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

AMERICAN ORTHOTICS & PROSTHETICS ASSOCIATION

## (AOPA) RATEPAGE

General Liability

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

### *$1,000,000/2,000,000Umit ofUabilitg*

Classification

Vermont

|  |  |
| --- | --- |
| Manufacturing/Patient Care Facilities | 9.436 |
| Supplier/ Manufacturer | 7.189 |
| Supplier/Distributor/Wholesaler | 1.799 |
| Countersales | 1.1:ZS |

Il. Additional Coverages

Description

Liability Only Location Discontinued Products:.

3 }'.ear prepaid using ISOfonn 2ndyear of AtJanticcoverage 3rd year of Atlanticcoverage

Rate

$25 per Iocal:ion

200% of premium

90% ofpremium

60% ofpremium



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Special general liability coverage form

m. Increased Limits Factors

Apply the applicable increased limits /actor to the base rnte.

*[..imils o{Liability*

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

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

3% of pr<!miumsubject to $750 minimum premium

### *Factor*

1.00

1.15

1. Deductible Credits

Apply the deductible credits i.o thebase rnteandsubtract from the increased limits premium, as follows: Mature Premluma{Base RateX ILF)-{Base RateX Ded CreditJ

1. Rate Modification Factors

|  |  |
| --- | --- |
| *Deduclible* | *Factor* |
| $0 | 1.00 |
| $1,000 | 0.92 |
| $2,500 | 0.88 |
| $5,000 | 0.80 |

If theapplicant is a member of the American Orthoticand Prosthetic Association (AOPA), they will qualify for a 10% discount on their premiu11L Useof the American Ortholic and Prosthetic Association (AOPA) approved Loss Control Program will qualify applicants for a10% policy discount.

VL Expe?rience Rating

Claims Frequency

No claimsin lastsyears Oneclaim in lastsyears

Two or moreclaims in last5years

Claims Severity

0.75

1.10

1.25

Based on Loss Ratio- calculated by dividing insureds totalincurred loss (includinglegal expenses)

in excess of any deductibles by the total premium theinsured paid 0-30% 0.85

31%-40%

41%-50%

51%-60%

61%-70%

71%-80%

VIL Scheduled Rating

0,90

0.95

1.05

1.10

1.15

Longevity ofBusiness

StartUp

1 to3years

4 to 6years

*7* to12years

More tltan12 years

1.20

1.15

1.00

. 0,90

0.80

Continuing Education..

No CE program

Accreditation of fadiity

Noaccieditation

Accreditation with AOPA and/or ABC

Patient Visit Records

Fullcompliance witlt documentation procedures Compliance with documentation procedures, butneeds improvement Non-compliance

1.10

1.15

0.85

0.90

**1.00**

1.10



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Maximum Debit/Credit

VIll. Minimum Policy Premium

25%

*Limit*

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

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

### *Premium*

$1,500

$2,000

Property

Special Property Coverage Form

### *Premium*

7% of Properly Premium subject to a S200 minimum premium

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