A REPORT TO THE LEGISLATIVE COUNCIL AND THE SENATE AND HOUSE INTERIM COMMITTEES ON INSURANCE AND COMMERCE OF

THE ARKANSAS GENERAL ASSEMBLY (AS REQUIRED BY ACT 796 of 1993)

ANNUAL STUDY OF THE WORKERS' COMPENSATION INSURANCE MARKET IN ARKANSAS



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REPORT TO THE LEGISLATURE ON ACT 796 OF 1993 THE STATE OF THE WORKERS' COMPENSATION MARKET FOR YEAR ENDING 2007

Previous reports to the Legislature have discussed in detail the condition of Arkansas's Workers' Compensation marketplace prior to the passage of Act 796 in 1993, and subsequent to the changes brought about as a result of Act 796.

Arkansas continues to enjoy a competitive workers' compensation market with the lowest premium levels in decades.

In 2007, Arkansas had a combined loss ratio of 79% ranking it among the lowest of any state for which Arkansas's statistical agent, the National Council on Compensation Insurance (NCCI), compiles loss data. In 2008, NCCI filed for decreases in both the voluntary market loss costs (-12.8%) and assigned risk plan rates (-13.8%). Several factors and trends in the industry, however, may offset future decreases. These factors include increased medical costs, increasing prescription drug utilization, increased reinsurance costs, and catastrophe loading for potential terrorism losses.

CONTINUED RATE IMPACT OF ACT 796 OF 1993

Arkansas's voluntary workers' compensation market would have disappeared and many employers would have found themselves unable to afford workers' compensation coverage, facing the choice of either closing down their business or operating outside the law, had Act 796 not become reality.

The impact of the Act on workers' compensation premiums is clear and significant. Prior to its enactment, rates were increasing significantly. For example, for both the voluntary market and the assigned risk plan, rates in 1991 and 1992 increased 15% and 18% respectively. Passage of the Act forestalled anticipated rate increases in 1993 and 1994, with 1993 being the first year in the last ten in which there was no rate increase. 1993 and 1994 were years of market stabilization, and subsequent years have seen significant rate reductions in both the voluntary market and the assigned risk plan. Year 2000 saw our first increase in the assigned risk plan rates while experiencing a decrease in the voluntary market. In 2003, Arkansas had the lowest loss costs in the region per \$100 of payroll (\$1.26) compared to the regional average loss cost of \$2.11 and the countrywide average loss cost of \$2.00. There are still positive effects from this Act that benefit Arkansas employers. On January 1, 2008, NCCI filed a slight increase to the advisory loss costs and assigned risks rates due to a change in the law pertaining to the phase-out of the Second Injury Fund and an increase to the threshold for the Death and Permanent Disability Trust Fund. Effective July 1, 2008, the NCCI filed significant decreases for both the voluntary market's loss costs (-12.8%) and for the assigned risk plan rates (-13.8%).

Year	Voluntary Market	Assigned Risk Plan
1993	0.0%	0.0%
1994	0.0%	0.0%
1995	-12.4%	-12.4%
1996	-8.0%	-3.7%
1997	-4.7%	-7.6%
1998	-9.1%	-8.2%
1999	-4.1%	-3.0%
2000	-4.5%	-2.0%
2001	-7.5%	1.9%
2002	-4.5%	-1.9%
2003	1.8%	5.5%
2004	0.5%	5.1%
2005	-1.5%	-2.8%
2006	-0.5%	-2.0%
2007	-5.4%	-6.8%
2007 (effective 1/1/08)	2.7%	2.7%
2008 (effective 7/1/08)	-12.8%	-13.8%

PAYROLL AND EXPERIENCE MODIFIER

Reported payroll in Arkansas continues to increase while premiums for insureds continue to decrease. The average experience modifier has increased minimally (0.961 from 0.912). This minimal change in experience modifier could represent the continuing effectiveness of loss control measures and the impact of the Hazardous Employer Program operated by the Health and Safety Division of the Workers' Compensation Commission. Please refer to Exhibit A for additional statistical information regarding premiums and modifiers.

ASSIGNED RISK PLAN

The assigned risk plan has seen a consistent history of decline in population since the passage of Act 796 except for a gentle upward trend during 2002 through 2004. Down from a record high of \$150,000,000 in 1993, to a low of \$6,566,275 in September 2000, the premium volume as of December 31, 2007, was \$17,881,539 as compared to \$21,575,067 on December 31, 2006. The increase in premium during the 2002 through 2004 period was, in part, attributable to the failure of several insurers domiciled in California and other states. A portion of the increase may also have been attributable to an increase in plan population of small premium employers who have premiums too low to be attractive to the competitive market. In essence, their premiums are less than the minimum premium for which coverage is available in the voluntary market. These employers may often get better rates through the plan; consequently, as of the end of 2007, small premium employers (less than \$2,500 in annual premium) constituted approximately 82% of the plan policy volume with an average of \$800 in premium per policy. Average plan premium per policy at the end of 2007 was \$2,687 for all 6,084 policies in the plan.

For those employers qualifying for voluntary coverage, cost savings have been substantial. According to the NCCI, price discounting by voluntary carriers reached record levels of 24% during 1999. Carriers pulled back on the discounting in 2000 to 14.7% and, as anticipated, carriers further reduced discounts in 2004 and 2005. The trend continued through 2007 with carrier credits and debits of a net +.8%. These discounts were predominately comprised of discounts to scheduled rating and dividends of -3.31%, which offset a +4.1% increase due to carrier rate and loss cost departures. As rates continue to drop, these discounts will continue to narrow.

PLAN ADMINISTRATION/SERVICING CARRIERS

The NCCI is an "Advisory Organization" licensed in Arkansas to assist its member insurers with respect to ratemaking and data collection activities. Effective July 1, 2006, the Commissioner re-appointed NCCI as Administrator for the Arkansas assigned risk plan until at least July 1, 2009.

Arkansas participates in the oversight of the market and the NCCI through a multi-state working group of the National Association of Insurance Commissioners (NAIC). The working group monitors data reliability and any other issues that arise involving the market.

In recent years, Arkansas has also participated in a multi-state examination of the NCCI in its role as an advisory organization licensed pursuant to Ark. Code Ann. §23-67-214. Participation in the examination task force, and periodic reviews of this nature, function to assure the quality of the data, as well as present the opportunity to improve existing systems and procedures. The examination found concerns about NCCI's statistical reporting and error correction systems. These concerns were addressed and changes are monitored by the working group of the NAIC. The issues were never significant enough to affect the overall reliability of the data reported by the NCCI for the State of Arkansas.

During the implementation of the examination findings, Arkansas served as chair of the multistate exam task force and concluded its responsibilities in this capacity after implementation of the required reforms.

The location of an office in Little Rock (mandated by 1993 legislation) continues to resolve many policy related service problems and provides Arkansas agents and insureds easy, immediate access to responsive company personnel. The effectiveness of this office is apparent in the reduction of the number of complaints received by the Insurance Department and the reduction in the number of appeals reaching the Appeals Board. The NCCI personnel assigned to the office are knowledgeable and committed to providing excellent service.

Attached are Exhibits B entitled *Arkansas Residual Market 2nd Quarter 2008 Status Report* and Exhibits C1 and C2 entitled *Arkansas Residual Market Annual 2007 and 2007 1st Quarter Status Reports*, respectively. The exhibits are prepared by the NCCI and provide detailed information on risk profiles such as average premium size, top ten classifications by code and by premium, and a list of contacts within NCCI for specific areas of concern.

NCCI provides, at no charge to the agent, the option to submit assigned risk applications online. Upon successful submission, the customer receives a confirmation code and application identification number for reference. There are significant savings to the plan when an application can be processed electronically. Arkansas agents have been extremely responsive to this initiative.

The Annual Servicing Carrier Performance Review conducted by NCCI reveals either "Commendable" or "Satisfactory" scores for all areas of Arkansas's servicing carriers. For the period commencing January 1, 2008, through December 31, 2011, the servicing carriers are Travelers Indemnity Company, Liberty Insurance Corporation, Union Insurance Company, and Technology Insurance Company.

SUMMARY OF INSURANCE DEPARTMENT'S CRIMINAL INVESTIGATION UNIT

Before the passage of Act 796 of 1993, there had never been a criminal prosecution in Arkansas for workers' compensation fraud committed by employees, employers, or healthcare providers.

Act 796 of 1993 created the Workers' Compensation Fraud Investigation Division and made any type of fraud committed within the workers' compensation system a Class D felony (maximum six years and/or \$10,000 fine). The division was renamed the Criminal Investigation Division during the 2005 Legislative Session.

Fraud in the workers' compensation system was perceived to be epidemic. Since the majority of employers were in the "Plan," there was little, if any, incentive for thorough investigation of possibly fraudulent insurance claims and few consequences to those caught making intentional misrepresentations. Act 796 changed the entire landscape of the workers' compensation system, particularly in regard to the detection, prevention, and prosecution of workers' compensation fraud.

The actual prosecution of a workers' compensation fraud case is contingent on many factors. Key among those factors is the elected prosecutor's willingness to carry a case forward. If the information provided from an investigation is not enough to meet the standards for conviction found at Ark. Code Ann. § 11-9-106, a prosecutor will be unwilling to pursue the case. Local law enforcement agencies often do not have the resources to investigate workers' compensation fraud; fortunately, the investigative authority of the Criminal Investigation Division allows the Arkansas Insurance Department to supplement these often under funded local agencies. This Division's dedication to a single purpose allows for complex investigations which require time and focus that would otherwise not be available. As these complex cases evolve, they frequently require investigators to work through a myriad of leads to develop a case. Occasionally, even with dedicated resources for this single purpose being used, there simply is not enough information to prosecute the crime. While the number of actual prosecutions varies from year to year, the possibility of investigation and prosecution is a constant deterrent.

Any lessening of the Division's enforcement powers would likely result in a re-emergence of both frequency and severity of fraud committed by employees, employers, and healthcare providers.

The cases represented by the statistics below, which are comparable per capita to those of other states with active anti-fraud efforts, are believed to have had a significant impact on workers' compensation rates in Arkansas, and the deterrent factor has been substantial. In fact, many cases are not carried forward to prosecution. In many instances, the threat of prosecution is enough to get the parties involved to settle the cases outside of court, resulting in restitution for the aggrieved parties. While not technically prosecutor wins, these cases result in positive outcomes for injured workers in the state.

Act 743 of 2001 significantly enhanced the efficiency and effectiveness of the Division by granting its investigators certified law enforcement authority. The Division can now execute arrest warrants, thus reducing the backlog of warrants that were awaiting service by local law enforcement agencies. Annual referrals to the Criminal Investigation Division have been reduced significantly since its first year of operation. This reduction is attributed to increased enforcement efforts under the Act. In the 2007-2008 reporting period there were 32 workers' compensation investigations opened. Currently there are 51 open and being investigated. In total, there have been 449 workers' compensation fraud cases referred to the Division since its creation in 1993 to July 31, 2008. In that same time period there have been 139 prosecutions. Out of these 139 cases, 101 resulted in convictions. In total, only three prosecutions have resulted in acquittals. In the remaining cases, the charges were dropped.

During this reporting period four cases were referred to prosecution. Currently there are 11 workers' compensation cases pending prosecution. Many of these cases are based upon the work done during the reporting period. Similarly, work continues on many investigations that were opened during the reporting period.

2007 LEGISLATIVE ACTIVITY WITH REGARD TO WORKERS' COMPENSATION

The following legislation was passed concerning workers' compensation during the 2007 Regular Session of the Legislature.

ACT 398. An Act to Amend Arkansas Code § 17-25-514(B) Concerning The Requirement That A Residential Building Contractor Submit Proof Of Current Workers' Compensation Coverage Before Renewing A License; And For Other Purposes.

This Act requires all licensees and applicants for license as a residential building contractor to have workers' compensation coverage for their employees and to furnish proof when applying for a new license or renewal of an existing license. There was no emergency clause associated with this Act. It is unlikely this Act will have any significant impact on rates or availability. It likely will result in an increase in workers covered under the workers' compensation system.

ACT 546. An Act To Give A Sole Proprietor, Partner, Professional Association Member, Or Limited Liability Company Member The Same Right To Waive Workers' Compensation Coverage As A Sole Proprietor And A Corporate Officer; And For Other Purposes.

This Act expanded to include additional entities in which owners have the right to be excluded from coverage under their own policy by endorsement. There was no emergency clause associated with this Act. It is unlikely this Act will have any significant impact on rates or availability.

ACT 1415. Amend Ark. Code Ann. § 11-9-525 Concerning Compensation For Second Injuries And To Amend A Portion Of The Arkansas Code Which Resulted From Initiated Act 4 Of 1948. Effective July 31, 2007.

This Act amends Ark. Code Ann. § 11-9-525 to provide a sunset provision for people seeking to claim compensation for second injuries. The last date a person could file was December 31, 2007. No claims of this nature may be submitted from January 1, 2008, forward. Act 1415 could result in a dampening of future rate decreases as the carriers will have to bear more of these losses directly and continue to support the Second Injury Fund during its runoff.

ACT 1599. Ensure The Solvency Of The Death And Permanent Total Disability Trust Fund And To Amend A Portion Of The Arkansas Code Which Resulted From Initiated Act 4 Of 1948. Effective July 31, 2007.

This Act amends Ark. Code Ann. § 11-9-502 concerning limitations payable by the employer or workers' compensation carrier for permanent disability or death compensation in workers' compensation claims. For injuries occurring on or after January 1, 2008, if an injured employee dies or is deemed to be permanently and totally disabled due to the workers' compensation injury, the employer or carrier must pay the weekly death or permanent disability benefits up to 325 times the maximum total disability rate for the date of the injury before the Death and Permanent Total Disability Trust Fund assumes payment for the death or permanent total disability. Injuries occurring before January 1, 2008, continue to be governed by the existing language of the statute which provides for the employer or carrier to pay \$75,000.00 before the Death and Permanent Total Disability Trust Fund assumes payment. Act 1599 could result in a dampening of future rate decreases as the carriers will have to bear more of these losses directly.

SUMMARY OF SIGNIFICANT WORKERS' COMPENSATION CASES FROM THE ARKANSAS COURT OF APPEALS AND SUPREME COURT FISCAL YEAR 2007-08¹

Cases from the Arkansas Supreme Court

Cedar Chemical Co. v. Knight, 372 Ark. 233, ___ S.W.3d ___ (2008); 2008 WL 251957 (Jan. 31, 2008): The Claimant in this instance felt pain in his left knee while descending a flight of stairs on July 1, 2001. Prior to that, in May 2001, he had ascended a flight of stairs and felt a pop in his knee and pain in his back, but continued to work and informed his supervisor that there was no need to file an accident report. However, after the July incident, the claimant could not put much weight on his leg and sought medical treatment. Relying on MRI findings and an opinion offered by the Claimant's physician, the Arkansas Workers' Compensation Commission

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¹ Westlaw citations are provided where standard legal citations are partially available or unavailable.

found that the event of July 1, 2001, was not "personal in nature" nor did it occur due to degenerative changes but rather represented a compensable, specific-incident injury. The Arkansas Court of Appeals subsequently affirmed, after which the Arkansas Supreme Court granted a Petition for Review. Relying heavily on the Commission's acceptance of the Claimant's testimony as credible, the Supreme Court also affirmed. The Court noted the opinion offered by the Claimant's treating physician that "Appellee's acute injury was responsible for more than fifty percent of Appellee's impairment," and went on to point out that "Where a claimant suffers an unexplained injury at work, it is generally compensable" [citing ERC Contractor Yard & Sales v. Robertson, 335 Ark. 63, 977 S.W.2d 212 (1998)].

Cases from the Arkansas Court of Appeals

Jones v. Wal-Mart Stores, Inc., 100 Ark. App. 17, ___ S.W.3d ___ (2007); 2007 WL 2713381 (Sept. 19, 2007): The Arkansas Workers' Compensation Commission found that the claimant had failed to prove that she was entitled to permanent disability benefits or additional medical treatment in association with her compensable injury of July 13, 2002. In particular, the Commission found that "in the absence of a physician's report assigning a permanent impairment rating, appellant was not entitled to permanent disability benefits." Relying on Johnson v. General Dynamics, 46 Ark. App. 188, 878 S.W.2d 411 (1994) and Polk County v. Jones, 74 Ark. App. 159, 47 S.W.3d 904 (2001), the Arkansas Court of Appeals held that "the Commission was authorized to decide which portions of the medical evidence to credit and translate the medical evidence into a finding using the AMA Guides, as to whether the claimant met her burden of proof." Consequently, the Court remanded the matter to the Commission to determine whether the claimant had, in fact, proven the existence and extent of a permanent impairment, effectively holding that it is within the Commission's prerogative to determine whether an impairment exists even in the absence of a medical report assigning an actual rating. (The Court affirmed the Commission's findings with regard to additional medical treatment.)

Williams v. Johnson Custom Homes, et al, 100 Ark. App. 60, S.W.3d (2007); 2007 WL 2851029 (Oct. 3, 2007): The claimant began working for Johnson Custom Homes in January 2002; however, he later signed a W-4 and other documents in early 2004 indicating that an out-of-state company known as "Paysource" was his actual employer. Among the forms was one which specified that any work-related injury sustained by the claimant would fall under the exclusive jurisdiction of the Ohio Bureau of Workers' Compensation. The claimant thereafter sustained multiple injuries when he fell from a scaffold on April 14, 2004, and began receiving workers' compensation benefits out of Ohio. The respondents subsequently denied coverage for a portion of the claim, resulting in an Ohio hearing which the claimant did not attend (the claimant apparently testified that he did not know he was required to travel to Ohio, but admitted to "having an attorney ready to represent him in Ohio"). In August 2004, Paysource became the subject of a Cease and Desist Order issued by the Insurance Commissioner of the State of Arkansas, in relation to certain "illegal activities." The claimant then filed for workers' compensation benefits under Arkansas jurisdiction, alleging also that the respondents had acted in bad faith and that the Arkansas workers' compensation system was unconstitutional. The Arkansas Workers' Compensation Commission found that the claim for benefits was barred since the claimant had made an election of remedies by "knowingly receiving benefits pursuant to the workers' compensation laws of the State of Ohio." The Commission further found that the

constitutional arguments raised by the claimant's attorney had been addressed in several prior cases and were without merit. The Arkansas Court of Appeals affirmed the Commission, agreeing that the "substantial weight of the evidence supports the Commission's finding that appellant elected his remedy in Ohio because he actively initiated a claim for benefits and then knowingly received benefits through Ohio." The Court also noted its prior language in *Biddle v. Smith & Campbell*, 28 Ark. App. 46, 773 S.W.2d 840 (1989), in which it stated that "a claimant should be held to his affirmative actions and the resulting consequences of making an election of remedies." In addition, the Court found no merit in the claimant's allegation of bad faith, pointing out that he had contracted with the respondents to accept Ohio jurisdiction of any work-related injuries and was a literate, educated management employee who had plenty of time to review the documents at issue and to ask questions of their meaning. Finally, the Court observed that it had rejected the claimant's constitutional arguments in *Long v. Wal-Mart Stores, Inc.*, 98 Ark. App. 70, 250 S.W.3d 263 (2007), and saw no reason to consider them again.

Texarkana School Dist. v. Conner, 100 Ark. App. 100, S.W.3d (2007); 2007 WL 2851054 (Oct. 3, 2007): The claimant in this instance sustained a broken leg while unlocking a parking lot gate on his employer's premises upon returning from a lunch-break errand. The Arkansas Workers' Compensation Commission found that the claimant had been performing "employment services" at the time of injury, in that he was on the employer's premises, was providing a service by allowing access to the parking lot, and was "on-call" while on the employer's grounds during his lunch break. The Arkansas Court of Appeals reversed, noting that the claimant was not required to stay on the premises during lunch, was not paid for his lunch break, and was returning from a personal errand at the time of injury. The Court also concluded that the claimant's activity at the time of injury was not "inherently necessary" to the performance of his job, nor was it for the employer's purpose or benefit, in that the claimant had never before opened the gate in question during his previous twenty-six years of employment and had done so only for the purpose of attending to the personal need of "parking in a convenient location of his choice." [NOTE: The Arkansas Supreme Court subsequently granted a Petition for Review, reversed the decision of the Arkansas Court of Appeals, and affirmed the Commission's original decision. In particular, the Supreme Court noted the Commission's reliance on evidence that the Claimant had attempted to unlock the gate in question only because the main gate was blocked by a disabled vehicle. The Commission had thus concluded that the employer's interests had been advanced by this action, and the Supreme Court was unable to say that there was a lack of substantial evidence to support the Commission's conclusion or that reasonable minds could not have reached the same result. 2008 WL 1970894 (Arkansas Supreme Court, May 8, 2008)]

Sierra v. Griffin Gin, 100 Ark. App. 113, ___ S.W.3d ___ (2007); 2007 WL 2964199 (Oct. 10, 2007): In this case involving the appropriate average weekly wage, the parties stipulated that the Claimant was a seasonal worker who earned \$1,020 per week for nine weeks of work. An Administrative Law Judge determined that the Claimant's average weekly wage was \$680, obtained by multiplying \$1,020 by 66 2/3%. In turn, the Administrative Law Judge awarded a compensation rate of \$466.00, the maximum for injuries occurring in 2005. The Full Commission reversed, finding that the claim warranted the application of Ark. Code Ann. §11-9-518(c) because it involved "exceptional circumstances." In particular, the Commission determined that it would be unfair to award the claimant the maximum compensation rate since,

if carried out for a disability period of fifty-two weeks, it would result in compensation that far exceeded the amount of money he had contracted to earn over a nine-week employment period. Accordingly, the Full Commission divided the claimant's \$9,180 of contracted earnings by fifty-two weeks for an average weekly wage of \$118.00. The Arkansas Court of Appeals reversed, holding that the claim involved no "exceptional circumstances" to warrant the application of Ark. Code Ann. §11-9-518(c). In so holding, the Court stated that "there is simply no evidence in the record regarding appellant's past or prospective annual earnings with this – or any other – employer." The Court also concluded that the Commission's decision had the effect of "legislating policy against seasonal employment."

Firestone Tube Co. v. Potts and Second Injury Fund, 100 Ark. App. 263, S.W.3d (2007); 2007 WL 3171822 (Oct. 21, 2007): The Claimant sustained a compensable injury on February 27, 2004, which resulted in a hearing involving the Second Injury Fund and from which the Fund appealed. Following its de novo review, the Arkansas Workers' Compensation Commission ruled in favor of the Claimant and awarded a \$500.00 attorney's fee. However, the Commission did not specify whether the Fund or the employer, who had not participated in the appeal, was responsible for paying the fee. Following various motions for clarification and reconsideration, the Commission ultimately ordered the employer and the Claimant to pay an equal share of the fee. The Arkansas Court of Appeals reversed, pointing out that "While Mr. Potts did prevail...in order for the employer to be responsible for an attorney's fee under that subsection, the employer at a minimum must have been a party to the appeal...whatever additional expense may have been caused by the appeal to the Commission, this expense was not made necessary by Firestone, who paid substantial benefits to the claimant and then prevailed before the Administrative Law Judge on its claim that any permanent disability benefits to which Mr. Potts was entitled was not its responsibility but rather the responsibility of the Second Injury Fund."

Toia v. HTI Logisitics, 100 Ark. App. 314, S.W.3d. (2007); 2007 WL 3357186 (Nov. 14, 2007): The Claimant, a truck driver, lost his footing and fell while attempting to climb into the cab of his truck to sleep for the evening on May 9, 2002. The Arkansas Workers' Compensation Commission found that the Claimant was not performing "employment services" at the time of the accident and denied benefits. The Arkansas Court of Appeals, in light of the Arkansas Supreme Court's decision in *Jivan v. Economy Inns and Suites*, 370 Ark. 414, (2007); 2007 WL 1847618 (June 28, 2007), reversed. In Jivan, the Claimant was required to live on the employer's premises and was essentially on call twenty-four hours a day, prompting the Supreme Court to find that she had been performing employment services (under an increased-risk analysis) at the time of her death even though her precise activities at the time of injury were not directly employment-related. Here, the Court of Appeals reversed the Commission after concluding that "the appellant's activities related to returning to the 'premises,' i.e., his truck, in preparation of staying overnight in the truck to protect it and its cargo, advanced the interests of his employer" (thus distinguishing the present case from Cook v. ABF Freight Systems, 88 Ark. App. 86, 194 S.W.3d 794 (2004), in which compensation was denied to an "on call" truck driver injured in a hotel room provided by his employer).

