



Instructions

- Complete this application each policy year of eligible participation.
- Complete all fields in this application. BWC cannot process incomplete applications.
- An officer, partner or owner must sign this application.
- You may submit the completed form in one of three ways listed below.

Online: www.bwc.ohio.gov

Fax: 614-621-1405

Mail: Attention: One Claim Program

Ohio Bureau of Workers' Compensation

30 W. Spring St., 22ND Floor

Columbus, OH 43215-2256

Employer information		
Name of employer and DBA	Federal tax ID number	BWC policy number
Address		
City	State	ZIP code
Employer contact for One Claim Program	Title of the employer contact for One Claim Program	
Email address for One Claim Program contact	Phone number	Employers fax number

This application is for the One Claim Program (OCP). Applicants must meet all of the requirements listed below.

- First year applicants must be participating in a group-rating program at the OCP application deadline. In addition, BWC will not renew the employer for group rating for the upcoming rating year beginning July 1 for private employers or Jan. 1 for public employers.
 - 20 percent during the first year in the program;
 - 15 percent in the second year;
 - 10 percent in the third year;
 - 5 percent in the fourth year;
 - 5 percent in the fifth year.
- The employer cannot have more than one significant claim and three non-significant, medical-only claims in the upcoming experience period.
- The employer cannot have cumulative lapses in workers' compensation coverage in excess of 40 days within nine months at the application deadline. The employer also must be current on all balances owed to BWC by the application deadline.
- An employer who meets all the eligibility requirements and makes application will receive the following discount off the base rate:
 - The OCP is a voluntary program that an employer may participate in for the duration a significant claim remains in his or her experience. BWC will also re-evaluate the employer each year to determine eligibility. BWC will have the final authority to approve an employer's participation in OCP.
 - BWC defines a significant claim as a claim whose total value or maximum claim value, whichever is lower, will be greater than the employer's total limited losses (TLL). Once designated as the significant claim, BWC cannot change it to another claim after the employer's initial enrollment in the program.
 - The total costs of the three non-significant, medical-only claims can not exceed the employer's TLL.

I have fully read and understand the OCP's rules. I understand BWC will revoke the discount at the beginning of the next policy year if I have more than one significant and three medical-only claims, or if the combined claim costs of the three medical-only claims surpasses the TLL, or if I fail to meet any of the requirements of paragraph (C) or paragraph (D) of Ohio Administrative Code (OAC) 4123-17-71. This includes that I must complete a half-day, classroom style class offered by BWC's Division of Safety & Hygiene the first year of participation and three hours online training through www.bwc.ohio.gov in subsequent years. By signing this application, I certify I have read and understand the program requirements outlined in OAC 4123-17-71, and I certify I will comply with all of the program's requirements.

Owner/partner; officer name	Title
Signature X	Date signed

Employers should refer to OAC 4123-17-74 Appendix C to determine which programs are compatible as not all programs are discount compatible.