

**APPENDIX B. OKLAHOMA WORKERS' COMPENSATION  
OPTIONAL DEDUCTIBLE ACCEPTANCE/REJECTION FORM**

Oklahoma law requires insurers issuing a policy under the Administrative Workers' Compensation Act ("AWCA") to offer, as a part of the policy or as an optional endorsement to the policy, deductibles optional to the policyholder for benefits payable under the AWCA. Deductible amounts offered shall be fully disclosed to the prospective policyholder in writing. The policyholder is not required to select the deductible option, but if the policyholder chooses to exercise this option, the policyholder may choose only one deductible amount. Please carefully review the requirements for the deductible option outlined below.

**DEDUCTIBLE OPTIONS**

Optional deductibles shall be offered in each policy insuring liability for workers' compensation that is issued, delivered, issued for delivery, or renewed under the AWCA on or after approval by the Insurance Commissioner, unless an insured employer and insurer agree to renegotiate a workers' compensation policy in effect on that date so as to include a provision allowing for a deductible.

**EMPLOYER OBLIGATIONS IF DEDUCTIBLE OPTION IS SELECTED**

If the policyholder exercises the option and chooses a deductible, the insured employer shall be liable for the amount of the deductible for benefits paid for each compensable claim of work injury suffered by an employee. The insurer shall pay all or part of the deductible amount, whichever is applicable to a compensable claim, to the person or medical provider entitled to the benefits conferred by the AWCA, and seek reimbursement from the insured employer for the applicable deductible amount. The payment or nonpayment of deductible amounts by the insured employer to the insurer shall be treated under the policy insuring the liability for workers' compensation in the same manner as payment or nonpayment of premiums. **WARNING: The insured employer must reimburse the insurer within sixty (60) days of a written demand. If the insured employer fails to reimburse the insurer within sixty (60) days, the insurer may seek to recover the full amount of such claim from the insured employer. In addition, the non-payment of deductible amounts shall be treated in the same manner as non-payment of premiums.**

**EXPERIENCE MODIFICATION**

Premium reduction for deductibles may be determined before the application of any experience modification, premium surcharge, or premium discounts, and, to the extent that an employer's experience rating or safety record is based on benefits paid, money paid by the insured employer under a deductible as provided herein may not be included as benefits paid so as to harm the experience rating of the employer.

**ACCEPTANCE/REJECTION**

Yes, I have read the optional deductible information outlined above and want the following deductible amount to apply to claims under the AWCA. I understand that this deductible applies to every claim for bodily injury by accident or disease filed by an injured employee.

Deductible Amount: \$ \_\_\_\_\_

No, I do not want the optional deductible described in this notice.

NAMED INSURED: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**PLEASE NOTE:** The optional deductible does not apply to employers who are approved to self-insure against liability for workers' compensation or group self-insurance funds for workers' compensation.

THIS FORM IS NOT A PART OF YOUR POLICY AND DOES NOT PROVIDE COVERAGE.