

Physician Guide to WorkSafeBC Registration and Insurance Coverage

Understanding your obligations and options to protect
yourself and your staff



About WorkSafeBC

At WorkSafeBC, we're dedicated to promoting safe and healthy workplaces across B.C. We partner with workers and employers to save lives and prevent injury, disease, and disability. When work-related injuries or diseases occur, we provide compensation and support injured workers in their recovery, rehabilitation, and safe return to work. We also provide no-fault insurance and work diligently to sustain our workers' compensation system for today and future generations. We're honoured to serve the workers and employers in our province.

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Contents

Introduction	1
About this guide	1
Registering for coverage	2
What is WorkSafeBC?	2
Am I required to register?	2
What are the benefits of registering?	3
Does paying premiums for my employees mean I'm covered myself?	3
How do I apply?	4
I don't employ staff and/or I'm not incorporated. Can I still apply to be covered personally?	4
What are the benefits of Personal Optional Protection (POP)?	5
How does POP fit with other kinds of disability insurance?	5
Costs and coverage	6
How much does coverage for my workers cost?	6
How much does personal coverage cost?	6
What do I get with Personal Optional Protection (POP)?	7
Could I be charged retroactively for unpaid premiums?	7
How do I appeal a decision regarding registration or premium costs?	7
When to contact WorkSafeBC	8
For more information.	8
Glossary	9

Introduction

Have you ever thought about what would happen if your medical office assistant slipped and was injured at work, or if you sustained a needle-stick injury?

As a physician, you have probably purchased insurance that covers your own extended health and dental needs or provides protection in the case of disability, accident, critical illness, or death — as well as any potential liability as a medical professional.

What you may not be aware of is your potential requirement to purchase workers' compensation insurance from WorkSafeBC. You may have encountered WorkSafeBC when caring for patients with a work-related injury or illness. The compensation and health care benefits patients receive are paid for by premiums collected by WorkSafeBC from B.C. employers.

Registration with WorkSafeBC may also be a requirement of your hospital privileges. Please review your contract and privileging documentation and check with your [health services authority](#) to determine if this is a factor for you.

Purchasing WorkSafeBC insurance is the obligation of all those defined as employers, but there are also options for those who don't meet this definition. Unincorporated physicians with or without staff who want personal protection in case of a work-related injury or illness may also be eligible to apply for optional personal coverage. If this describes you and you'd like to explore this option, you'll find more information in the following section on registering for coverage.

Physicians are often employers themselves, operating as an individual proprietor hiring employees (known as “workers” by WorkSafeBC) or as a shareholder of an incorporated business. **In either situation, you, as an employer, are required to register with WorkSafeBC for insurance coverage for your workers.**

About this guide

This guide, developed with [Doctors of BC](#), explains how to determine if you are an employer required to register with WorkSafeBC and pay premiums — and if so, how to apply to register.

If you are not an employer, or if you are an employer whose coverage does not extend to you personally, this guide will help you understand the potential benefits of personal optional insurance so you can make an informed decision about the coverage that's appropriate for you.

If, after reading this guide, you have questions for WorkSafeBC, please contact the employer line at 1.888.922.2768 between 8:30 a.m. and 4:30 p.m., Monday to Friday.

If you have questions for Doctors of BC, please [email](#) them or contact your [Regional Advisor and Advocate](#).

For definitions of terms that are used in this guide, please refer to the glossary at the end.

Registering for coverage

What is WorkSafeBC?

WorkSafeBC, also known as the Workers' Compensation Board of British Columbia, is a provincial agency dedicated to promoting safe and healthy workplaces across B.C. WorkSafeBC partners with workers and employers to prevent work-related injury, disease, disability, and death. Its services include education, prevention, compensation and support for injured workers, and no-fault protection to protect employers and workers.

Employers in B.C. are required to register with WorkSafeBC and pay insurance premiums to cover their workers. Under the [Workers Compensation Act](#), workers have the right to compensation for on-the-job injuries; in return, employers are immune from lawsuits filed by injured workers for work-related injury or illness.

Whether or not you employ workers, WorkSafeBC also offers personal insurance to self-employed proprietors and partners. [Personal Optional Protection](#) (POP) is an optional insurance plan designed to cover income loss and medical costs should you suffer a work-related injury or disease.

WorkSafeBC offers a [streamlined application process](#) to determine if you are required to register for coverage — or, if you're not required to register, whether you're eligible to apply for personal coverage.

