workers' Compensation Act, and extensions, this Office requires each authorized self-insured employer to submit an annual report of outstanding workers' compensation liabilities under the Act, to include the following information for each open case existing as of December 31, 1981: Employer's Case Number, OWCP Case Number, Name of Injured Employee, Date of Injury, Nature of Injury, Amount of Compensation and Medical Benefits Paid through December 31, 1981, Estimate of Future Compensation Benefits Payments, Estimate of Future Medical Benefits Payments, and Estimate of Total Future Compensation Payments. Fatal cases are to be separately identified. The report of outstanding liabilities may be submitted on Form LS-274, Report of Injury Experience of Self-Insured Employer (copy enclosed).

Self-insured employers must provide separate reports for the Act and each of its extensions (i.e., Longshoremen's and Harbor Workers' Compensation Act, Outer Continental Shelf Lands Act, Defense Base Act, District of Columbia Compensation Act, and Nonappropriated Fund Instrumentalities Act). Also, self-insured employers with subsidiaries authorized under the Act must provide separate reports for each subsidiary. If a self-insured employer or subsidiary has more than one location, a separate report must be submitted for each location.

All estimated future payments listed for each open claim are to be listed chronologically, by accident date, for each authorization year (July 1 through June 30). Subtotals of the estimated future payments requested in the first paragraph above or as called for in columns (g), (h), and (i) of Form LS-274 are to be provided for each authorization year.

Finally, each report should reflect a "Grand Total" for all estimated future payments. Each self-insured employer's annual report of outstanding liabilities is due no later than March 1, 1982, and must include a separate notarized statement signed by the corporation treasurer or other appropriate corporate officer (President, Vice President, Secretary or Controller) of the self-insured employer attesting to the completeness and accuracy of the information provided. The signed statement should be on a separate form or letter. Please indicate in your correspondence the name and telephone number of the person to contact in the event there are any questions.

In the event that a self-insured employer has no outstanding workers' compensation liabilities under the Act, a negative report should be filed for each location of the company and each subsidiary. The certification and due date requirements are the same as outlined above.

In order to insure that your report is received in this Office as expeditiously as possible, it should be addressed as follows:

U.S. Department of Labor  
Attention: Neil A. Montone  
ESA/OWCP/DLHWC, Room C4315  
200 Constitution Avenue, N.W.  
Washington, D.C. 20210

Failure to submit the completed report and/or reports as outlined in this notice could result in the termination of your authorization to self-insure. Your cooperation in providing the report as requested will be appreciated.

For further information contact Mr. Frank Fiorini of this Office at (202) 523-8700.



NEIL A. MONTONE  
Associate Director,  
Longshore and Harbor  
Workers' Compensation

Enclosure