

**DLT5 Division of Workers' Compensation \***

**DLT5.1.1 Referral Files**

Allegations of workers' compensation fraud that do not result in case files because allegation is determined to be unfounded or does not provide sufficient evidence to open an investigation case file. Files include but are not limited to intake sheets.

Retention: Retain ten (10) years.

**DLT5.1.2 Investigation Case Files**

Case files relating to allegations of workers' compensation fraud that are determined to warrant full investigation. Upon completion of investigation, case is either determined unfounded and closed or referred to the Attorney General's Office for potential prosecution. File includes, but is not limited to, the initial allegation as documented on the referral form; the investigator's activity summary reflecting the steps taken by the investigator; legal and administrative notes, documents obtained from the insurer reflecting benefits paid, medical treatment, independent medical examinations, surveillance reports, and report of earnings forms; documents created/obtained during the investigation, including witness interviews, pay records, corporate records, and final disposition.

Retention: Retain ten (10) years from final disposition.

**DLT5.1.3 Information Charging Package**

After completing an investigation, the fraud investigator develops an information package. The package contains: a criminal face sheet listing all documents in the package; an investigative narrative setting forth the facts of the case; witness statements; and all other documents necessary to prove workers' compensation fraud (e.g. medical reports, benefit checks, proof of earning while receiving benefits, and surveillance reports and videos.) This package is turned over to the Department of the Attorney General for prosecutorial review.

*Note: The Fraud unit keeps the original of this file for resource material and sends an exact copy to the Attorney General.*

Retention: Retain twenty (20) years or until defendant's sentence, including probation and/or parole is completed, whichever occurs later.

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\* This schedule is a consolidation of two previously approved records retention schedules. These two schedules cover the records of two formerly separate entities within DLT, the Division of Injured Worker Services and the Fraud Prevention and Compliance Unit. The Workers' Compensation (Injured Worker Services) schedule was approved in 2002, and an amended Fraud Prevention and Compliance schedule was approved in 2006. A few record series numbers have changed and redundant record series have been eliminated. This consolidation does not involve any revision of duly approved records retention periods in these two schedules. Subsequent amendments are noted within particular record series.

**DLT5.1.4 First Report Investigation Files**

Employers are required to file First Report of Injury forms within ten days of an injury that requires medical attention, or which prevents employees from performing their duties. The Fraud Prevention and Compliance Unit conducts investigations where there have been allegations that the required First Report of Injury was not filed. These files contain documents relating to these investigations, including investigative notes and correspondence, copies of the first report, hearing notices and orders, and a copy of the penalty check.

Retention: Retain seven (7) years from date of final closure.

**DLT5.1.5 Computer Case Management Data System**

Computer index of all allegations received by the Workers' Compensation Fraud Prevention and Compliance Unit, including allegations not investigated as well as those resulting in the creation of case files. Includes, but is not limited to, case number, subject's name, insurance company involved, source of the allegation, investigator assigned to the case, case disposition (i.e. criminal charges, restitution ordered), state of the investigation (i.e. open or closed.) System is used to track all open investigations, and also for historical and statistical analysis.

Retention: Retain twenty (20) years.

*Note: Ensure migration of records to successive generations of technology and systems, and other necessary maintenance to enable retention of and access to accurate, reliable and complete records throughout their authorized lifecycle.*

**DLT5.1.6 Division Annual Report**

Annual report of the Workers' Compensation Fraud Prevention and Compliance Unit.  
RIGL §42-16.1-12

Retention: Permanent.

**DLT5.1.7 Proof of Insurance Coverage Records  
[Formerly DLT Workers Compensation Schedule. See series  
DLT5.2.1]**

Documents employer compliance with Workers' Compensation law requiring them to provide WC coverage for their employees. Includes Proof of Insurance Cards, waivers and exemptions, Form DWC-06: Notification of Issuance or Renewal of Policy, Form DWC-06a, Notification to Director of Acceptance of WC Act (obsolete), Form DWC-07, Notification of Cancellation, Non-Renewal, Expiration or Termination of Policy, Electronic Reporting Records, and related correspondence.

RIGL §§ 28-29-8; 28-29-17; 28-29-19; 28-33-17.3; 28-36-12; 28-36-15.

Retention: Retain thirty (30) years from policy termination.

*Note: Retention of these records can be for the length of an employee's work history, especially in occupational disease cases and apportionment of liability amongst successive employers.*

**DLT5.1.8 Lack of Insurance Complaints/Investigations Records**  
**[Formerly DLT Workers Compensation Schedule. See series**  
**DLT5.2.3]**

Documents proof of coverage complaints against employers for not providing insurance for their employees as mandated by RIGL 28-29-6 and RIGL 28-36-15. Includes referral forms initiating investigations, employer information, copies of WC claim records, wage records, policy information, investigation notes and determinations, notices of hearings, orders of the Department, notices of appeal, notices of fines/penalties, and proof of payment of the fines/penalties, court decrees, summary reports of investigations, and related correspondence.

*Business Sweep Investigations program records include similar records documenting results of DLT random spot checks of Rhode Island businesses and companies for proper WC coverage.*

RIGL § 28-29-6; 28-36-15; 28-33-17.3.

