

WISCONSIN CONTRACTOR'S PREMIUM ADJUSTMENT PROGRAM

WCPAP

The Wisconsin Contractor's Premium Adjustment (WCPAP) provides a premium credit for a qualifying policy.

Eligibility Requirements:

- Must contain one or more contracting classifications to qualify for WCPAP
[See list of valid contracting codes in FAQ/WCPAP/Question #13.](#)
- Must have at least 50% of payroll or premium allocated to contracting classification(s).
- Credit will be determined based on total 3rd quarter (July-September) gross wages paid and hours worked of the calendar year preceding the policy inception date as reported to taxing authorities. Overtime premium is not included.
- In the absence of specific records for salaried employees, it shall be assumed that each employee worked forty (40) hours per week.
- May be combined with other policies with common ownership and contracting classifications to calculate a single credit for all policies. An application must be submitted for each policy, and 50% of the payroll or premium must remain allocated to contracting classes.
- Pay a minimum average hourly wage of \$33.47 to contracting employees for credits effective 7/1/2024 to 6/30/2025
- Pay a minimum average hourly wage of \$34.44 to contracting employees for credits effective 7/1/2025 to 6/30/2026

You may contact our office to discuss eligibility at 262-796-4593.

General Instructions:

For the WCRB to calculate the proper WCPAP Credit Factor, the WCPAP Online Application must contain the following information:

Report 3rd quarter **2024** WI operations. If there were no 3rd quarter **2024** WI operations, you may report the 3rd quarter of **2023**. (3rd quarter - July 1 through September 30)

WC Code Numbers Refer to the Information Page Item. 4 of your worker's compensation insurance policy for the four-digit numbers that classify the operations of your business.

Gross wages paid (excluding vacation, holiday, overtime premium and sick pay).

Gross wages are prior to the deduction of State and Federal taxes and Social Security, and include salaries, wages, commissions, and bonuses. Enter each code that there were WI operations during the period reporting. Report wages paid and hours worked for all employees (contracting and non-contracting).

Overtime wages are the extra monies paid for time in excess of the regular rate and regular hours worked.

Hours worked (excluding vacation, holiday, overtime premium, and sick pay).

Each covered Executive Officer, Partner, Sole Proprietor, or Members of LLC's wages should be limited to the values provided in the table within the application. Please enter the applicable WC code number based on the duties performed.

Submit one application for each eligible commonly owned entity.

Revised Online WCPAP Application - If you are submitting a Revised Online WCPAP Application, please provide ALL wages paid and hours worked for the 3rd quarter reporting. Please select the Revised button in lieu of Original.

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Program Rules:

- o Keep in mind that application of a Policy Credit Factor is subject to audit; therefore, please preserve your payroll records upon which the Premium Credit Factor application is based.
- o Information submitted by any method other than form WCPAP.ED11 from the wcrb.org Web site is not acceptable.
- o May not be cancelled to take advantage of the provisions of this Program.
- o The rating effective date rules are applicable and are defined as the month and day of the policy.
- o The policy credit factor shall not reduce the policy premium below the applicable minimum premium.

Specific Instructions:

THE FOLLOWING INFORMATION IS REQUIRED WHEN SUBMITTING A WCPAP APPLICATION:

Coverage ID-Once you locate your Coverage ID, select the Coverage ID Number, and you will be returned to the form. DO NOT CHOOSE ANY NAME SIMILAR TO YOURS THAT SHOWS A "WU" IN THE NAME. This is a wrap-up, and it is not eligible for the Contractor's credit.

Employer Name-Your business name as listed on your Worker's Compensation policy

Employer Address, City, State, and Zip Code-The address listed on your WC policy

E-mail Address-The address entered must be a valid e-mail address and will be used for notification of the WCPAP Application results.

Important Note: All fields must be filled in for each code number. If there was no payroll for the WC Code Number, enter zero. Do not enter spaces, decimals, or commas.

By submitting this application through the wcrb.org Web site, the applicant is consenting to apply for a premium credit in electronic fashion for this specific transaction. The electronic signature contained within this application is enforceable and cannot be denied legal effect pursuant to WIS STAT 137.15(1)

APPLICATION IS SUCCESSFULLY SUBMITTED ONCE THE PRINTABLE VERSION OF THE APPLICATION APPEARS WITH A CONFIRMATION AND DATE SUBMITTED AT THE TOP OF THE PAGE. ALL ERRORS INDICATED BY AN X IN A RED CIRCLE MUST BE CORRECTED FOR A VALID SUBMISSION.