



Quick Links within Document

- Before You Begin
- Step 1: Terms of Use Acceptance Step 2: Profile Information
- Step 3: Confirmation
- Contact Information

Before You Begin

During the registration process you will be asked to provide specific information about your company. Ensure you have the following documents on-hand:

- Your most recent WCB account statement
- Your most recent Notice of Assessment
- The details of your last payment made to WCB

Please note: In order to register for Online Services, your business/organization must have an active account with the WCB, have received at least one account statement and have submitted at least one payment to the WCB. You will be asked to provide your current assessment rate.

Step #1 – Terms of Use Acceptance

In order to begin the process you must read the Terms of Use Acceptance statement. When you are finished reading, click the checkbox next to the statement "By clicking this box the user acknowledges that they have read and accepted the Online Services Terms of Use document displayed above. Select the "Continue" button to proceed to the next page or select "Close" to cancel registration and close the registration window.

Terms of Use Acceptance

The Workers Compensation Board ("WCB") of Prince Edward Island online services are provided to you on the terms and conditions set out below (collectively the "Online Services Terms of Use"), as well as, contained within the Website Terms of Use document.

This system is restricted to authorized users for legitimate business purposes and is subject to audit. Actual or attempted unauthorized access, use or modification of computer systems is a violation of federal and provincial laws.

Terms and Conditions

- I am responsible and accountable for all use of my User Name and password and I must take prudent measures to protect my User Name and password. I am responsible for changing my password immediately after a new password has been issued to me by WCB. I may only use my User Name and password to perform activities related to my business with WCB and I may only perform authorized functions. Any unauthorized attempt to access or modify computer system information or to interfere with normal systems operations, whether on WCB computer systems or networks that are accessible from WCB, may result in the suspension or termination of my access and possible legal action being taken.
- Information sent to WCB will only have legal effect after it has been submitted to and properly received by, and is accessible to WCB.
 If I receive information from WCB through this service and suspect that it is incomplete inaccurate, corrupted in transmission, or not

Workers Compensation Board of PEI requires that users accept the Online Services Terms of Use document in order to access Online Services.

By clicking this box the user acknowledges that they have read and accepted the Online Services Terms of Use document displayed above.



Step #2 – Profile Information

When registering for using Online Services, you are creating an account so that you can view WCB information for a particular company. The personal information you enter into the registration form should be your own contact information and should not have an email address that is shared by multiple people.

The account you are about to create will be an administrator account which will allow you to create user accounts for other staff.

Personal Information

Enter your first name, last name, email address, and phone number. You must also re-type your email address into the "Email Confirmation" text field to confirm that your email address was typed correctly.

Personal Information					
First Name		Last Name			
Email		Email Confirmation			
Phone Number				-	

Company Information

Enter your WCB Firm Number. When you click outside of this box the Employer Name will automatically appear next to the firm number that you entered. Verify that the correct Employer Name appears.

Company Information				
WCB Firm Number	Employer Name			

If you are not sure of the firm name or number, please refer to one of the following documents your company receives from WCB:

SAMPLE COMPANY NAME LTD. 2 WATER STREET FAKETOWN, PE, CAN A1B 2C3	STATEMENT OF ACCOUNT	"Cost of Claims Statement of Account" -
Period Date Range Firm Number 0		Information located in
Claim Cost Information		top section of
Opr Case Id Accident Date Claimant Name	Transaction Date Payment Type Amount	document.
	000	"Ctatana ant af
SAMPLE COMPANY NAME LTD. 2 WATER STREET FAKETOWN, PE, CAN	COPY STATEMENT OF ACCOUNT	"Statement of Account" -
SAMPLE COMPANY NAME LTD. 2 WATER STREET FAKETOWN, PE, CAN A1B 2C3	COPY STATEMENT OF ACCOUNT	"Statement of Account" - Information located in top section of
SAMPLE COMPANY NAME LTD. 2 WATER STREET FAKETOWN, PE, CAN A1B 2C3 Assessment Information Statement Date	COPY STATEMENT OF ACCOUNT	"Statement of Account" - Information located in top section of document.
SAMPLE COMPANY NAME LTD. 2 WATER STREET FAKETOWN, PE, CAN A1B 2C3 Assessment Information Statement Date Firm Number 0 Account Information	COPY STATEMENT OF ACCOUNT	"Statement of Account" - Information located in top section of document.



