

March 17, 2025

CHERYL BENEDICT
CITY OF WILLOWICK
30435 LAKE SHORE BLVD.
WILLOWICK, OH 44095

Re: Group Retrospective Rating Re-Enrollment for Policy # 34305902

We are pleased to announce that your organization has qualified for re-enrollment in the 2026 Ohio Association of Public Treasurers Retro Group.

2026 Group Retrospective Rating projection:		Max Refund	Max Assessment	
Projected Premium	\$ 108,160			
Target Refund %	32%	62.9%	5%	use to be 10%
Target Refund \$	\$34,611	\$ 68,033	\$ 5,408	

*Actual group refunds/assessments will be dependent on the performance of the entire group.
BWC will conduct three (3) annual evaluations to determine the refund/assessment.
Evaluations will take place at 12, 24, and 36 months after the end of the policy year.*

Our group retrospective programs are successful and consistently generate significant refunds because of our focus on safety best practices, client education, and aggressive claims management.

To re-enroll, simply sign and return the enclosed U-153 enrollment form with invoice and payment, or enroll online at www.sedgwick.com/ohiotpa/enroll.

Join our program and receive these services:

- Claims management
- Hearing representation
- Review of BWC rates and invoices
- Online account access
- Educational opportunities
- BWC updates

To discuss our Group Retrospective Rating Program or related services, please contact **Ben Shutler** at **740-827-0640** or **Ben.Shutler@sedgwick.com**.

As a reminder, when enrolling in a group retrospective rating program, BWC does not allow the stacking of discounts with any of the following programs: \$15k Medical Deductible, Claim Impact Reduction, Substance Use Prevention & Recovery Bonus, and Transitional Work Bonus. However, Group Retro has the potential to provide **significant refunds** in comparison to these other alternative rating programs.



Bureau of Workers' Compensation

Employer Statement for Group-Retrospective-Rating Program

Instructions

- Please print or type.
- Return completed statement to the attention of the sponsoring organization you are joining.
- The sponsoring organization's third-party administrator will submit this form.
- If you have any questions, please call BWC at (614) 466-6773.

Note: This application must be review and approve by BWC's employers programs unit BEFORE it becomes effective.

Employer Name CITY OF WILLOWICK	Telephone number 440 585 3700	BWC Policy Number 34305902
Address 30435 LAKE SHORE BLVD.	City WILLOWICK	State OH
		Nine-digit Zip Code 44095

Group-retrospective-rating program enrollment

I agree to comply with the Ohio Bureau of Workers' Compensation Group-Retrospective-Rating Program rules (Ohio Administrative Rule 4123-17-73). I understand that my participation in the program is contingent on such compliance.

This form supersedes any previously executed U-153.

I understand that only a BWC Group-Retrospective-Rating Program certified sponsor can offer membership into the program. I also understand if the sponsoring organization listed below, is not certified, this application is null and void.

I am a member of the Ohio Association of Public Treasurers Retro Group sponsoring organization or a certified affiliate organization and would like to be included in the Group-Retrospective-Rating Program it sponsors for the policy year beginning January 1, 2026. I understand the employer roster submitted by the group will be the final, official determination of the group in which I will or will not participate. Submission of their form does not guarantee participation.

I understand the sponsoring organization's representative Sedgwick #000900-80 (currently, as determined by the sponsoring organization) is the only representative I may have in risk-related matters while I remain a member of the group. I also understand the representative for the Group-Retrospective-Rating Program will continue as my individual representative in the event that I no longer participate in the program. At the time, I am no longer a member of the program, I understand I must file a *Permanent Authorization* (AC-2) to cancel or change individual representation.

I understand a new U-153 shall be filed each policy year I participate in the Group-Retrospective-Rating Program.

I am associated with the sponsoring organization or a certified affiliate sponsoring organization. ☒ Yes ☐ No

Ohio Association of Public Treasurers Retro Group

1581124

Name of sponsor or affiliate sponsor

Sponsor or affiliate sponsor policy number

Note: For injuries that occur during the period an employer is enrolled in the Group-Retrospective-Rating Program, employers may not use or participate in the Deductible Program, Group Rating, Retrospective Rating, \$15,000 Medical-Only Program or the Drug-Free Safety Program.

Certification

_____ certifies that he/she is the _____ of _____
(Officer Name) (Title)

_____, the employer referred to above, and that all of the
(Employer Name)

information is true to the best of his/her knowledge, information, and belief, after careful investigation.

X

(Officer Signature)

(Date)

BWC-7659 (Rev. Oct. 1, 2024)

U-153

Ohio Association of Public Treasurers Retro Group, group #6142 (2026)
Ohio Association of Public Treasurers - C / policy #34305902

2026 Group Retrospective Rating Analysis

Employer: City Of Willowick

Policy No.: 34305902

Projections based on: TM: -1% EMR: 0.99

Estimated Standard Premium:	\$108,160
BWC Assessments:	\$0
Estimated Individual Premium:	\$108,160

BWC will conduct three (3) annual evaluations to determine the refund/assessment. Evaluations will take place at 12, 24, and 36 months after the end of the policy year.

