

New

Mid-term Payroll Adjustment to Help Customers

We realize that many of your customers' businesses are temporarily closing or slowing down due to COVID-19. Arrowhead Workers' Compensation Programs wants to help.

If the policyholder is currently on an installment plan and would like consideration for reduced "estimated annual payrolls" and reduced future installments, please complete the attached form and return it to your underwriter for further consideration. By completing this form to reflect the insured's current situation, we may be in a position to adjust any future installments (this assumes that the insured is not on their final installment).

If the policyholder is currently paying on an MSR (Monthly Self Reporter) basis, they should be less impacted because they can report payroll based on their actual payroll for the given month and thus pay premium based on actual. For example: if the insured is temporarily shut down and they have 0 payroll they simply report 0 payroll and pay 0 premium for that month. It is important that the insured continue to report (even if 0 payroll), if possible.

Any downward adjustments will be re-evaluated after the COVID impact has passed and business resumes under "normal" conditions.

If you have any questions, please reach out to your underwriter.

Sincerely,

Becky Pinto

President - Workers' Compensation Programs

Please be advised that any and all information, comments, analysis and/or recommendations set forth above relative to the possible impact of COVID-19 on potential insurance coverage or other policy implications are intended solely for informational purposes and should not be relied upon as legal advice. We have no authority to make coverage decisions, as that ability rests solely with the issuing carrier. Therefore, all claims should be submitted to the carrier for evaluation. The positions expressed herein are opinions only and are not to be construed as any form of guarantee or warranty. Finally, given the extremely dynamic and rapidly evolving COVID-19 situation, comments above do not take into account any applicable pending or future legislation introduced with the intent to override, alter or amend current policy language.

Exposure Modification

COVID-19 Response

In response to the National Emergency due to COVID response and to assist in easing the potential resultant burden on our insureds, Arrowhead will endeavor to amend payroll/exposure based on the insured's estimate of economic impact over their policy term. Please provide the insured's best estimate based on the current situation, and we will review for consideration of change(s). Any downward adjustments will be re-evaluated after the COVID impact has passed and business resumes under "normal" conditions.

Please complete this form and send it to WCEndorsements@ArrowheadGrp.com. Note, e-mail stating this is approved will suffice for signature if preparer is unable to print and/or scan.

Insured Name _____

Policy Number(s) _____

Class Code	Current Payroll Basis	Revised Payroll (Full Term Estimate)

As evidenced by your signature below, you do hereby certify that the above information is accurate to the best of your knowledge and that you agree to provide requested documentation on actual annual exposures upon request from your insurance carrier.

Preparer's Name (please print)

Email Address

Preparer's Signature

Date

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