Parker v. Comcast Cable Corp., 100 Ark. App. 400, ___ S.W.3d ___ (2007); 2007 WL 4247602 (Dec. 5, 2007): The Arkansas Workers' Compensation Commission held that the

Claimant was not performing employment services on May 8, 2004, when she tripped while leaving an elevator en route to her work station after arriving for her shift. Just before her fall, the Claimant had obtained a drink from the break room and had used a key card to gain access to enter the building. In affirming the Commission, the Arkansas Court of Appeals disagreed with the Claimant's comparison of her case with Caffev v. Sanvo Mfg. Corp., 85 Ark. App. 342, 154 S.W.3d 274 (2004): "However, we cannot equate the requirement of undergoing security checks with the necessity of swiping a key card to unlock a door. In our view, appellant was merely on her way to work, and there was no testimony that she had any job-related responsibilities as she walked through the building...We thus reject the notion that the requirement of having to unlock the door renders this claim compensable. Had appellant tripped during regular business hours when the door was unlocked, there would be no question that appellant's claim would not be compensable. We decline to create a distinction that would render a claim compensable just because the door to the building was locked. Moreover, to accept appellant's argument would erode the legislature's intent to do away with the premises exception." (The Court also distinguished the facts of this case from Shults v. Pulaski Co. Special School Dist., 63 Ark. App. 171, 976 S.W.2d 399 (1998), in which benefits were awarded to a claimant who had fallen when entering his employer's premises upon arriving for work; in that case, the Claimant had been responsible for entering the building and checking the alarm system and was thus advancing the employer's interests at the time of injury.)

The Steak House v. Weigel, 101 Ark. App. 81, ___ S.W.3d ___ (2007); 2007 WL 4415202 (Dec. 19, 2007): The Arkansas Court of Appeals remanded this case to the Arkansas Workers' Compensation Commission for further fact-finding on whether "guarding" constituted an objective medical finding within the meaning of Act 796 of 1993. The Court noted that medical authorities provided conflicting information as to whether guarding was an involuntary (objective) or voluntary (subjective) response. Consequently, the Court determined that the Commission's conclusion that guarding was an objective finding "sweeps too broadly," and went on to disavow its own dicta in Polk Co. v. Jones, 74 Ark. App. 159, 161, 47 S.W.3d 904, 905 (2001) which stated that guarding was "subjective criteria and not objective findings." In sum, the Court held that "muscle guarding is sometimes involuntary and sometimes voluntary...This issue is therefore a matter of fact on which the Commission should make a specific finding case by case based on the medical evidence."

O'Hara v. J. Christy Constr. Co., Inc., ___ Ark. App. ___, ___ S.W.3d ___ (2008); 2008 WL 1735034 (April 16, 2008): In the third presentation of this case to the Arkansas Court of Appeals, the Court was asked to consider the proper date of accrual for an award of permanent total disability benefits which stemmed from a previous, modified order of wage loss disability. Prior to this appeal, the Arkansas Workers' Compensation Commission had awarded a 20% wage loss disability rating to the Claimant in an Opinion and Order issued in February 1998. The Arkansas Court of Appeals affirmed this decision in March 1999. Subsequently, in 2003, the Claimant sought additional wage loss disability before the Commission, which the latter denied in a January 13, 2005, opinion. The Court of Appeals reversed, holding that the Commission had erroneously applied the doctrine of res judicata. The Court also remanded the case for a consideration of whether the Claimant had been rendered permanently and totally disabled under the "odd-lot doctrine" since his injury had occurred prior to the implementation of Act 796 of 1993. In its next opinion, dated May 10, 2006, the Commission found that the

Claimant was, in fact, permanently and totally disabled under the odd-lot doctrine. However, the Commission did not specify the effective date of the award. In yet another opinion issued on May 2, 2007, the Commission found that permanent and total benefits should begin on May 10, 2006, the date on which the order granting the award was entered. On appeal from that opinion, the Arkansas Court of Appeals determined instead that the award of permanent and total disability commenced on August 15, 2003. Specifically, the Court noted that "to hold that the accrual of benefits to a modification accrues only after a series of appeals and remands finally results in a correct disposition of the injured workers' claim would divest an employee of his rights to timely payment of benefits. Accordingly, we hold that the accrual of benefits began at the time the first order in the case addressing the modification was entered, August 15, 2003, which was the order entered by the Administrative Law Judge."

Martin Charcoal, Inc. v. Britt, ___ Ark. App. ___, __ S.W.3d ___ (2008); 2008 WL 2042954 (May 14, 2008): In this "old law" case (to wit, workers' compensation law as it existed prior to July 1, 1993), the Arkansas Court of Appeals affirmed the Arkansas Workers' Compensation Commission's finding that a proposed heart/lung transplant was reasonably necessary treatment in connection with the Claimant's cardiac injury of March 4, 1991. Specifically, both the Commission and the Court relied on an earlier Court of Appeals' opinion which held that "medical treatments which are required so as to stabilize or maintain an injured worker are the responsibility of the employer." Artex Hydrophonics, Inc. v. Pippin, 8 Ark. App. 200, 649 S.W.2d 845 (1983). The Court further noted opinions from various physicians indicating that a heart transplant alone would offer little or no benefit, and concluded that "The fact remains that the heart/lung transplant is necessary to stabilize or maintain the appellee's compensable condition." However, the Court also affirmed the Commission's finding that the Claimant's claim for a separate lung injury stemming from the same accident was barred by the statute of limitations. Quoting from Corpus Juris Secundum, the Court pointed out that a "single employment accident may create more than one 'compensable injury,' for purposes of an act, which in turn results in more than one date for the start of the statute of limitations." 100 C.J.S. Workers' Compensation §825 (2000). The Court went on to say that "Mr. Britt's heart condition and lung condition are two distinct injuries for which compensation must be timely claimed under our statutes. The first time Mr. Britt claimed compensation for a lung injury was on October 23, 2003, which was outside of the two-year limitations period...The Commission correctly concluded that Mr. Britt's claim for a compensable lung injury was barred by the statute of limitations." Likewise, the Court declined to accept the Claimant's argument that his lung injury was a latent condition that did not manifest itself until 2003, since pulmonary diagnostics and function tests performed in 2000 revealed severe abnormalities: "Thus, the nature and extent of Mr. Britt's lung condition manifested itself more than two years prior to his claim filed on October 24, 2003, and the Commission correctly found that the latent injury rule did not save Mr. Britt's claim."

Roberts v. Whirlpool, ___ Ark. App. ___, __ S.W.3d ___ (2008); 2008 WL 2042955 (May 14, 2008): In this instance, the Arkansas Workers' Compensation Commission found that the claimant's cervical problems were not causally connected to a work-related injury of September 4, 2004. In so finding, the Commission had discounted the opinion of Dr. Arthur Johnson, who had concluded that the Claimant's cervical problems did occur in connection with his 2004 injury. In particular, according to the Arkansas Court of Appeals, the Commission

dismissed Dr. Johnson's opinion because it was "based on the claimant's history" and because Dr. Johnson "did not review the claimant's medical records." In reversing the Commission, the Court noted that there was no evidence in the record to suggest that the history provided by the Claimant to Dr. Johnson was inaccurate, and that the Commission had made no finding to that effect. Accordingly, the Court concluded that there was no basis for dismissing a physician's opinion "simply because it was based in part on the history provided by the claimant." The Court also pointed out that, by the time of his deposition, Dr. Johnson "was...fully conversant with appellant's medical records." Consequently, the Court remanded the case back to the Commission "for it to fully examine the relevant evidence presented."

Rutherford v. Mid-Delta Community Services, Inc., ___ Ark. App. ___ , ___ S.W.3d ___ (2008); 2008 WL 2191142 (May 28, 2008): The claimant sustained injuries from a compensable automobile accident in June 2002, for which she received workers' compensation benefits until the end of her healing period in March 2006. Thereafter, the parties could not reach an agreement on the extent (if any) of her permanent disability, prompting the Claimant to file a claim for permanent and total disability with the Arkansas Workers' Compensation Commission. Though an Administrative Law Judge found that the Claimant was, in fact, permanently and totally disabled, the Full Commission reversed, finding that the Claimant had sustained no ratable permanent anatomical impairment and thus could not be awarded any permanent disability. On appeal, the Arkansas Court of Appeals considered a single issue presented by the Claimant, to wit, whether a permanent partial impairment rating was a prerequisite to a claim for permanent and total disability. In answering this question, the Court of Appeals noted that an impairment was required in the context of permanent partial disability pursuant to Ark. Code Ann. §11-9-522(b)(1) and Wal-Mart Stores v. Connell, 340 Ark. 475, 479, 10 S.W.3d 882, 884 (2000), in which the Arkansas Supreme Court stated that: "[A]ny consideration of 'the employee's age, education, work experience, and other matters reasonably expected to affect his earning capacity' may not occur until the Commission has first determined 'the percentage' of permanent physical impairment." However, the Court of Appeals went on to point out that "there is an entirely different statute in play when the issue is PTD." In sum, following the strict construction mandate of Act 796 of 1993, the Court accepted the Claimant's argument that Ark. Code Ann. §11-9-519(c) only required that PTD "shall be determined in accordance with the facts," and that §519 did not mention permanent impairment other than to require the Commission to adopt an impairment rating guide in subsection (g). Consequently, the Court overruled its previous holding in Wren v. Sanders Plumbing Supply, 83 Ark. App. 111, 117 S.W.3d 657 (2003), to the extent that Wren had required a permanent partial impairment rating as a prerequisite to an award of permanent total disability.

Singleton v. City of Pine Bluff, ___ Ark. App. ___, ___ S.W.3d ___ (2008); 2008 WL 2191143 (May 28, 2008): In 2006, the Arkansas Court of Appeals considered the first appeal of this case, and reversed the Arkansas Workers' Compensation Commission's finding that the Claimant had failed to prove any entitlement to benefits for anatomical impairment or wage loss disability. In particular, the Court found error with the Commission's rejection of "all evidence that did not constitute an objective finding." Subsequently, the Commission entered a new order in which it recognized that objective medical evidence was not necessary to prove each and every element of compensability. However, the Commission went on to state that it had adopted the Fourth Edition of the Guides to the Evaluation of Permanent Impairment as an impairment

rating guide pursuant to its statutory mandate, and that "[t]here is not a single table or figure in [the Guides] which allows the Commission to assign a permanent anatomical impairment to the claimant's left ankle in accordance with relevant standards of Act 796 of 1993." On its second consideration of this case, the Court of Appeals concluded that such reasoning was not a proper basis for denying relief and that the Commission had not complied with the Court's mandate from the first appeal, pointing out that "...the Commission ignored our mandate and denied relief on the same theory of law that we held to be erroneous in our prior opinion, justifying this refusal to comply with our mandate on the legal theory that compensability was decided by the Guides it had adopted, rather than by the provisions of the Arkansas Workers' Compensation Act as interpreted by this court." Though recognizing that the Commission was statutorily authorized to adopt an impairment rating guide, the Court went on to state that: "The Guides are just that: mere guides to aid the Commission in assessing the degree of a claimant's disability as defined by statute and interpreted by the courts. If those Guides do not contain an express method of rating an injury that is compensable pursuant to Arkansas law, the Commission must adopt a reasonable method of doing so." The Court thus remanded the case back to the Commission for compliance with its earlier mandate.

Estate of Jerry Slaughter v. City of Hampton, ___ Ark. App. ___, __ S.W.3d ___ (2008); 2008 WL 2266322 (June 4, 2008): In yet another case making its second appearance before the Arkansas Court of Appeals, the Court reversed the Arkansas Workers' Compensation Commission's finding that the Claimant's surviving spouse was not entitled to widow's benefits under Ark. Code Ann. §11-9-527 since she was not married to the Claimant when he sustained his compensable injury (on the first appeal, the Court had reversed the Commission's determination that the Claimant's estate had not proven that he sustained a compensable injury in the form of chemical exposure that resulted in his death; the Commission subsequently awarded death benefits when it re-considered the claim). The Court pointed out that a litigant claiming entitlement to widow's benefits pursuant to Ark. Code Ann. §11-9-527 must prove that (1) she is the decedent's widow and (2) that she was "wholly and actually dependent" on the decedent at the time of the injury. In addition, the Court noted that Ark. Code Ann. §11-9-102(20)(A) defined "widow" as "the decedent's legal wife, living with or dependent for support upon him at the time of his death," and that the introductory clause of §11-9-102 provided that its definitions applied throughout the workers' compensation code. The Court thus concluded that while questions of "dependency" turn on the facts as they exist on the date of injury, whether someone is a widow is not governed or dealt with by §11-9-527 but rather by §11-9-102(20)(A). Accordingly, the Court reversed the Commission's decision and remanded the matter for further proceedings to determine whether the estate had met its burden of proof.

Pharmerica v. Seratt, ____ Ark. App. ____, ___ S.W.3 ____ (2008); 2008 WL 2440001 (June 18, 2008): The Arkansas Workers' Compensation Commission entered an Order in this case finding that the Claimant had proven entitlement to occupational disease benefits arising from carbon monoxide exposure at work that culminated on June 8, 2005. The Respondents subsequently appealed, contending that: (1) the Commission had erred in awarding occupational disease benefits when only a specific-incident injury was at issue; (2) an occupational disease claim was barred in this instance because the claimant had not given the statutorily required 90-day written notice thereof; and (3) there were no objective findings to support an occupational disease injury, there was no substantial evidence to support causation, and the matter did not fit

within the definition of an "occupational disease." The Arkansas Court of Appeals found no procedural error with the Commission's decision to consider the issue of occupation illness, noting from prior case law and from Commission Rule 25 that the Commission was not precluded from reviewing issues that were not appealed from or not raised at the Administrative Law Judge level. [American Transp. Co. v. Payne, 10 Ark. App. 56, 661 S.W.2d 418 (1983)]. In sum, the Court held that "the Commission has the authority, and the duty, to render anew findings relevant to the claim before it. Given the posture of the claim as presented, we hold that the Commission was within its power to render findings on compensability, regarding an occupational disease or single workplace accident." However, the Court nonetheless reversed and remanded the case back to the Commission, since the Commission had made no findings as to whether the Claimant had supplied the required statutory notice of an occupational disease claim, nor had it addressed how the claim fit within the "occupational disease construct."

FUTURE PROJECTIONS

While Arkansas has seen increases in the average indemnity and medical cost per lost time claim, and a slight hardening of the market in general, Arkansas's market remains strong and competitive. The attached state of the industry report (Exhibit D) graphically depicts the sound condition of the workers' compensation marketplace.

The NCCI continues to discover that workers' compensation results are deteriorating countrywide. The NCCI identifies a number of factors that are having a negative impact on the market:

- lower earnings relating to investments;
- an increase in assigned risk applications;
- claim costs that are beginning to rise at more rapid rates than in previous years;
- pending proposals for benefit increases;
- challenges to workers' compensation as an exclusive worker remedy for workplace injury;
- recent federal initiatives that threaten to increase claim costs, broaden compensability definitions, and have the potential to create duplicate remedies;
- reform roll-back proposals in recent state legislative sessions;
- increasing costs of medical benefits; and
- increasing utilization of certain prescription pain medications.

The NCCI does point out one favorable development among the negatives. The incidence of workplace injuries continues to fall sharply since the reform efforts of 1993. This means fewer injured workers – the most valuable outcome imaginable for workers, their families, and employers.

CONCLUSION

Absent the reforms encompassed in Act 796 of 1993, it is doubtful Arkansas's employers would now have the option of voluntary workers' compensation insurance. Rather, the assigned risk

plan, designed to be a market of "last resort," would have become Arkansas's market of "only resort." The General Assembly is to be highly commended for its leadership in reforming the workers' compensation market in our State while protecting the interests of the injured worker.

Arkansas's employers must have available to them quality workers' compensation products in the voluntary market at affordable prices. The creation of good jobs requires a marketplace where all businesses, regardless of size, can grow. Maintaining a stable workers' compensation system is essential for this growth. The evidence shows the reforms have worked. The incidence of fraud has been reduced through high-profile fraud prosecutions, employee compensation rates and benefits have been increased, and workers injured within the course and scope of their employment have received timely medical treatment and the payment of much improved indemnity benefits. Eroding the positive changes incorporated into Act 796 would be counterproductive to continued economic growth and development.

Prepared: September 9, 2008

cc: The Honorable Mike Beebe, Governor

The Honorable Olan W. Reeves, Chairman, AWCC

The Honorable Karen H. McKinney, Commissioner, AWCC

The Honorable Philip Alan Hood, Commissioner, AWCC

Mr. Alan McClain, Chief Executive Officer, AWCC

Ms. Lenita Blasingame, Chief Deputy Commissioner, AID

Mr. Nathan Culp, Public Employee Claims Division Director, AID

Mr. Corey Cox, Criminal Investigation Division Director, AID

Ms. Alice Jones, Communications Director, AID





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State of the Industry—An Overview

- While still resulting in an underwriting gain, both accident year and calendar year combined ratios increased in 2007
- Injury frequency rates continue to improve
- Overall: Results are positive but system stakeholders must remain cautious due to longterm challenges of medical inflation, changing legislative demographics, and a need for a longterm solution for terrorism exposure

Arkansas Workers Compensation State Advisory Forum

Continental Breakfast 8:30

Industry and Arkansas Outlook 9:00 Workers Compensation System Overview State of the Industry Claim Frequency **Indemnity Severity**

10:30 Break

Medical Severity

Legislative Issues Nationwide and in Arkansas Impact of Recessions on Workers Compensation

The Residual Market in Arkansas

Closing Remarks





Arkansas Workers Compensation System— An Overview

- Loss costs continue to decrease
- One of the lowest combined ratios in the country
- Frequency decreases continue to offset growth in indemnity and medical costs
- Employment forecast to decline in the more hazardous construction and manufacturing sectors
- Residual market share is declining

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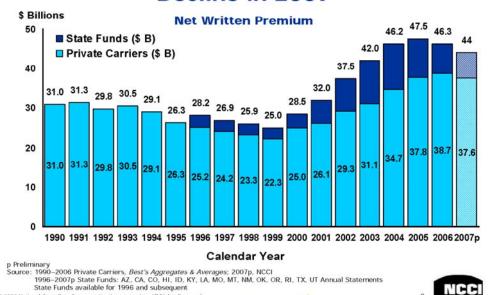




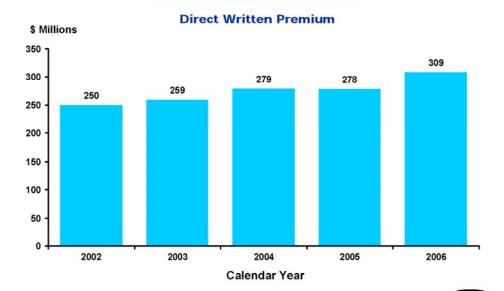


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Countrywide Total Workers Compensation Premium Continues to Decline in 2007

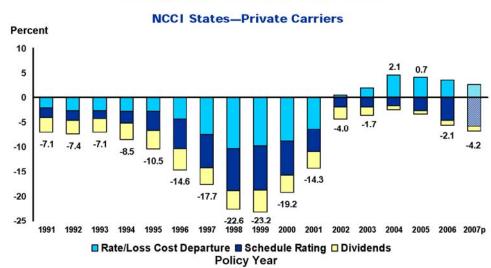


Arkansas Workers Compensation Premium Volume



Source: NAIC Annual Statement data © 2008 National Council on Compensation Insurance, Inc. All Rights Reserved.

Impact of Discounting on Workers Compensation Premium



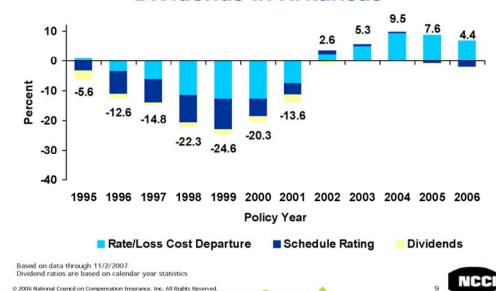
NCCI benchmark level does not include an underwriting contingency provision

Dividend ratios are based on calendar year statistics Based on data through 12/31/2007 for the states where NCCI provides ratemaking services

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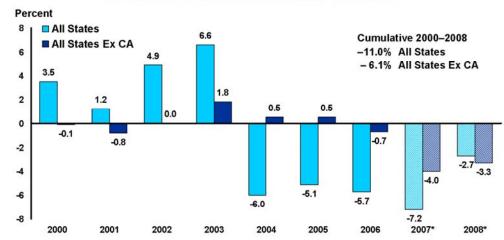


The Impact on Premium of Rate/Loss Cost Departures, Schedule Rating, and Dividends in Arkansas



Countrywide Average Approved Bureau Rates/Loss Costs

All States vs. All States Excluding California



Calendar Year

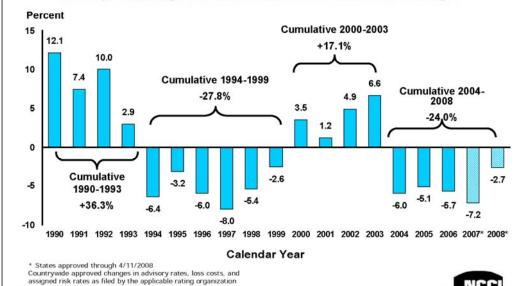
* States approved through 4/11/2008

Countrywide approved changes in advisory rates, loss costs, and assigned risk rates as filed by the applicable rating organization

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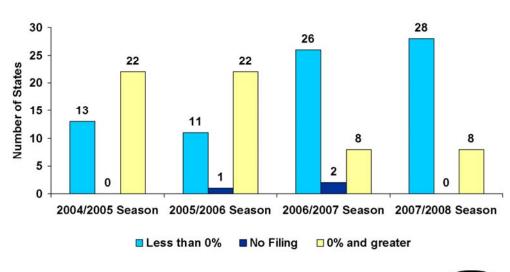
Countrywide Average Approved Bureau Rates/Loss Costs

History of Average WC Bureau Rate/Loss Cost Level Changes



Status of NCCI Filing Activity

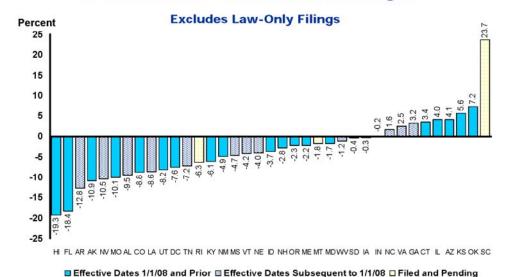
Voluntary Market Filings





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Current NCCI Voluntary Market Filed Rate/Loss Cost Changes



2007/2008 Filing Cycle

NCCI Voluntary Market Filing Activity

- Data for 36 states has been reviewed
 - 8 states have filed a change of 0% or greater or will not have a filing during this filing cycle
 - 28 states have filed decreases
- Range of voluntary filings: -19.3% to +7.2%

Based on data evaluated as of 12/31/2006.

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State Voluntary Market Filings Southeastern NAIC Zone

States filed through 4/18/2008

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South Carolina*	12/1/07	+23.7%	
Georgia	5/1/08	+3.2%	
Virginia	4/1/08	+2.5%	
North Carolina	4/1/08	+1.6%	
West Virginia	7/1/08	-1.2%	
Mississippi	3/1/08	-4.7%	
Kentucky	10/1/07	-6.1%	
Tennessee	3/1/08	-7.2%	
Louisiana	5/1/08	-8.6%	
Alabama	3/1/08	-9.5%	
Arkansas	7/1/08	-12.8%	
Florida	1/1/08	-18.4%	

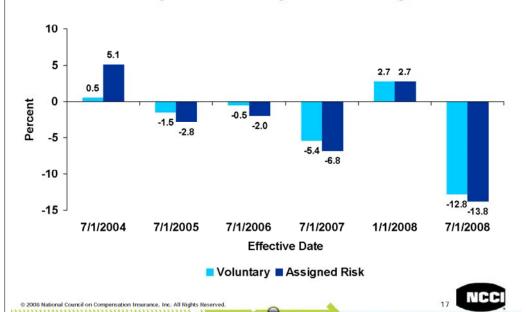
Law and Judicial Impacts

Arizona	1/1/08	+4.1%
Arkansas	1/1/08	+2.7%
Montana	2/1/08	-2.9%
Tennessee*	7/1/08	-3.1%

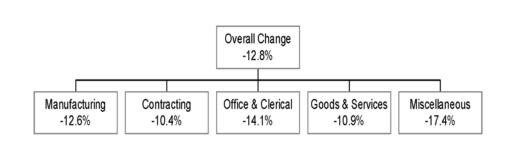
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Arkansas Filing Activity

Voluntary Loss Cost and Assigned Risk Rate Changes









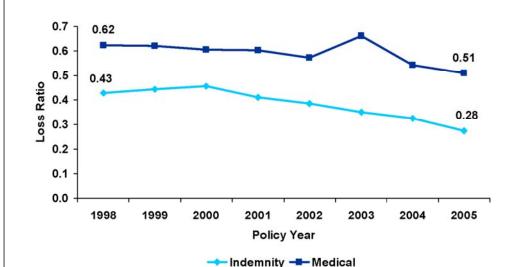






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Arkansas Indemnity and Medical Loss Ratios



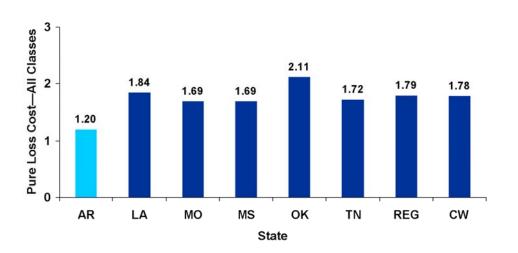
Based on NCCI's financial data at current benefit level and developed to ultimate







Current Average Voluntary Pure Loss Costs Using Arkansas Payroll Distribution



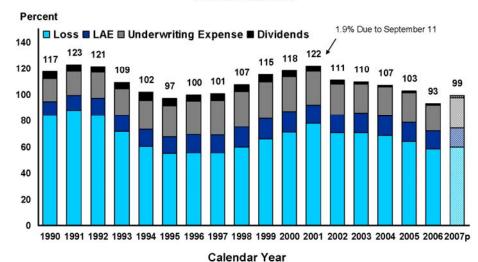




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The Countrywide WC Calendar Year Combined Ratio Increased in 2007

Private Carriers



p Preliminary Source: 1990–2006, Best's Aggregates & Averages; 2007p, NCCI

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Based on the latest NCCI approved rates and loss costs in the various states

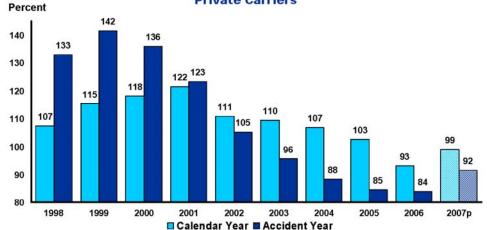
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NCCI

NCCI

Countrywide Accident Year Combined Ratio—Another Underwriting Gain in 2007

Workers Compensation Calendar Year vs. Ultimate Accident Year Private Carriers



p Preliminary Accident Year data is evaluated as of 12/31/2007 and developed to ultimate

Source: Calendar Years 1998–2006, Best's Aggregates & Averages; Calendar Year 2007p and Accident Years 1998–2007p, NCCI analysis based on Annual Statement data Includes dividends to policyholders

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Results Vary From State to State



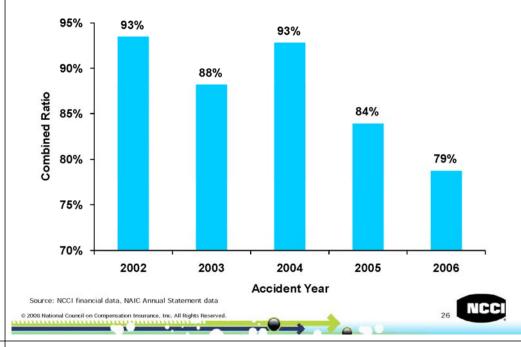


Data is evaluated as of 12/31/2006.

