



## WORKERS COMPENSATION EXPERIENCE RATING

Risk Name: DODGE CO BD OF ED

Risk ID: 100267381

Rating Effective Date: 01/01/2019

Production Date: 09/27/2018

State: GEORGIA

State	Wt	Exp Excess Losses	Expected Losses	Exp Prim Losses	Act Exc Losses	Ballast	Act Inc Losses	Act Prim Losses
GA	.15	143,322	214,342	71,020	262,893	50,000	440,966	178,073

(A) Wt	(B)	(C) Exp Excess Losses (D - E)	(D) Expected Losses	(E) Exp Prim Losses	(F) Act Exc Losses (H - I)	(G) Ballast	(H) Act Inc Losses	(I) Act Prim Losses
.15		143,322	214,342	71,020	262,893	50,000	407,292	144,399

	Primary Losses	Stabilizing Value	Ratable Excess	Totals	
Actual	(I) 144,399	$C * (1 - A) + G$ 171,824	(A) * (F) 39,434	(J) 355,657	
Expected	(E) 71,020	$C * (1 - A) + G$ 171,824	(A) * (C) 21,498	(K) 264,342	
	ARAP	FLARAP	SARAP	MAARAP	Exp Mod
Factors					(J) / (K) 1.35

RATING REFLECTS A DECREASE OF 70% MEDICAL ONLY PRIMARY AND EXCESS LOSS DOLLARS WHERE ERA IS APPLIED.

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10-GEORGIA Firm ID: Firm Name: DODGE CO BD OF ED

Carrier: 58912 Policy No. WC1915 Eff Date: 01/01/2015 Exp Date: 01/01/2016

Code	ELR	D-Ratio	Payroll	Expected Losses	Exp Prim Losses	Claim Data	IJ	OF	Act Inc Losses	Act Prim Losses
7383	2.32	.26	581,009	13,479	3,505	702015000242	05	F	5,931	5,931
8868	.21	.35	16,646,741	34,958	12,235	20151103	05	F	7,471	7,471
9101	2.28	.35	962,621	21,948	7,682	702015000060	05	O	37,933	16,500
						702015000193	05	O	103,000	16,500
						20151447	06	F	2,105	2,105
						NO. 11	06	*	4,668	4,668
						702015000580	06	F	7,055	7,055
						20151435	06	F	7,057	7,057
<b>Policy Total:</b>			<b>18,190,371</b>	<b>Subject Premium:</b>	<b>174,416</b>	<b>Total Act Inc Losses:</b>		<b>175,220</b>		

10-GEORGIA Firm ID: Firm Name: DODGE CO BD OF ED

Carrier: 22381 Policy No. 0000022000 Eff Date: 01/01/2016 Exp Date: 01/01/2017

Code	ELR	D-Ratio	Payroll	Expected Losses	Exp Prim Losses	Claim Data	IJ	OF	Act Inc Losses	Act Prim Losses
7383	2.32	.26	661,322	15,343	3,989	0032189	05	O	36,175	16,500
8868	.21	.35	17,064,876	35,836	12,543	0032463	06	F	2,313	2,313
9101	2.28	.35	947,604	21,605	7,562	0032101	06	F	3,330	3,330
9812	EMPLOYERS LIABILIT			0	0	0032249	06	F	3,398	3,398
						NO. 13	06	*	5,949	5,949
<b>Policy Total:</b>			<b>18,673,802</b>	<b>Subject Premium:</b>	<b>164,701</b>	<b>Total Act Inc Losses:</b>		<b>51,165</b>		

10-GEORGIA Firm ID: Firm Name: DODGE CO BD OF ED

Carrier: 22381 Policy No. 0000022 Eff Date: 01/01/2017 Exp Date: 01/01/2018

Code	ELR	D-Ratio	Payroll	Expected Losses	Exp Prim Losses	Claim Data	IJ	OF	Act Inc Losses	Act Prim Losses
7383	2.32	.26	673,836	15,633	4,065	0032567	05	F	1,065	1,065
8868	.21	.35	17,105,060	35,921	12,572	0032624	05	F	20,730	16,500
9101	2.28	.35	860,483	19,619	6,867	0033143	05	O	30,234	16,500
9812	EMPLOYERS LIABILIT			0	0	0033037	05	O	71,089	16,500
						0033076	05	O	79,232	16,500
						NO. 8	06	*	1,934	1,934
						0032924	06	F	2,210	2,210
						0032648	06	F	8,087	8,087
<b>Policy Total:</b>			<b>18,639,379</b>	<b>Subject Premium:</b>	<b>168,207</b>	<b>Total Act Inc Losses:</b>		<b>214,581</b>		

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\* Total by Policy Year of all cases \$2000 or less.  
 C Catastrophic Loss

D Disease Loss  
 E Employers Liability Loss

X Ex-Medical Coverage  
 # Limited Loss

U USL&HW



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State: GEORGIA

10-GEORGIA Firm ID: Firm Name: DODGE CO BD OF ED

Carrier: 58912 Policy No. WC1915 Eff Date: 01/01/2015 Exp Date: 01/01/2016

Code	ELR	D-Ratio	Payroll	Expected Losses	Exp Prim Losses	Claim Data	IJ	OF	Act Inc Losses	Act Prim Losses
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						702015000193	05	O	103,000	16,500
						20151447	06	F	2,105	2,105
						NO. 11	06	*	4,668	4,668
						702015000580	06	F	7,055	7,055
						20151435	06	F	7,057	7,057
<b>Policy Total:</b>			<b>18,190,371</b>	<b>Subject Premium:</b>	<b>174,416</b>	<b>Total Act Inc Losses:</b>			<b>175,220</b>	

10-GEORGIA Firm ID: Firm Name: DODGE CO BD OF ED

Carrier: 22381 Policy No. 0000022000 Eff Date: 01/01/2016 Exp Date: 01/01/2017

Code	ELR	D-Ratio	Payroll	Expected Losses	Exp Prim Losses	Claim Data	IJ	OF	Act Inc Losses	Act Prim Losses
7383	2.32	.26	661,322	15,343	3,989	0032189	05	O	36,175	16,500
8868	.21	.35	17,064,876	35,836	12,543	0032463	06	F	2,313	2,313
9101	2.28	.35	947,604	21,605	7,562	0032101	06	F	3,330	3,330
9812	EMPLOYERS LIABILIT			0	0	0032249	06	F	3,398	3,398
						NO. 13	06	*	5,949	5,949
<b>Policy Total:</b>			<b>18,673,802</b>	<b>Subject Premium:</b>	<b>164,701</b>	<b>Total Act Inc Losses:</b>			<b>51,165</b>	

10-GEORGIA Firm ID: Firm Name: DODGE CO BD OF ED

Carrier: 22381 Policy No. 0000022 Eff Date: 01/01/2017 Exp Date: 01/01/2018

Code	ELR	D-Ratio	Payroll	Expected Losses	Exp Prim Losses	Claim Data	IJ	OF	Act Inc Losses	Act Prim Losses
7383	2.32	.26	673,836	15,633	4,065	0032567	05	F	1,065	1,065
8868	.21	.35	17,105,060	35,921	12,572	0032624	05	F	20,730	16,500
9101	2.28	.35	860,483	19,619	6,867	0033143	05	O	30,234	16,500
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