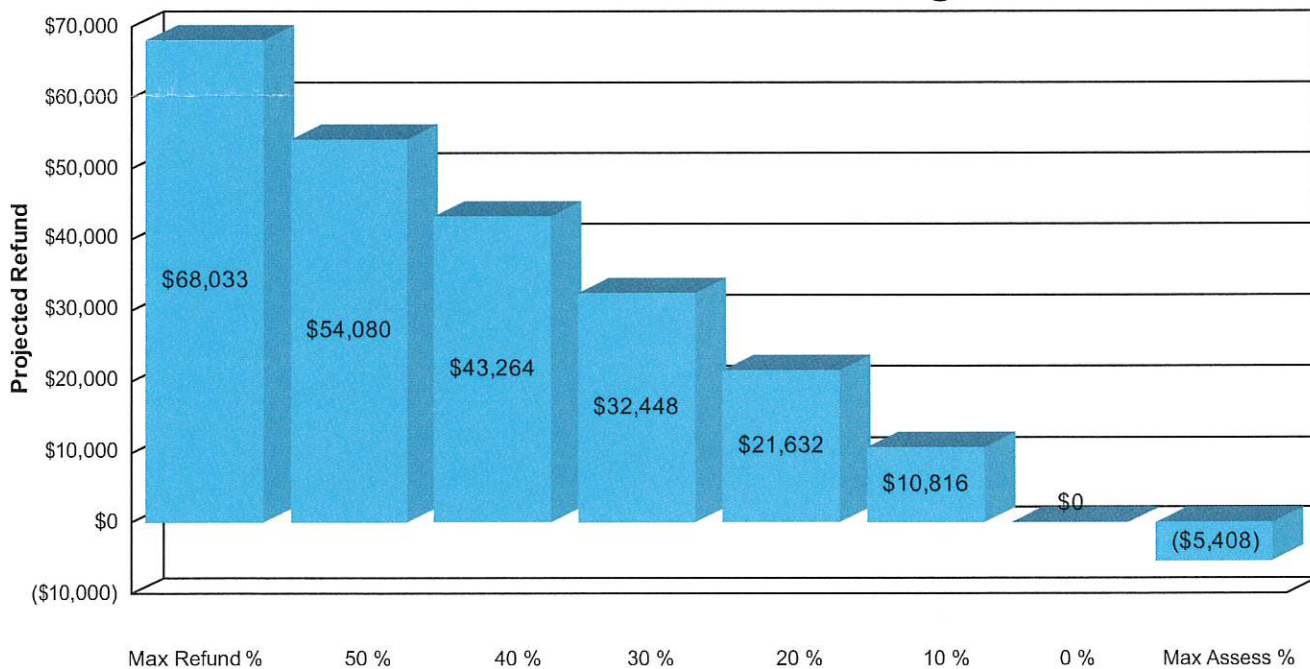
Max Refund: 62.90%

Max Assessment: 5%

Projected Maximum Refund: \$ 68,033

Projected Maximum Assessment: \$ 5,408

Estimated Refund Range



*The 2026 premium amounts are for the payroll period from 1/01/2026 to 12/31/2026.

Actual group refunds/assessments will be dependent on the performance of the entire group.

This projection is to be used as a guideline only for decision making purposes. The results should not be construed as actual.

Bill To:

CHERYL BENEDICT
CITY OF WILLOWICK
30435 LAKE SHORE BLVD.
WILLOWICK, OH 44095

Policy Number	Invoice Date
34305902	March 17, 2025
Invoice Number	Payment Due Date
1552550	UPON RECEIPT
Group Number	
6142	
Rating Year	Annual Fee
2026	\$ 3,260


Ohio Workers' Compensation Group Retrospective Rating Program

The enrollment fee of \$ 3,260 includes:

- Services for the annual contract period beginning 9/1/2025
- Policy Year: Group Retrospective Rating enrollment for January 1, 2026 to December 31, 2026

To enroll:

- Pay online at www.sedgwick.com/ohiotpa/enroll or
- Sign and return enclosed U-153 enrollment form and invoice with remittance
 - Email to ohio.group@sedgwick.com or mail to:
Sedgwick
PO Box 89456
Cleveland OH 44101-6456
 - Include check made out to Sedgwick or complete credit card portion of this invoice.

	
Credit card number:	
Amount to be charged: \$ 3,260	Expiration date:
Print name as it appears on card:	
Authorized Signature:	

By returning this invoice or by remittance of the service fee, Client acknowledges and accepts all terms and conditions of the workers' compensation service agreement. Said agreement is hereby incorporated by reference herein <https://viaoneohio.sedgwick.com/Rating/2026PEgroupcontract.pdf> (password: group2026).

This invoice is for Sedgwick's workers' compensation third party administration services pursuant to a service agreement between your company and Sedgwick. Client acknowledges that payment of this invoice does not constitute or guarantee enrollment in any workers' compensation discount/alternative rating program.

X

Signature

Printed Name

Title

Date

CBENEDICT@CITYOFWILLOWICK.COM

440 585 3700

Email Address

Phone number

Questions?

Contact Ben Shutler at 740-827-0640 or
Ben.Shutler@sedgwick.com

If your organization has merged with or acquired another company in the last year or plans to up through the policy year noted above, initial here and contact our office immediately to review your options.

If a W-9 is needed visit <https://viaoneohio.sedgwick.com/Rating/SedgwickW9.pdf>

Invoice #: 1552550

Ohio Association of Public Treasurers Retro Group, group #6142 (2026) GRC-M
Ohio Association of Public Treasurers - C / policy #34305902