NOTIFICATION OF ASSESSMENT RATE	Assessment year	·	
SAMPLE COMPANY NAME LTD. 2 WATER STREET FAKETOWN, PE, CAN A1B 2C3	Firm number 0 Rate Group	Date # of Pages	1
Operation			

"Notice of Assessment" -Information located in top section of document.

Authorized Representative Acceptance

The account you are registering will create your administrator account. To register, you are required to click on the checkbox next to the statement "I acknowledge that I am a duly authorized representative of the company with permission to view all data pertaining to financial and claim information."

Role

As the initial user account created for your Company you will be given the role of WCB Account Administrator. You will be responsible for creating and assigning roles for each of your staff that will require access to the Online Service.

I acknowledge that I am a duly authorized representative of the company with permission to view all data pertaining to financial and claim information.

Keys Facts for Firm

You will be asked to provide specific information pertaining to your company. After you have entered the information click "Submit Request" to proceed to the next section.

What was your last statement balance? Found on Statement of Account (bottom of page)

PLEASE RETAIN THIS PORTION FOR YOUR RECORDS		Total Due 💲	
			See "Amount Due" value
Safety Matters @work Workers Compensation Board of PEI	Statement Date Firm Number	Amount Due: Amount Paid:	on your most recent statement of account.
P.O. Box 757 14 Weymouth Street Charlottetown, PEI C1A 7L7 Tel (902) 368-5680		All outstanding balances in favour of the board are subject to a service charge at the rate of 1.50 % per month	
Payable at Workers Compensation Board Office, any authorized paystation, Chartered Bank or Credit		To avoid additional service charges, payment must be received within 30 days of statement date.	
Union.	Page 1 of 1	PLEASE RETURN THIS PORTION WITH YOUR PAYMENT	



What was the last payment amount your company submitted to WCB? *Can be obtained from your accounting department.*

Provide one operation number for your company and state your current rate of assessment for the operation number you entered. *This information displays on your Statement of Account and Notification of Assessment Rate*

NOTIFICATION OF ASSESSM	ENT RATE	Assessme	nt year	Page
			Firm number	Date
			Rate Group	# of Pages
1 - Claim cost for experience rating for each year of injury: / / / /				
Claim Number Name			2 - Payrolls	
			3 - Employer o	ost ratio
			4 - Group Ratio	
			5 - Employer va	ariance percentage
			6 - Participation	n Factor
			7 - Rate Adju	stment
			8 - Industry As	sessment Rate
			9 - Experience	Rate
			10 - Net Asses	sment Rate

Your "Notification of Assessment Rate" will display the operation in the top section of the page, and the assessment rate will display in Box 10 – Net Assessment Rate.



Step #3 – Confirmation

Upon successfully entering the required information, you will be taken to the confirmation page.

IMPORTANT: A temporary password will display on this screen. Record this password -- you will need it to activate your account.

An email will automatically be sent to the address you provided. This email will contain a link to a page where you will need to enter the temporary password. Once you sign in successfully with the temporary password you will be required to change your password before you can enjoy the convenience of accessing WCB Online Services.

Contact Information

Please direct questions about registering to Employer Services, (902) 368-5680.

Technical Assistance

If you experience technical difficulties when trying to use the user registration service please read the "Learn About Online Services" section pertaining to Technical Requirements. If you continue to experience difficulties please contact <u>wcbeservices@wcb.pe.ca</u> or phone (902) 368-6351.

REVISED JULY 2012