# Granite State Insurance Company/ illinois National Insurance Company New Hampshire Insurance Company

AMERICAN ORTIIOTICS & PROSTIIETICS ASSOCIATION

(AOPA) RATEPAGE

Iowa

#### Genera] Liability

L Base Rates *(Per* $1,000 *Net Sales)*

*$1,00D,000/2,DOD,000Umit of Liability*

Classification Manufacturing/PatientCare Facilities

Supplier/ Manufacturer

Supplier/Distributor/\oVholesaler

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7.189

1.799

#### Countersales IL Additional Coverages

Description

Rate

l.125

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Liability Only Location

Discontinued Products:

#### 3 year prepaid using ISOform

2"'1year of Atlantic coverage

3rdyear of Atlanticcoverage

Special general liability covl?iage form

#### htcreased Limits Factors

Apply lhenppllcable increased Jlmllsfactor to the b.uerate.

*Limils o{Linbility*

$1,000,000/$4000,000

$1,000,000/$3,000,000

$25periOt?ti0r..-· . ·.'-·i,

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200% ofpremium

·90% ofpremium·

60% ofpremium

3% of premium subject to $750 minimum premium

### *Faclor*

1.00

1.15

1. Deductible Credits

Apply lhe deduci10le credits tolhebaserate and.rubtnct from the increased llmilspremium,115!olh,ws:

Mature Premlum•{B:i.se Rate XJLF}-{B:i.se Rate X Dcd CreditJ

|  |  |
| --- | --- |
| *Ded11ctible* | *Factor* |
| $0 | 1.00 |
| $1,000 | 0.92 |
| $2,500 | 0,88 |
| $5,000 | 0.80 |

#### Rate Modification Factors

If theapplicant is a member of the American Orlhotic and Prosthetic Association (AOPA), they willqualify for a10% discount on their premium. Use of the American Orthotic and Prosthetic Association (AOPA) approved Loss Control Program will qualify applicants for a10% policy discount.

VL Experience Rating

Claims Frequency

No daimsinlastSyears

One claim in Jast 5 years

Two or moreclaims inlastSyears

ClaimsSeverity

**0.75**

#### 1.10

1.25

Based on Loss Ratio- calculated by dividing insureds total incurred loss (including legalexpenses)

inexcess of any deductibles by the total premium the insured paid

0-30% 0.85

#### 31%-40% 0.90

41%--50%

51%-60%

61% 70%

#### 71%-80%

VIL Scheduled Rating

#### 0.95

1.05

1.10

#### 1.15

Longevity of Business

Start Up

## 1 to3years

4 to 6 years

*7* to 12years

More than12 years

Continuing Educii.tion ,. ;

No CEprogram

Accreditation of facility

-No accreditation

Accreditation with AOPAand/or ABC

PatientVisitRecords

Fullcompliance with documentation procedures Compliance with documentation procedures, but needs improvement Non-compliance

1.20

1.15

1.00

#### 0.90

0.80

1.10

1.15

0.85

#### 0.90

**1.00**

#### 1.10

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Maximum Debit/Credit

VIII. Minimum Policy Premium

*Limit*

$1,000,000/$2,000,000

$1,000,000/$3,000,000

25%

### *Premium*

$1,500

$2,000

Property

Special Properly Coverage Form

### *Premium*

*7%* of Property Premium subject to a $200 minimum premium