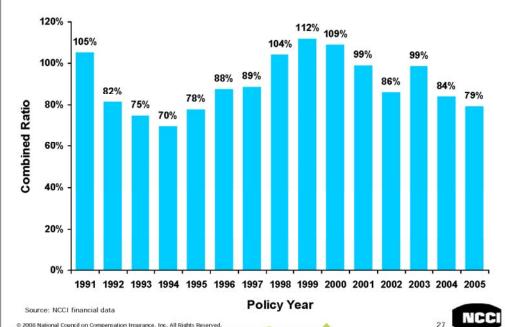
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Arkansas Accident Year Combined Ratios



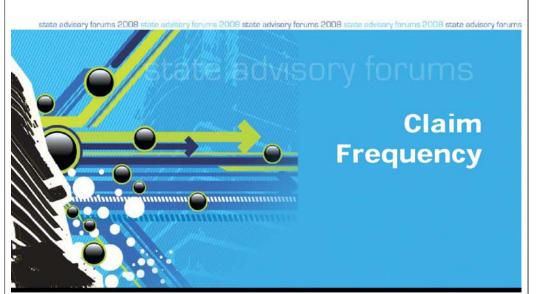
Arkansas Policy Year Combined Ratios



Countrywide Workers Compensation Claim Frequency and Severity

- Countrywide frequency continues to decline. In fact, for each of the last 10 years (and 15 of the last 17), on-the-job claim frequency for workers compensation injuries has declined from the previous year's level.
- Countrywide medical and indemnity costs continue to rise—somewhat negating the good news regarding reduced claims.





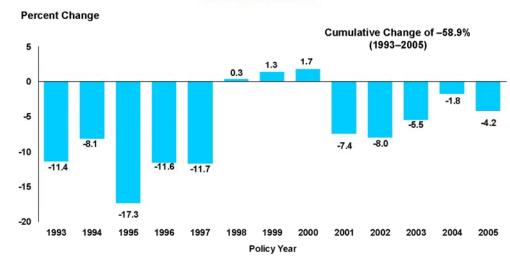
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Countrywide Workers Compensation Lost-Time Claim Frequency Continues to Decline



Arkansas Workers Compensation Lost-Time Claim Frequency

Lost-Time Claims

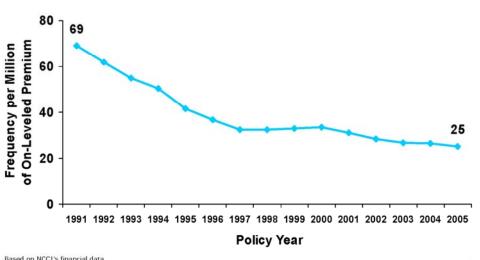


Based on data through 12/31/06, developed to ultimate

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NCC!

Declines in Claim Frequency Have Contributed to Arkansas Improving Results



Based on NCCI's financial data Frequency of lost-time claims

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1991–2006: Based on data through 12/31/2006, developed to ultimate Based on the states where NCCI provides ratemaking services

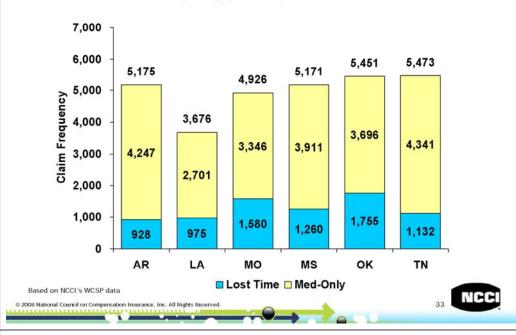
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Excludes the effects of deductible policies

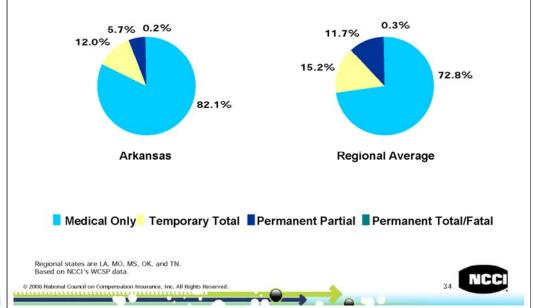


Arkansas Average Claim Frequency

Frequency per 100,000 Workers



Arkansas Distribution of Claims by Injury Type



Key Drivers of Claim Frequency

- Employment growth: "Experienced Worker" effect
- Demographic trends relating to the age of the workforce
- Underlying economic and technological forces

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Employment Growth

Changes in Employment Impact Claim Frequency Through the "Experienced Worker" Effect

- In economic expansions, increases in new hires reduce the experience level of the workforce
- In recessions, the "last hired is the first fired," so the experience level of the workforce increases
- As a result, frequency tends to come under upward pressure in expansions and downward pressure in contractions
- Of course, the actual direction of claim frequency at any given time reflects the confluence of many factors

MCC

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Frequency of Injuries: **Experience Matters**

Inexperienced Have a Disproportionately High Share of Lost Work-Time Injuries and Illnesses

Time With Current Employer	Share of Employment (2006)	Share of Lost Work- Time Injuries & Illnesses (2006)	Relative Difference Share of Injuries vs. Employment
Less Than 1 Year	24.4%	35.5%	45.7% : Higher
1–5 Years	36.7%	33.7%	-8.3% : Lower
5+ Years	38.9%	30.8%	-20.8% : Lower

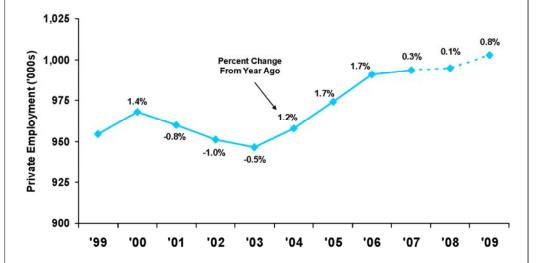
* Time periods in the table are based on Share of Lost Work-time Injuries and Illnesses. Tenure "breaks" for Share of Employment classifications: 12 months or less, 13 months-to-5 years, and 5 years and above

Source: US Bureau of Labor Statistics

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Slower Employment Growth Is Forecast for Arkansas

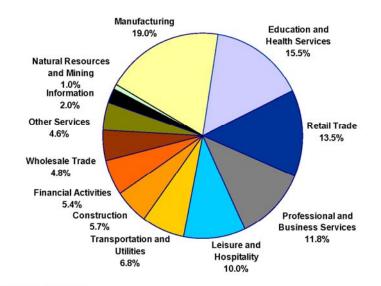


Source: US Bureau of Labor Statistics

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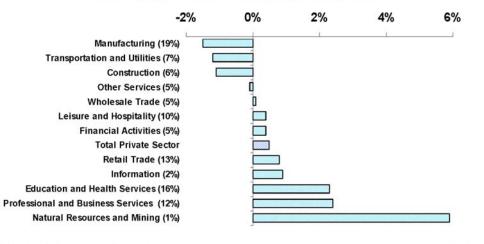
Private Employment in Arkansas

2007



Industries Accounting for Nearly 40% of Arkansas Employment Are Forecast to Post Job Declines in 2007-2009

Average Annual Percent Change, 2007-2009

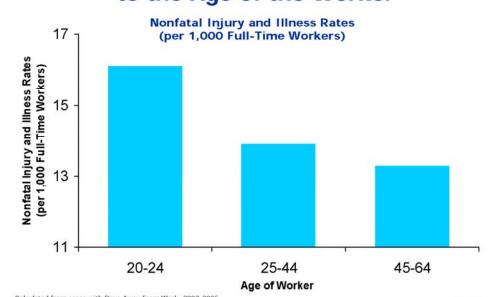


Claim Frequency

Demographic Drivers of



Frequency Is Inversely Related to the Age of the Worker



Calculated from cases with Days Away From Work, 2003-2005 Source: NCCI estimate using data from the US Bureau of Labor Statistics

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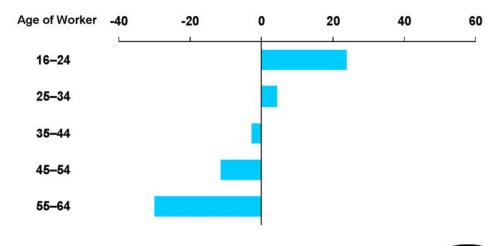
() = Share of Private Sector Employment in 2007 Source: US Bureau of Labor Statistics; Moody's Economy.com

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NCCI

BLS Incidence Rates by Age of Worker in the Construction Industry

Percentage Above or Below the Average Construction Lost Work-Time Incidence Rate in 2006 (National Data)



Source: NCCI estimate using data from the US Bureau of Labor Statistics

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Baby Boomers and Changes in Manufacturing Incidence Rates

National Data

Frequency	Increased	as Baby	Boomers	Entered	the	Workforce
-----------	-----------	---------	----------------	----------------	-----	-----------

Avg. Time Period	% Labor Force Aged 16- 24	Mfg. Incidence Rate
1961–1962	15.9%	11.9
1972-1973	22.1%	15.5

Frequency Declined as Baby Boomers Entered Their 50s

Avg. Time Period	% Labor Force Aged 45+	Mfg. Incidence Rate	
1992–1993	30.1%	12.3	
2002-2006	35.1%	6.6	

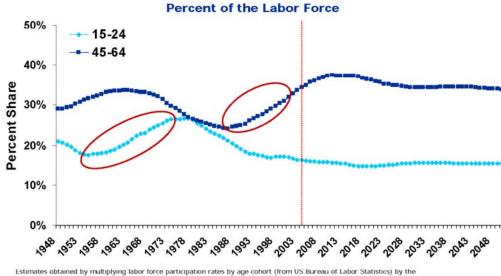
Incidence rates based on total recordable cases Source: US Bureau of Labor Statistics: US Census Bureau

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Underlying Economic and Technological Forces

Forecasts of Labor Force Shares Show Only Small Changes in the Future



population for each cohort (historical and projected population data from the US Census Bureau). Labor force forecast is based on the 2006 participation rate.

Source: NCCI; derived data for all years (including historical period)

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Why Frequency Has Been Trending Lower

- Continuing improvement in productivity
- Impact of global competition
- Technology
- Indirect impacts of OSHA





The Change in Frequency Since the **Early 1990s**

The key findings of NCCI research indicate that the decline is broadly-based:

- Across virtually all states
- Across industries and occupations and
- Across virtually all "injury demographics" including
 - Gender
 - Event
 - Source
 - Body part injured



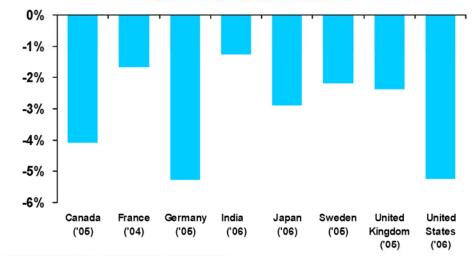


Key Takeaways— Drivers of Claim Frequency

- Prospects for claim frequency partly reflect the strength of the business cycle/employment growth
- Analysis for Arkansas suggests the economy may exert modest downward pressure on claim frequency in coming years
- Younger workers tend to have higher claim frequency
- Age is likely to be less of a factor in affecting claim frequency going forward than previously
- Continued downward pressure on claim frequency is likely as a result of ongoing impacts from globalization and productivity improvement

Injury Incidence Rates Are Declining in **Major Industrial Nations**

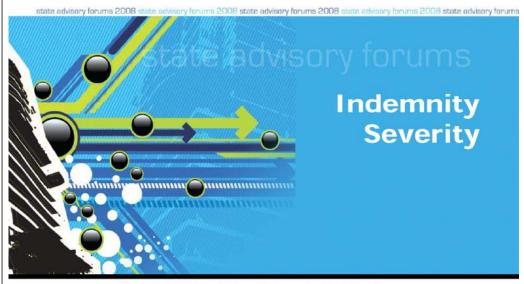
Average Annual Percent Decline in Nonfatal Injury Incidence Rates, Latest Available Year vs. 1994



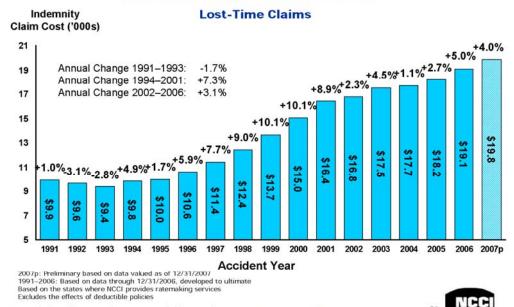
Number in parenthesis is the latest year for which data are available Source: International Labor Organization

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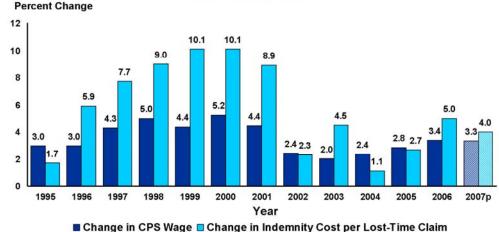


Countrywide Workers Compensation Indemnity Claim Costs



Countrywide Indemnity Severity Outpacing Wage Inflation in 2007



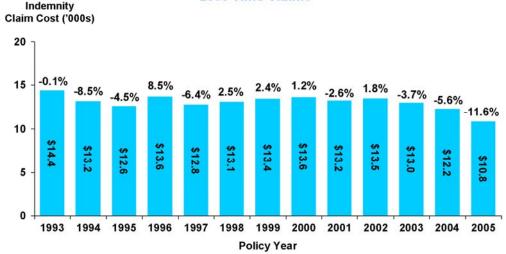


Indemnity severity 2007p: Preliminary based on data valued as of 12/31/2007 Indemnity severity 1995–2006: Based on data through 12/31/2006, developed to ultimate Based on the states where NCCI provides ratemaking services, excludes the effects of deductible policies Source: CPS Wage-All states (Current Population Survey), Economy.com; Accident year indemnity severity-NCCI states, NCCI

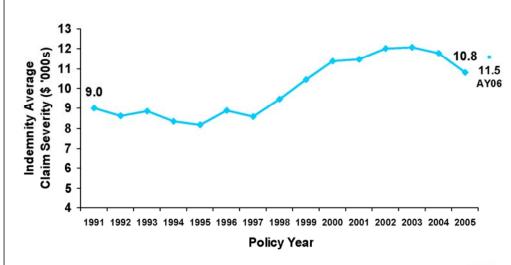
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Arkansas Workers Compensation Indemnity Claim Costs

Lost-Time Claims



Arkansas Average Indemnity Severity

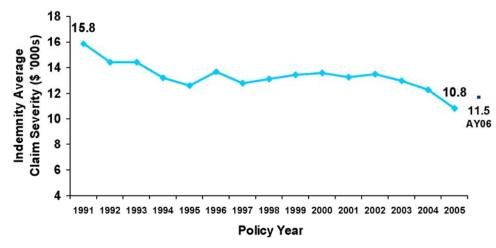


Based on NCCI's financial data for lost-time claims at current benefit level and developed to ultimate.

Based on data through 12/31/06, on-leveled and developed to ultimate

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Arkansas Average Indemnity Severity in Excess of Wage Growth



The severity figures shown are in excess of wage trend.

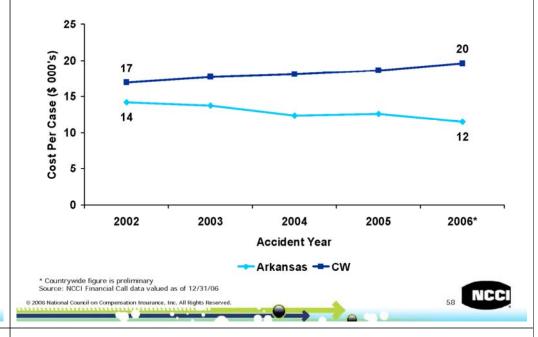
Based on NCCI's financial data for lost-time claims at current benefit level and developed to ultimate.

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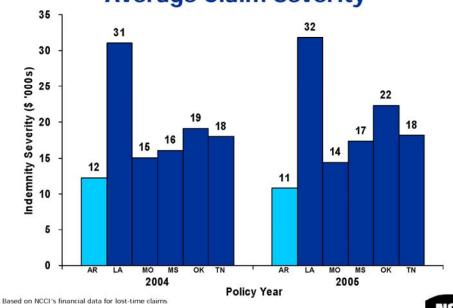
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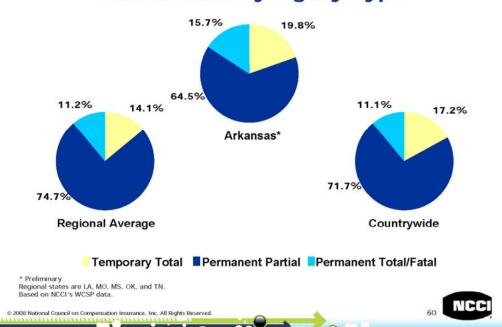
Arkansas Indemnity Average Cost per Case vs. Countrywide



Arkansas Indemnity Average Claim Severity



Arkansas Indemnity Loss Distribution by Injury Type



Drivers of Indemnity Severity

Wages

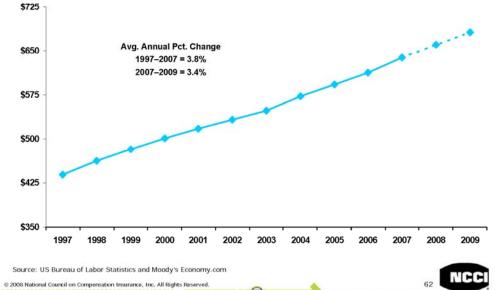
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- Arkansas-specific information
- Demographics
 - -How indemnity severity varies by age



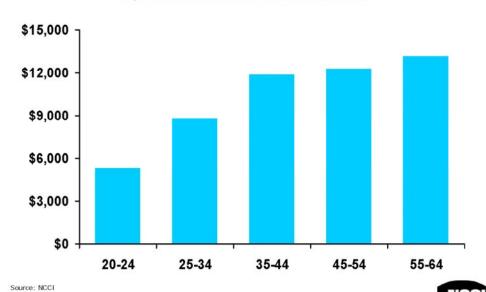
Forecast to Trend Higher Through 2009

Arkansas Average Weekly Wage Is



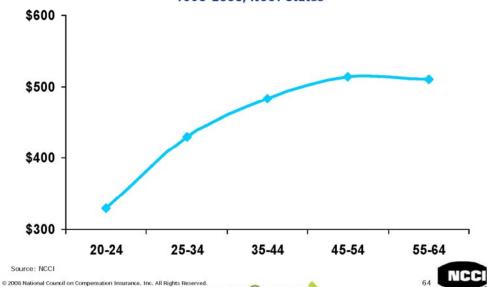
Indemnity Severity Increases With Age

Average Paid + Case Indemnity Severity Reported at 18 Months by Age for Accident Year 2004, NCCI States

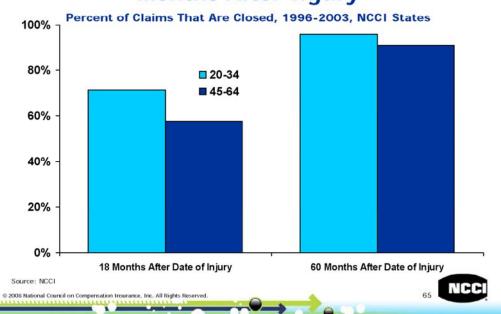


Average Weekly Wage Increases With Age

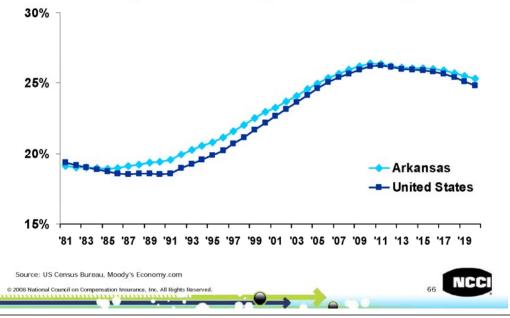
Average Weekly Wage of Injured Workers Closed Claims at 60 Months, 1996-2003, NCCI States



Older Workers Have Fewer Claims Closed Than Younger, Both at 18 and 60 Months After Injury



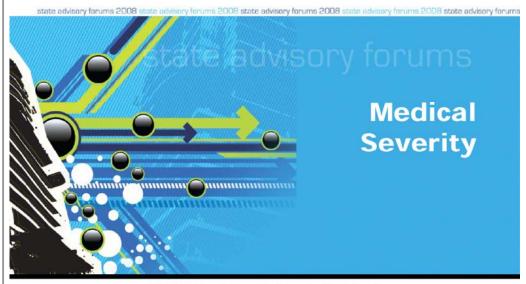
The Share of Arkansas Population Aged 45 to 64 Is Expected to Peak in 2010, as the Baby Boomers Age



Key Takeaways— Drivers of Indemnity Severity

- Projected wage increases in Arkansas suggest modest upward pressure on indemnity severity in coming years
- Indemnity severity tends to increase with age

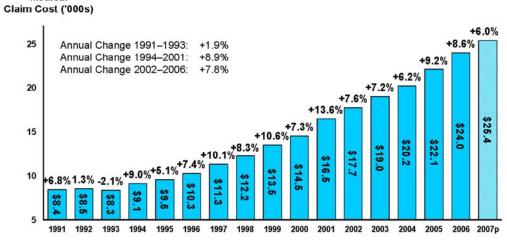






Countrywide WC Medical Claim Cost Trends—Growth Continues in 2007

Lost-Time Claims



Accident Year

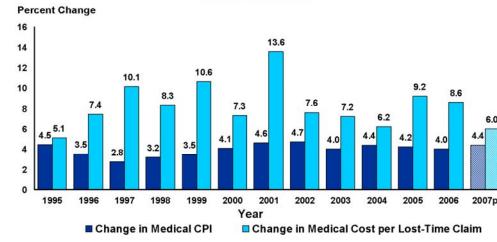
2007p: Preliminary based on data valued as of 12/31/2007 ACCIC 1991–2006: Based on data through 12/31/2006, developed to ultimate Based on the states where NCCI provides ratemaking services Excludes the effects of deductible policies

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Medical

Countrywide WC Medical Severity Still Growing Faster Than the Medical CPI





Medical severity 2007p: Preliminary based on data valued as of 12/31/2007
Medical severity 1995–2006: Based on data through 12/31/2006, developed to ultimate
Based on the states where NCCI provides ratemaking services, excludes the effects of deductible policies
Source: Medical CPI—All states, Economy.com; Accident year medical severity—NCCI states, NCCI

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Arkansas Workers Compensation Medical Claim Cost Trends

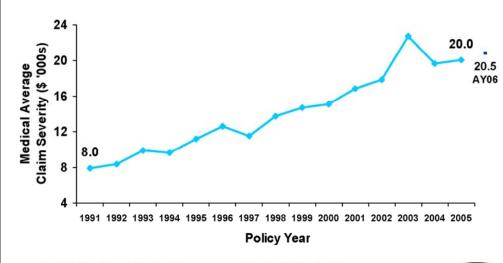


Based on data through 12/31/06, on-leveled and developed to ultimate.

