Texas Negotiated Deductible Workers’ Compensation Form

Confidential Quarterly Reporting Form Pursuant to Article 1.15B

Current Policies in Force and Policies that Currently Have an Open Claim

As of: ___________________________  Preparation Date: ___________________________

Insurer: ___________________________ Policy Year: ___________________________

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Notes: Only One Policy per sheet.

Col 1 - If there is more than one client of the policyholder with sub-policies, only the master policy needs to be listed.

Col 4 - One, unless coverage is for multiple client companies, such as employee leasing operations.

Col 6 - Master contract only.

Col 7 - Premium for Insured on a first dollar basis.

Col 8 - Premium retained by insurer reflecting deductible coverage, before deducting excess of loss reinsurance.

Col 9 - Ultimate Losses which include losses paid to date, case reserves, and IBNR losses. Includes DCC and AAO Expenses.

Col 10 - Dollar amount of loss and loss adjustment that exceeds deductible.

Col 11 - 1=Industry Loss Ratio Basis, 2=Policy experience basis, 3= Other (please describe)

Col 12 - Portion of Column 9 losses paid as of current date.

Col 13 - Portion of Column 10 losses paid as of current date.

Col 14 - That portion of Column 12 not yet recovered from policyholder.

Col 15 - Reserve Credit that has been recorded for losses below the deductible.

Col 16 - Total Security (collateral) being held by insurer for the policyholder.

Col 17 - Code for the primary sources of the collateral. 1=LOC; 2=Cash; 3=Securities held by Insurer; 4=Other (describe)