

**File Name: X2022022**

SCHEDULE NAME: UNDERWRITING AND INVESTMENT EXHIBIT - PART 2C - DEVELOPMENT RATIO INCURRED YEAR  
HEALTH CLAIMS

PAGE NUMBER: 012

COLUMN NUMBER	COLUMN NAME	FORMAT	LENGTH
1	COCODE	NUMERIC	5
2	LINE_NO	ALPHA	10
3	KEY_CODE	ALPHA	3
4	PREM_ERND	NUMERIC	14
5	CLMS_PAYMENTS	NUMERIC	14
6	CLAIM_ADJ_EXPENSE_PAYMENTS	NUMERIC	14
7	COL_32_PCT	NUMERIC	13.3
8	CLAIM_AND_CLAIM_ADJ_EXPENSE_PA	NUMERIC	14
9	COL_51_PCT	NUMERIC	13.3
10	CLMS_UNPAID	NUMERIC	14
11	UNPAID_CLMS_ADJ_EXPNS	NUMERIC	14
12	TOT_CLMS_AND_CLMS_ADJ_EXPENSE	NUMERIC	14
13	COL_91_PCT	NUMERIC	13.3

**VALID LINE NUMBERS**

LINE NUMBER	LINE DESCRIPTION
01	2018
02	2019
03	2020
04	2021
05	2022