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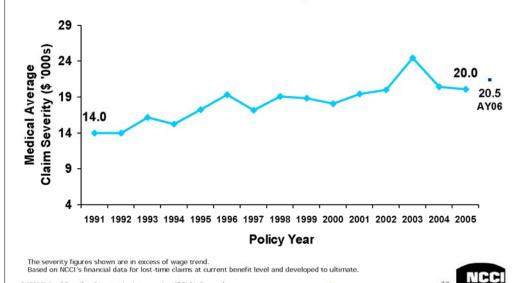
Arkansas Average Medical Severity



Based on NCCI's financial data for lost-time claims at current benefit level and developed to ultimate.

NCCI

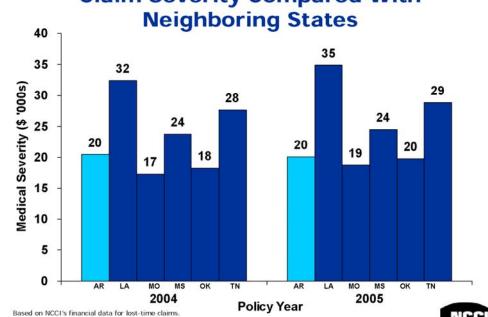
Arkansas Average Medical Severity in Excess of Wage Growth



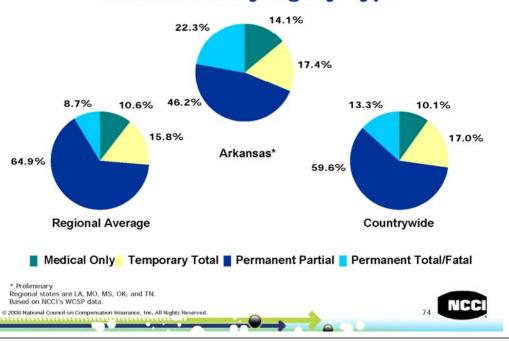
Arkansas Medical Average
Claim Severity Compared With

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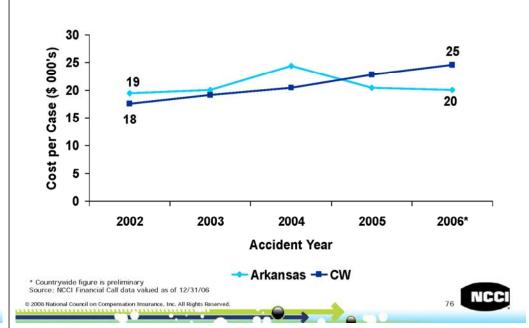
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Arkansas Medical Loss Distribution by Injury Type

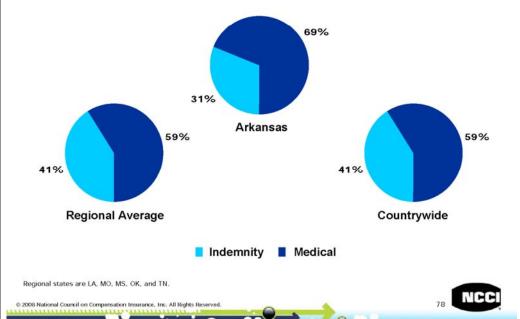


Arkansas Medical Average Cost per Case vs. Countrywide



Workers Compensation Medical Losses Are More Than Half of Total Losses All Claims—NCCI States 2007p 1997 Indemnity Medical 1987 41% Indemnity Medical 59% 47% 53% Indemnity Medical 54% 46% **Accident Year** 2007p: Preliminary based on data valued as of 12/31/2007 1987, 1997: Based on data through 12/31/2006, developed to ultimate Based on the states where NCCI provides ratemaking services Excludes the effects of deductible policies NCCI





Drivers of Medical Severity

Medical inflation

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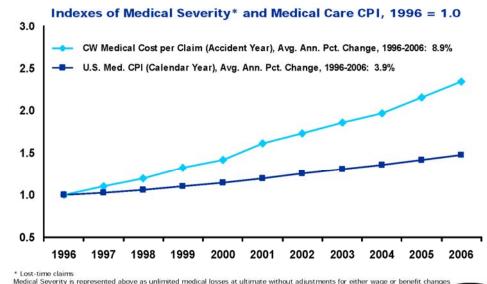
- Demographics
- Utilization (changes in both mix and quantity)

Medical Care Inflation





Countrywide Medical Severity Is Outpacing the Medical Care CPI

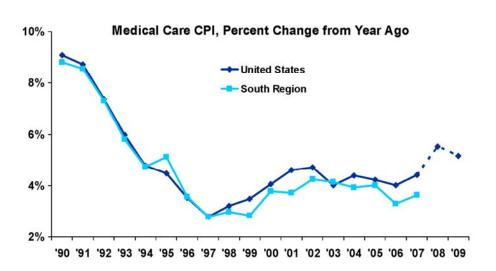


Medical Severity is represented above as unlimited medical losses at ultimate without adjustments for either wage or benefit changes Source: NCCI; US Bureau of Labor Statistics

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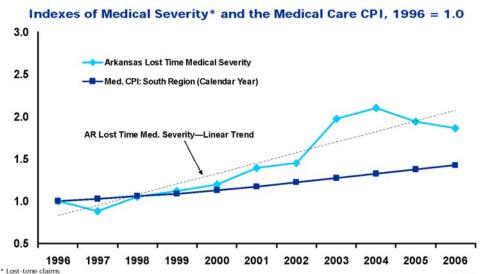
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Further Increases in Medical Care Inflation Are Expected Through 2009



Source: US Bureau of Labor Statistics and Moody's Economy.com for forecasts

Medical Severity in Arkansas Has Returned to More Normal Levels After a Sharp Rise in 2003



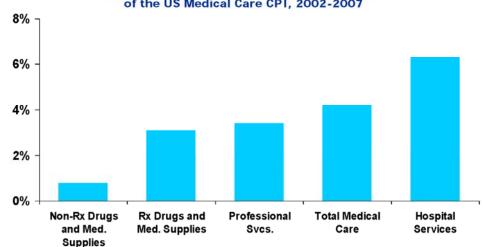
Medical Severity is represented above as unlimited medical losses at ultimate without adjustments for either wage or benefit change Source: NCCI: US Bureau of Labor Statistics

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Medical Care Price Increases Are Highest for Hospital Services

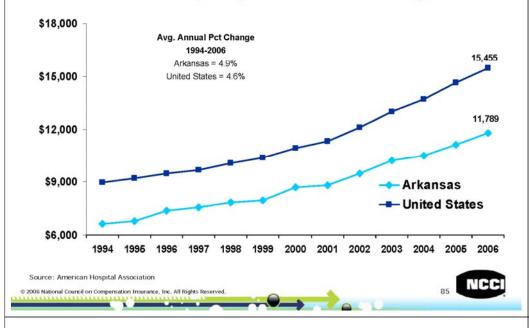
Average Annual Pct. Change in Components of the US Medical Care CPI, 2002-2007



Source: US Bureau of Labor Statistics



Avg. Hospital Cost per Stay in Arkansas: Less Than That of the U.S.; Rising a Bit More Rapidly than Nationally



Utilization



Changes in Utilization Can Come From Many Sources

- Changes in the number of services provided
- Changes in treatment modalities (use of MRIs instead of X-rays)
- Introduction of newer pharmaceuticals/generics
- Adaptive practices by providers

Utilization Changes Are Key to Understanding Changes in Medical Severity

- Recent NCCI research quantifies the extent to which changes in utilization help to explain the rise in medical severity
- The study focuses on claims closed within 24 months of date of injury between 1996–97 and 2001–02, a period when medical severity rose 73%
- Looks separately at impact of changes in mix, quantity, and price on medical severity changes
- Full study available on NCCI's Web site (ncci.com)





Changes in Mix



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Changes in the Number of Treatments

Changes in the Mix of Diagnoses

Top 10 Claim Diagnoses by Accident Year for Lost-Time Claims That Closed Within 24 Months of Date of Injury

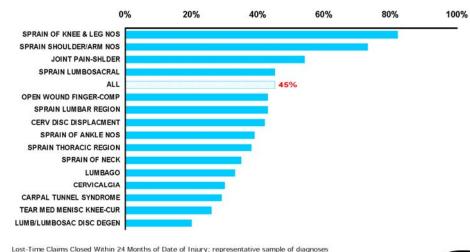
	Accident Years 1996/1997		Accident Years 2001/2002	
	Diagnosis and Severity Index		Diagnosis and Severity Index	
1	Sprain Lumbar Region 0.43		Sprain Lumbar Region	0.43
2	Carpal Tunnel Syndrome	1.44	Carpal Tunnel Syndrome	1.17
3	Lower Leg Injury— not otherwise specified	0.87	Lower Leg Injury —not otherwise specified	0.76
4	Lumbar Disc Displacement	1.94	Lumbar Disc Displacement	1.85
5	Sprain Lumbosacral	0.37	Tear Medial Cartilage/Meniscus of Knee	1.64
6	Lumbago	0.61	Cervicalgia	1.24
7	Sprain of Ankle—not otherwise specified	0.25	Lumbago	0.56
8	Cervicalgia	1.33	Sprain Rotator Cuff	(2.14)
9	Tear Medial Cartilage/Meniscus of Knee	2.03	Unilateral Inguinal Hernia	0.82
10	Unilateral Inguinal Hernia	1.11	Sprain of Ankle— not otherwise specified	0.24

The severity index is the ratio of paid medical severity for that diagnosis to overall average paid medical severity.

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The Number of Treatments per Claim **Increased in All Leading Diagnoses**

Percentage Increase in Number of Treatments per Claim by Diagnosis Code Accident Years 2001/2002 Over 1996/1997



Lost-Time Claims Closed Within 24 Months of Date of Injury; representative sample of diagnoses





What Contributes to These Increases?

Focus on the Range of Services





Why the Dramatic Increase in the **Number of Treatments?**

Were More Claims Receiving a Service?

or

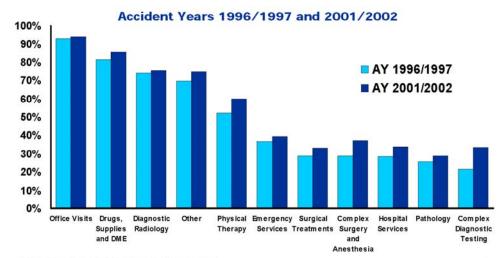
Was There an Increase in the Number of **Treatments per Service?**

Treatments per Claim Up the Most for Physical Therapy, Complex Surgery, and **Complex Diagnostic Testing**

	Average Treatments per Claim		
Treatment Service Group	Accident Years 1996/1997	Accident Years 2001/2002	% Difference
Physical Therapy	19.5	32.6	67%
Complex Surgery and Anesthesia	1.0	1.5	60%
Complex Diagnostic Testing	0.4	0.7	C.
Other	4.4	6.1	39%
Drugs, Supplies, and DME	5.6	7.5	34%
Surgical Treatments	0.6	0.7	26%
Pathology	1.1	1.4	26%
Emergency Services	0.8	0.9	19%
Hospital Services	0.9	1.0	15%
Diagnostic Radiology	2.6	2.9	14%
Office Visits	5.8	6.4	11%
Total Treatments	42.6	61.8	45%

Lost-Time Claims Closed Within 24 Months of Date of Injury

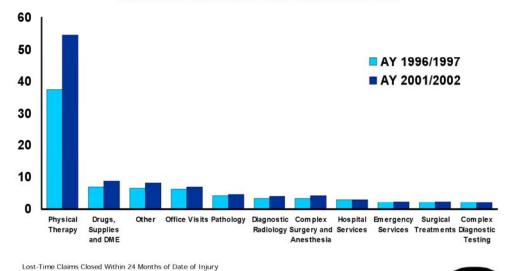
The Percentage of Claims Receiving the **Indicated Service Increased for All Service Groups**



Lost-Time Claims Closed Within 24 Months of Date of Injury

Quantity—Number of Treatments per Claim Receiving Indicated Service

Accident Years 1996/1997 and 2001/2002



Source: NCCI

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Demographics

Changes in Utilization (Mix and Quantity) Explain the Major Portion of the Increase in Paid Medical Severity

Paid Medical Severities on Lost-Time Claims Closed Within 24 Months of Date of Injury

	Percent of Severity Increase, Accident Years 2001/02 vs. 1996/97
Increase Due to Diagnosis Mix Differences	21%
Increase Due to Number of Treatments	52%
Remaining Increase Due to Price and Other Factors	27%

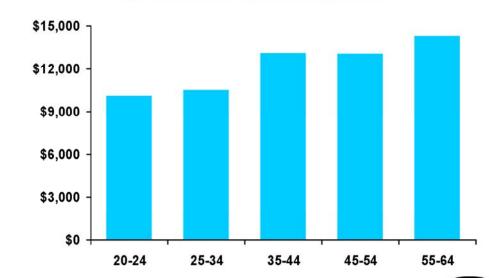
Source: NCC1

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Medical Severity Increases With Age

Average Paid + Case Medical Severity Reported at 18 Months by Age for Accident Year 2004, NCCI States



Source: NCC







Rankings of Top 10 Lost-Time Claim Diagnoses

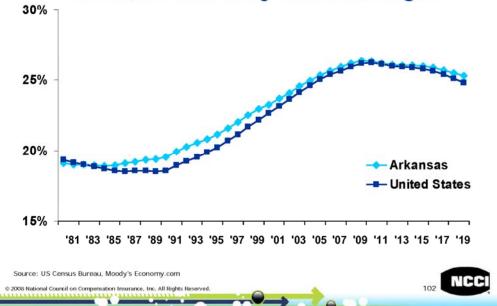
1996-2003, NCCI States



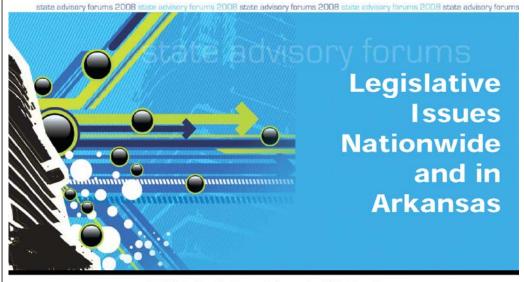
Key Takeaways— Drivers of Medical Severity

- Increases in medical severity largely reflect increases in utilization (mix and quantity)
- Changes in medical prices play an important but less significant role in explaining medical severity changes
- Medical severity increases with age
- Upward pressure on medical severity may diminish as baby boomers exit the workforce, although this latter effect may be partly offset to the extent that persons work well beyond the "normal" retirement age

The Share of Arkansas' Population Aged 45 to 64 is Expected to Peak in 2010, as the Baby Boomers Age







Insurance Reform

- Federal Insurance Office Bill
- Treasury "Blueprint for Reform"
- Optional Federal Charter (OFC)





Treasury Blueprint Recommendations for Change— **Insurance Companies**

- 2-5 year—OFC
- Separate charters: Life/Health and Property/Casualty
- Retain state worker compensation system, including residual markets
- No rate regulation or requirement to use particular rate, rating element (e.g., trending) or price
 - But may do so
- Office of Insurance Oversight (OIO)

Federal Insurance Office/ Office of Insurance Information

- Treasury Office with authority to:
 - Collect publicly-available insurance lines data (except health)
 - Possibly preempt state laws inconsistent with federal policy
- No authority over insurers
- Advisory Group of NAIC, Commerce Department, US trade representatives, insurance industry, consumer groups, other organizations





Optional Federal Charter

- House Bill (no action)
- Senate Bill (no action)
- Treasury Blueprint (short- to long-term proposals)



Terrorism Risk Insurance Program Reauthorization Act of 2007

- Coverage for domestic and foreign certified "acts of terrorism"
- Law effective until 2014
- Trigger amount, co-pays, and deductibles about the same as current law
- Annual liability cap of \$100B total payout by insurers and the federal government
- Treasury to write rules for pro rata payments if annual losses exceed \$100B in any year
- Nuclear, biological, chemical or radiological (NBCR) events not specifically included in the definition of Acts of Terrorism
- Two studies: capacity for CBRN coverage, especially for workers compensation insurers, and availability and affordability of terrorism coverage in specific markets





State Legislative Challenges

- In NCCI states, workers compensation reform pursued only in VT in 2008.
- Many states are experiencing in 2008 attempts to increase benefits and/or expand compensability standards, as well as determining whether to use the 6th Edition of the AMA Guides.
- Changing political demographics could threaten earlier enacted reforms. Constitutionality challenges to earlier enacted reforms are being waged in FL and MO.
- Regulatory turnover continues at a rapid pace, with many veteran Commissioners either retiring or seeking other state offices.



Arkansas Legislation

- Closure of the Second Injury Fund to new claims
- Increase in threshold for Death and Permanent Disability Trust Fund

Arkansas Legislation

- Act 1599 of 2007 raised the \$75,000 threshold at which the Death and Permanent Total Disability Trust Fund assumes payments of indemnity benefits for injuries resulting in permanent total disability or death.
- For injuries occurring on or after January 1, 2008, the employer or carrier is responsible for paying weekly benefits for death or permanent total disability "not to exceed three hundred twenty-five (325) times the maximum total disability rate" at the time of the injury.
- The maximum total disability rate for 2008 has been determined to be \$522. Therefore, the threshold at which the Death and Permanent Total Disability Trust Fund will assume responsibility for payment of indemnity benefits for 2008 will be \$169,650. ($$522 \times 325 = $169,650$)
- NCCI estimates this change will increase system costs by 1.7%.

Arkansas Legislation

- Act 1415: This Act prohibits claims for second injuries after January 1, 2008. In effect, this act eliminates the Second Injury Fund for new claims. The Fund will continue to pay compensation on existing claims.
- NCCI estimates this change will increase system costs by 1.0%.

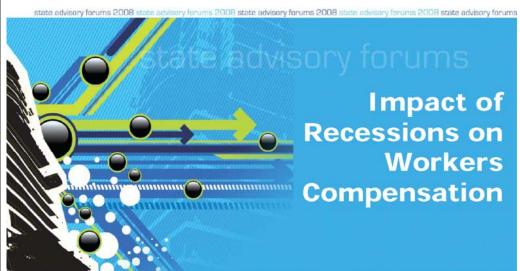




Focus on ...

- Exposure
- Investment Income
- Claim Frequency
- Indemnity and Medical Severity

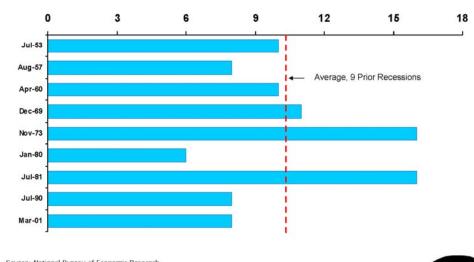




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The Average Duration of Prior Recessions Has Been a Bit Less Than One Year

Recession Length (in Months), Date Indicates Start of the Recession

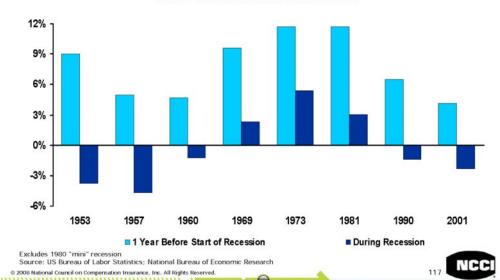


Source: National Bureau of Economic Research



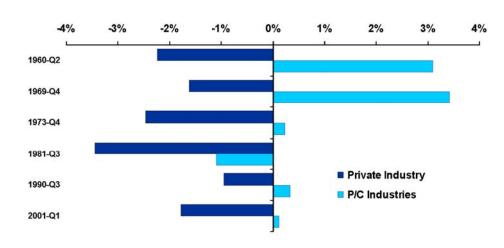
Recessions Result in Slower Growth or Declines in Wages and Salaries

Percent Change, Annual Rate, in Wage and Salary Disbursements, During Year Before the Start of Recession vs. During Recession; **Years Indicate Start of Recession**



P/C Industry Employment Has Increased **During Most Prior Recessions**

Percent Change During Prior Recession Periods*

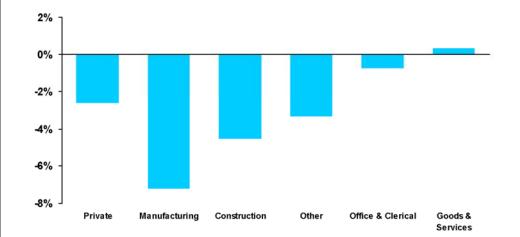


 Comparative employment data not available prior to the 1960 recession Source: US Bureau of Labor Statistics: National Bureau of Economic Research

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The Impact of Recessions on Employment **Differs Markedly by Industry Sector**

Average Percent Decline in Employment in Eight Prior Recessions*

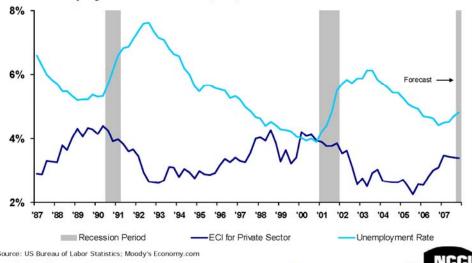


* Includes recessions beginning in 1953, 1957, 1960, 1969, 1973, 1981, 1990, and 2001 Source: US Bureau of Labor Statistics: National Bureau of Economic Research

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Recession-Related Increases in the **Unemployment Rate Tend to Place Downward Pressure on Wage Increases**

Unemployment Rate vs. Year-Ago Percent Change in the **Employment Cost Index (ECI) for Private-Sector Workers**



Source: US Bureau of Labor Statistics; Moody's Economy.com



The Fed Typically Reduces Short-Term Interest Rates Before the Start of a Recession. With Declines Continuing After the Economy **Begins to Expand**



on P/C Fixed Income Portfolios 12 10

Lower Interest During and Immediately

After Recessions Result in Reduced Yields



Stock Prices During and After Recessions

Based on the S&P 500 Stock Price Index

Recession Period	No. of Months Before Start of Recession That Stocks Prices Began to Decline	Percent Decline From Pre- Recession High to Recession- Period Low	No. of Months for Stock Prices to Regain Their Pre-Recession High
July 1953—May 1954	6	11%	14
August 1957—April 1958	13	17%	26
April 1960—February 1961	9	10%	19
Dec. 1969—November 1970	12	29%	39
November 1973—March 1975	10	43%	90
July 1981—November 1982	3	19%	19
July 1990—March 1991	1	15%	8
March 2001—November 2001	7	30%	81
Average	8	22%	37
Median	8	18%	23

Implications for Claim Frequency

- Recessions, by increasing the skill level of the workforce ("last hired-first fired"), tend to place downward pressure on claim frequency
- NCCI research found that the unemployment rate and the share of younger workers in the workforce—both measures of the extent to which inexperienced workers are in the workforce—were statistically significant in explaining year-to-year changes in the manufacturing incidence rate
- The complete study is available on NCCI's Web site (ncci.com)





Uncertain Implications for Indemnity and Medical Severity

Indemnity Severity

- Some downward pressure from slower wage growth and reduced employment in more hazardous industries
- Impact on workers' attitudes less clear

Medical Severity

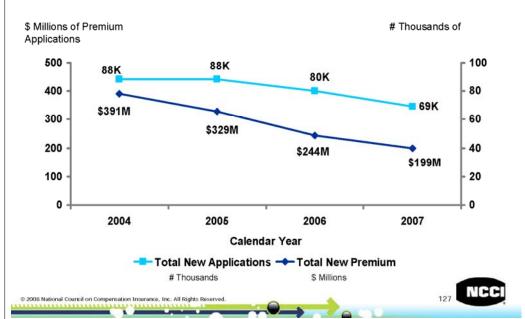
- Relationship with the business cycle has yet to be determined
- Economy may play a role, if only indirectly (indemnity and medical severity moved together during the 1980s and early 1990s)



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NCCI

Total Residual Market New Applications and Premium Assigned in All Plan States

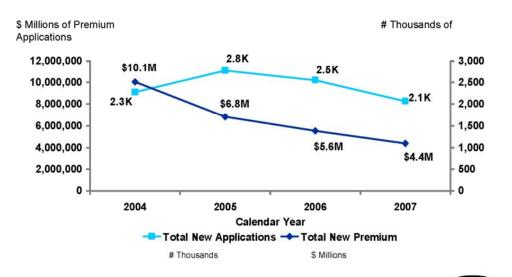






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Total Residual Market New Applications and Premium Assigned in Arkansas



The Number of Residual Market Plan **Assignments in Arkansas**

Number of Total Assignments

Year	Q1-Q4	% Change From Prior Year
2004	2,277	
2005	2,772	21.7%
2006	2,546	-8.2%
2007	2,068	-18.8%



