

Proof of Workers Compensation and Disability Insurance

Effective December 1, 2008; the Workers' Compensation Law (WCL) requires all municipalities and state entities to ensure that anyone that we do business with have appropriate workers' compensation and disability benefits insurance coverage.

Please be aware that we require one form of proof for each section.

Section A

To comply with coverage provisions regarding **workers' compensation**, **businesses must:**

- be legally exempt from obtaining workers' compensation insurance coverage ; OR
- obtain such coverage from insurance carriers; OR
- be a Board-approved self-insured employer or participate in an authorized group self-insurance plan.

Your business **MUST provide ONE** of the following forms to our department naming NYS Department of Agriculture and Markets as the entity requesting proof. **ACORD forms are NOT acceptable proof of workers' compensation coverage!**

- **CE-200*** Certificate of Attestation for New York Entities With No Employees and Certain Out of State Entities, that NYS Workers' Compensation and/or Disability Benefits Insurance Coverage is Not Required; OR
- **C-105.2** Certificate of Workers' Compensation Insurance (the business's insurance carrier will send this form to the government entity upon request) PLEASE NOTE: The State Insurance Fund provides its own version of this form, the U-26.3; OR
- **SI-12** Certificate of Workers' Compensation Self Insurance (the business calls the Board's Self-Insurance Office at 518-402-0247) OR GSI-105.2 Certificate of Participation in Workers' Compensation Group Self-Insurance (the business's Group Self-Insurance Administrator will send this form to the government entity upon request).

Section B

To comply with coverage provision of the WCL regarding **disability benefits**, **businesses may:**

- be legally exempt from obtaining disability benefits insurance coverage
- obtain such coverage from insurance carriers; or
- be self-insured

In an effort to process your contract you **must** provide **ONE** of the following forms to Fiscal Management, NYS Department of Agriculture & Markets:

- **CE-200*** Certificate of Attestation for New York Entities W/ No Employees & Certain Out of State Entities, that NYS Workers' Compensation and/or Disability Benefits Insurance Coverage is Not Required; OR
- **B-120.1** Certificate of Disability Benefits Insurance (the business's insurance carrier will send this form to the government entity upon request; OR
- **DB-155** Certificate of Disability Benefits Self-Insurance (the business calls the Board's Self-Insurance Office at 518-402-0247).

** Starting December 1, 2008, Form CE-200 can be filled out electronically on the Board's website, www.wcb.ny.gov, under the heading "Forms." Applicants filing electronically are able to print a finished Form CE-200 immediately upon completion of the electronic application. Applicants without access to a computer may obtain a paper application for the CE-200 by writing or visiting the customer Service Center at any District Office of Workers' Compensation Board. Applicants using the manual process may wait up to four weeks before receiving a CE-200, the applicant can then submit that CE-200 to the government agency from which he/she is getting the permit, license or contract.*