

# Workers Compensation Experience Rating Worksheet

<b>NAME OF RISK</b>	Sample 2010 Mod Projection	<b>RISK ID</b>		<b>EFFECTIVE DATE</b>	4/1/2010
		<b>STATE</b>	FL		

1	2	3	4	5	6	7	8	9	10
CLASS CODE	ELR	D-RATIO	AUDITED PAYROLL	EXPECTED LOSSES	EXP. PRIM. LOSSES	# CLAIM ID	IJ OF	ACT. INC. LOSSES	ACT. PRIM. LOSSES

(2) x (4) / 100

(3) x (5)

5 = Temporary Injury w/Indemnity

6 = Medical Only

\*\*\*\*\* Florida

<b>Policy Period: 04/01/2006 to 04/01/2007</b>			<b>Policy #: 123456-548</b>						
7380	2.360	0.20	1,438,657	33,952	6,790	2 Sm. losses	6 *	2,100	2,100
8742	0.180	0.19	510,348	919	175	1 234687	6 F *	3,500	3,500
8810	0.120	0.21	2,800,013	3,360	706	1 336725	5 F	25,687	5,000
(2) Workplace Safety Credit				(765)	(153)				
(3) Drug-Free Workplace Credit				(1,873)	(376)				
<b>Policy Period Totals</b>			<b>4,749,018</b>	<b>35,593</b>	<b>7,142</b>			<b>31,287</b>	<b>10,600</b>

<b>Policy Period: 04/01/2007 to 04/01/2008</b>			<b>Policy #: 123456-549</b>						
7380	2.360	0.20	1,785,392	42,135	8,427	4 Sm. losses	6 *	2,654	2,654
8742	0.180	0.19	527,368	949	180	1 335587	5 F	25,349	5,000
8810	0.120	0.21	3,256,487	3,908	821				
(2) Workplace Safety Credit				(940)	(189)				
(3) Drug-Free Workplace Credit				(2,303)	(462)				
<b>Policy Period Totals</b>			<b>5,569,247</b>	<b>43,750</b>	<b>8,777</b>			<b>28,003</b>	<b>7,654</b>

<b>Policy Period: 04/01/2008 to 04/01/2009</b>			<b>Policy #: 123456-550</b>						
7380	2.360	0.20	1,834,267	43,289	8,658	6 Sm. losses	6 *	3,849	3,849
8742	0.180	0.19	535,467	964	183	1 34895	5 F	15,349	5,000
8810	0.120	0.21	3,357,468	4,029	846	1 61287	6 F *	3,849	3,849
(2) Workplace Safety Credit				(966)	(194)	1 69874	5 F	4,000	4,000
(3) Drug-Free Workplace Credit				(2,366)	(475)	1 367824	5 F	15,387	5,000
<b>Policy Period Totals</b>			<b>5,727,202</b>	<b>44,951</b>	<b>9,019</b>			<b>42,434</b>	<b>21,698</b>

	(D) - (E)	(H) - (I)					
0.15	99,355	124,293	24,938	61,772	28,800	90,558	28,786
"W" VALUE	EXPECTED EXCESS	TOTAL EXPECTED	TOTAL EXP. PRIM.	ACTUAL EXCESS	"B" VALUE	TOTAL ACTUAL	TOTAL ACT. PRIM.
A	B	C	D	E	F	G	H

# Limited loss. S Subrogation or other special loss.		Experience Modification Calculation	11	12	13	14	15 EXP. MOD (J) / (K) <b>0.99</b>	
			PRIMARY LOSSES	STABILIZING VALUE	RATABLE EXCESS	ADJUSTED TOTALS		
	16		ACTUAL	(I)	(C) X (1-W) + (G)	(A) X (F)		J
	ARAP 1.00 if applicable		EXPECTED	28,786	(C) X (1-W) + (G)	(A) X (C)		K
			24,938	113,252	14,903	153,093		

\* Rating reflects a decrease of 70% medical only primary and excess loss dollars where ERA is applied, reflected only in totals (F), (H) & (I).

The ARAP surcharge shown is for those states in the rating that have approved the ARAP program. It was calculated based on the general interstate formula and maximum, however, the maximum surcharge may vary by state.

This is an ESTIMATE of your experience modification factor. Your actual factor is issued by the appropriate rating bureau.