Please note: Most physicians purchase additional disability coverage outside of WorkSafeBC that covers both work-related and non-work-related illnesses and accidents. For more information, see “How does POP fit with other types of disability insurance?”

Am I required to register?

If you hire workers or operate through a corporation, you must [register](#).

You are not required to register if either of the following apply:

- Your income is exclusively reflected in a T4 Statement of Remuneration Paid or a T4A Statement of Pension, Retirement, Annuity and Other Income from a health services authority or
- You exclusively provide your services to a health services authority under a salary agreement (as described in the [Physician Master Agreement](#))

Please note: If you are a shareholder in an incorporated business, you are considered a worker and the corporation is considered the employer. However, it is still your responsibility to act as an employer and register for coverage for the corporation's workers. When you do, you yourself are also covered. (See next page).

What are the benefits of registering?

Registration ensures that any workers you employ (such as medical office assistants and clinical staff) receive coverage for health care benefits, wage-loss benefits, and rehabilitation benefits in the event of a work-related illness or injury. If you are a shareholder working through your corporation, registration ensures you are also covered in the event of a work-related injury or illness. (For example, if you are injured via a needle stick, WorkSafeBC insurance will cover you.)

In addition, registration **ensures physicians aren't subject to lawsuits** from workers or other employers, the costs of which can be significant. Also, if you are not registered and a worker (including a shareholder) is injured, you could be responsible for both the worker's WorkSafeBC claim costs and your unpaid premiums. And in some cases, registration is a requirement in order to maintain hospital privileges. Please review your contract and privileging documentation and check with your [health services authority](#) to determine if this is a factor for you.

Does paying premiums for my employees mean I'm covered myself?

It depends. If you're an owner of or shareholder in an incorporated company (Inc., Ltd., or Corp.) and you are paid for your services through that company, you are covered. The employer is the incorporated company, and you are considered a worker of that company.

If you're a partner or an individual proprietor hiring workers, as an employer you are not covered personally, even with an active account to cover your workers. If you wish to be covered, you may apply for Personal Optional Protection to be added to your account.

To ensure you understand the details of your coverage, please contact WorkSafeBC's employer line at 1.888.922.2768 between 8:30 a.m. and 4:30 p.m., Monday to Friday.

Please note: Most physicians purchase additional disability coverage outside of WorkSafeBC that covers both work-related and non-work-related illnesses and accidents. See the "How does POP fit with other types of disability insurance?" section for more information.

How do I apply?

Please complete the [Physician Registration Application \(Form 1800PHPC\)](#). Page 1 of this form lets you know if you need to complete an Application for Personal Optional Protection ([Form 1801](#)) in order to be covered yourself.

The forms linked to above can be downloaded and submitted electronically (if you complete them in the latest version of [Acrobat Reader](#)) or by mail or fax. If you're applying for Personal Optional Protection, you can also [apply online](#).

I don't employ staff and/or I'm not incorporated. Can I still apply to be covered personally?

You are eligible to apply for [Personal Optional Protection](#) coverage if you provide your services to a health services authority as an independent contractor in your own name (e.g., Dr. Jane Doe) and your revenue is earned solely through one or more of:

- A service contract (under which you provide your services as an independent contractor)
- A sessional contract (under which you provide services on a time or sessional basis, in which a session equals 3.5 hours of your professional services)
- Fee-for-service payments from the Medical Services Plan (MSP), WorkSafeBC, or ICBC
- Earnings related to private practice (third-party, medico-legal, and private billings)

You cannot apply for Personal Optional Protection if you're an owner of or shareholder in an incorporated company and you work for that company. In this case, the employer is the company and you are considered a worker of that company, so you must register for coverage for workers using Form 1800PHPC.

What are the benefits of Personal Optional Protection (POP)?

Personal Optional Protection coverage, once accepted, will pay health care, wage-loss, and rehabilitation benefits if you can't work due to a work-related injury or illness. In that event, WorkSafeBC generally pays wage-loss benefits based on 90 percent of net average earnings (the average amount remaining after probable deductions), up to the yearly maximum.

You can choose how much wage-loss coverage you purchase, up to a maximum that is adjusted each year. In 2022, for example, the minimum monthly coverage is \$2,500 and the maximum coverage you can purchase is equal to your current monthly earnings or \$8,333, whichever is less. If you're applying for more than \$5,000 per month in coverage, you'll need to provide proof of earnings. Without this, your monthly coverage will be set to \$5,000 per month.

