

My Company

1. Do I know what my company's Experience Modification Factor history is?

2016 _____ 2015 _____
 2014 _____ 2013 _____

2. How does our company's EMF compare against competitors?

Very good Good Not Good Don't know

3. What is my company's lowest possible Experience Modification Factor in 2013? _____

4. In the past 10 years, did our company have any of the following types of situations?

- Subrogation Case _____ Year _____
- Joint-Coverage Case _____ Year _____
- Fraudulent Case _____ Year _____
- Partially Fraudulent Case _____ Year _____
- Non-Compensable Case _____ Year _____
- OCIP/Wrap-up Insurance Programs

5. Was our company's Experience Modification Factor ever revised down?

Yes _____ What Year(s) _____
 No _____ But I think it should have been _____

6. Did we ever receive money back from a past W/C insurance company because of an EMF revision?

Yes _____ What Year(s) _____
 No _____ But I think we should have _____

7. What is our current W/C main policy effective dates?

From: _____ To: _____

8. What is the Unit Statistical Reporting date for our company's main policy? _____

9. Does our main company's Experience Modification Factor apply to another business?

Yes _____ What is the policy effective date for that business? _____

No, our company is a single entity.