

Group Accident Protection Plan

Helpful Hints For The Occupational Accident Employer



Contract Labor

- **Contractor:** Means a party that enters into agreement, by written contract or otherwise, to provide services to, or on behalf of, the Policyholder.
- **Contract Labor Census Form:** The Policyholder must list any Eligible Persons **Not** shown on the TWC Tax Employer's Quarterly Report filed with the Texas Workforce Commission. The Contract Labor Census Form will be sent with your monthly premium statement and must be completed and returned with each premium payment.
- **Eligible Contractors:** A Contractor (1099), or an employee (W2) of a Contractor, may be an Eligible Person. A Sub-Contractor (1099) of a Contractor can never be an Eligible Person.
- **Claim Eligibility:** In the event of a claim on a contracted employee, the following copies of documentation are required to finalize the verification of eligibility.
 1. W-9 or 1099
 2. Copy of cancelled check for the week of injury
 3. Copy of the payable ledgers with detail of dates, hours worked, and hourly rate of pay

If you have Contract Laborers and the administration of your policy is not set-up for Contract Labor, please contact North American Benefits Company immediately.

**NORTH AMERICAN BENEFITS COMPANY
GAPP ADMINISTRATION
530 EAST SWEDES FORD ROAD
SUITE 100
WAYNE, PENNSYLVANIA 19087
800-994-4277**