



Gross Loss Run

Dodge County Board of Education
 Dodge County Board of Education
 1118 McRae Highway

Policy Number AC-GA-000181-1
 Inception Date 01/01/2018
 Expiration Date 01/01/2019
 Agency Marsh & McLennan Agency, LLC

Eastman, GA 31023

Carrier: American Compensation Insurance Company

Product: Workers' Compensation Insurance

| Claimant Name / Injury Description | Claim Number | Injury Date | File Status | Liability Status | Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | |
|---|-----------------|----------------|----------------|---------------------|--------------|--------------|--------------|---------------|------------------------|---------------|-----------|---------------|------------------|---------------|--------------|---------------|
| | | | | | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total |
| 8868 / LEFT ANKLE SPRAIN ON LADDER PLACING DECORATIONS ON HER CLASSROOM WAL | 590741 | 07/05/18 | O | AL | 5,786 | 4,025 | 1,637 | 11,447 | 10,114 | 16,675 | 55 | 26,844 | 15,900 | 20,700 | 1,692 | 38,292 |
| 9101 / left knee contusion and left rib contusion WALKING DOWN THE HALL AND TRIPPED ON OWN FEET | 594972 | 09/12/18 | O | D | 0 | 0 | 0 | 0 | 2,900 | 0 | 0 | 2,900 | 2,900 | 0 | 0 | 2,900 |
| 8868 / DISLOCATION OF LEFT SHOULDER ON STOOL, HANGING ROOM DECORATIONS -Stool slipped out from her and tried to catch self with left arm | 592573 | 08/06/18 | F | A | 1,269 | 0 | 27 | 1,296 | 0 | 0 | 0 | 0 | 1,269 | 0 | 27 | 1,296 |
| 9101 / Left Knee pain and giving out took a step and knee gave out, has given out ever since 2nd surgery to the knee for prior work injur | 593335 | 07/03/18 | O | D | 0 | 0 | 0 | 0 | 500 | 0 | 0 | 500 | 500 | 0 | 0 | 500 |
| 9101 / ABRASION TO RIGHT KNEE COMING FROM LUNCH,FELL TRYING TO STOP STUDENT FROM | 593832 | 08/24/18 | F | CN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal for Location 1118 McRae Highway | Count: 5 | | | | 7,055 | 4,025 | 1,663 | 12,743 | 13,514 | 16,675 | 55 | 30,244 | 20,569 | 20,700 | 1,718 | 42,988 |

Run Date: 9/24/2018 11:18:17 AM Central Time

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Gross Loss Run

Dodge County Board of Education
 Dodge County Board of Education
 167 Orphan's Cemetery Road

Policy Number AC-GA-000181-1
 Inception Date 01/01/2018
 Expiration Date 01/01/2019
 Agency Marsh & McLennan Agency, LLC

Eastman, GA 31023

Carrier: American Compensation Insurance Company

Product: Workers' Compensation Insurance

| Claimant Name / Injury Description | Claim Number | Injury Date | File Status | Liability Status | Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | | |
|--|--------------|----------------|----------------|---------------------|--------------|----------|----------|----------|------------------------|----------|----------|----------|------------------|----------|----------|----------|----------|
| | | | | | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | |
| | 594641 | 09/06/18 | F | CN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8868 / RIGHT WRIST INJURY WALKING IN FROM PLAYGROUND & SLIPPED DOWN - SLID O | | | | | | | | | | | | | | | | | |
| Subtotal for Location 167 Orphan's Cemetery Road | | | | Count: 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Run Date: 9/24/2018 11:18:17 AM Central Time



Gross Loss Run

Dodge County Board of Education
 Dodge County Board of Education
 328 School Bus Alley

Policy Number AC-GA-000181-1
 Inception Date 01/01/2018
 Expiration Date 01/01/2019
 Agency Marsh & McLennan Agency, LLC

Eastman, GA 31023

Carrier: American Compensation Insurance Company

Product: Workers' Compensation Insurance

| Claimant Name / Injury Description | Claim Number | Injury Date | File Status | Liability Status | Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | |
|---|--------------|----------------|----------------|---------------------|--------------|----------|------------|------------|------------------------|----------|----------|----------|------------------|----------|------------|------------|
| | | | | | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total |
| | 585727 | 04/30/18 | F | D | 143 | 0 | 382 | 524 | 0 | 0 | 0 | 0 | 143 | 0 | 382 | 524 |
| 7383 / strain to right shoulder OPENING AND CLOSING BUS DOOR - HE IS A BUS DRIVER. | | | | | | | | | | | | | | | | |
| | 592997 | 08/09/18 | O | D | 0 | 0 | 60 | 60 | 0 | 0 | 0 | 0 | 0 | 0 | 60 | 60 |
| 7383 / BACK, RIGHT LEG, AND NECK WERE SORE EE was on route taking the children home, logs were on the road blocking passage. EE picked/moved th | | | | | | | | | | | | | | | | |
| Subtotal for Location 328 School Bus Alley | | | | Count: 2 | 143 | 0 | 441 | 584 | 0 | 0 | 0 | 0 | 143 | 0 | 441 | 584 |