How does POP fit with other kinds of disability insurance?

Most physicians purchase additional disability insurance outside of WorkSafeBC (such as through Doctors of BC), which can be tailored to physicians and covers both work-related and non-work-related illnesses and accidents. Here are some important points about WorkSafeBC's POP to consider when deciding on your overall disability coverage:

- Maximum yearly wage-loss coverage is adjusted annually and capped to keep premiums low. (In 2022, you can insure your earnings up to \$100K.)
- POP covers work-related injuries and illnesses only.
- It provides protection from lawsuits from other workers.
- There's no waiting period for wage-loss coverage.
- Health care and rehabilitation benefits include access to specialized programs and expedited care.
- POP covers work-related fatalities.

To better understand your options, Doctors of BC recommends that you speak with a [Doctors of BC Insurance Advisor](#) or other licensed insurance agent.

Costs and coverage

How much does coverage for my workers cost?

When you register for WorkSafeBC insurance, you are assigned to the Physician Professional Services classification unit (766015) based on the services you provide. All physicians are assigned to the same classification unit, which is then added to a pool of classification units (a rate group) with similar historical claims costs. This system ensures the coverage costs are spread out evenly over a group with similar occupational circumstances.

Premium rates are set annually. For 2022, the base premium rate for **Physician Professional Services** is 0.19 percent (or \$0.19 per \$100) of assessable payroll.

How much you pay in premiums is affected by the size of your business and your claims costs relative to the industry average. Based on these factors, you are assigned an experience rating. Your experience rating can be a discount (if your claims costs are lower than the average for similar-sized firms in your rate group) or a surcharge (if your claims costs are higher).

Your total premiums are calculated in two steps:

1. Industry's base premium rate +/- your experience rating = Your net premium rate
2. Your net premium rate × Your assessable payroll = Your total premiums

For example, if your annual assessable payroll in 2022 was \$100,000, with no experience rating adjustment applied, your annual premium would be \$190. (Please note that in the case of a shareholder of a limited corporation, you still have to report your shareholder's earnings or dividends, etc., and pay based on that amount, up to the maximum.)

With the same annual assessable payroll in 2022 and an experience rating discount of 10%, your annual premium would be \$171.

How much does personal coverage cost?

The cost of your Personal Optional Protection coverage depends on the monthly amount of coverage and your net premium rate. (See above for an explanation of how premium rates are set.)

The cost to you will vary according to how much wage-loss coverage you purchase. In 2022, for example, the **maximum for insurable earnings** is \$108,400 in income per year, which equates to \$9,033 per month. If you applied for the maximum monthly coverage in 2022, your premium (with no experience rating adjustment applied) would be calculated as follows: $\$9,033 \times 0.19\% = \17.16 per month.

For more information on Personal Optional Protection, please visit [worksafebc.com](https://www.worksafebc.com).

What do I get with Personal Optional Protection (POP)?

- No-fault protection: Your insurance protects you from lawsuits from workers who are injured or fall ill on the job. Workplace injuries can include both physical injuries and work-related [mental health disorders](#).
- Tools and advice: WorkSafeBC provides resources and consultation to help you with injury prevention, workplace health and safety, communicable disease prevention, disability management, and return-to-work programs for injured workers.
- Collective liability: The claims costs are shared by those in your industry, so you never have to bear the full cost of a claim.
- Benefits: These include health care treatments, compensation for time missed from work, and other services to support recovery and return to work. In the case of permanent disability, WorkSafeBC may provide vocational rehabilitation services and specialized benefits and services. In the case of death, specific benefits and services for families may also be available.

Please note: WorkSafeBC coverage provides wage-loss benefits up to a [maximum wage rate](#), which changes annually. Doctors of BC recommends that physicians who earn more than this speak with a [Doctors of BC Insurance Advisor](#) or other licensed insurance agent to understand their options. See the “How does POP fit with other types of disability insurance?” section for more information.

Could I be charged retroactively for unpaid premiums?

If a physician meets the registration criteria as an employer, WorkSafeBC may retroactively register and assess that physician for previous years in which premiums were not paid. That’s because if the physician employed workers, coverage was provided for those workers, even though the physician was not paying premiums into the workers’ compensation system. (This does not apply to Personal Optional Protection.)

