

Texas Nonsubscriber Option Data Request for Employers Currently in Workers' Compensation

Please provide the information below to PartnerSource.

Requested Data	Texas
Loss Runs – 5 years of Texas data, in Excel, including: <ul style="list-style-type: none"> • date of accident, • accident description, • amounts paid/reserved/incurred • amounts by type of incurred (i.e. medical, indemnity, expense), & • other available fields 	✓
Texas Payroll – Broken out by WC classification code: e.g. 8810 – Clerical, 8742 – Outside Salespersons, etc.	✓
Employees – Total number including full time & part time.	✓
Locations – Total number.	✓
Workers' Compensation Insurance	
Carrier Name	✓
Current Retention	✓
Texas Premium (Actual or estimated allocation)	✓
Policy Term	✓
Third Party Administration	
TPA Name	✓
Annual fees or fee per claim type	✓
Transportation	
Describe, e.g. long haul trucking, employee use of company vehicles, etc.	✓
If you have truck drivers, indicate the number of such employees.	✓
Optional Actuarial Information – If available.	Optional

Contact:

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