Run Date: 9/24/2018 11:18:17 AM Central Time



Gross Loss Run

Dodge County Board of Education
 Dodge County Board of Education
 350 Pearl Bates Road

Eastman , GA 31023

Policy Number AC-GA-000181-1
 Inception Date 01/01/2018
 Expiration Date 01/01/2019
 Agency Marsh & McLennan Agency, LLC

Carrier: American Compensation Insurance Company

Product: Workers' Compensation Insurance

| Claimant Name / Injury Description | Claim Number | Injury Date | File Status | Liability Status | Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | | |
|--|--------------|----------------|----------------|---------------------|--------------|----------|----------|----------|------------------------|----------|----------|----------|------------------|----------|----------|----------|----------|
| | | | | | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | |
| | 594983 | 09/06/18 | F | CN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8868 / ABRASION TO LEFT WRIST IN CLASSROOM, STUDENT GRABBED TEACHER'S WRISTS, WO | | | | | | | | | | | | | | | | | |
| | 594985 | 09/06/18 | F | CN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8868 / LEFT WRIST SPRAIN APPROACHED BY STUDENT IN THE CLASSROOM, GRABBED WRI | | | | | | | | | | | | | | | | | |
| Subtotal for Location 350 Pearl Bates Road | | | | Count: 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Run Date: 9/24/2018 11:18:17 AM Central Time

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Gross Loss Run

Dodge County Board of Education
 Dodge County Board of Education
 401 Harrell Street

Eastman, GA 31023

Policy Number AC-GA-000181-1
 Inception Date 01/01/2018
 Expiration Date 01/01/2019
 Agency Marsh & McLennan Agency, LLC

Carrier: American Compensation Insurance Company

Product: Workers' Compensation Insurance

| Claimant Name / Injury Description | Claim Number | Injury Date | File Status | Liability Status | Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | |
|---|--------------|----------------|----------------|---------------------|--------------|----------|--------------|--------------|------------------------|----------|-----------|--------------|------------------|----------|--------------|---------------|
| | | | | | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total |
| | 586618 | 05/18/18 | O | PM | 2,031 | 0 | 1,871 | 3,903 | 7,269 | 0 | 63 | 7,332 | 9,300 | 0 | 1,935 | 11,235 |
| 8868 / PAIN IN BACK - LOWER BACK CHASING STUDENT THAT RAN OUT OF GATE : TWISTED BACK | | | | | | | | | | | | | | | | |
| | 584223 | 04/19/18 | F | CN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8868 / contusion to right hand CAR PICK UP AT BUS RAMP LOADING CHILDREN IN CARS: DOG BIT EE RIGHT HAND. | | | | | | | | | | | | | | | | |
| | 579206 | 02/09/18 | F | CN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8868 / ABRASION TO RIGHT FOREARM TAKING CHILDREN TO RESTROOMS - STUDENT ATTACKED EE | | | | | | | | | | | | | | | | |
| Subtotal for Location 401 Harrell Street | | | | Count: 3 | 2,031 | 0 | 1,871 | 3,903 | 7,269 | 0 | 63 | 7,332 | 9,300 | 0 | 1,935 | 11,235 |

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Gross Loss Run

Dodge County Board of Education
 Dodge County Board of Education
 5911 Oak Street

Eastman, GA 31023

Policy Number AC-GA-000181-1
 Inception Date 01/01/2018
 Expiration Date 01/01/2019
 Agency Marsh & McLennan Agency, LLC