Volume of Total Assigned Premium

Year	Q1-Q4	% Change From Prior Year
2004	\$10,082,128	
2005	\$6,843,651	-32.1%
2006	\$5,550,244	-18.9%
2007	\$4,381,685	-21.1%







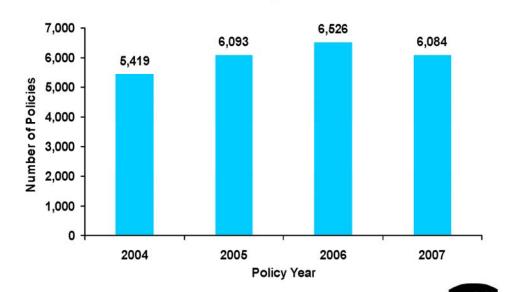


In Arkansas, Growing Percentages of New **Residual Market Plan Applications Are Being Processed Online**

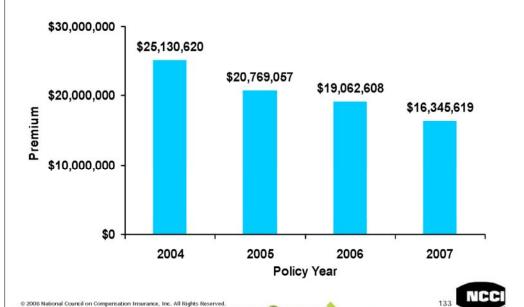
Percentage of Arkansas' New Applications Received via Electronic Transmission at Month's End

	Arkansas	National
Average		
December 2004	59.5%	73.9%
December 2005	70.3%	78.8%
December 2006	74.4%	83.1%
December 2007	87.1%	88.1%

Arkansas Total Residual Market Plan Policy Count



Arkansas Total Residual Market Plan Premium Volume



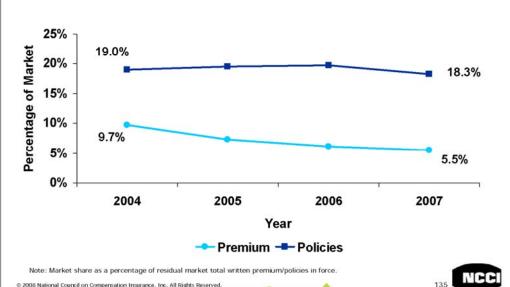
Arkansas Residual Market Plan 2006 vs. 2007 Total Policy Size Comparison

	2006		2007	
Premium Size	# of Policies	Premium	# of Policies	Premium
\$0-\$2,499	5,168	\$4,099,523	4,995	\$3,997,722
\$2,500-\$4,999	641	\$2,220,562	518	\$1,831,448
\$5,000-\$9,999	375	\$2,619,560	292	\$2,041,706
\$10,000-\$19,999	205	\$2,769,637	155	\$2,209,177
\$20,000-\$49,999	87	\$2,659,562	89	\$2,570,795
\$50,000-\$99,999	37	\$2,422,814	24	\$1,616,003
\$100,000-\$199,999	11	\$1,477,780	9	\$1,181,980
\$200,000 and greater	2	\$ 793,170	2	\$ 896,788
TOTAL	6,526	\$19,062,608	6,084	\$16,345,619

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Comparison of Market Share for the Arkansas Residual Market by Total Policy Count and Written Premium



Arkansas Top Five Class Codes Based on Residual Market Plan Total Policy Count

Nationally	Arkansas
5645—Carpentry (12.6%)	5645—Carpentry (25.2%)
8810—Clerical (4.9%)	8810—Clerical (5.6%)
5437—Carpentry, Installation (4.6%)	5551—Roofing (3.3%)
5474—Painting (4.1%)	5474—Painting (2.9%)
7228—Trucking, Local (3.9%)	5022—Masonry (2.8%)





Arkansas Top Five Class Codes Based on Residual Market Plan Total Written Premium

Nationally	Arkansas
5645—Carpentry (7.5%)	5645—Carpentry (13.2%)
5551—Roofing (3.1%)	5403—Carpentry NOC (5.1%)
7228—Trucking, Local (2.5%)	7720—Police Officers (2.6%)
7229—Trucking, Long Distance (2.4%)	7229—Trucking, Long Distance (2.6%)
8835—Nursing, Home Health	5551—Roofing (2.4%)



(2.4%)



Demographics: Top 10 Zip Codes With the Largest Arkansas Residual Market Premium Volume

Zip		Premium in	% of Premium in	Avg. Policy
Code	City	Zip Code	Zip Code	Size
72756	ROGERS	\$268,926	2.06%	\$2,318
71913	HOT SPRINGS	\$255,658	1.95%	\$2,223
71802	HOPE	\$228,919	1.75%	\$38,153
71901	HOT SPRINGS	\$226,333	1.73%	\$2,241
72712	BENTONVILLE	\$221,800	1.70%	\$1,643
72209	LITTLE ROCK	\$221,441	1.69%	\$5,272
71730	EL DORADO	\$221,142	1.69%	\$3,510
72903	FT SMITH	\$200,908	1.54%	\$7,175
72103	MABELVALE	\$189,172	1.45%	\$7,006
72143	SEARCY	\$187,443	1.43%	\$2,640
		\$2,221,742	16.99%	

Demographics: Top 10 Zip Codes With the Largest Number of Arkansas Residual Market Policies

Zip Code	City	Policy Counts	% of Policies in Zip Code
72712	BENTONVILLE	135	2.38%
72764	SPRINGDALE	119	2.09%
72756	ROGERS	116	2.04%
71913	HOT SPRINGS	115	2.02%
71901	HOT SPRINGS	101	1.78%
72032	CONWAY	94	1.65%
72023	CABOT	94	1.65%
72015	BENTON	87	1.53%
72401	JONESBORRO	82	1.44%
72762	SPRINGDALE	80	1.41%
		1,023	17.99%



Demographics: Some Interesting Facts

New applications received by NCCI provide some interesting information, based on how the producers answer the questions, such as:

- Request USL&H coverage
 - 4 of the of 340 applications requesting USL&H coverage were from Arkansas (1.2%)
- Indicate that the risk was previously self-insured
 - 189 of 3,477 applications indicating previous selfinsurance were from Arkansas (or 5.4%)

Note: "Self-insured" could also indicate small accounts that were formerly group self-insureds or PEO









Arkansas Assigned Risk Plan Pricing Programs

- Merit Rating
- Differential/Surcharge
- Take-Out Credit Program
- Alternate Preferred Plan
- Managed Care Credit Program
- Tabular Adjustment Program
- Drug-Free Workplace Credit

















Glossary

- Assigned Risk Adjustment Program (ARAP)—An assigned risk market program that surcharges residual market risks based on the magnitude of their experience rating modification.
- Calendar Year (CY)—Experience of earned premium and loss transactions occurring within the calendar year beginning January 1, irrespective of the contractual dates of the policies to which the transactions relate and the dates of the accidents.
- Calendar-Accident Year (AY)—The accumulation of loss data on all accidents with the date of occurrence falling within a given calendar year. The premium figure is the same as that used in calendar year experience.
- Claim Frequency—The number of claims per unit of exposure. For example, the number of claims per million dollars of premium or per one hundred workers.

Glossary

- **Indemnity Benefits—**Payments by an insurance company to cover an injured worker's time lost from work. These benefits are also referred to as "wage replacement" benefits.
- **Loss Ratio**—The ratio of losses to premium for a given time period.
- Lost-Time (LT) Claims—Claims resulting in indemnity benefits (and usually medical benefits) being paid to or on behalf of the injured worker for time lost from work.
- Medical-Only Claims—Claims resulting in only medical benefits being paid on behalf of an injured worker.
- Net Written Premium (NWP)—The gross premium income adjusted for additional or return premiums and including any additions for reinsurance assumed and any deductions for reinsurance ceded.

Glossary

- Claim Severity—The average cost of a claim. Severity is calculated by dividing total losses by the total number of claims.
- Combined Ratio—The sum of the (i) loss ratio, (ii) expense ratio, and (iii) dividend ratio for a given time period.
- Detailed Claim Information (DCI)—An NCCI call that collects detailed information on an individual workers compensation lost-time claim basis, such as type of injury, whether or not an attorney was involved, timing of the claim's report to the carrier, etc.
- Direct Written Premium (DWP)—The gross premium income adjusted for additional or return premiums, but excluding any reinsurance premiums.



Glossary

- Permanent Partial (PP)—Disability that prevents the insured from working at their own (and sometimes any) occupation. A disability is considered to result in partial permanent loss of earning power.
- Policy Year (PY)—Premium and loss data on business for a 12-month period for policies with inception dates within the 12-month period.
- Schedule Rating—A debit and credit plan that recognizes variations in the hazard-causing features of an individual risk.
- Take-Out Credit Program—An assigned risk program that encourages carriers to write current residual market risks in the competitive voluntary marketplace.
- Temporary Total (TT)—A disability that totally disables a worker for a temporary period of time.









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NCCI Workers Compensation Databases

- Financial Aggregate Calls
 - Used for aggregate ratemaking
- **Workers Compensation Statistical Plan (WCSP)**
 - Used for class ratemaking
- **Detailed Claim Information (DCI)**
 - In-depth sample of lost-time claim information
- **Policy Data**
 - Policy declaration page information

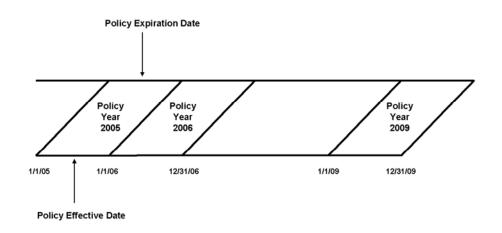




Financial Aggregate Calls

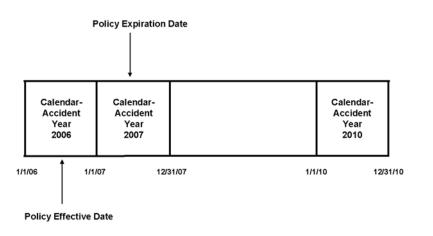
- Collected Annually
 - Policy and calendar-accident year basis
 - Statewide and assigned risk data
- Premiums, Losses, and Claim Counts
 - Evaluated as of December 31
- Purpose
 - Basis for overall aggregate rate indication
 - Research

Policy Year Financial Aggregate Data





Calendar-Accident Year Financial Aggregate Data



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Workers Compensation Statistical Plan (WCSP) Data

Experience by policy detail

- Exposure, premium, experience rating modifications
- Individual claims by injury type

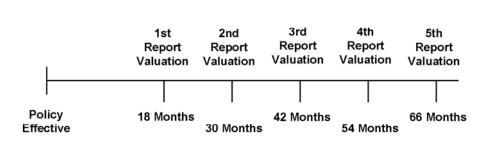
Purposes

- Classification relativities
- Experience Rating Plan
- Research

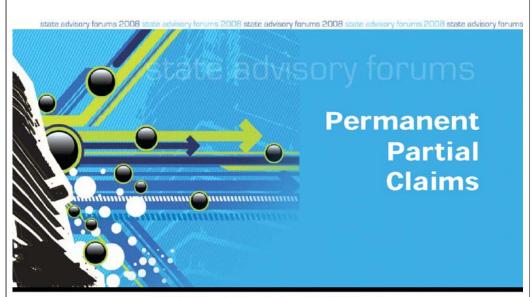
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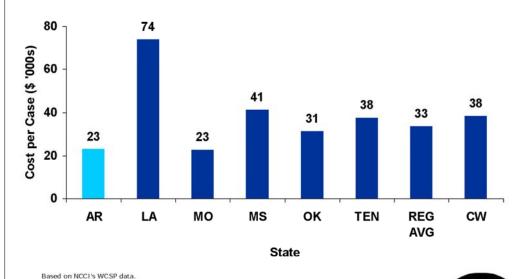
Valuation of WCSP Data







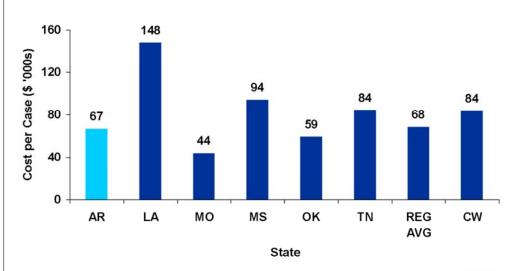
Arkansas Indemnity Permanent Partial Average Cost per Case



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NCCI

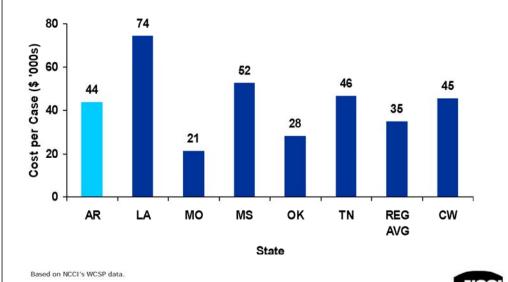
Arkansas Permanent Partial Average Total per Case ...



Based on NCCI's WCSP data.

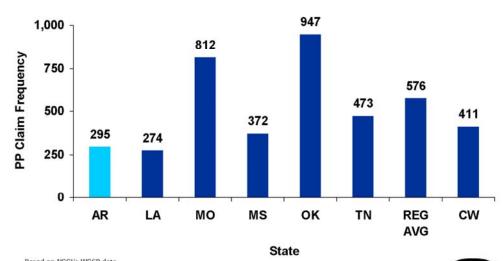
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Arkansas Permanent Partial Medical Average Cost per Case



Times Arkansas Average Frequency of Permanent Partial Claims ...

Permanent Partial Frequency per 100,000 Workers



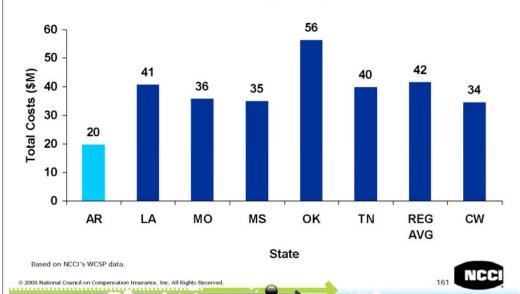
Based on NCCI's WCSP data

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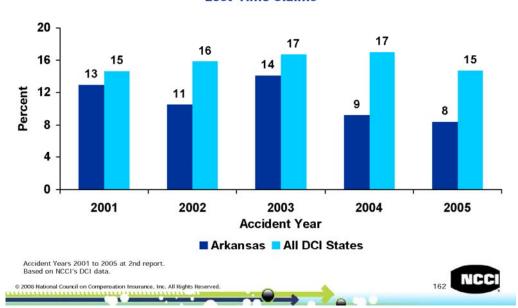
Gives Arkansas Permanent Partial Total Costs

Permanent Partial Costs per 100,000 Workers

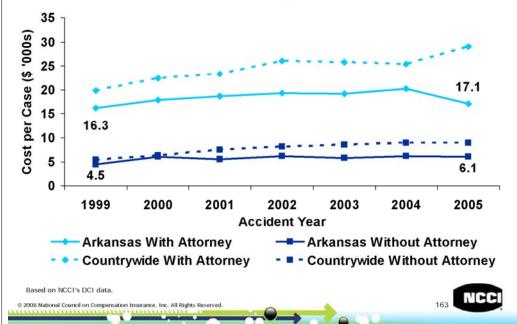


Percentage of Claims With Attorney Involvement

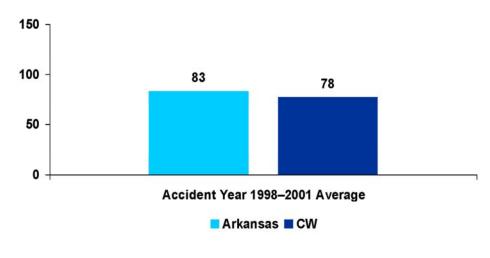
Lost-Time Claims



Arkansas Indemnity Average Claim Costs When an Attorney Is Involved



Number of Days to Return to Work



Source: NCCI Detailed Claim Information



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Executive Summary

NCCI, as Pool and Plan Administrator of the Arkansas Workers Compensation Insurance Plan, is pleased to provide the Second Quarter 2008 Residual Market State Activity Report.

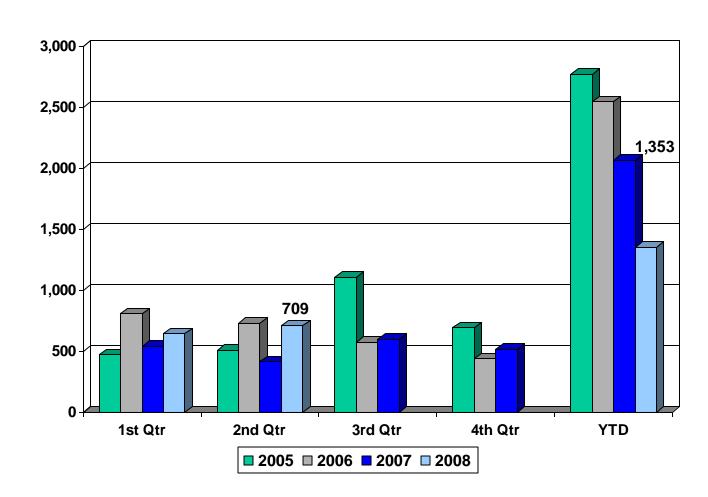
Readers will notice an update of the key measurement factors and issues relating to the operation of the Arkansas Plan. NCCI, has enhanced our data reporting tools to provide a more accurate picture of what is happening in your state.

If you have any questions or comments about this report, please feel free to contact any of the individuals listed below.

Terri Robinson, State Relations Executive (314) 843-4001 Chantel Weishaar, Technical Specialist (561) 893-3015

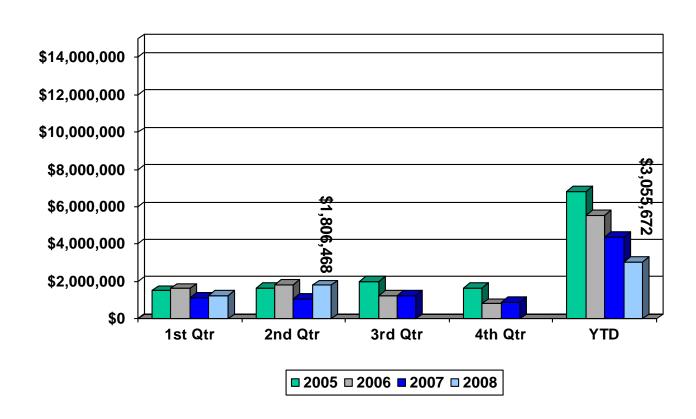
Arkansas Residual Market Total New Applications Bound 2005 vs. 2006 vs. 2007 vs. 2008

The number of new applications that are actually assigned to a Servicing Carrier or Direct Assignment Carrier (if applicable).



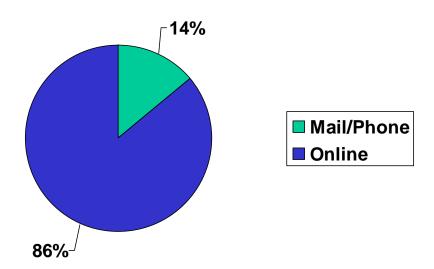
Arkansas Residual Market Total New Application Premium Bound 2005 vs. 2006 vs. 2007 vs. 2008

The total estimated premium on bound new applications assigned to as Servicing Carrier or Direct Assignment Carrier (if applicable).



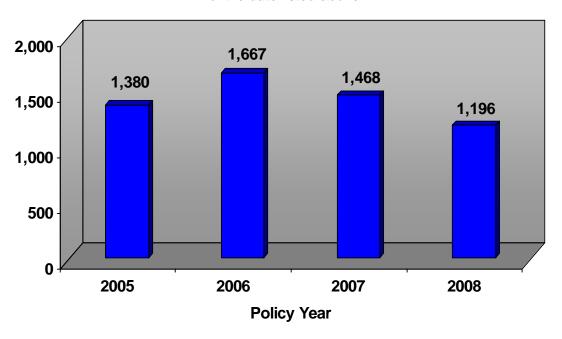
Percentage of New Applications Received by Submission Format Data through June 30, 2008

The total percentage of new applications received via online, phone or mail formats.



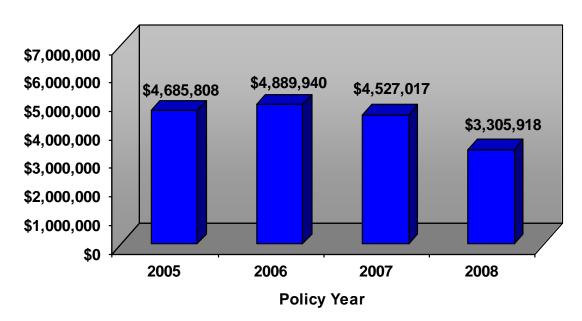
Residual Market Total Policy Counts Second Quarter Data for Policies Reported through June 30, 2008

Total Number of all Assigned Risk Plan Policies effective during this quarter and reported as of the date listed above.



Residual Market Total Premium Volume Second Quarter Data Reported through June 30, 2008

Total Amount of All Assigned Risk Plan Premium effective during this quarter and reported as of the date listed above.



Residual Market Total Policies and Premium in Force As of June 30, 2008 compared to prior year

This chart reflects the total number of policies and estimated premium in-force for this state as of the date shown above.

The other exhibits in this report describe quarterly and year-to-date data.

	2007	2008	2007 vs. 2008 #	2007 vs. 2008 %
Policy Count	6,105	5,574	-531	-8.7%
Premium Volume	\$18,710,212	\$13,638,590	-\$5,071,622	-27.1%

Residual Market Second Quarter 2008 Total Premium Distribution by Size of Risk Data Reported through June 30, 2008

The total number of assigned risk plan policies reported to NCCI for this quarter by Direct Assignment and Servicing Carriers in a premium range as of the date listed above.

Premium Interval	Policy Count	% of Total Policies	Total State Premium	% of Total Premium	Average Premium
\$0 - 2499	1,011	84.53%	\$893,470	27.03%	\$883
\$2500 - 4999	94	7.86%	\$334,475	10.12%	\$3,558
\$5000 - 9999	47	3.93%	\$325,817	9.86%	\$6,932
\$10000 - 19999	25	2.09%	\$349,409	10.57%	\$13,976
\$20000 - 49999	12	1.00%	\$405,030	12.25%	\$33,752
\$50000 - 99999	4	0.33%	\$296,841	8.98%	\$74,210
\$100000 - 199999	1	0.08%	\$102,077	3.09%	\$102,077
\$200000+	2	0.17%	\$598,799	18.11%	\$299,399
Total	1,196	100%	\$3,305,918	100%	\$2,764

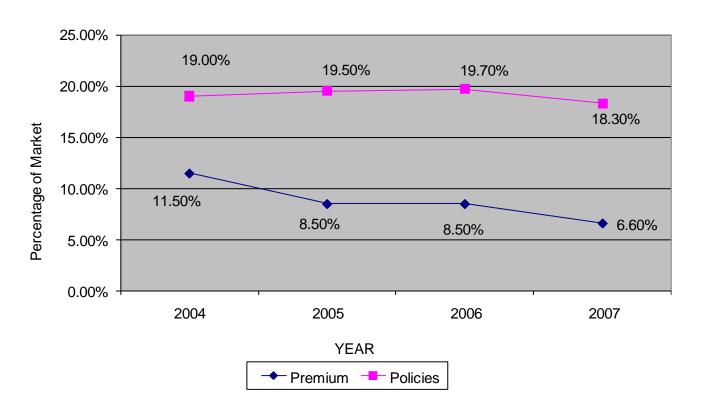
Residual Market Total Premium Distribution by Size of Risk Second Quarter 2007 Data for Comparison

The total number of assigned risk plan policies reported to NCCI for this quarter by Direct Assignment and Servicing Carriers in a premium range as of the date listed above.

Premium Interval	Policy Count	% of Total Policies	Total State Premium	% of Total Premium	Average Premium
\$0 - 2499	1,184	80.65%	\$983,129	21.72%	\$830
\$2500 - 4999	141	9.60%	\$489,123	10.80%	\$3,468
\$5000 - 9999	70	4.77%	\$492,912	10.89%	\$7,041
\$10000 - 19999	46	3.13%	\$658,882	14.55%	\$14,323
\$20000 - 49999	20	1.36%	\$663,274	14.65%	\$33,163
\$50000 - 99999	4	0.27%	\$272,261	6.01%	\$68,065
\$100000 - 199999	2	0.14%	\$288,474	6.37%	\$144,237
\$200000 +	1	0.07%	\$678,962	15.00%	\$678,962
Total	1,468	100%	\$4,527,017	100%	\$3,084

Total Arkansas Assigned Risk Plan Market Share

The percentage of total assigned risk plan policies and estimated annual premium, as compared to the total policies and estimated annual premium for the voluntary market, as of December 31,2007.



Residual Market Top 10 Classification Codes by Policy Count Data Reported through June 30, 2008

The top ten governing class codes by total policy count - policies issued by Servicing Carriers and Direct Assignment Carriers in this state as of the date listed above.

