



Account Experience Report

Whitney Manor Operating Company, LLC; Whitney Rehabilitation
Care Center

Report Date: 8/10/2018

Data as of: 8/9/2018

Account Number: 149242

For External Use Only

Policy Period	# of Claims	OB Reserve	OB Paid	OB Incurred
3/25/2015-1/1/2016, LTC-6634-15	2	\$0.00	\$0.00	\$0.00
3/25/2015-1/1/2016, MPX-3862-15	0	\$0.00	\$0.00	\$0.00
1/1/2017-1/1/2018, LTC-000247-0117	29	\$243,540.86	\$6,463.14	\$250,004.00
1/1/2017-1/1/2018, LTX-000067-0117	0	\$0.00	\$0.00	\$0.00
Total All Years	31	\$243,540.86	\$6,463.14	\$250,004.00

Policy Period	Retn/Ded Reserve	Retn/Ded Paid	Retn/Ded Incurred	Total Reserve	Total Paid	Total Incurred
3/25/2015-1/1/2016, LTC-6634-15	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00
3/25/2015-1/1/2016, MPX-3862-15	Not Tracking	Not Tracking	Not Tracking	\$0.00	\$0.00	\$0.00
1/1/2017-1/1/2018, LTC-000247-0117	N/A	N/A	N/A	\$243,540.86	\$6,463.14	\$250,004.00
1/1/2017-1/1/2018, LTX-000067-0117	Not Tracking	Not Tracking	Not Tracking	\$0.00	\$0.00	\$0.00
Total All Years	\$0.00	\$0.00	\$0.00	\$243,540.86	\$6,463.14	\$250,004.00



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Policy Number: LTC-6634-15 Policy Period: 3/25/2015 to 1/1/2016

PerClaimDed	AggDed	PerClaimLimit	AggLimit
N/A	N/A	\$1,000,000.00	\$3,000,000.00

Coverage Type: GL

Claim #: 0AB155830	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Lucibello, Barbara	Claim	6/21/2017	Closed	10/21/2015		2/9/2016

Description/Location: insd employee suffered injuries from fall in parking lot

DED	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Insured	OB	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
Whitney Manor Operating Compan		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total OB :		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL FOR CLAIM 0AB155830:		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Claim #: 0AB141817	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Delahuntey, Irena	Incident	9/29/2015	Closed	9/28/2015		9/28/2015

Description/Location: fell down a step when one of the steps broke.

Total for all Claims Coverage: GL	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
LTC-6634-15, 3/25/2015 to 1/1/2016	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total for LTC-6634-15:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00



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Policy Number: MPX-3862-15 Policy Period: 3/25/2015 to 1/1/2016

No Claims Exist

PerClaimLimit	AggLimit
\$1,000,000.00	\$1,000,000.00



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PerClaimDed	AggDed	PerClaimLimit	AggLimit
N/A	N/A	\$1,000,000.00	\$3,000,000.00

Coverage Type: Other

Claim #: 0AB216788	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: 2016 PCEs	Incident	12/29/2017	Closed	1/1/2017		12/29/2017

Description/Location: 2016 PCEs

Total for all Claims Coverage: Other	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
LTC-000247-0117, 1/1/2017 to 1/1/2018	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00



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PerClaimDed	AggDed	PerClaimLimit	AggLimit
N/A	N/A	\$1,000,000.00	\$3,000,000.00

Coverage Type: Professional Liability

Claim #: 0AB200866	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Kramarczuk, Ted	Suit		Open	2/17/2016		6/13/2017

Description/Location: resident fell asleep and fell out of his wheelchair

	DED	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Insured	OB	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
Whitney Manor Operating Compan		\$100,000.00	\$19,363.00	\$0.00	\$5,637.00	\$125,000.00
Total OB :		\$100,000.00	\$19,363.00	\$0.00	\$5,637.00	\$125,000.00
TOTAL FOR CLAIM 0AB200866:		\$100,000.00	\$19,363.00	\$0.00	\$5,637.00	\$125,000.00