Carrier: American Compensation Insurance Company

Product: Workers' Compensation Insurance

| Claimant Name / Injury Description | Claim Number | Injury Date | File Status | Liability Status | Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | |
|--|--------------|----------------|----------------|---------------------|---------------|------------|--------------|---------------|------------------------|---------------|----------|---------------|------------------|---------------|--------------|---------------|
| | | | | | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total |
| | 580611 | 03/05/18 | O | AL | 8,731 | 230 | 2,278 | 11,239 | 31,169 | 12,970 | 0 | 44,139 | 39,900 | 13,200 | 2,278 | 55,378 |
| 8868 / left knee contusion SHE WAS WALKING INTO THE BUILDING AND TRIPPED OVER THE MAT fell landing on left knee | | | | | | | | | | | | | | | | |
| | 576365 | 01/04/18 | F | A | 1,874 | 0 | 251 | 2,125 | 0 | 0 | 0 | 0 | 1,874 | 0 | 251 | 2,125 |
| 8853 / laceration to head Ee tripped walking up steps with class and fell into corner wall of concrete landing on her stomach | | | | | | | | | | | | | | | | |
| | 594564 | 09/06/18 | O | D | 0 | 0 | 0 | 0 | 500 | 0 | 0 | 500 | 500 | 0 | 0 | 500 |
| 9101 / neck and right shoulder pain box fell on employee in the freezer | | | | | | | | | | | | | | | | |
| | 581502 | 03/15/18 | F | CN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8868 / PAIN TO WRIST AREA ON BOTH ARMS AND LOWER BACK. STEPPING OUT OF BAND ROOM INTO HALLWAY - SLIPPED ON WET FLOOR AND COULD NOT GET UP FOR A FEW MINUTE | | | | | | | | | | | | | | | | |
| | 594664 | 09/07/18 | F | A | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9101 / Ee stung by bees. PICKING UP TRASH UNDERNEATH THE BLEACHERS at the football stadium attacked by bees | | | | | | | | | | | | | | | | |
| Subtotal for Location 5911 Oak Street | | | | Count: 5 | 10,606 | 230 | 2,529 | 13,364 | 31,669 | 12,970 | 0 | 44,639 | 42,274 | 13,200 | 2,529 | 58,003 |

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Gross Loss Run

Dodge County Board of Education
 Dodge County Board of Education
 720 College Street
 Eastman, GA 31023

Policy Number AC-GA-000181-1
 Inception Date 01/01/2018
 Expiration Date 01/01/2019
 Agency Marsh & McLennan Agency, LLC

Carrier: American Compensation Insurance Company

Product: Workers' Compensation Insurance

| Claimant Name / Injury Description | Claim Number | Injury Date | File Status | Liability Status | Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | | |
|--|--------------|----------------|----------------|---------------------|--------------|----------|----------|----------|------------------------|----------|----------|----------|------------------|----------|----------|----------|----------|
| | | | | | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | |
| [REDACTED] | 578135 | 01/30/18 | F | CN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 7383 / CONTUSION TO LEFT KNEE SHE WAS LEAVING THE LUNCHROOM WHEN SHE SLIPPED ON BROCCOLI AND LANDED ON HER LEFT KNEE | | | | | | | | | | | | | | | | | |
| Subtotal for Location 720 College Street | | | | Count: 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

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Gross Loss Run

| | Count: | Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | |
|---|--------|--------------|-------|-------|--------|------------------------|--------|-------|--------|------------------|--------|-------|---------|
| | | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total |
| Subtotal for Policy Number AC-GA-000181-1 | 19 | 19,835 | 4,255 | 6,504 | 30,594 | 52,452 | 29,645 | 118 | 82,215 | 72,286 | 33,900 | 6,623 | 112,809 |

Run Date: 9/24/2018 11:18:17 AM Central Time

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Gross Loss Run

Subtotal for Insured Dodge County Board of Education

| Count: | Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | |
|--------|--------------|-------|-------|--------|------------------------|--------|-------|--------|------------------|--------|-------|---------|
| | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total |
| 19 | 19,835 | 4,255 | 6,504 | 30,594 | 52,452 | 29,645 | 118 | 82,215 | 72,286 | 33,900 | 6,623 | 112,809 |

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Gross Loss Run

| | Count | Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | |
|---|-----------|---------------|--------------|--------------|---------------|------------------------|---------------|------------|---------------|------------------|---------------|--------------|----------------|
| | | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total |
| Subtotal for Product Workers' Compensation | 19 | 19,835 | 4,255 | 6,504 | 30,594 | 52,452 | 29,645 | 118 | 82,215 | 72,286 | 33,900 | 6,623 | 112,809 |

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Gross Loss Run

**Subtotal for Carrier American Compensation
Insurance Company**

Count: 19

| Paid To Date | | | | + Outstanding Reserves | | | | = Total Incurred | | | |
|---------------------|-------|-------|--------|-------------------------------|--------|-------|--------|-------------------------|--------|-------|---------|
| Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total | Medical | Ind | Alloc | Total |
| 19,835 | 4,255 | 6,504 | 30,594 | 52,452 | 29,645 | 118 | 82,215 | 72,286 | 33,900 | 6,623 | 112,809 |

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Gross Loss Run

KEY: Liability Status

A - Accepted - Medical Only

AL - Accepted Indemnity

CN - Closed - No Pay

D - Denied

PD - Partial Denial - Indemnity and Medical

PI - Partial Denial - Indemnity

PM - Partial Denial - Medical

PP - Pay Without Prejudice

U - Liability Undetermined

UI - Liability Undetermined - Indemnity

UM - Liability Undetermined - Medical

File Status

F - Claim is Final

O - Claim is Open

Ind

Includes Indemnity + Vocational Rehabilitation

Alloc

Includes Expense + Legal

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