

## Loss Run for LHC768461 - ALUMNI STAFFING LLC AND ALUMNI HEALTHCARE STAFFING DALLAS LLC

## For all years

Insured Name:			C AND ALUMNI NG DALLAS LLC	Policy No:	LHC768461 0	Term: 3/4/2018 - 3/4/2019			
Claim No:	7030124408	Status:	O Date of Loss:	6/29/2018	Location of Loss:	Pendleton, IN			
			Date Reported	: 6/29/2018	Loss Description:	Claimant alleges medical care	was improper, i	not enough and someti	mes nonexistent
			<u>Suffix</u>			<u>Status</u>	<u>Paid</u>	Reserve	Incurred
			00			0	\$3,250.44	\$17,501.00	\$20,751.44
Claim No:	7030124409	Status:	C Date of Loss:	6/29/2018	Location of Loss:	New Castle, IN			
			Date Reported	: 6/29/2018	Loss Description:	negligent pain management			
			<u>Suffix</u>			<u>Status</u>	<u>Paid</u>	<u>Reserve</u>	<u>Incurred</u>
			00			С	\$0.00	\$0.00	\$0.00
Claim No:	7030124915	Status:	O Date of Loss:	7/17/2018	Location of Loss:	New Castle, IN			
			Date Reported	: 7/17/2018	Loss Description:	Alleging medical care improp	er, insufficient a		ent
			<u>Suffix</u>			<u>Status</u>	<u>Paid</u>	Reserve	<u>Incurred</u>
			00			0	\$0.00	\$8,434.00	\$8,434.00
Claim No:	7030127371	Status:	C Date of Loss:	9/25/2018	Location of Loss:	•			
	Date Reported: 9/27/2018 Loss Descript				Loss Description:	Lawsuit alleging Insured failed to treat injuries, provide surgery, maintain prescriptions			
			<u>Suffix</u>			<u>Status</u>	<u>Paid</u>	<u>Reserve</u>	<u>Incurred</u>
			00			С	\$0.00	\$0.00	\$0.00
Claim No:	7030127470	Status:	C Date of Loss:	10/4/2018	Location of Loss:	Cumberland, MD			
			Date Reported	: 10/4/2018	Loss Description:	Alleging ankle disfigurement	due to imprope	r care	
			<u>Suffix</u>			<u>Status</u>	<u>Paid</u>	<u>Reserve</u>	Incurred
			00			С	\$0.00	\$0.00	\$0.00
Claim No:	7030128870	Status:	C Date of Loss:	11/14/2018	Location of Loss:	Unknown, IN			
			Date Reported	: 11/14/2018	Loss Description:	Lawsuit alleging improper me	edical treatment		
			<u>Suffix</u>			<u>Status</u>	<u>Paid</u>	<u>Reserve</u>	Incurred
			00			С	\$1,156.53	\$0.00	\$1,156.53
Claim No: — — — — —	7030131607	Status:	O Date of Loss:	1/7/2019	Location of Loss:	Unknown, IN			
			Date Reported	: 2/13/2019	Loss Description:	inadequate medical treatmen	it		
			<u>Suffix</u>			<u>Status</u>	<u>Paid</u>	<u>Reserve</u>	Incurred
			00			О	\$3,527.36	\$9,020.00	\$12,547.36

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## For all years

Insured Name:	ALUMNI STAFFING LLC AND ALUMNI HEALTHCARE STAFFING DALLAS LLC			Policy No:	LHC768461 0	Term: 3/4/2018 - 3/4/2019			
Claim No:	7030131700	Status:	C Date of Loss:	11/7/2018	Location of Loss:	New Castle, IN			
			Date Reported	: 2/13/2019	Loss Description:	alleged medical malpraction	ce		
			<u>Suffix</u>			<u>Status</u>	<u>Paid</u>	<u>Reserve</u>	<u>Incurred</u>
			00			C	\$0.00	\$0.00	\$0.00
Claim No:	7030131802	Status:	C Date of Loss:	2/20/2019	Location of Loss:	Indianapolis, IN			
			Date Reported	: 2/20/2019	Loss Description:	•	cal care		
			<u>Suffix</u>			Status	<u>Paid</u>	<u>Reserve</u>	Incurred
			00			C	\$0.00	\$0.00	\$0.00
						Policy Gross Incurred	<u>Paid</u>	Reserve	Incurred
						Indemnity	\$0.00	\$7,503.00	\$7,503.00
						<u>Expense</u>	\$7,934.33	\$27,452.00	\$35,386.33
						<u>Tota</u>	\$7,934.33	\$34,955.00	\$42,889.33
						Total Gross Incurrec	<u>Paid</u>	<u>Reserve</u>	Incurred
						<u>Indemnity</u>	\$0.00	\$7,503.00	\$7,503.00
						<u>Expense</u>	\$7,934.33	\$27,452.00	\$35,386.33
						<u>Tota</u>	\$7,934.33	\$34,955.00	\$42,889.33

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