Typically, WorkSafeBC will only require retroactive premiums to be paid for up to a maximum of three years. If one of your workers sustained a workplace injury while you were not registered, you may be charged for the total claim cost for that injury.

Because of this, it is important that physicians inquire about registration as soon as possible by using WorkSafeBC’s Form 1800PHPC or by contacting WorkSafeBC directly.

How do I appeal a decision regarding registration or premium costs?

If you disagree with any decision, you can request a reconsideration within 75 days of the date of the decision. If you still disagree, you can [request a review](#) within 90 days of the reconsideration decision.

You may also wish to contact the [Employers’ Advisers Office](#), a resource for employers that is a branch of the Ministry of Labour, or the [Physician Advocacy department](#) at Doctors of BC. Please be aware that payment may still be required after pursuing these options.

When to contact WorkSafeBC

If you are an incorporated physician or if you hire workers, please ensure you fill out the [Physician Registration Application \(Form 1800PHCP\)](#) and submit it electronically or by mail or fax.

If you would like to apply for Personal Optional Protection, please [apply online](#) or download the [application package](#) and submit it electronically or by mail or fax.

If you have any questions that have not been answered in this guide, please contact WorkSafeBC's employer line at 1.888.922.2768. Please note that status decisions are not made over the phone.

For more information

Premium calculations

worksafebc.com/en/insurance/know-coverage-costs

Claims — Benefits and services

worksafebc.com/en/claims/benefits-services

Benefits of coverage

worksafebc.com/en/insurance/need-coverage/benefits-of-coverage

Wage-loss benefits

worksafebc.com/en/claims/benefits-services/wage-loss-benefits

WorkSafeBC's Employer Service Centre

(for inquiries about registration and Personal Optional Protection)

Phone 1.888.922.2768 (Monday to Friday, 8:30 a.m. to 4:30 p.m.)

Doctors of BC

(for questions about other or complementary types of insurance offered)

doctorsofbc.ca/your-benefits/insurance

Doctors of BC advocacy

Email worksafebc@doctorsofbc.ca

or phone 604.736.5551 / 1.800.665.2262 (Monday to Friday, 8:30 a.m. to 4:30 p.m.)

Glossary

Assessable payroll: The gross earnings of all workers, including casual workers, shareholders, and principals. Gross earnings include wages, salaries, commissions, holiday pay, bonuses, piecework, and any other remuneration paid to workers before deductions, up to a maximum wage per worker.

Base premium rate: The rate assigned to all the employers in a classification unit. The base premium rate is the rate each industry is charged based on the risk of injury. It's a percentage of assessable payroll. The base premium rate does not include an experience rating adjustment.

Classification unit (CU): A group of employers in similar industries with similar levels of risk. WorkSafeBC organizes employers in this way so that the base premium rate is reflective of those industries. The classification unit is the basic grouping in this system, representing one or more industries based on their products, their services, and the processes, technology, or materials they use. Physicians are grouped into the Physician Professional Services classification unit (766015).

Experience rating: A method for adjusting employers' premiums to reflect their claims costs. Employers whose injury costs are below their industry average get a discount, while employers whose injury costs are higher than their industry average pay a surcharge.

Health care benefits: Benefits that cover costs of doctors' visits and related health care costs such as lab or x-ray services, medical supplies, and prescription drugs. Wage-loss benefits are determined separately and are not included in health care benefits.

Net premium rate: An employer's personalized premium rate. If your claim costs are lower than the average for similar-sized businesses in your rate group, you can earn discounts on your base premium rate — up to 50 percent over time. If you have higher-than-average claim costs, you may face surcharges of up to 100 percent over time. This discount or surcharge is called your experience rating adjustment. It is applied to your base premium rate to create the net premium rate, which is used to calculate your premium.

No-fault protection: A key advantage of WorkSafeBC coverage. Workers' compensation insurance protects you from lawsuits from workers who are injured or fall ill on the job.

Personal Optional Protection (POP): An optional insurance plan designed to cover income loss and pay for medical costs should you suffer a work-related injury or disease.

Rehabilitation benefits: If you need assistance getting back to work, you may receive vocational assessment and planning, counselling, and skills development and placement assistance.

Wage-loss benefits: Benefits that compensate workers who lose pay due to a work-related injury or illness. Wage-loss benefits are generally based on 90 percent of net average earnings (the average amount remaining after probable deductions), up to the yearly maximum.