Rank	Code	Description	Policy Count	% of Policies
1	5645	Carpentry-Detached One Or Two Family Dwellings	332	27.76%
2	8810	Clerical Office Employees NOC	64	5.35%
3	5551	Roofing-All Kinds & Yard Employees	44	3.68%
4	5437	Carpentry-Installation Of Cabinet Work Or Interior Trim	30	2.51%
5	5474	Painting Or Paperhanging NOC	25	2.09%
6	5183	Plumbing NOC & Drivers	23	1.92%
7	6217	Excavation & Drivers	23	1.92%
8	5606	Contractor - Project Manager Construction Executive Construction Manager	22	1.84%
9	9014	Janitorial Services By Contractors-No Window Cleaning Above Ground Level	22	1.84%
10	8017	Store: Retail NOC	22	1.84%

Residual Market Top 10 Classification Codes by Premium Volume Data Reported through June 30, 2008

The top ten governing class codes by premium volume written on total policies issued by Servicing Carriers and Direct Assignment Carriers in this state as of the date listed above.

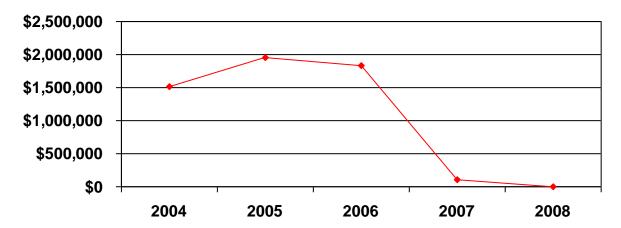
Rank	Code	Description	Premium	% of Premium
1	5403	Carpentry NOC	\$333,506	10.09%
2	5645	Carpentry-Detached One Or Two Family Dwellings	\$327,329	9.90%
3	2710	Sawmill	\$292,732	8.85%
4	5472	Asbestos Removal Operations - Pipe And Boiler Work Exclusively	\$129,131	3.91%
5	9063	YMCA YWCA YMHA Or YWHA Institution-All Employees	\$112,600	3.41%
6	7420	Aviation: Stunt Flying Racing Or Parachute Jumping: Flying Crew	\$77,739	2.35%
7	8868	College: Professional Employees	\$75,119	2.27%
8	9403	Garbage Ashes Or Refuse Collection	\$75,024	2.27%
9	5506	Street Or Road Construction: Paving Or Repaving	\$74,294	2.25%
10	8831	Hospital-Veterinary	\$66,901	2.02%

Collections/Indemnification

The following shows a comparison of gross written premium and uncollectible premium reported in Arkansas and the National Pool for Policy Years 2004-2008, obtained through NP-4 and NP-5 reports including traumatic and black lung claims, evaluated through First Quarter 2008.

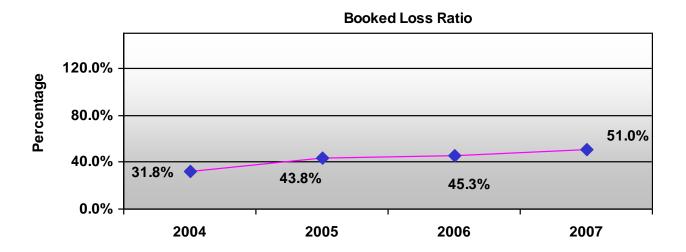
Arkansas	Gross Written Premium	Uncollectible Premium	Percentage
2004	\$28,709,458	\$1,519,354	5.3%
2005	\$25,361,972	\$1,961,036	7.7%
2006	\$22,893,977	\$1,839,407	8.0%
2007	\$17,919,445	\$100,394	0.6%
2008	\$2,837,406	\$0	0.0%
National Pool 2008	\$122,708,122	\$0	0.0%

Arkansas Uncollectible Premium



Arkansas Residual Market Reinsurance Pool Booked Loss Ratio Policy Year Financial Results through 1st Quarter 2008 for 2007 and prior years

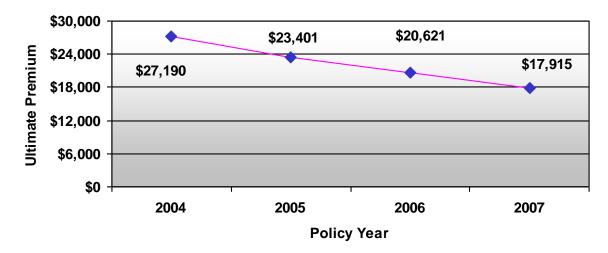
The ratio of total incurred losses to total earned premiums in a given period, in this state, expressed as a percentage .



Arkansas Residual Market Reinsurance Pool Ultimate Net Written Premium (Projected to Ultimate) (000's)

Policy Year Financial Results through 1st Quarter 2008 for 2007 and prior years*

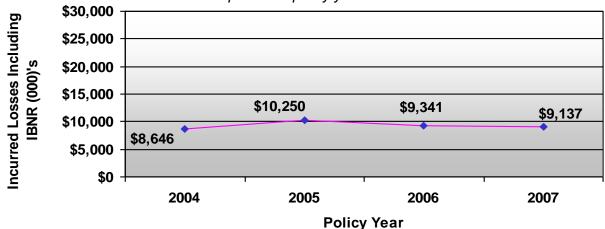
The premium charged by an insurance company for the period of time and coverage provided by an insurance contract in this state.



^{*-}Second Quarter 2008 Data will be available the end of October 2008 due to the timing of data reporting

Arkansas Residual Market Reinsurance Pool Net Operating Results (Projected to Ultimate) Incurred Losses

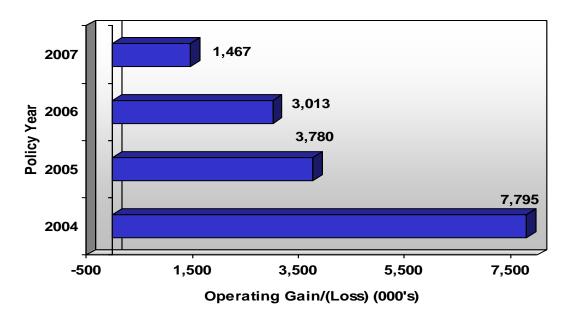
Policy Year Financial Results through 1st Quarter 2008 for 2007 and prior years*
Policy year incurred losses reflect paid losses, case reserves and IBNR reserves for policies
written in a particular policy year in that state.



Arkansas Residual Market Reinsurance Pool Net Operating Results (Projected to Ultimate) Estimated Net Operating Gain/(Loss) (000's)

Policy Year Financial Results through 1st Quarter 2008 for 2007 and prior years*

The financial statement presentation that reflects the excess of earned premium over incurred losses, less all operating expenses, plus all investment income in that state.



^{*-}Second Quarter 2008 Data will be available the end of October 2008 due to the timing of data reporting

Glossary of Terms

Combined Ratio-The combined loss ratio, expense ratio and dividend ratio, expressed as a sum for a given period. The formula for combined ratio is [(loss + loss adjustment expense)/earned premium] + [underwriting expenses/written premium].

EBNR (Earned But Not Reported) Premium Reserve-A projection of additional premium that is expected to be uncovered after auditing at the end of the policy.

Earned Premium or Premiums Earned-That portion of written premiums applicable to the expired portion of the time for which the insurance was in effect. When used as an accounting term, "premiums earned" describes the premiums written during a period plus the unearned premiums at the beginning of the period less the unearned premiums at the end of the period.

Incurred But Not Reported (IBNR)-

Pertaining to losses where the events which will result in a loss, and eventually a claim, have occurred, but have not yet been reported to the insurance company. The term may also include "bulk" reserves for estimated future development of case reserves.

Underwriting Gain/(Loss)-The financial statement presentation that reflects the excess of earned premium over incurred losses.

Applications Bound-The applications that are actually assigned to a Servicing Carrier or Direct Assignment Carrier (if applicable).

Premium Bound-The total estimated annual premium on bound applications.

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Executive Summary

NCCI, as Pool and Plan Administrator of the Arkansas Workers Compensation Insurance Plan, is pleased to provide the Annual 2007 Residual Market State Activity Report.

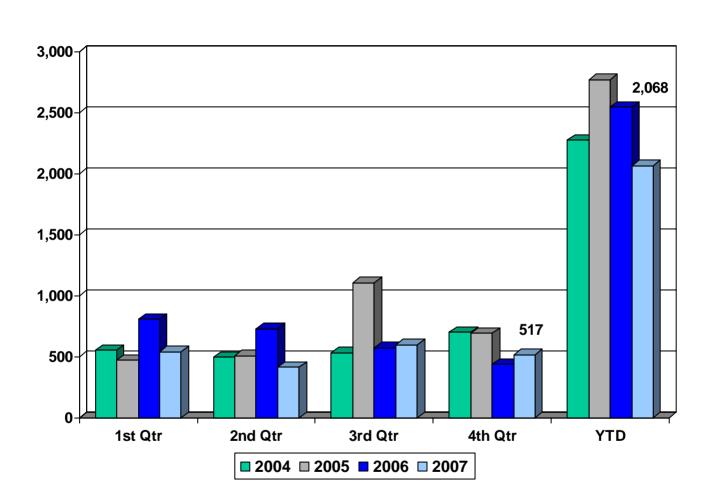
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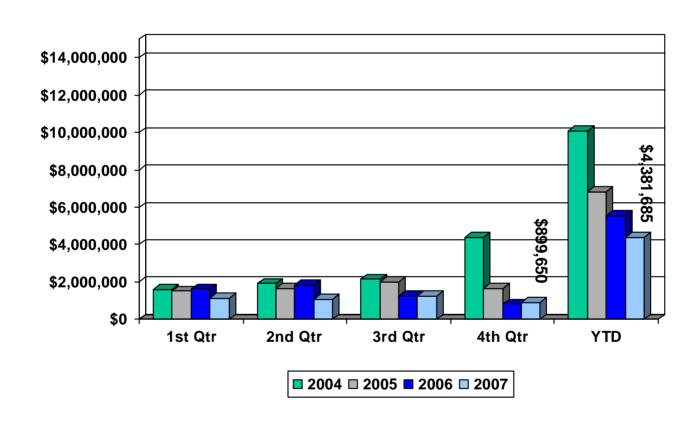
Arkansas Residual Market Total New Applications Bound 2004 vs. 2005 vs. 2006 vs. 2007

The number of new applications that are actually assigned to a Servicing Carrier or Direct Assignment Carrier (if applicable).



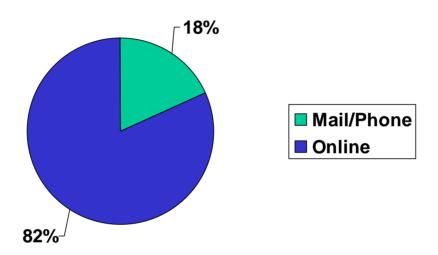
Arkansas Residual Market Total New Application Premium Bound 2004 vs. 2005 vs. 2006 vs. 2007

The total estimated premium on bound new applications assigned to as Servicing Carrier or Direct Assignment Carrier (if applicable).



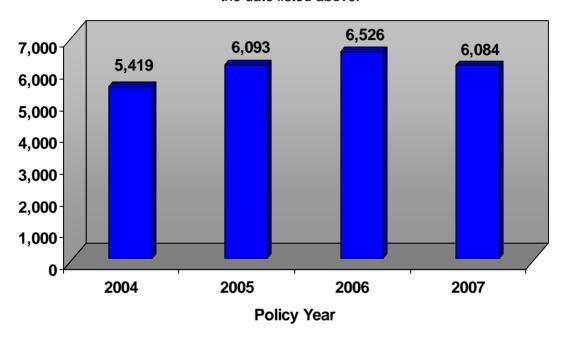
Percentage of New Applications Received by Submission Format Data through December 31, 2007

The total percentage of new applications received via online, phone or mail formats.



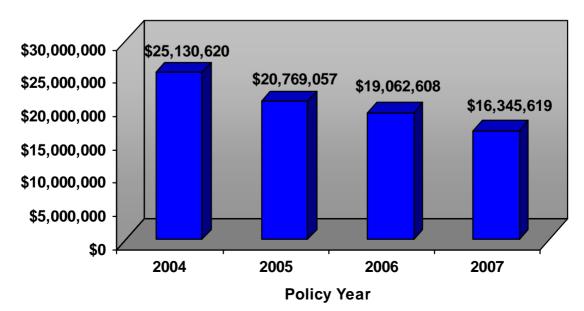
Residual Market Total Policy Counts Annual Data for Policies Reported through December 31, 2007

Total Number of all Assigned Risk Plan Policies effective during this year and reported as of the date listed above.



Residual Market Total Premium Volume Annual Data Reported through December 31, 2007

Total Amount of All Assigned Risk Plan Premium effective during this year and reported as of the date listed above.



Residual Market Total Policies and Premium in Force As of December 31, 2007 compared to prior year

This chart reflects the total number of policies and estimated premium in-force for this state as of the date shown above.

The other exhibits in this report describe quarterly and year-to-date data.

	2006	2007	2006 vs. 2007 #	2006 vs. 2007 %
Policy Count	6,439	6,026	-413	-6.4%
Premium Volume	\$19,048,104	\$16,231,176	-\$2,816,928	-14.8%

Residual Market Annual 2007 Total Premium Distribution by Size of Risk Data Reported through December 31, 2007

The total number of assigned risk plan policies reported to NCCI for the year by Direct Assignment and Servicing Carriers in a premium range as of the date listed above.

Premium Interval	Policy Count	% of Total Policies	Total State Premium	% of Total Premium	Average Premium
\$0 - 2499	4,995	82.1%	\$3,997,722	24.46%	\$800
\$2500 - 4999	518	8.51%	\$1,831,448	11.20%	\$3,535
\$5000 - 9999	292	4.80%	\$2,041,706	12.49%	\$6,992
\$10000 - 19999	155	2.55%	\$2,209,177	13.52%	\$14,252
\$20000 - 49999	89	1.46%	\$2,570,795	15.73%	\$28,885
\$50000 - 99999	24	0.39%	\$1,616,003	9.89%	\$67,333
\$100000 - 199999	9	0.15%	\$1,181,980	7.23%	\$131,331
\$200000+	2	0.03%	\$896,788	5.49%	\$448,394
Total	6,084	100%	\$16,345,619	100%	\$2,687

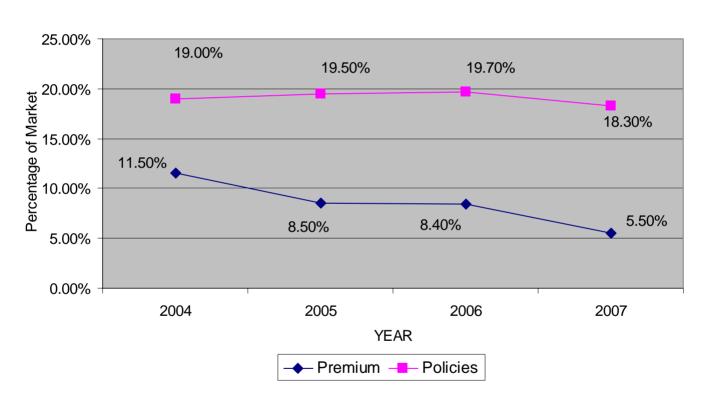
Residual Market Total Premium Distribution by Size of Risk Annual 2006 Data for Comparison

The total number of assigned risk plan policies reported to NCCI for the year by Direct Assignment and Servicing Carriers in a premium range as of the date listed above.

Premium Interval	Policy Count	% of Total Policies	Total State Premium	% of Total Premium	Average Premium
\$0 - 2499	5,168	79.19%	\$4,099,523	21.51%	\$793
\$2500 - 4999	641	9.82%	\$2,220,562	11.65%	\$3,464
\$5000 - 9999	375	5.75%	\$2,619,560	13.74%	\$6,985
\$10000 - 19999	205	3.14%	\$2,769,637	14.53%	\$13,510
\$20000 - 49999	87	1.33%	\$2,659,562	13.95%	\$30,569
\$50000 - 99999	37	0.57%	\$2,422,814	12.71%	\$65,481
\$100000 - 199999	11	0.17%	\$1,477,780	7.75%	\$134,343
\$200000 +	2	0.03%	\$793,170	4.16%	\$396,585
Total	6,526	100%	\$19,062,608	100%	\$2,921

Total Arkansas Assigned Risk Plan Market Share

The percentage of total assigned risk plan policies and premium, as compared to the total estimated annual premium and policies for the voluntary market, as of December 31,2007.



Residual Market Top 10 Classification Codes by Policy Count Data Reported through December 31, 2007

The top ten governing class codes by total policy count - policies issued by Servicing Carriers and Direct Assignment Carriers in this state as of the date listed above.

Rank	Code	Description	Policy Count	% of Policies
1	5645	Carpentry-Detached One Or Two Family Dwellings	1,531	25.16%
2	8810	Clerical NOC	340	5.59%
3	5551	Roofing-All Kinds & Yard Employees	199	3.27%
4	5474	Painting Or Paperhanging NOC	172	2.83%
5	5022	Masonry NOC	169	2.78%
6	8832	Physician & Clerical	143	2.35%
7	5437	Carpentry-Installation Of Cabinet Work Or Interior Trim	139	2.28%
8	5190	Electrical Wiring-Within Buildings	129	2.12%
9	5445	Wallboard Installation Within Buildings	119	1.96%
10	6217	Excavation & Drivers	119	1.96%

Residual Market Top 10 Classification Codes by Premium Volume Data Reported through December 31, 2007

The top ten governing class codes by premium volume written on total policies issued by Servicing Carriers and Direct Assignment Carriers in this state as of the date listed above.

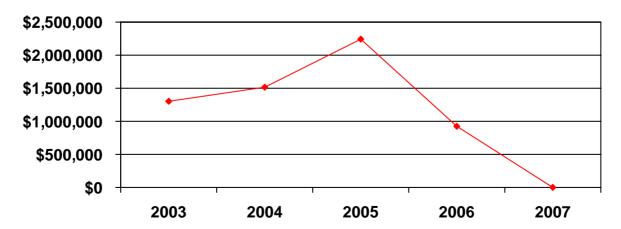
Rank	Code	description	Premium	% of Premium
1	8832	Physician & Clerical	\$2,152,419	5.64%
2	9094	Outdoor Guide Services	\$2,096,629	5.49%
3	5645	Carpentry-Detached One Or Two Family Dwellings	\$1,680,315	4.40%
4	2104	Seafood Processors	\$1,407,146	3.69%
5	2702	Logging Or Tree Removal - Non Mechanized Operations	\$1,200,974	3.15%
6	8835	Nursing-Home Health Public And Traveling-All Employees	\$1,194,043	3.13%
7	8017	Store: Retail NOC	\$1,145,684	3.00%
8	8824	Retirement Living Centers: Health Care	\$1,030,148	2.70%
9	8380	Automobile Service Or Repair Center	\$888,063	2.33%
10	7422	Aviation - NOC - Other Than Helicopters - Flying Crew	\$881,320	2.31%

Collections/Indemnification

The following shows a comparison of gross written premium and uncollectible premium reported in Arkansas and the National Pool for Policy Years 2003-2007, obtained through NP-4 and NP-5 reports including traumatic and black lung claims, evaluated through Third Quarter 2007.

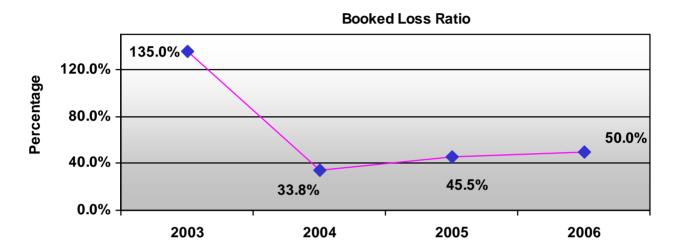
Arkansas	Gross Written Premium	Uncollectible Premium	Percentage
2003	\$29,478,724	\$1,301,414	4.4%
2004	\$28,702,878	\$1,508,150	5.3%
2005	\$25,488,806	\$2,236,696	8.8%
2006	\$23,323,765	\$929,814	4.0%
2007	\$13,611,432	\$723	0.0%
National Pool 2007	\$559,478,906	\$269,470	0.0%

Arkansas Uncollectible Premium



Arkansas Residual Market Reinsurance Pool Booked Loss Ratio Policy Year Financial Results through 3rd Quarter 2007 for 2006 and prior years

The ratio of total incurred losses to total earned premiums in a given period, in this state, expressed as a percentage .

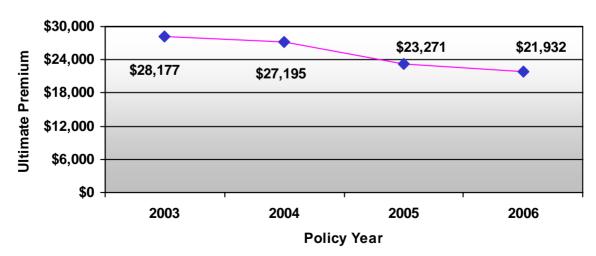


Arkansas Residual Market Reinsurance Pool Ultimate Net Written Premium (Projected to Ultimate) (000's)

Policy Year Financial Results through 3rd Quarter 2007 for 2006 and prior years*

The premium charged by an insurance company for the period of time and

coverage provided by an insurance company for the period of time and coverage provided by an insurance contract in this state.

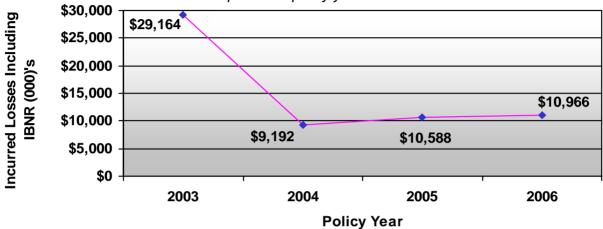


Arkansas Residual Market Reinsurance Pool Net Operating Results (Projected to Ultimate) Incurred Losses

Policy Year Financial Results through 3rd Quarter 2007 for 2006 and prior years*

Policy year incurred losses reflect paid losses, case reserves and IBNR reserves for policies

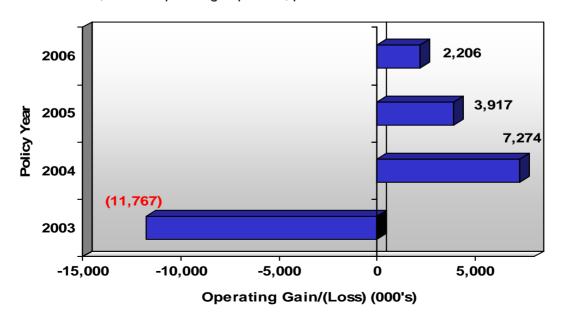
written in a particular policy year in that state.



Arkansas Residual Market Reinsurance Pool Net Operating Results (Projected to Ultimate) Estimated Net Operating Gain/(Loss) (000's)

Policy Year Financial Results through 3rd Quarter 2007 for 2006 and prior years*

The financial statement presentation that reflects the excess of earned premium over incurred losses, less all operating expenses, plus all investment income in that state.



^{*-}Fourth Quarter 2007 Data will be available the end of March 2008 due to the timing of data reporting

Glossary of Terms

Combined Ratio-The combined loss ratio, expense ratio and dividend ratio, expressed as a sum for a given period. The formula for combined ratio is [(loss + loss adjustment expense)/earned premium] + [underwriting expenses/written premium].

EBNR (Earned But Not Reported) Premium Reserve-A projection of additional premium that is expected to be uncovered after auditing at the end of the policy.

Earned Premium or Premiums
Earned-That portion of written
premiums applicable to the expired
portion of the time for which the
insurance was in effect. When
used as an accounting term,
"premiums earned" describes the
premiums written during a period
plus the unearned premiums at the
beginning of the period less the
unearned premiums at the end of
the period.

Incurred But Not Reported (IBNR)-

Pertaining to losses where the events which will result in a loss, and eventually a claim, have occurred, but have not yet been reported to the insurance company. The term may also include "bulk" reserves for estimated future development of case reserves.

Underwriting Gain/(Loss)-The financial statement presentation that reflects the excess of earned premium over incurred losses.

Applications Bound-The applications that are actually assigned to a Servicing Carrier or Direct Assignment Carrier (if applicable).

Premium Bound-The total estimated annual premium on bound applications.

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Executive Summary

NCCI, as Pool and Plan Administrator of the Arkansas Workers Compensation Insurance Plan, is pleased to provide the First Quarter 2007 Residual Market State Activity Report.

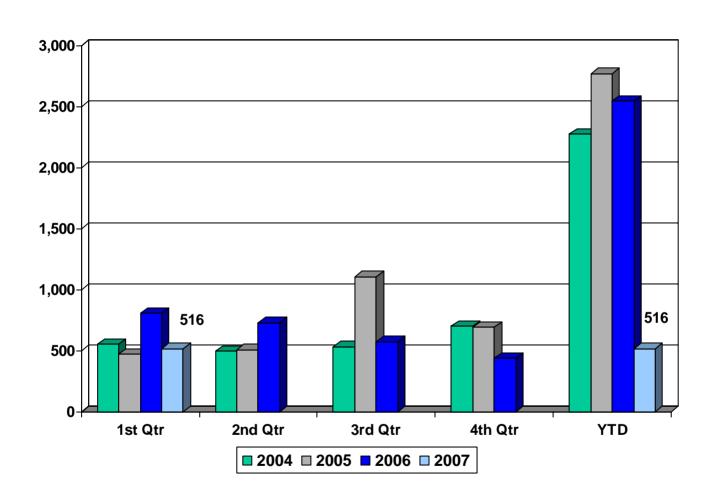
Readers will notice an update of the key measurement factors and issues relating to the operation of the Arkansas Plan. NCCI, has enhanced our data reporting tools to provide a more accurate picture of what is happening in your state.

