COMMONWEALTH OF KENTUCKY

DEPARTMENT OF INSURANCE WORKERS' COMPENSATION SELF-INSURED GROUP CALCULATION OF LOSS COST MULTIPLIER EXPENSE CONSTANT SUPPLEMENT

WC	C SIG NAME	KOI#	DATE	
4.	DEVELOPMENT OF EXPECTED LOSS R	Sele	acted Provisions	
	 a. TOTAL PRODUCTION EXPENSE b. GENERAL EXPENSE c. TAXES, LICENSES & FEES (Note: Do not include any pass through ass The WC Special Fund Assessment is exclu- d. UNDERWRITING PROFIT & CON e. TOTAL 	sessments collected that are not your actuded from this line.)	Variable Fixed	d % % %
5.	a. EXPECTED LOSS RATIO: [ELR = 100% b. ELR EXPRESSED AS A FACTOR c. VARIABLE EXPECTED LOSS RATIO: [¹ d. VELR EXPRESSES AS A FACTOR:	- 	%	
6.	 a. INDICATED EXPENSE CONSTANT: [(1.00 / 5.b.) – (1.00 / 5.d.)] x [2.b.x 3. x Ave Note: The Average Underlying Loss Cost is the v individual risk's loss cost including all rating factor b. INDICATED VARIABLE LOSS COST MU 	weighted average of the ors (no expenses included.)		
7.	a. SELECTED EXPENSE CONSTANT: b. SELECTED VARIABLE LOSS COST MU	ULTIPLIER		

WC SIG: LC-2 P&C (3/2005)