Claim #: 0AB215043	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Aloj, Jane Ricci	Suit		Open	9/20/2015	12/4/2017	12/4/2017

Description/Location: Alleged wrongful death resulting from fall

	DED	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Insured	OB	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
Whitney Manor Operating Compan		\$100,000.00	\$24,173.86	\$0.00	\$826.14	\$125,000.00
Total OB :		\$100,000.00	\$24,173.86	\$0.00	\$826.14	\$125,000.00
TOTAL FOR CLAIM 0AB215043:		\$100,000.00	\$24,173.86	\$0.00	\$826.14	\$125,000.00



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Claim #: 0AB216779	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
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Claimant: Kearney, June	Claim		Open	12/26/2017		12/29/2017
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Description/Location: fall

DED	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Insured	OB	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
Whitney Manor Operating Compan		\$4.00	\$0.00	\$0.00	\$0.00	\$4.00
Total OB :		\$4.00	\$0.00	\$0.00	\$0.00	\$4.00

TOTAL FOR CLAIM 0AB216779:		\$4.00	\$0.00	\$0.00	\$0.00	\$4.00
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Claim #: 0AB211869	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
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Claimant: Swartz, Edmund	Incident	10/24/2017	Closed	10/20/2017		10/23/2017
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Description/Location: resident had a gall at facility

Claim #: 0AB216902	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
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Claimant: Nunez	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
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Description/Location: fall

Claim #: 0AB216960	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
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Claimant: Nunez, Miguell	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
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Description/Location: fall



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Claim #:	0AB216893	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Swartz, Edmond	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
Description/Location:	fall						

Claim #:	0AB216956	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Haxton, Robert	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
Description/Location:	fall						

Claim #:	0AB216958	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Bassett	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
Description/Location:	skin tear						

Claim #:	0AB216933	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Hennessy	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
Description/Location:	fall						

Claim #:	0AB216882	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Kendricks	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
Description/Location:	abuse						



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Claim #:	0AB216891	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Bednarczyk	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: abuse

Claim #:	0AB216946	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Stephania, Angelo	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: fall

Claim #:	0AB216876	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Modley	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: other

Claim #:	0AB216908	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Caldwall	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: neglect

Claim #:	0AB216935	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Turies, Katherine	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: fall



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Claim #:	0AB216929	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Elli, Nater	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
Description/Location:	other						

Claim #:	0AB216885	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Gampayolo	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
Description/Location:	abuse						

Claim #:	0AB216953	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	McHugh, John	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
Description/Location:	fall						

Claim #:	0AB216941	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Cavalop	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
Description/Location:	abuse						

Claim #:	0AB216880	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant:	Iaccebelli	Incident	12/29/2017	Closed	12/29/2017		12/29/2017
Description/Location:	other						



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Claim #: 0AB216938	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Eaton	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: bruise

Claim #: 0AB216869	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Pisani, Concetta	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: fall

Claim #: 0AB216950	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Nickelson	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: altercation

Claim #: 0AB216959	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Santos, Maria	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: fall

Claim #: 0AB216899	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Poroo, Lance	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: verbal abuse



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Claim #: 0AB216887	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Petit	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: other

Claim #: 0AB216905	Claim Type	Closed Date	Status	Date of Loss	Date of Claim	Date Reported
Claimant: Morgillo	Incident	12/29/2017	Closed	12/29/2017		12/29/2017

Description/Location: abuse

Total for all Claims Coverage: Professional Liability	Indemnity Reserve	Expense Reserve	Indemnity Paid	Expense Paid	Total Incurred
LTC-000247-0117, 1/1/2017 to 1/1/2018	\$200,004.00	\$43,536.86	\$0.00	\$6,463.14	\$250,004.00
Total for LTC-000247-0117:	\$200,004.00	\$43,536.86	\$0.00	\$6,463.14	\$250,004.00



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Policy Number: LTX-000067-0117 Policy Period: 1/1/2017 to 1/1/2018

No Claims Exist

PerClaimLimit	AggLimit
\$1,000,000.00	\$1,000,000.00

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