

## **NEW STATUTORY REQUIREMENTS**

Effective July 1, 2007

Notice to the Fund

Effective July, 1, 2007 Section 42-9-400 (f) ....this written notice must provide the:

1. Date of accident
2. Employee's name
3. Employer's name and address
4. Insurance carrier's name, address, and the National Council on Compensation Insurance Code
5. **Insurance carrier's claim number, policy number and policy effective date. The carrier claim number is the unique identifier a carrier uses throughout the life of a claim to report that claim to the National Council on Compensation Insurance. Failure to comply with the provisions of this subsection shall bar an employer or his carrier from recovery from the Fund.**

### Prerequisite to Reimbursement:

Section 42-9-400 (l) states:

As a prerequisite to reimbursement from the Fund, the insurer shall be required to certify that the medical and indemnity reserves have been reduced to the threshold limits of reimbursement and report in accordance with the National Council on Compensation Insurance Workers' Compensation Statistical Plan.