If you have any questions or comments about this report, please feel free to contact any of the individuals listed below.

Terri Robinson, State Relations Executive (314) 843-4001 Chantel Weishaar, Technical Specialist (561) 893-3015

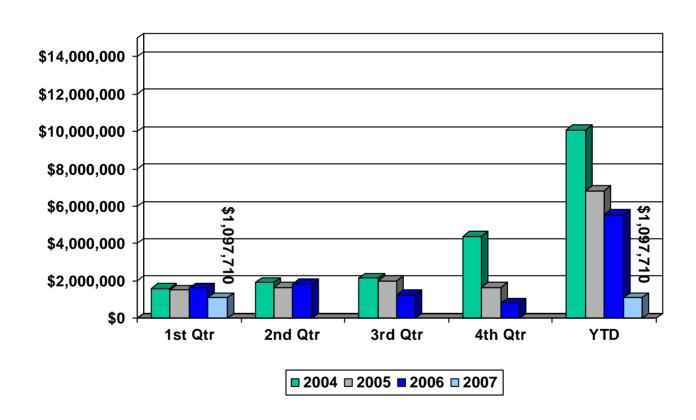
Arkansas Residual Market Total New Applications Bound 2004 vs. 2005 vs. 2006 vs. 2007

The number of new applications that are actually assigned to a Servicing Carrier or Direct Assignment Carrier (if applicable).



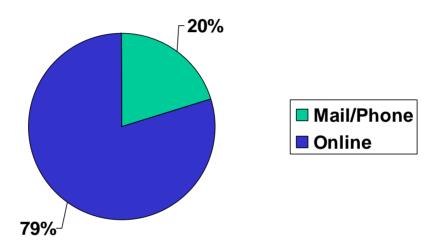
Arkansas Residual Market Total New Application Premium Bound 2004 vs. 2005 vs. 2006 vs. 2007

The total estimated First Quarter premium on bound new applications assigned to as Servicing Carrier or Direct Assignment Carrier (if applicable).



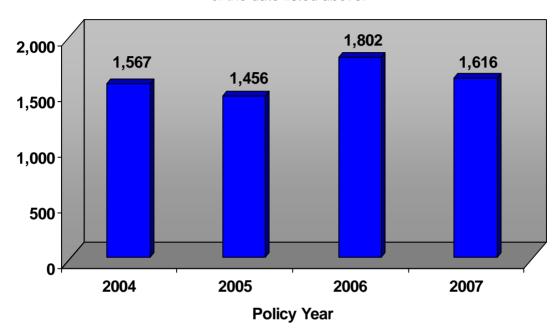
Percentage of New Applications Received by Submission Format Data through March 31, 2007

The total percentage of new applications received via online, phone or mail formats.



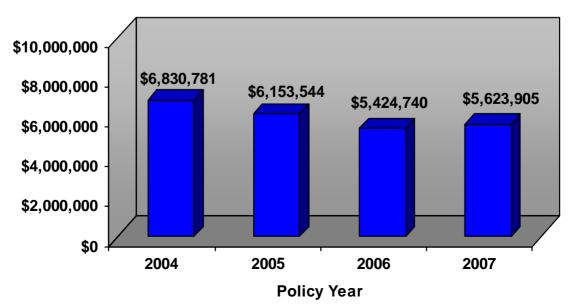
Residual Market Total Policy Counts First Quarter Data for Policies Reported through March 31, 2007

Total Number of all Assigned Risk Plan Policies effective during this quarter and reported as of the date listed above.



Residual Market Total Premium Volume First Quarter Data Reported through March 31, 2007

Total Amount of All Assigned Risk Plan Premium effective during this quarter and reported as of the date listed above.



Residual Market Total Policies and Premium in Force As of March 31, 2007 compared to prior year

This chart reflects the total number of policies and estimated premium in-force for this state as of the date shown above.

The other exhibits in this report describe quarterly and year-to-date data.

	2006	2007	2006 vs. 2007 #	2006 vs. 2007 %
Policy Count	6,357	6,229	-128	-2.0%
Premium Volume	\$20,091,391	\$18,968,935	-\$1,122,456	-56%

Residual Market First Quarter 2007 Total Premium Distribution by Size of Risk Data Reported through March 31, 2007

The total number of assigned risk plan policies reported to NCCI for the quarter by Direct Assignment and Servicing Carriers in a premium range as of the date listed above.

Premium Interval	Policy Count	% of Total Policies	Total State Premium	% of Total Premium	Average Premium
\$0 - 2499	1,264	78.22%	\$1,012,785	18.01%	\$801
\$2500 - 4999	157	9.72%	\$564,449	10.04%	\$3,595
\$5000 - 9999	92	5.69%	\$638,451	11.35%	\$6,939
\$10000 - 19999	59	3.65%	\$801,535	14.25%	\$13,585
\$20000 - 49999	31	1.92%	\$931,856	16.57%	\$30,059
\$50000 - 99999	8	0.5%	\$562,629	10%	\$70,328
\$100000 - 199999	4	0.25%	\$560,497	9.97%	\$140,124
\$200000 +	1	0.06%	\$551,703	9.81%	\$551,703
Total	1,616	100%	\$5,623,905	100%	\$3,480

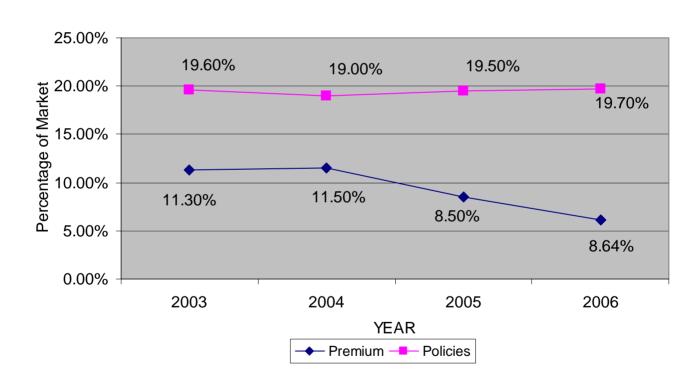
Residual Market Total Premium Distribution by Size of Risk First Quarter 2006 Data for Comparison

The total number of assigned risk plan policies reported to NCCI for the quarter by Direct Assignment and Servicing Carriers in a premium range as of the date listed above.

Premium Interval	Policy Count	% of Total Policies	Total State Premium	% of Total Premium	Average Premium
\$0 - 2499	1,362	75.58%	\$1,054,969	19.45%	\$774
\$2500 - 4999	199	11.04%	\$696,990	12.85%	\$3,502
\$5000 - 9999	143	7.94%	\$991,819	18.28%	\$6,935
\$10000 - 19999	63	3.5%	\$843,899	15.56%	\$13,395
\$20000 - 49999	23	1.28%	\$704,244	12.98%	\$30,619
\$50000 - 99999	7	0.39%	\$458,323	8.45%	\$65,474
\$100000 - 199999	5	0.28%	\$674,496	12.43%	\$134,899
\$200000 +	0	0%	\$0	0%	\$0
Total	1,802	100%	\$5,424,740	100%	\$3,010

Total Arkansas Assigned Risk Plan Market Share

The percentage of total assigned risk plan policies and premium, as compared to the total estimated annual premium and policies for the voluntary market, as of December 31, 2005.



Residual Market Top 10 Classification Codes by Policy Count Data Reported through March 31, 2007

The top ten governing class codes by total policy count - policies issued by Servicing Carriers and Direct Assignment Carriers in this state as of the date listed above.

Rank	Code	Description	Policy Count	% of Policies
1	5645	Carpentry-Detached One Or Two Family Dwellings	314	19.43%
2	8810	Clerical NOC	103	6.37%
3	5474	Painting Or Paperhanging NOC	52	3.22%
4	5022	Masonry NOC	44	2.72%
5	5190	Electrical Wiring-Within Buildings	42	2.6%
6	8832	Physician & Clerical	41	2.54%
7	5437	Carpentry-Installation Of Cabinet Work Or Interior Trim	37	2.29%
8	5551	Roofing-All Kinds	36	2.23%
9	8279	Stable Or Breeding Farm	36	2.23%
10	5445	Wallboard Installation Within Buildings	35	2.17%

Residual Market Top 10 Classification Codes by Premium Volume Data Reported through March 31, 2007

The top ten governing class codes by premium volume written on total policies issued by Servicing Carriers and Direct Assignment Carriers in this state as of the date listed above.

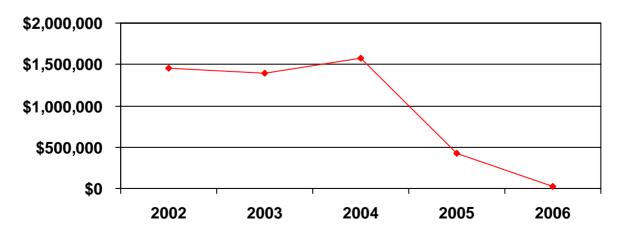
Rank	Code	description	Premium	% of Premium
1	5183	Plumbing NOC	\$594,738	10.58%
2	5645	Carpentry-Detached One Or Two Family Dwellings	\$476,628	8.48%
3	7720	Police Officers & Drivers	\$284,319	5.06%
4	7229	Trucking-Long Distance Hauling	\$185,792	3.3%
5	2003	Bakery & Drivers Route Supervisors	\$151,822	2.7%
6	0083	Farm: Cattle Or Livestock Raising NOC	\$131,285	2.33%
7	1624	Quarry NOC	\$128,135	2.28%
8	8868	College: Professional Employees	\$125,496	2.23%
9	5474	Painting Or Paperhanging NOC	\$120,993	2.15%
10	9110	Charitable Or Welfare - All Other Employees And Drivers	\$108,807	1.93%

Collections/Indemnification

The following shows a comparison of gross written premium and uncollectible premium reported in Arkansas and the National Pool for Policy Years 2002-2007, obtained through NP-4 and NP-5 reports including traumatic and black lung claims, evaluated through Fourth Quarter 2006.

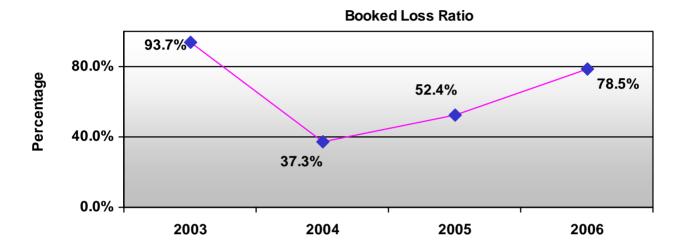
Arkansas	Gross Written Premium	Uncollectible Premium	Percentage
2002	\$23,006,436	\$1,452,188	6.3%
2003	\$29,432,949	\$1,387,971	4.7%
2004	\$28,701,192	\$1,570,823	5.5%
2005	\$26,115,683	\$426,115	1.6%
2006	\$19,979,555	\$26,419	0.1%
National Pool 2006	\$910,283,518	\$1,478,374	0.2%

Arkansas Uncollectible Premium



Arkansas Residual Market Reinsurance Pool Booked Loss Ratio Policy Year Financial Results through 4th Quarter 2006 for 2006 and prior years

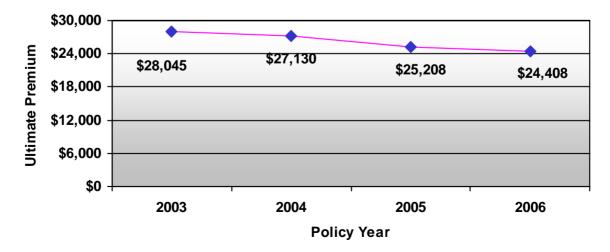
The ratio of total incurred losses to total earned premiums in a given period, in this state, expressed as a percentage .



Arkansas Residual Market Reinsurance Pool Ultimate Net Written Premium (Projected to Ultimate) (000's)

Policy Year Financial Results through 4th Quarter 2006 for 2006 and prior years*

The premium charged by an insurance company for the period of time and coverage provided by an insurance contract in this state.



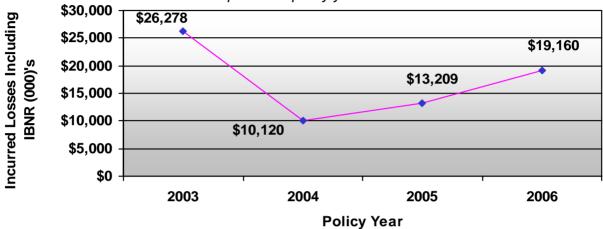
^{*-}First Quarter 2007 Data will be available the end of July 2007 due to the timing of data reporting

Arkansas Residual Market Reinsurance Pool Net Operating Results (Projected to Ultimate) Incurred Losses

Policy Year Financial Results through 4th Quarter 2006 for 2006 and prior years*

Policy year incurred losses reflect paid losses, case reserves and IBNR reserves for policies

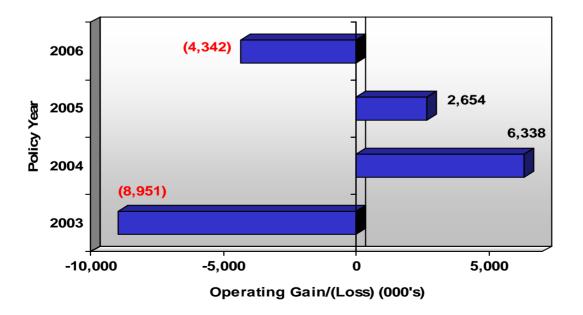
written in a particular policy year in that state.



Arkansas Residual Market Reinsurance Pool Net Operating Results
(Projected to Ultimate) Estimated Net Operating Gain/(Loss) (000's)

Policy Year Financial Results through 4th Quarter 2006 for 2006 and prior years*

The financial statement presentation that reflects the excess of earned premium over incurred losses, less all operating expenses, plus all investment income in that state.



^{*-}First Quarter 2007 Data will be available the end of July 2007 due to the timing of data reporting

Glossary of Terms

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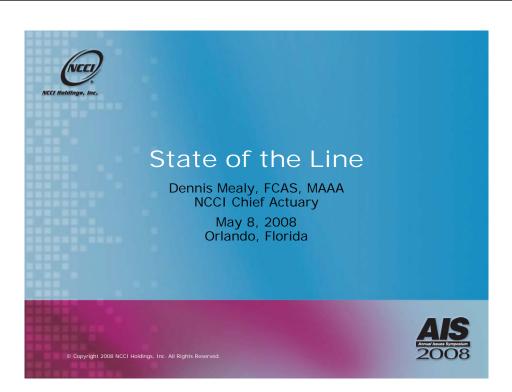
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Applications Bound-The applications that are actually assigned to a Servicing Carrier or Direct Assignment Carrier (if applicable).

Premium Bound-The total estimated annual premium on bound applications.



- I. Property/Casualty Results
- II. Workers Compensation Results
- III. Current Topics of Interest
- IV. Concluding Remarks



Property/Casualty Results



P/C Industry Net Written Premium—A Rare Decline

Private Carriers

Line of Business (LOB)	2005	2006	2007р	2006– 2007p Change
Personal Auto	\$159.5 B	\$160.2 B	\$160.8 B	0.4%
Homeowners	\$52.2 B	\$54.5 B	\$53.8 B	-1.4%
Other Liability (Incl Prod Liab)	\$42.7 B	\$45.7 B	\$46.1 B	1.0%
Workers Compensation	\$37.8 B	\$38.7 B	\$37.6 B	-3.0%
Commercial Multiple Peril	\$29.6 B	\$31.7 B	\$31.4 B	-1.0%
Commercial Auto	\$26.5 B	\$26.7 B	\$25.9 B	-3.0%
Fire & Allied Lines (Incl EQ)	\$17.4 B	\$20.0 B	\$21.8 B	9.0%
All Other Lines	\$59.8 B	\$65.9 B	\$63.5 B	-3.6%
Total P/C Industry	\$425.5 B	\$443.5 B	\$440.8 B	-0.6%

p Preliminar

urce: Workers Compensation, NCCI;
All Other Lines, Best's Review Preview and ISO



Another Year of Underwriting Gain

Net Combined Ratio—Private Carriers

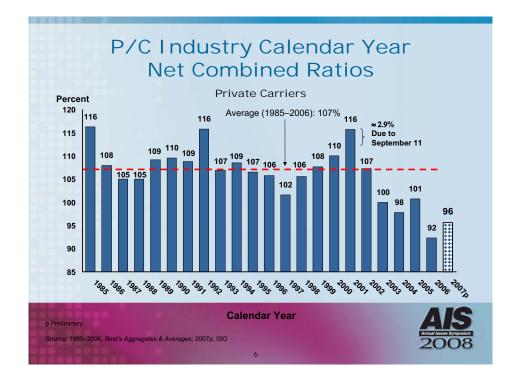
	Calendar Year			
Line of Business (LOB)	2005	2006	2007p	
Personal Auto	95%	96%	98%	
Homeowners	100%	90%	95%	
Other Liability (Incl Prod Liab)	113%	95%	99%	
Workers Compensation	103%	93%	99%	
Commercial Multiple Peril	97%	93%	94%	
Commercial Auto	92%	92%	95%	
Fire & Allied Lines (Incl EQ)	104%	81%	83%	
All Other Lines	111%	86%	89%	
Total P/C Industry	101%	92%	96%	

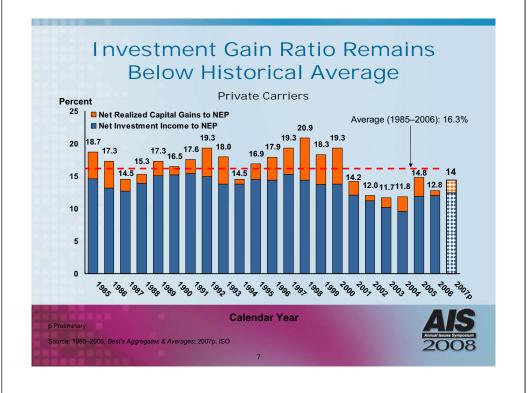
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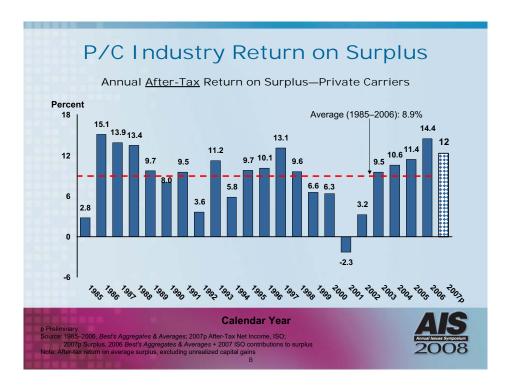
Source: Workers Compensation, NCCI;

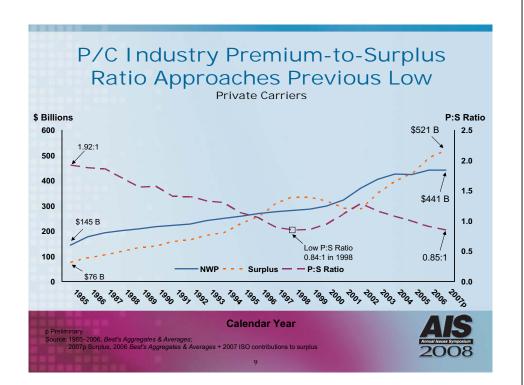
All Other Lines, Best's Review Preview and ISO











Contributions to Surplus

Private Carriers

	2005	2006	2007p
Underwriting Gains/Losses	\$ (5.6) B	\$ 31.1 B	\$ 19.0 B
Investment Income	\$ 49.7 B	\$ 52.3 B	\$ 54.6 B
Realized Capital Gains	\$ 9.7 B	\$ 3.5 B	\$ 9.0 B
Other Income	\$ 1.0 B	\$ 1.2 B	\$ (1.0) B
Unrealized Capital Gains	\$ (3.4) B	\$ 20.6 B	\$ (0.5) B
Federal Taxes	\$ (10.7) B	\$ (22.4) B	\$ (19.7) B
Shareholder Dividends	\$ (15.6) B	\$ (24.7) B	\$ (32.0) B
Contributed Capital	\$ 14.4 B	\$ 3.8 B	\$ 3.2 B
Other Changes to Surplus	\$ (5.1) B	\$ (4.9) B	\$ (0.9) B
Total	\$ 34.5 B	\$ 60.4 B	\$ 31.7 B

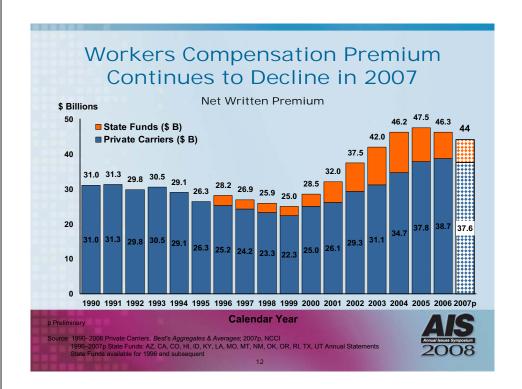
Preliminary

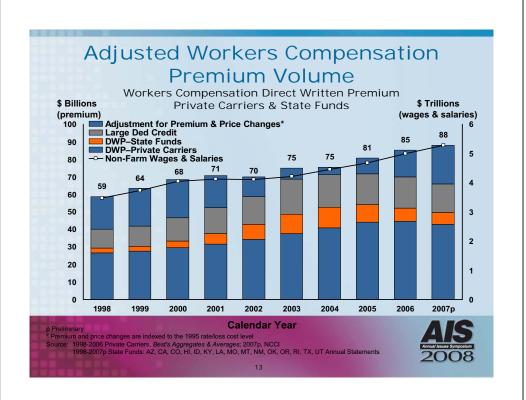
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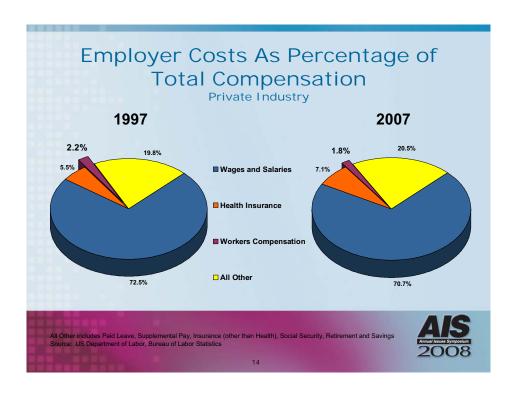
AIS
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2008

