



WORKERS COMPENSATION INSURANCE PROPOSAL

FOR

**PREFERRED SCHOOL GROUP
LINCOLNWOOD SCHOOL DISTRICT 74
6950 N. EAST PRAIRIE ROAD
LINCOLNWOOD, ILLINOIS 60712**

July 1, 2026 – July 1, 2027

Presented by

**Tom Cummings, CLCS
Robertson Ryan Insurance
TOP 100 US INSURANCE AGENCY**

This is for illustrative purposes only and is not a substitute for an insurance contract.
Please refer to your policy for actual terms and conditions.

INTRODUCTION

Robertson Ryan Insurance

As an independent *Top 100 US Insurance Agency*, Robertson Ryan represents numerous major insurance companies. A diverse selection of products is available to our clients. As part of our comprehensive range of client advantages, we offer loss control and risk management services tailored to address the specific exposures of our commercial customers.

In preparing your proposal, we have worked hard to build an insurance program that delivers superior protection at a reasonable cost. Our recommendations are based on careful analysis of exposures unique to your operation and our expert knowledge of quality insurance products available in today's marketplace.

We appreciate the opportunity to present this proposal, and we look forward to working with you in the future.



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ACCOUNT SERVICING TEAM

No matter how comprehensive or competitively priced your insurance is, you still need people to provide ongoing service. The individuals who make up your account servicing team include some of the industry's finest professionals. Our insurance experts know that you expect and deserve the best.

These team members will be handling your account.

Agent & Vice-President: Tom Cummings, 847-529-2214
tcummings@robertsonryan.com

Senior Account Manager: Errol Heron, 224-206-4912
eheron@robertsonryan.com

Account Manager: Morgan Kain, 224-206-4916
mkain@robertsonryan.com

Certificate Requests: Direct Dial, 224-206-4911
certificates@robertsonryan.com



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WHO IS AN INSURED

Important Information about Named Insureds

The first named insured is given certain rights and responsibilities by the policy contract language. If more than one insured is named, the one intended to receive these rights and responsibilities should be named first.

All legal entities or individuals owning property or involved in the business operations to be insured must be specifically named to be covered. All changes in ownership must be reported to us immediately. The coverages outlined in this proposal apply only to those entities identified below:

FIRST NAMED INSURED: LINCOLNWOOD SCHOOL DISTRICT 74



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WORKERS COMPENSATION COVERAGE

Company: ILLINOIS PUBLIC RISK FUND
 RATED, "AAA UNSURPASSED", BY DEMOTECH RATINGS

Workers Compensation: **Statutory Illinois Workers Compensation Benefits**

Employers Liability: **\$3,000,000 Each Accident/\$3,000,000 Disease-Pol. Limit
 \$3,000,000 Disease- Each Employee**

Code	Classification	'25 -'26 Payroll '25-'26 Rates	'25 -'26 Payroll '26-'27 Rates	Proposer AmTrust	Proposer Zenith	Proposer Accident Fund
8868	Schools- Prof. Empl.	\$ 16,100,000	\$ 16,100,000	\$16,100,000	\$ 16,100,000	\$ 16,100,000
9101	Schools- All Other	\$ 800,000	\$ 800,000	\$ 800,000	\$ 800,000	\$ 800,000
	Total Annual Premium Incl. Fees	\$ 69,623	\$ 79,228	\$150,723*	Declined	Declined

*Subject to final underwriting approval.



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WORKERS COMPENSATION COVERAGE

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Employers Liability: **\$3,000,000 Each Accident/\$3,000,000 Disease-Pol. Limit
 \$3,000,000 Disease- Each Employee**

Code	Classification	2025/26 Payroll/ 2025/26 Rates	2025/26 Payroll/ 2026/27 Rates	2026/27 Payroll/ 2026/27 Rates
8868	Schools- Prof. Empl.	\$16,100,000	\$ 16,100,000	\$17,500,000
9101	Schools- All Other	\$ 800,000	\$ 800,000	\$ 1,000,000
Total Annual Premium		\$ 67,595.00	\$ 76,920.00	\$ 87,960.00
Annual Administrative Fee		\$ 2,028.00	\$ 2,308.00	\$ 2,639.00
HELP Discount		\$0	- \$9,059.90	- \$ 9,059.90
Grant Money		-\$ 8,670.00	- \$ 3,429.00	- \$ 3,429.00
Total Net Costs		\$ 60,953.00	\$ 66,739.10	\$ 78,110.10

The above annual premium includes the 2025 MOD Factor of .89. The 2026 MOD is 1.11 included.

Claims Summary Valued 5/1/2026

Year	Total Incurred
7/1/2021 – 06/30/2022	\$ 8,452.44
7/1/2022 – 6/30/2023	\$ 4,037.00
7/1/2023 – 6/30/2024	\$ 94,985.99
7/1/2024 – 6/30/2025	\$ 125,486.52
7/1/2025 – Current	\$ 62,267.52
Total Incurred Claims	\$ 295,229.47

Break Even Premium Calculation

**Average annual claims of \$ 62,154 @ 60% loss ratio (break-even)
 requires an average annual premium of \$ 103,590..**



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