WORKERS' COMP PROGRAM SCORECARD · PREPARED FOR KESTREL MANUFACTURING GROUP

# Your program scored 42 out of 100

**42**/100

**INCONSISTENT**

**You have the pieces. They do not connect, and they do not hold across locations.**

## ESTIMATED ANNUAL SAVINGS OPPORTUNITY

# $135,680

Conservative range $110,080 to $161,280 · $452 per employee per year · $45,227 per location per year

At a 6 percent net margin, this is the equivalent of **$2,261,333 in revenue** your company has to produce to cover it.

Annual premium $640,000 · Current mod 1.28 · Loss free minimum 0.71

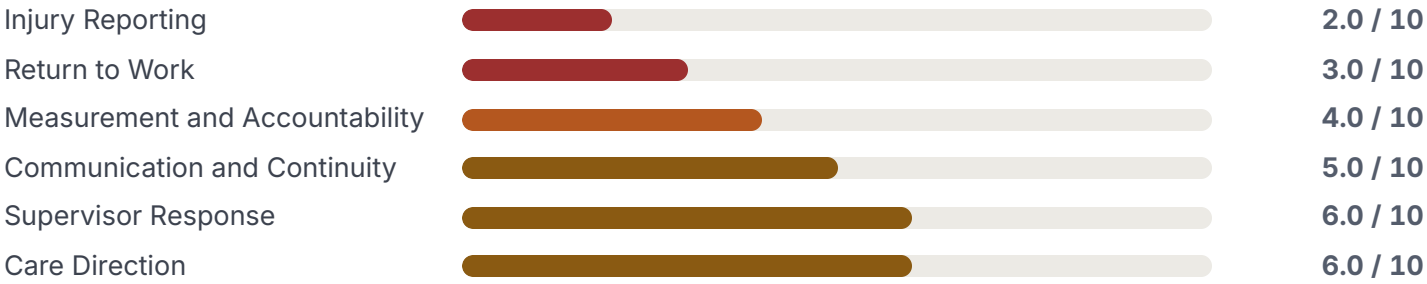
**Minimum mod you supplied + premium you supplied**

## MAXIMUM THEORETICAL SAVINGS OPPORTUNITY

# $285,000

The maximum shows the estimated premium difference between your current mod and your loss free minimum mod. It represents the theoretical upper end of the opportunity, not what we expect you to save.

## WHERE YOUR PROGRAM STANDS, BY AREA




©2008–2026 Amaxx LLC. All Rights Reserved under International Copyright Law

**YOUR SINGLE BIGGEST LEAK · INJURY REPORTING · $43,856 PER YEAR**

You told me a supervisor reports an injury when they have time, which may be the next day or later. That delay is decided by workload, not by your program.

Delay is the most expensive free decision in workers' comp. A claim reported late has already lost control of the medical direction, the narrative, and the employee's expectations, and none of those are recoverable later at any price.

Ranked by dollar impact rather than by score, so this is not always your lowest scoring area. A weaker score in a lower cost area moves less money.

**ONE DISTINCTION WORTH NAMING**

You told me you hold a claim review rather than an execution review. Most sophisticated employers pick that answer believing it is the right one, so it is worth being precise about the difference.

A claim review looks at outcomes after the fact. It asks what happened on this file and what it will cost. An execution review looks at behavior while it can still be changed. It asks whether the first hour was handled the same way at every location last month, and who owns it where it was not.

The first is accounting. The second is the only one that changes next year's number.

©2008–2026 Amaxx LLC. All Rights Reserved under International Copyright Law

### WHAT YOU CURRENTLY CANNOT PROVE

- Indemnity rate
- Litigation rate
- Large loss claim rate
- What share of injured employees return to work within 4 days

You reported that you cannot currently see and review these from your own reporting without asking your carrier or broker to build the analysis. That makes it harder to spot variation, demonstrate improvement, and get leadership support where it is needed.

### THREE MOVES, IN COST PRIORITY ORDER

1. Set a same shift reporting standard with one defined route, name one owner per location, and start measuring your average lag time this month.
2. Build a written modified duty job bank with at least ten real tasks, and put it in the hands of your treating provider before the next injury.
3. Assign a named contact owner and a contact schedule for every open claim, and log every contact.

©2008–2026 Amaxx LLC. All Rights Reserved under International Copyright Law

### HOW THIS NUMBER WAS CALCULATED

This starts from the approximate annual premium you entered, $640,000. Dividing it by your current mod of 1.28 gives an estimated mod rated premium basis of $500,000. That is an estimate rather than a manual premium: your actual policy premium can include schedule credits and debits, expense components, and carrier pricing adjustments that sit outside the experience mod. You supplied a minimum or loss free mod of 0.71. We used the value you gave us rather than calculating one, so this figure rests on your number. Against your current mod of 1.28, that is $285,000, which we calculate by comparing the premium at your current mod with the premium at your minimum mod. Your score places you in the Inconsistent band, which carries a modeled savings rate of 17.2 to 25.2 percent. Applying that rate to your annual premium of $640,000 produces an estimated annual opportunity of $110,080 to $161,280, with a midpoint of $135,680. Because that estimate sits below the $285,000 theoretical ceiling your mod and loss free minimum imply, the score based estimate is the one used. Your loss runs and rating data would replace more of these assumptions with actual figures, and would let us test this estimate against your real claim experience.

One note on the method. The score that selects this recovery range includes how well you can measure your own program, while the split of dollars across areas below deliberately excludes it, because not measuring something does not itself cost money. Measurement is in the rate and out of the attribution, on purpose.

**Validate this against your actual claim data**

This assessment identifies areas where additional structure and consistency may improve financial results. A Program Diagnostic Review uses actual claim and rating data to validate the opportunity, identify where the current system can provide stronger support, and prioritize the changes with the greatest financial impact.

The next step is a review of the claim data with WorkPartners USA.

©2008–2026 Amaxx LLC. All Rights Reserved under International Copyright Law