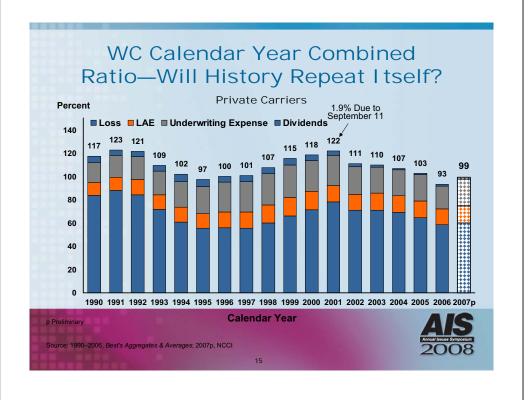
Workers Compensation
Results

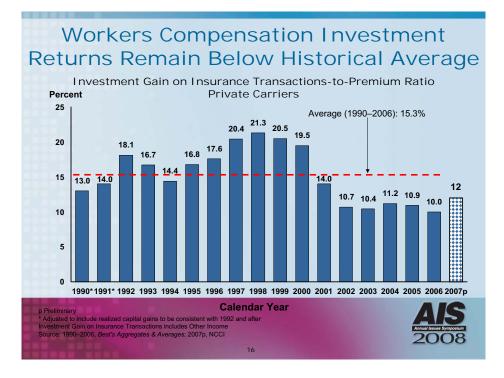


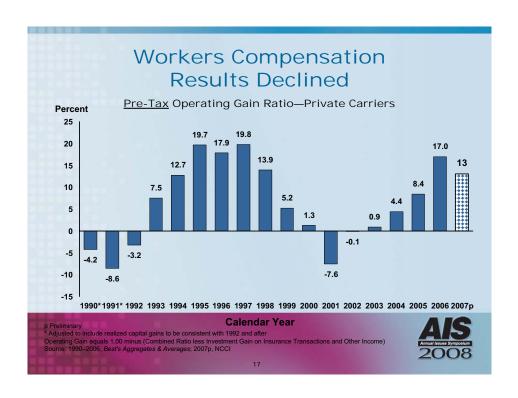


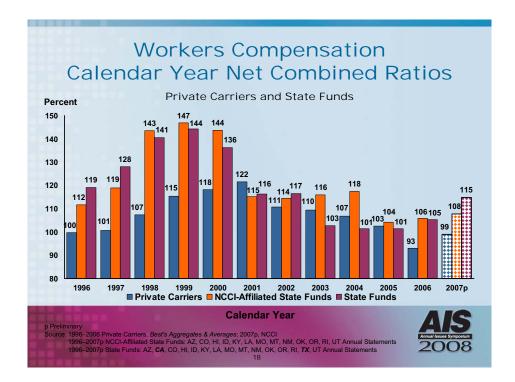


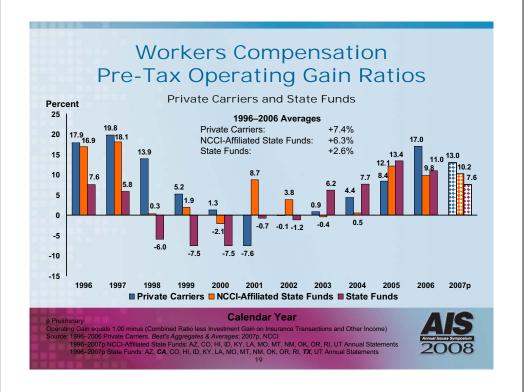


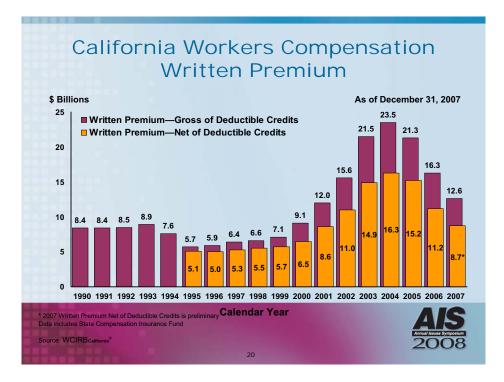


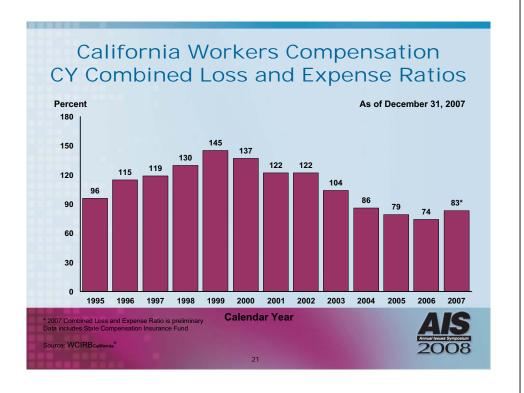






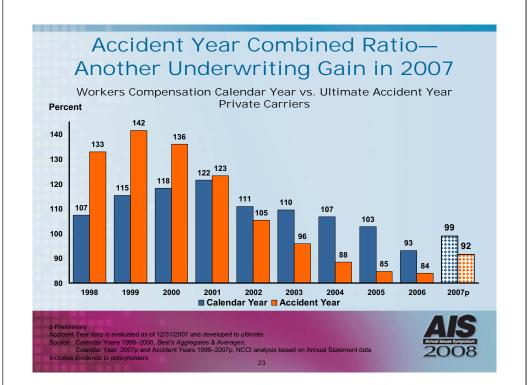


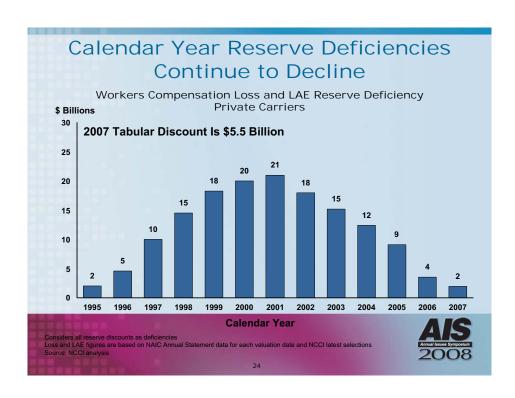


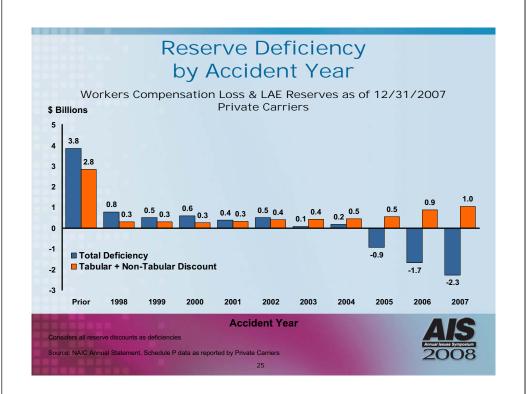


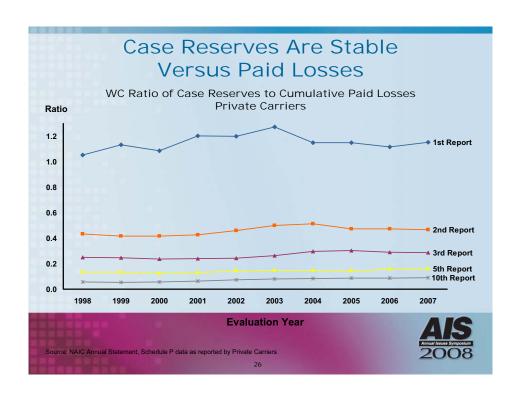


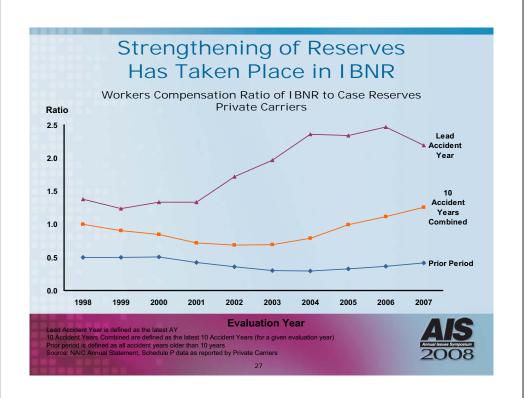


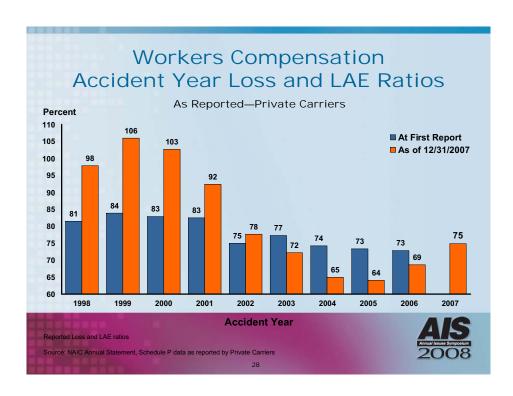


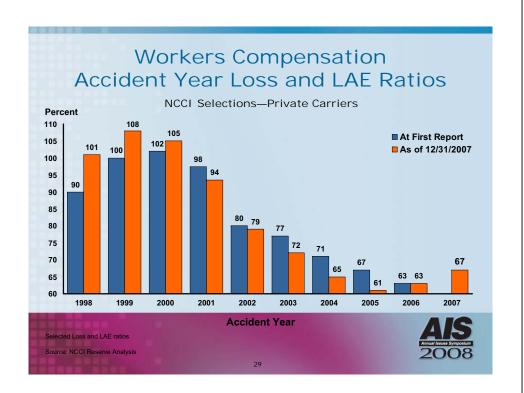






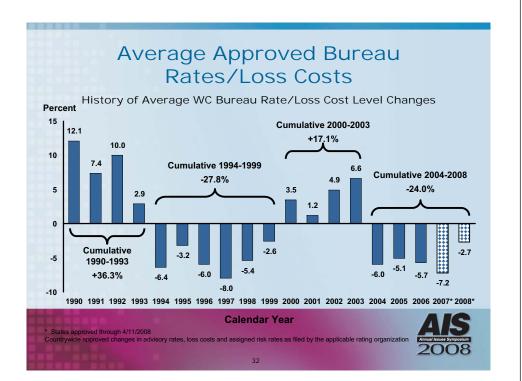


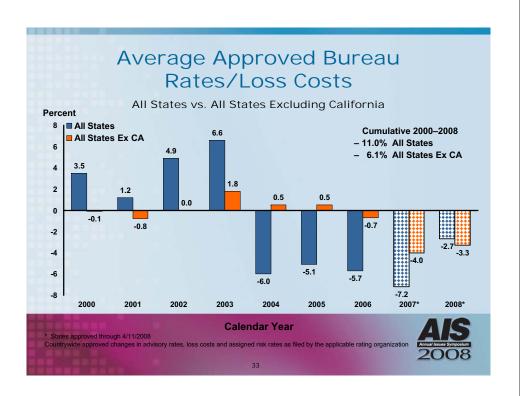




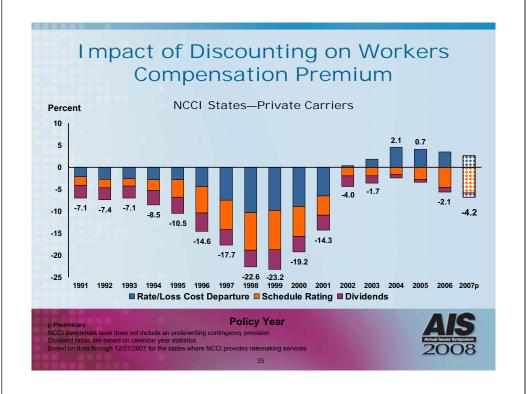


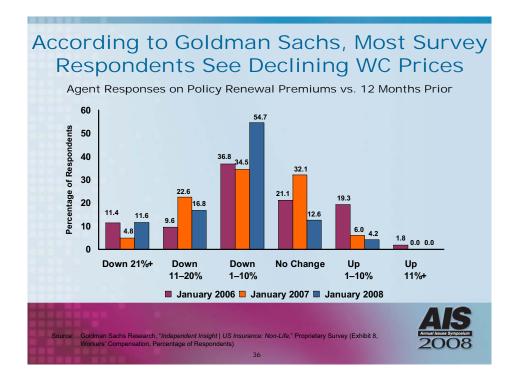




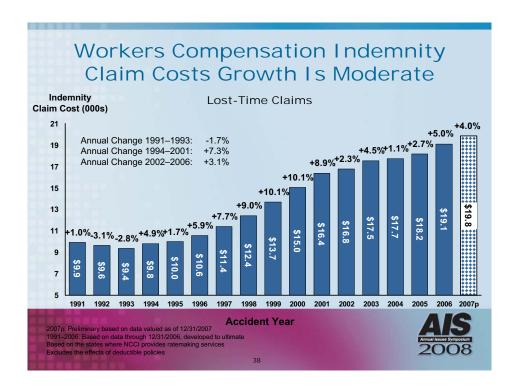


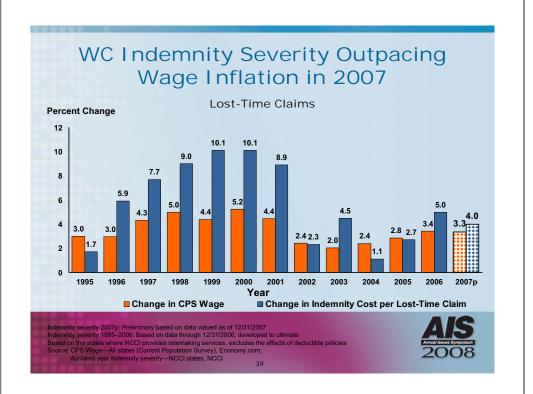




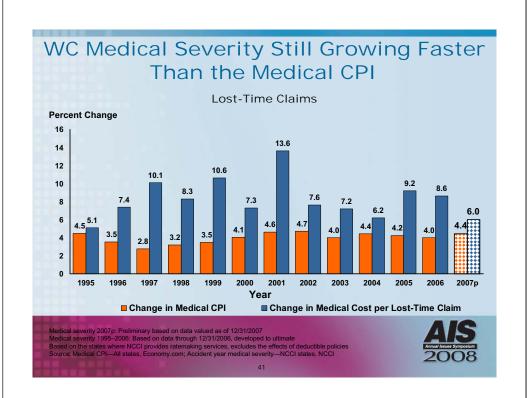


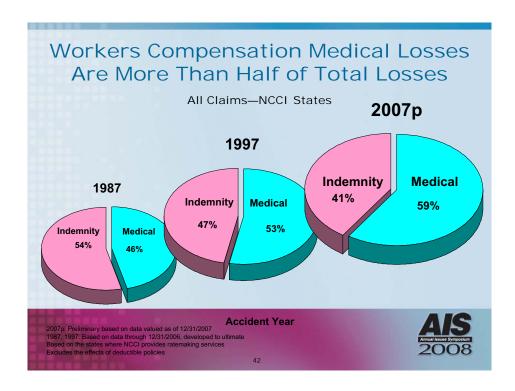
Workers Compensation Loss Drivers

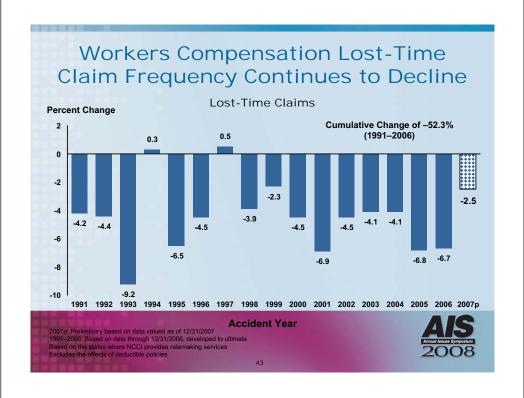


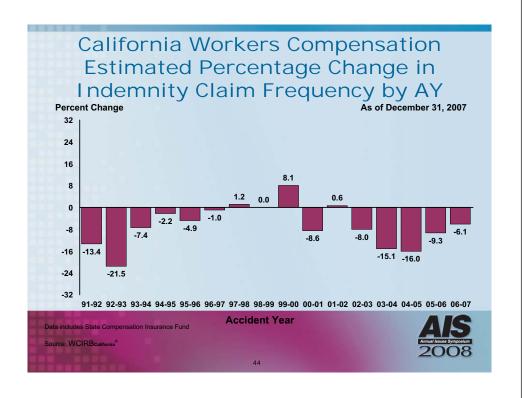


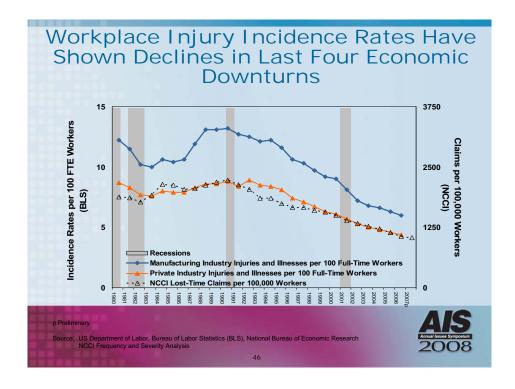


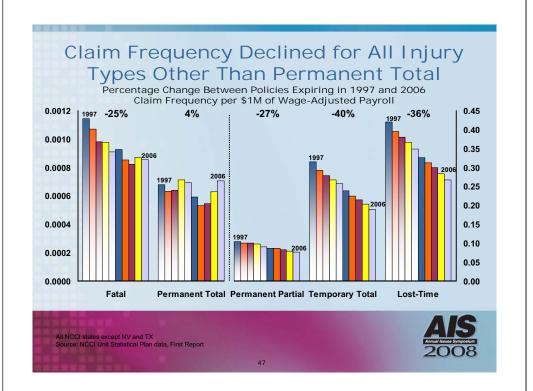


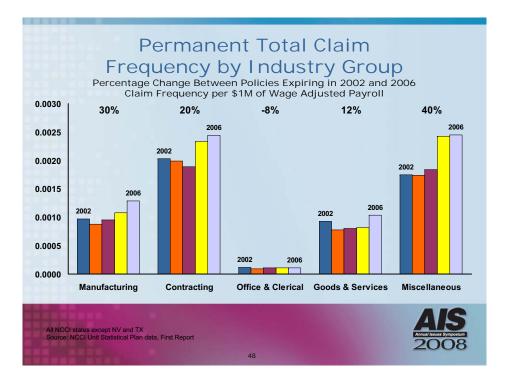


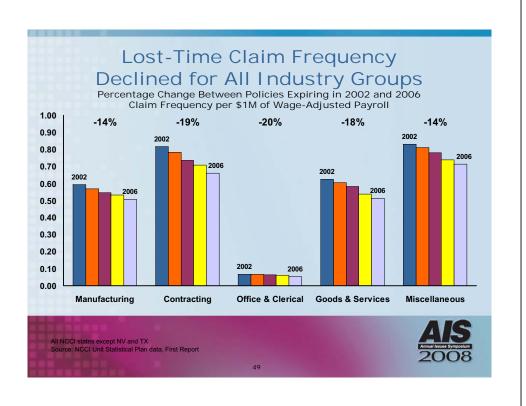


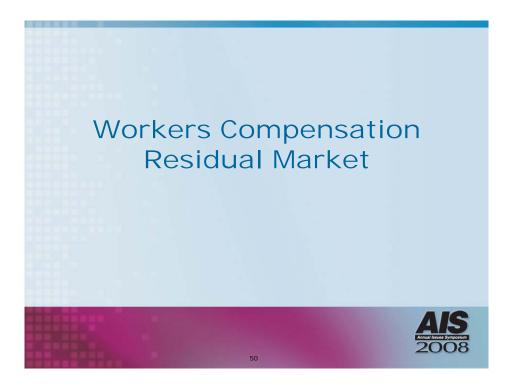


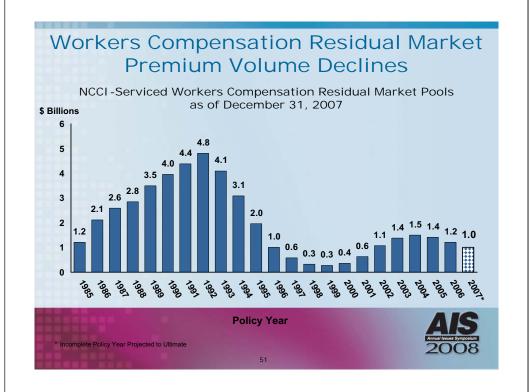


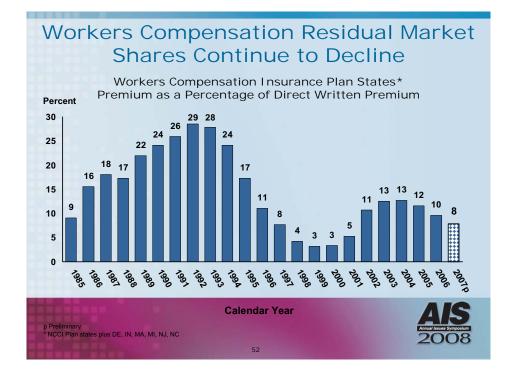


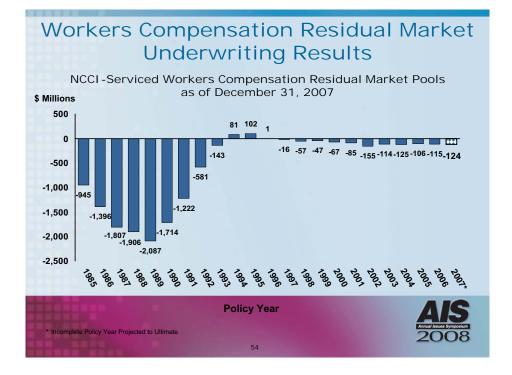












Residual Markets Are Depopulating in Most States

First Quarter 2008 vs. First Quarter 2007

	Size	of F	Risk	2007	2008	Change
\$	0	-	\$ 2,499	36,146	32,868	-9%
\$	2,500	-	\$ 4,999	5,064	4,458	-12%
\$	5,000	-	\$ 9,999	3,332	3,092	-7%
\$	10,000	_	\$ 49,999	3,187	2,682	-16%
\$	50,000	-	\$ 99,999	379	268	-29%
\$ 1	00,000	and	over	167	121	-28%
Tota	al			48,275	43,489	-10%

Total number of assigned risk policies in force includes residual market policies for:
AK, AL, AR, AZ, CT, DC, GA, ID, IL, IA, IN, KS, MS, NV, NH, NM, OR, SC, SD, VT, VA

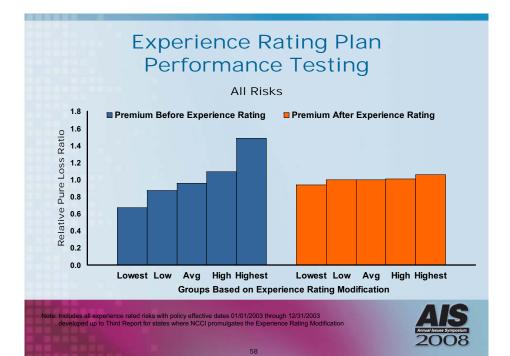


Current Topics of Interest

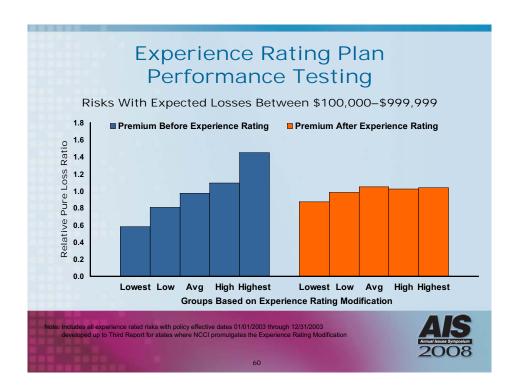


Experience Rating Plan

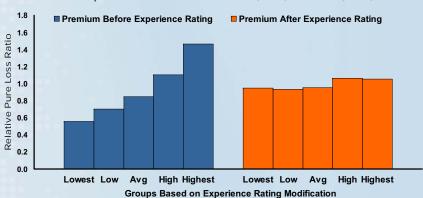
- NCCI is conducting a major review of the Experience Rating Plan over the next two years
- Review will involve analysis of all parameters
- * Additionally, we will investigate eligibility criteria
- Analysis to date reveals the plan is performing very well across hazard groups and policy sizes



Experience Rating Plan Performance Testing Risks With Expected Losses Between \$10,000-\$99,999 ■ Premium Before Experience Rating ■ Premium After Experience Rating 1.6 1.4 1.2 1.0 0.8 0.6 0.4 0.2 Lowest Low Avg High Highest Lowest Low Avg High Highest **Groups Based on Experience Rating Modification** Includes all experience rated risks with policy effective dates 01/01/2003 through 12/31/2003 developed up to Third Report for states where NCCI promulgates the Experience Rating Modification



Experience Rating Plan Performance Testing Risks With Expected Losses Between \$1,000,000-\$10,000,000



lote: Includes all experience rated risks with policy effective dates 01/01/2003 through 12/31/2003 developed up to Third Report for states where NCCI promulgates the Experience Rating Modification

AIS
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2008

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Terrorism Risk Insurance Program Reauthorization Act of 2007 (TRIPRA)



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Terrorism Risk Insurance Provisions

Provision	Original (TRIA)	Extension (TRIEA)	Revision and Extension (TRIPRA)
- H - H	Most commercial lines	All current TRIA lines (except comm. auto,	No new lines of insurance added
Coverage	(med. mal., financial guaranty specifically excluded)	surety, prof. liability, farmowners, burglary and theft)	Eliminated distinction between foreign and domestic terrorism
Retentions	7%-10%-15%	17.5%-20%	20%
Fed. Contrib./ Insurer Co-Pay	90%-10%	90%-10% (yr. 1) 85%-15% (yr. 2)	85%-15%
		\$5M (yr. 1 through 3/31/06)	
Federal Program Payment Trigger	\$5M	\$50M (yr. 1 after 3/31/06)	\$100M
		\$100M (yr. 2)	
Expiration	12/31/05	12/31/07	12/31/14

NCCI Response to TRIPRA

- NCCI has received updated terrorism model results from EQECAT
- A national filing is anticipated around June 1 with a proposed effective date of September 1, 2008
- Separate state filings will be made in states that have not approved the DTEC provision
- Statistical Code 9740 will be redefined from foreign terrorism to all certified acts of terrorism
- Statistical Code 9741 will be redefined from DTEC to other than certified acts of terrorism

DTEC—Domestic Terrorism, Earthquake, Catastrophic Industrial Accidents



Concluding Remarks



Questions and More Information

- Questions on the State of the Line presentation? E-mail us at stateoftheline@ncci.com
- Download the complete presentation materials and watch a video overview of the State of the Line at ncci.com



In Summary

Positives

Negatives

- Underwriting results
- Frequency continues to decline
- Strongest reserve position in over
 Medical costs still above two decades
- Residual market depopulation continues
- Terrorism backstop renewed for seven years

- Low investment returns continue to put pressure on underwriting results
- inflation
- Uncertain political fallout for industry
- Underwriting cycle