**a) Cases that were unfounded, or addressed informally**

Retention: Retain three (3) years after last action.

**b) Cases that resulted in a formal administrative decision/appeal**

Retention: Retain ten (10) years from final case activity.

**c) Cases that resulted in criminal charges**

Retention: Retain twenty (20) years or until defendant's sentence, including probation and/or parole is completed, whichever occurs later.

**d) Cases that set policy or were otherwise historically significant**

Retention: Permanent.

**DLT5.1.9 Independent Contractor Files** (Amended 9/2013)

Documents relating to the establishment of independent contractor status of individuals. This series consists primarily of notice of designation as Independent Contractor forms (DWC-11-IC) as well as Notice of Withdrawal of Designation as Independent Contractor forms (DWC 11-11-ICR). These forms include the name of the contractor, date of the filing, the name of the hiring entity.

RIGL § 28-29-17.1

Retention: Retain fifty (50) years.

**DLT5.1.10 Carrier Penalty Investigation Files**  
**[Formerly DLT5.2.4]**

These reports relate to investigations of insurance carriers failing to report proof of insurance coverage to the DLT, as required by RIGL 28-36-12. These files include investigative notes and correspondence, workers' compensation insurance policy information, and a copy of the penalty check.

Retention: Retain seven (7) years from date of final closure.

~~**DLT 5.2.1 Proof of Insurance Coverage Records**~~  
~~**[Deleted. See above series DLT5.1.7]**~~

**DLT5.2.2 Self-Insurance Program Records**

Documents employer compliance with Workers' Compensation law requiring them to provide WC coverage for their employees where the employer has elected to pay claims directly. The program is responsible for the certification of the employers as solvent self-insurers. Includes applications and certificates of self-insurance, claim loss information, excess policy information, surety bond or letter of credit documentation, annual assessment data, and related correspondence.

*Notes:*

- 1. Employers must re-certify on an annual basis.*
- 2. The WC Department holds surety to cover claims that may be filed against self-insured employers in the future, in case of bankruptcy or insolvency.*

RIGL 28-36-1; 28-36-2; 28-36-13.

**a) Certificates of self-insurance, excess policy information, and surety bond or letter of credit documentation**

Retention: Retain thirty (30) years following termination.

**b) All other records**

Retention: Retain ten (10) years.

~~**DLT 5.2.3 Lack of Insurance Complaints/Investigations Records**~~  
~~**[Deleted. See above series DLT5.1.8]**~~

**DLT5.2.4 Workers' Compensation Claim Records** (Amended 8/2012)

Documents all claims for job related injuries or illnesses covered by the Rhode Island Workers' Compensation Act. Includes injury reports (lost time and no lost time claims); claim forms, employer proof of coverage, wage schedules, claim documentation, court decisions and decrees, and related correspondence.

*Note: State employee claims files are maintained and paid by DOA Personnel/ State Workers' Compensation; however, the State must file claims with the Department of Labor and Training*

*Workers' Compensation Unit, just as any other insurer/self-insured company.*

RIGL 28-35-57; 28-35-45.

Retention: Retain fifty (50) years.

*Note: Retention of these records can be for the length of an employees' work history, especially in occupational disease cases and apportionment of liability amongst successive employers.*

#### **DLT5.2.5 WCAF Assessment Records**

Documents the Departments' assessment and billing of insurers, self-insurers, group self-insurers, and municipalities. Also documents the subsequent payment of these assessments which are put into the Workers' Compensation Administration Fund (WCAF). Includes assessment calculation materials, billing documentation, payment documents, vouchers, Licensed Insurers Assessment Return Form, Licensed Insurers Informational Request Form and Insurers Bill, Self-Insurers Assessment Return Forms, Self-Insurers Assessment Billing Forms, check stubs, copies of checks, Receipts Transmittal vouchers, Billing Amounts reports, audit reports, and related correspondence.

*Note: WCAF revenues provide the base funding for the Workers' Compensation Division of the Department of Labor and Training's yearly budget allotment. Assessment revenues are also a source of funding for WC claims listed under RIGL 28-37-1. Assessments are based on the ratio of Departments' total need for the year and the total amount of premiums paid by employers, self-insurers, group self-insurers, and municipalities. A percentage is then calculated from the result.*

RIGL 28-37-13; 28-37-14; 28-37-15; 28-37-16.

Retention: Retain ten (10) years.

#### **DLT5.2.6 WCAF Claim Records** (Amended 8/2012)

Documents the handling of supplemental WC claims which are not covered by Employers' Insurance Policies due to changes in legislation or other extenuating circumstances. Includes injury reports, claim forms, error payment claim forms, Cost of Living Adjustment (COLA) claim forms, partial incentive bonus claim forms, employer proof of coverage, payment schedules, claim re-opening documentation, court decisions and decrees, and related correspondence.

RIGL 28-37-1.

Retention: Retain fifty (50) years.

#### **DLT5.2.7 Certificates of Records Destruction**

Certification of Records Destruction forms (PRA003) signed by the authorized agency official and submitted to, and signed by, the State Archivist/Public Records Administrator. Certificates authorize the disposal of records listed in this and other applicable schedules.

RIGL 38-1-10; 38-3-6; 42-8.1-10.

Retention: Permanent.